



Access to Catheters 101

March 8, 2023



The mission of the Access & Care Coalition is to counter restricted consumer access to medical supplies under Medicare, Medicaid and private insurance. The Access & Care Coalition consists of urological and ostomy medical technology suppliers and manufacturers, as well as clinician, physician, and consumer and disability advocates.

<https://unitedspinal.org/access-care-coalition/>



Speakers



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Legal Disclaimer



This information is for educational purposes only. It is not intended to substitute for professional medical advice and should not be interpreted to contain treatment recommendations. You should rely on the healthcare professional who knows your individual history for personal medical advice and diagnosis. Call your healthcare provider if you have any medical concerns about managing your catheterization routine.

Reimbursement Disclaimer: We provide this information for convenience and your general reference only. It does not constitute legal advice or a recommendation regarding clinical practice. Reimbursement, coverage and payment policies can vary from one insurer and region to another and is subject to change without notice. The provider has the responsibility to determine medical necessity and to submit appropriate codes and charges for care provided. We do not guarantee coverage or payment of products and make no guarantee that the use of this information will prevent differences of opinion or disputes with Medicare, insurers, or other payors as to the correct form of billing or the amount that will be paid. Actual amounts may vary by payer and plan. For exact amounts and actual “out of pocket” expenses, members should always contact their plan directly.

Challenges – User

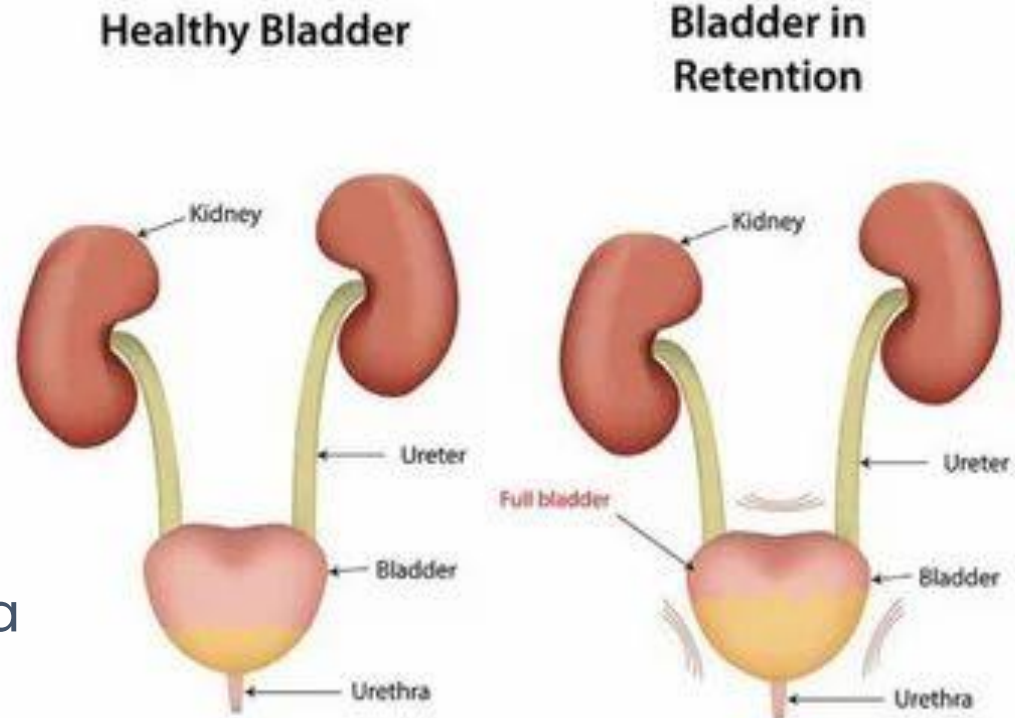


- Understanding your mobility (dexterity and physical abilities)
- Knowing when you need to void your bladder
- Dealing with a leaky bladder
- Using a catheter properly
- Identifying when you have urinary tract infection (UTI)
- Understanding the importance of having a routine
- Staying connected to other catheter users and the community
- Remaining active and getting out
- Finding physicians and providers that are your true partners and advocates
- Being your own advocate

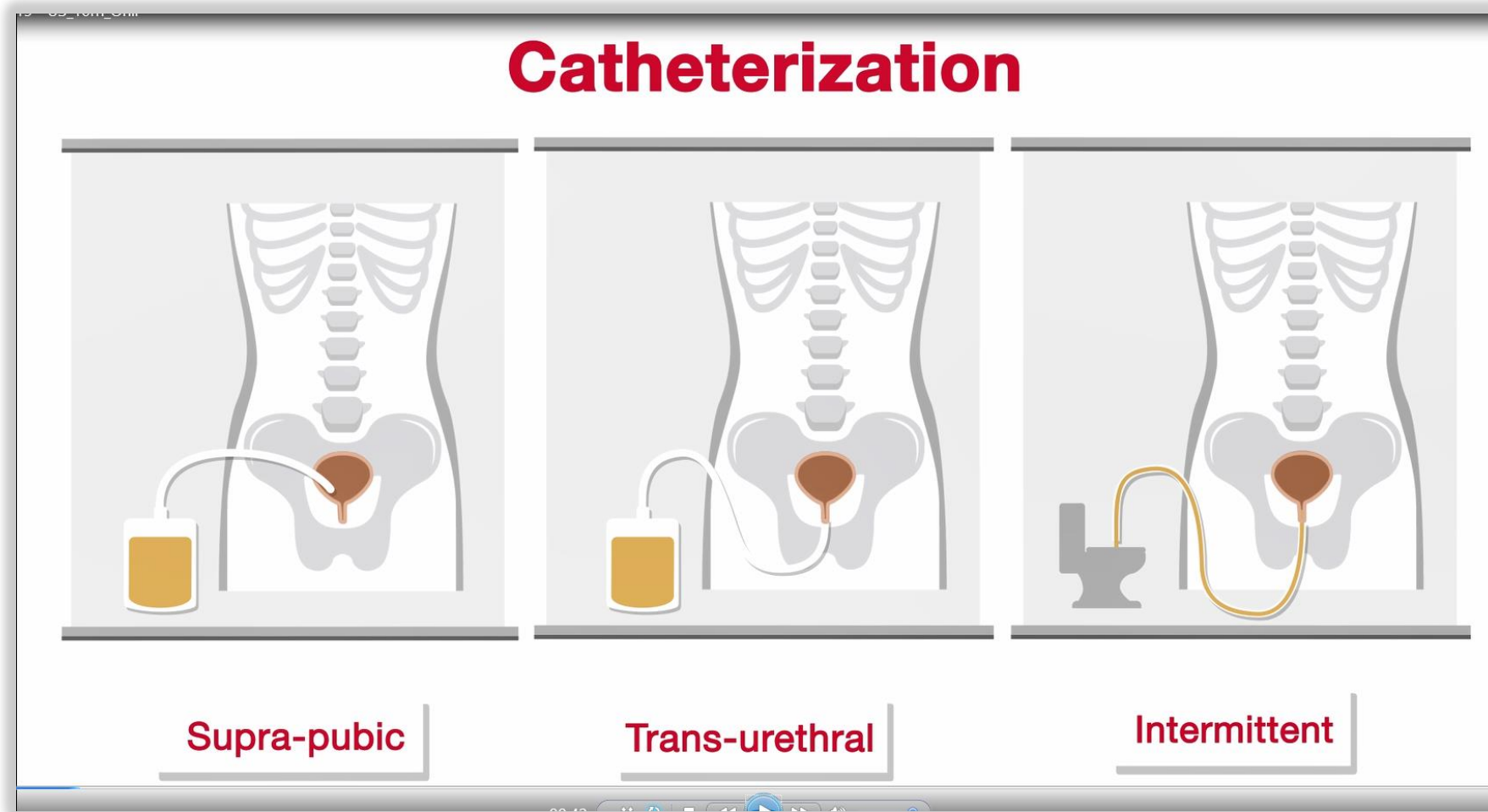
What is urinary retention?



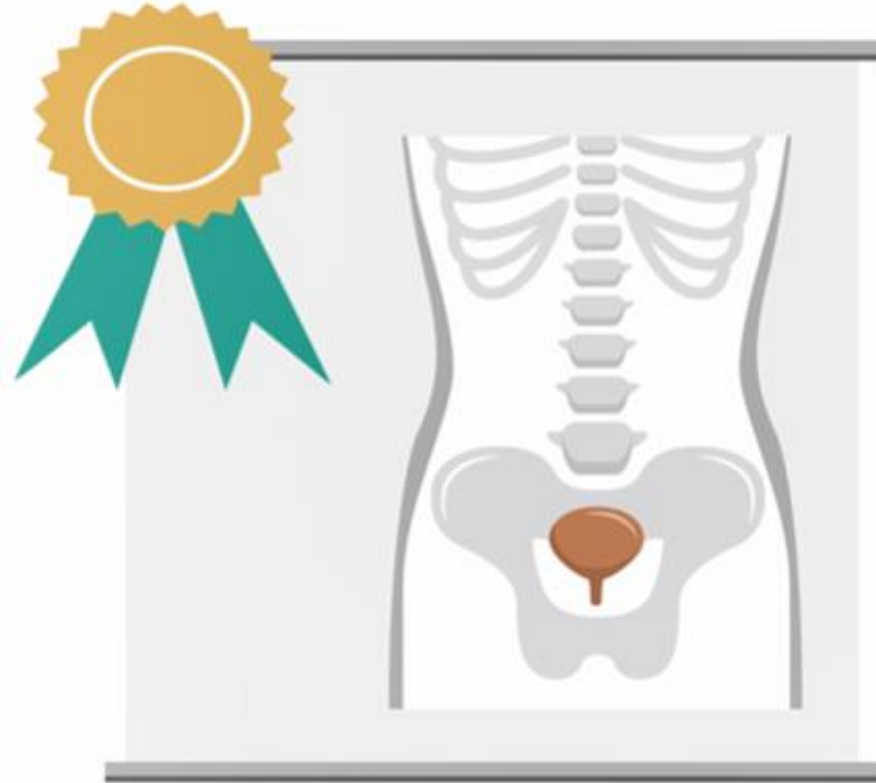
- Incomplete bladder emptying
 - Acute or Chronic
- Often caused by neurogenic bladder
 - Person lacks, bladder control due to brain, spinal cord, or nerve condition.
 - Common among individuals with spinal cord injury (SCI), multiple sclerosis (MS), or spina bifida (SB).



Types of urinary catheters



Benefits of intermittent catheterization



- Lower risk of infections
- Safe-guard renal function
- Independence
- Dignity
- Improved quality of life
- Sexual freedom

US Healthcare landscape is complex and shifting towards managed care



Govt' sponsored

Medicare¹ – 35M

Federally funded and available to individuals aged 65+ or individuals who become totally or permanently disabled, have ESRD or ALS.

Medicaid² ≈ 22.3M

Jointly funded by Federal and state for individuals with income under % of poverty level. CHIP program for children above poverty line but unable to afford private insurance.

VA & Tricare³ – 9.6M

VA benefits with access to care at VA facilities and Choice network. Tricare (active duty and family) have access to in-network providers.

Managed care

Managed Medicare¹ – 30M

Voluntary option for Medicare patients. Healthcare is paid for by Medicare but managed by various commercial plans whose aim is to control spending and allow for more choices for Medicare beneficiaries.

Managed Medicaid² ≈ 58.5M

State level voluntary or enforced option. Medicaid patients whose healthcare is paid for by Medicaid but managed by commercial plans. They aim to control spending.

Commercial (+500)⁴– 176.5M

Employer sponsored plans or individually purchased plans.

1. [Access to Health Coverage | CMS](#)
2. [Filtered Managed Care Enrollment Summary \(medicaid.gov\)](#)
3. [Facts and Figures | TRICARE](#)
4. [Medicare Advantage Plans | Medicare](#)
4. [Health Insurance Coverage of the Total Population | KFF](#)

Coding, Coverage & Payment





What does it mean when I hear something is not covered?



The terms “**coverage**” and “**reimbursement**” are often used interchangeably but are quite different

Catheters are a covered benefit by most insurance as this refers to health policy, while reimbursement or payment for the supplies varies depending on plan and negotiated fee schedule with the DME supplier

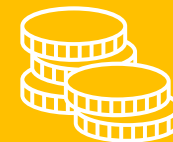


Coverage

Coverage is determined by the written policy of your health insurance

Reimbursement

Reimbursement is the rate that insurance pays for a product and can vary



Questions to ask when selecting insurance



Coverage & Benefits

Are my catheters covered by the insurance?

Out of Pocket Costs

What costs and how much am I responsible for each month?



DME Supplier Network

Can I use my current DME supplier with this insurance?

Quantity Allowed

How many catheters and related supplies are allowed per month?

Healthcare Provider

Can I see my healthcare provider (e.g., doctor) with this insurance?

Coding: Healthcare Common Procedure Coding System: HCPCS¹



- A standardized code system necessary for medical providers to submit claims
- All payors use HCPCS
- HCPCS code is a billing code that describes a product
- HCPCS codes are brand agnostic
- HCPCS codes have a reimbursement amount attached

Example:

A4351	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH
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Claim:

A4353

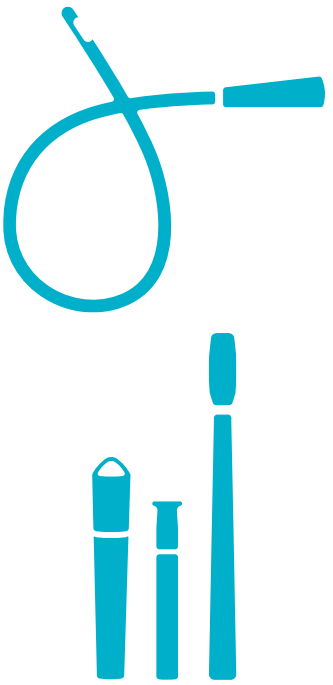


[HCPCS Codes - HCPCS Level II Coding - AAPC](#)



Medicare coverage requirements for intermittent catheters

Intermittent catheters are covered for Medicare beneficiaries who have a **permanent impairment** of urination. This is generally defined as a condition of “long and indefinite duration (at least 3 months)”¹



HCPCS	Description	Quantity per month
A4351	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH	200
A4352	INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMERIC, OR HYDROPHILIC, ETC.), EACH	200
A4353	INTERMITTENT URINARY CATHETER, WITH INSERTION SUPPLIES	200

Medicare coverage requirements for intermittent catheters



A4351 Straight Tip

Permanent urinary
retention

Up to 200/month

A4352 Coude Tip

Documentation
indicating that
patient has tried and
is unable to use a
straight tip A4351
catheter

Up to 200/month

A4353 Catheter w/ Insertion Supplies

Beneficiary meets one of the following criteria:

1. Resides in a nursing facility,
2. Is immunosuppressed, for example (not all-inclusive):
 1. on a regimen of immunosuppressive drugs post-transplant
 2. on cancer chemotherapy
 3. has AIDS
 4. has a drug-induced state such as chronic oral corticosteroid use
3. Radiologically documented vesico-ureteral reflux while on a program of IC
4. Is a spinal cord injured female with neurogenic bladder who is pregnant (for duration of pregnancy only)
5. Has had distinct, recurrent urinary tract infections, while on a program of sterile IC with A4351/A4352 and sterile lubricant A4332, twice within the 12-month prior to the initiation of sterile intermittent catheter kits

Up to 200/month

1. LCD - Urological Supplies (L33803). [www.cms.gov](https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33803&ContrID=140). Accessed March 8, 2022. <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33803&ContrID=140>

2. Article - Urological Supplies - Policy Article (A52521). [www.cms.gov](https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52521&ver=33). Accessed March 8, 2022. <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52521&ver=33>

General Medicare coverage requirements



For any item to be covered by Medicare, it must:

1. Be eligible for a defined Medicare benefit category,
2. Be reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member, and
3. Meet all other applicable Medicare statutory and regulatory requirements. Information provided in this policy article relates to determinations other than those based on Social Security Act §1862(a)(1)(A) provisions (i.e. “reasonable and necessary”).¹

1. LCD - Urological Supplies (L33803). www.cms.gov. Accessed March 8, 2022. <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33803&ContrID=140>

Medicare coverage A4353 immunosuppression criteria



Medicare policy allows patients who are immunosuppressed to receive intermittent catheter kits (HCPC A4353)

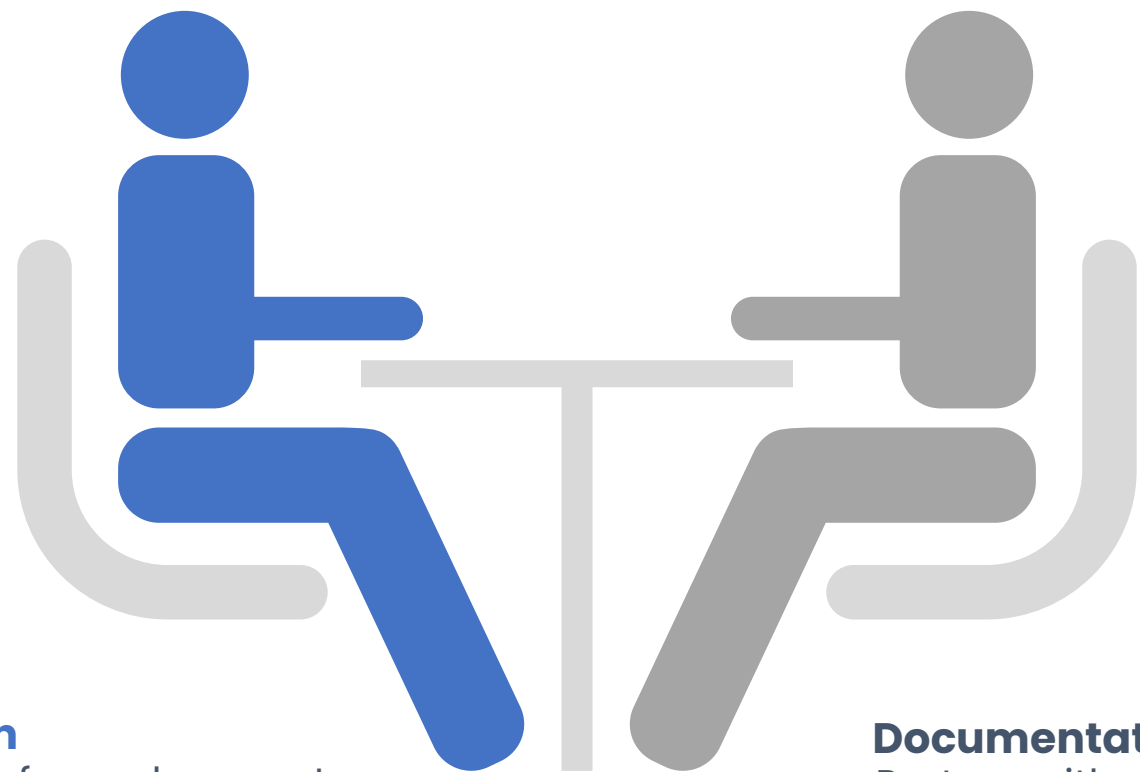
The beneficiary is immunosuppressed, for example (not all-inclusive):

- (beneficiary is) on a regimen of immunosuppressive drugs post-transplant
- (beneficiary is) on cancer chemotherapy
- (beneficiary) has AIDS
- (beneficiary) has a drug-induced state such as chronic oral corticosteroid use

These examples are not all-inclusive, there are additional conditions which may cause immunosuppression, one example is high level **spinal cord injury (SCI)**

1. LCD - Urological Supplies (L33803). www.cms.gov. Accessed March 8, 2022. <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33803&ContrID=140>

Partner with your DME Supplier and Clinician



Communication

Inform your DME of any changes to your insurance, your physician, your medical conditions, your delivery address, and if you are receiving additional care through a hospital, skilled nursing facility, or home health agency.



Documentation

Partner with your physician/clinician to ensure the justification for catheters is in your medical records. To keep your documentation current, we recommend that you plan a follow up visit at least once a year.

Opportunities for advocacy

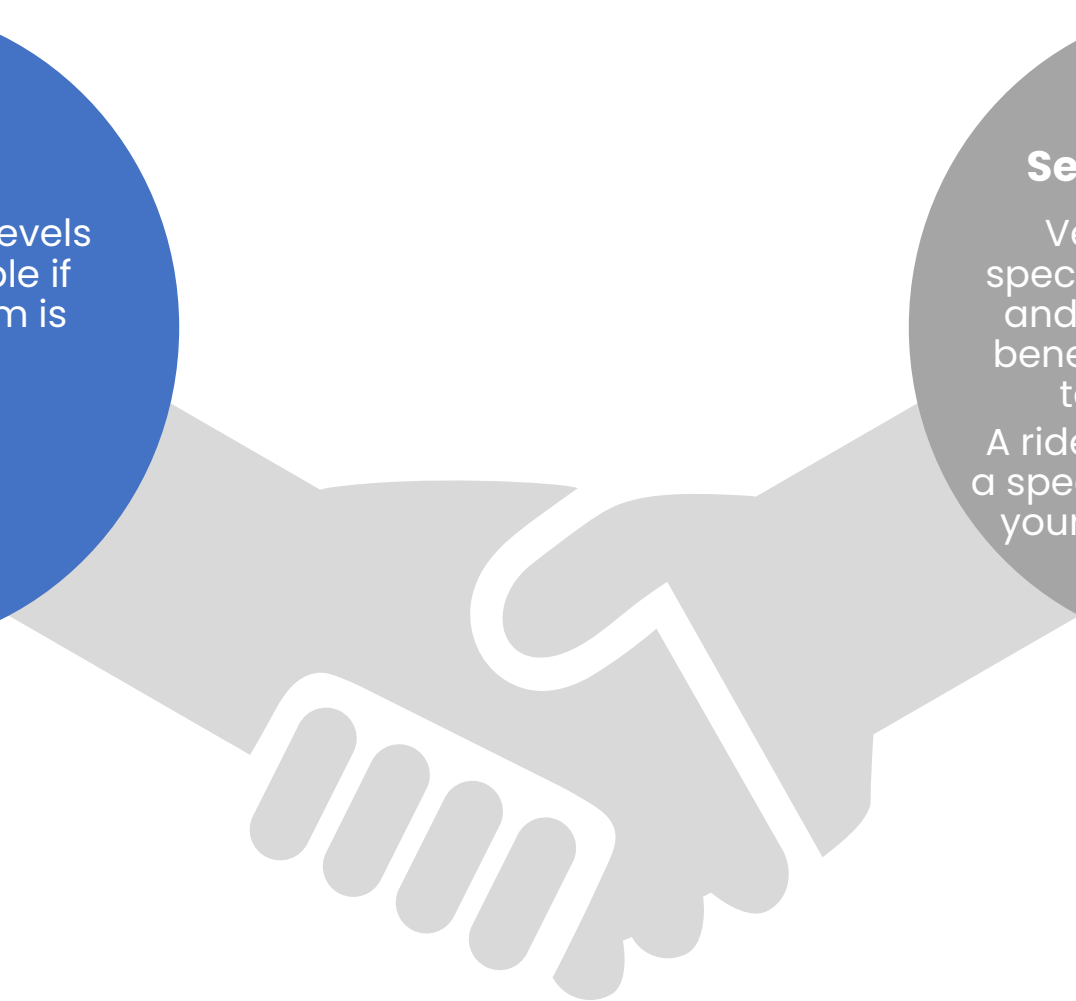


Appeals

There are multiple levels of appeals available if your catheter claim is denied

Self-funded plans

Verify if exclusion is specific to individual plan and if not included as a benefit, follow up with HR to request a rider.
A rider is designed to add a specific type of benefit to your individual member policy

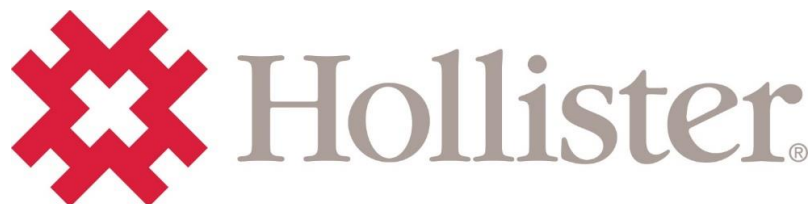




Apple West + Home Medical Supply

<https://applewesthms.com/join-now/>

Monthly reorder question examples and more



www.securestartservices.com

Join today and receive free personalized support regardless of the brand of ostomy or continence care products you use



Coloplast

Coloplast Care –

[Care for catheter users - Coloplast US](#)

Medicare Intermittent Catheter Documentation Check List

[Back A4353 IC CathKit.pdf \(coloplast.us\)](#)



United Spinal Association

For immediate assistance, please visit our homepage at www.unitedspinal.org, call (800) 404-2898 or contact our Resource Center, <https://unitedspinal.org/spinal-cord-resources/> (not an emergency or 24-hour hotline). Resource Center hours are Monday through Friday from 9am to 5pm. Staff is not able to give specific medical advice).

Noridian website: Urological Supplies with clinician letter and checklist <https://med.noridianmedicare.com/web/jddme/dmepos/urological-supplies>

Questions/Contact Information



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