



## Urological Supplies Order and Documentation Requirements

Medicare, and other insurance providers who follow Medicare guidelines, requires a prescription that includes:

- Patient's name
- Physician's name
- Date of the order and the start date, if start date is different from date of order
- Detailed description of the item(s)
- Quantity to dispense
- Specific frequency of use for items to be dispensed (not "as needed" or "prn")
- Length of need or number of refills
- Signature of ordering practitioner and signature date. Signature and date stamps are not allowed. Signatures must be legible and/or physician's name must also be printed

### Urological Supplies Criteria:

BASIC COVERAGE CRITERIA: urinary catheters and external urinary collection devices are only covered for a patient with a permanent impairment of urination, i.e. **permanent urinary incontinence** or **permanent urinary retention**, which is not expected to be medically or surgically corrected within 3 months.

- ❖ Indwelling catheters: **no more than one catheter per month** is covered for routine catheter maintenance. Non-routine catheter changes are covered when documentation substantiates medical necessity, such as the following:
  - Catheter is accidentally removed (i.e. pulled out by patient)
  - Malfunction of catheter (i.e. balloon does not stay inflated, hole in catheter)
  - Catheter is obstructed by encrustation, mucous plug, or blood clot
  - History of recurrent obstruction or urinary tract infection for which it has been established that an acute event is prevented by a scheduled change frequency of more than once per month
- ❖ Intermittent sterile catheterization is covered when basic coverage criteria are met and the patient or caregiver can perform the procedure. The patient must also meet one of the following criteria:
  - Resides in a nursing facility
  - Is immunosuppressed
  - Has radiologically documented vesico-ureteral reflux while on a program of intermittent catheterization
  - Is a spinal cord injured female with neurogenic bladder who is pregnant
  - Has had distinct, recurrent **urinary tract infections** while on a program of sterile intermittent catheterization **twice** within the 12 months prior to the initiation of sterile intermittent catheter kits

### Patient Medical Records must contain documentation of the following:

- The number of times per day the patient performs self-catheterization. As needed (prn) or PVR > 300 cc is NOT acceptable.
- If Coude tip or silicone catheter is being ordered, there must be documentation of recurrent encrustation, inability to pass a straight catheter, or sensitivity to latex.
- Drainage bag use over and above normal routine maintenance must be supported by documentation of obstruction, sludging, clotting of blood or chronic recurrent UTI.
- Leg bags are covered if there is documentation that the patient is ambulatory.

*Thank you for making Rice Home Medical part of your healthcare team. Please call 320-235-8434 with questions.*