

Michigan Department of Community Health

Bulletin Number: MSA 06-23

Distribution: Medical Suppliers

Issued: April 1, 2006

Subject: Correction of Mandatory List of Incontinent Items That Must Be Obtained Through J & B Medical (MDCH Volume Purchase Contractor)

Effective: Upon Receipt

Programs Affected: Medicaid, Children's Special Health Care Services (CSHCS), Adult Waiver/Fee for Service Program

During the January 2006 update to the Michigan Medicaid Provider Manual, an error occurred in the HCPCS table published as part of Section 2.19 Incontinent Supplies of the Medical Supplier Chapter. The following list correctly details the selected incontinent supply items that must be obtained from J & B Medical. Beneficiaries dually eligible for Medicaid and Medicare are required to obtain the incontinent items designated with an "X" from the contractor.

HCPCS Code	Nomenclature	Mandatory for Medicaid/ Medicare	HCPCS Code	Nomenclature	Mandatory for Medicaid/ Medicare
A4310	Insert Tray W/O Bag/Cath		A4357	Bedside Drainage Bag	
A4311	Catheter W/O Bag 2-Way Latex		A4358	Urinary Leg Bag Or Abdomen Bag	
A4312	Cath W/O Bag 2-Way Silicone		**A4520	Incontinence Garment Any Type	X
A4314	Cath W/Drainage 2-Way Latex		A5112	Urinary Leg Bag; Latex	
A4315	Cath W/Drainage 2-Way Silicone		T4521	Adult Size Brief/Diaper SM	X
A4320	Irrigation Tray		T4522	Adult Size Brief/Diaper MED	X
A4322	Irrigation Syringe		T4523	Adult Size Brief/Diaper LG	X
A4326	Male External Catheter		T4524	Adult Size Brief/Diaper XL	X
A4328	Female Urinary Collection Pouch		T4525	Adult Size Pull-On SM	X
A4330	Perianal Fecal Collection Pouch		T4526	Adult Size Pull-On MED	X
A4331	Extension Drainage Tubing		T4527	Adult Sized Pull-On LG	X
A4333	Urinary Cath Anchor Device		T4528	Adult Size Pull-On XL	X
A4334	Urinary Cath Leg Strap		T4529	Ped Size Brief/Diaper SM/MED	X
*A4335	Incontinence Supply		T4530	Ped Size Brief/Diaper LG	X
A4338	Indwelling Catheter Latex		T4531	Ped Size Pull-On SM/MED	X
A4340	Indwelling Catheter, Specialty Type		T4532	Ped Size Pull-On LG	X
A4344	Cath Indw Foley 2-Way Silicone		T4533	Youth Size Brief/Diaper	X
A4349	Disposable Male External Cat		T4534	Youth Size Pull-On	X
A4351	Straight Tip Urine Catheter		T4535	Disposable Liner/Shield/ Pad	X
A4352	Coude Tip Urinary Catheter		T4536	Reusable Pull-On Any Size	X
A4353	Intermittent Catheter w/insertion supplies		T4541	Large Disposable Underpad	X
A4354	Insertion Tray w/Drainage Bag w/o Cath		T4542	Small Disposable Underpad	X

*Use HCPCS code A4335 only to report belted/unbelted undergarments w/o sides. PA is not required up to the established quantity limit of 150 per month

**Use HCPCS code A4520 only for moisture resistant reusable incontinence pants.

Manual Maintenance

The provider should retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

A handwritten signature in black ink that reads "Paul Reinhart". The signature is written in a cursive style with a large initial "P" and a long, sweeping underline.

Paul Reinhart, Director
Medical Services Administration