Dear Physician,

Recently Medicare changed the local coverage determination (LCD) for urological supplies. The previous policy covered "clean technique" for patients without a history of recurring urinary tract infections – allowing four intermittent catheters per month which were cleaned and re-used. Now any patient who utilizes intermittent catheterization can receive one sterile urological catheter and one packet of lubricant for each catheterization.

Because of this change in Medicare policy, medical equipment suppliers may be contacting you for new prescriptions for your patients. There are a couple of important points to keep in mind. First, the prescription should reflect the actual number of times that the patient actually catheterizes him/herself per day. For example, if the patient self-catheterizes four times per day, the prescription should be for approximately 120 catheters per month. Although the LCD says that Medicare will cover up to 200 intermittent catheters per month, this is a maximum number and most patients self-catheterize less than 6 times per day. It would be inappropriate to order 200 catheters per month for every patient. The prescription must be individualized for each patient.

The second important point is that you should clearly document in your chart the number of times per day that the patient performs self-catheterization. Just listing that value on the prescription or on a separate form provided by the supplier is not sufficient. In the case of an audit, we would look for documentation in the patient’s medical record.


Thank you for your cooperation and your care of Medicare beneficiaries.

Sincerely,

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