

## 2020 Incontinence Products Policy and List FAQs

### 1. When will the new changes go into effect?

They take effect Jan. 1, 2020.

### 2. What is the transition period?

The transition period covers Jan. 1, 2020, to Apr. 1, 2020.

### 3. Do NCCI edits still apply?

No, the NCCI edits have been deactivated and no longer apply. We now allow billing for products one size apart (medium and large, for example) and they can be billed on the same day.

### 4. Where does the product code need to be entered on the claim?

Enter the product code into the line note field. We have updated the policy to address this question.

### 5. What loop segment will the product code go in?

Loop: 2400, NTE02

### 6. Batch billing does not permit the use of “-” or “/” in product codes. Can they be removed?

Yes. We have removed special characters from the updated list.

### 7. Could you explain the four tables shown on the Incontinence Products MHCP Provider Manual webpage?

The tables have been changed for clarity due to stakeholder feedback. Use Table 1 if only one kind of incontinence product is being used. Use the other tables when combinations of products are used, with the product listed in the table heading being the primary product. Use Table 2 for disposable brief usage. Use Table 3 if the member is using disposable protective underwear. Use Table 4 if the member is using pads or liners.

### 8. Are there combination limits for members receiving diapers or briefs and pads?

No there are not. Members primarily using pads may need briefs or underpads for overnight. However, members primarily using briefs should not need pads. The new MHCP Incontinence Products list is based on the National Foundation for Continence’s standards for premium briefs.

**9. May a member receive 300 diapers with 300 pads per month when medically necessary?**

Yes, with authorization. Members primarily using briefs should not need pads. The new MHCP Incontinence Products list is based on the National Foundation for Continence's standards for premium briefs. Members who are using premium products should not need boosters or inserts. If a member has tried various appropriately sized premium briefs and continues to have leaks, liners or boosters may be necessary, and the provider should seek authorization for the pads.

**10. Why are pads being reduced for members who receive pull-on disposable underwear?**

The new MHCP Incontinence Products list is based on the National Foundation for Continence's standards for premium products. Disposable underwear is covered for members who are toilet training or who have light or infrequent incontinence. These members should not need pads.

**11. Why are T4535 and T4541 listed as covered in policy but not on the MHCP Incontinence Products List?**

We have added T4535 to the MHCP Incontinence Products List. We do not list T4541 - Underpads because any underpad will be covered.

**12. Why are there no youth products listed on the approved MHCP Incontinence Product list?**

Due to the low number of youth products that met the MHCP standards for premium products, we have decided to remove all youth products from the list. We will allow any product a member would like. Please follow correct billing to ensure we have a product number.

**13. Do pediatric products always need authorization?**

No. Authorization requirements are specific to the age of the member, not the size of the product. Products for children under age 4 always require authorization.

**14. Will physician's orders that were valid for 60 months under previous policies be grandfathered in?**

No, a new physician order is required every 12 months for all members. As a transition period, we will allow members to get their annual physician order by the same month as they had their previous physician order. For example, if a member's physician order was issued in October of 2017, the member should obtain a new annual physician order in October of 2020 and then updated annually each following year by October.

**15. When will DHS and MN–ITS accept the U1, U2 and U3 modifiers for T4535?**

These modifiers will be valid for submission on Jan. 1, 2020.

**16. Will there be a difference in reimbursement for the U1, U2 and U3 modifiers for T4535? If so, when will the fee schedule be updated?**

Yes, eventually the fee schedule will be updated. However, until 2021 at the earliest, DHS will not have sufficient data to set separate rates by modifier. DHS plans to use claims submitted in 2020 to set rates by modifier.

**17. Will there be a list of pediatric products and approved product codes?**

No. Any pediatric-sized product can be covered if criteria are met.

**18. Will MHCP be honoring existing authorizations that are currently on file?**

Yes. We will honor existing authorizations currently on file until they expire.

**19. How will MHCP be processing the claims for the initial 300 units for children under 4?**

MHCP will only authorize the product that exceeds 300 units per calendar month. No claims are needed for the initial 300. Example: A child who requires 12 changes per day during a 30-day month would require 360 diapers that month. MHCP will pay for 60 of those.

**20. Will pricing be updated as of Jan. 1, 2020?**

Yes. Pricing will be updated effective Jan. 1, 2020.