

Billing Guidelines for the *DISPOSABLE INCONTINENCE MEDICAL SUPPLIES FEE SCHEDULE.*

The codes listed below are billable under the Durable Medical Equipment (DME) and Medical Supplies State Plan Program for recipients under 21 years of age. For recipients under age 21, providers must bill the DME State Plan Program up to the maximum limit before billing the waiver for these codes. For recipients over age 21, the provider may bill the waiver for these codes using the code plus the waiver modifier. Reimbursement for these codes under the waiver is counted towards the total allowable reimbursement for medical supplies.

- For recipients **UNDER** the age of 21, enrolled DME providers/support coordinators **MUST** access Florida Medicaid's state plan Durable Medical Equipment (DME) Program first and bill, as prescribed, up to the maximum limit.

“Service limits indicated on the DME and Medical Supply Services Provider Fee Schedules **may be exceeded only for eligible recipients under 21 years of age.** Providers must consult with the staff at the recipient's area Medicaid office when submitting a request to exceed maximum limits. Documentation of medical necessity, required to justify the recipient's need to exceed the maximum limits, must be submitted with a paper CMS-1500 claim and submitted directly to the recipient's area Medicaid office for processing.”

- For recipients **OVER** the age of 21, enrolled waiver providers/support coordinators can access the appropriate waiver program directly.

The codes listed below are billable under the Durable Medical Equipment (DME) and Medical Supplies State Plan Program for recipients 4 to 20 years of age. For recipients under age 21, providers must bill the DME State Plan Program up to the maximum limit before billing the waiver for these codes. Reimbursement for these codes under the waiver is counted towards the total allowable reimbursement for medical supplies.

- For recipients **UNDER** the age of 21, enrolled DME providers/support coordinators **MUST** access Florida Medicaid's state plan Durable Medical Equipment (DME) Program first and bill, as prescribed, up to the maximum limit.

Requests to exceed state plan limits, through the waiver, are at the waiver's discretion based on establishing medical necessity.

- For recipients **OVER** the age of 21, enrolled waiver providers/support coordinators can access the appropriate waiver program directly.

Billing Guidelines continued...

The codes listed below are billable under the Durable Medical Equipment (DME) and Medical Supplies State Plan Program for all recipients. Providers must bill the DME State Plan Program up to the maximum limit before billing the waiver for these codes. Reimbursement for these codes under the waiver is counted towards the total allowable reimbursement for medical supplies.

This section's codes pertain to recipients of all ages

- For recipients of all ages, enrolled DME providers/support coordinators **MUST** access Florida Medicaid's state plan Durable Medical Equipment Program first and bill, as prescribed, up to the maximum limit.

"Service limits indicated on the DME and Medical Supply Services Provider Fee Schedules **may be exceeded only for eligible recipients under 21 years of age**. Providers must consult with the staff at the recipient's area Medicaid office when submitting a request to exceed maximum limits. Documentation of medical necessity, required to justify the recipient's need to exceed the maximum limits, must be submitted with a paper CMS-1500 claim and submitted directly to the recipient's area Medicaid office for processing."

The codes listed below are billable under the waiver for recipients of all ages. The codes are not billable under the Medicaid Durable Medical Equipment (DME) and Medical Supplies State Plan Program. Reimbursement for these codes under the waiver is counted towards the individual maximum limits and the total allowable reimbursement for medical supplies.

This section's codes pertain only to waiver recipients of all ages

- For recipients of all ages, enrolled waiver providers/support coordinators can access the appropriate waiver program directly.

The codes listed below are billable under the Durable Medical Equipment (DME) and Medical Supplies State Plan Program for recipients aged 21 and older. The codes are not billable under the Medicaid Durable Medical Equipment (DME) and Medical Supplies State Plan Program. Reimbursement for these codes under the waiver is counted towards the total allowable reimbursement for medical supplies.

- For recipients **OVER** the age of 21, enrolled waiver providers/support coordinators can access the appropriate waiver program directly.

Please note:

Providers must bill using the appropriate disposable incontinence medical supplies fee schedule code and modifier specific to the waiver they are billing. For example, for the Aged and Disabled Adult Waiver, providers will submit a claim with code "A1234" with the modifier "U2".