

## ADULT DIAPERS/INCONTIENCE LINERS

Adult diapers and incontinence liners provide comfortable and effective bladder control protection for both men and women.

## ORIGINAL MEDICARE

Adult diapers and incontinence liners are not covered services under Original Medicare for any condition. Although diapers and other incontinence supplies fall under the broader category of Durable Medical Equipment, these specific items are excluded from coverage under Original Medicare's DME benefit.

## MEDICARE ADVANTAGE

Coverage for adult diapers and incontinence liners is provided to members under select Medicare Advantage private fee-for-service plans. Since Original Medicare does not cover adult diapers and incontinence liners, the scope of the benefit, reimbursement methodology, maximum allowable payment amounts and member cost-sharing are determined by the groups.

### Conditions for payment

BCBSM Medicare Advantage private fee-for-service plans use CMS deemed-provider<sup>1</sup> concept for group specific benefits. The table below specifies conditions for adult diapers and incontinence liners:

Conditions for payment	
Eligible providers	DME supplier
Deemed provider	See terms and conditions on <a href="http://bcbsm.com/ma">bcbsm.com/ma</a>
Payable locations	No restrictions
Frequency	No restrictions
CPT/HCPCS codes	A4520, A4554
Diagnosis restrictions	No restrictions
Age restrictions	No restrictions

### Reimbursement

The maximum payment amount for the adult diapers and incontinence liners benefit is available in a separate document, *BCBSM Medicare Advantage – Additional Benefits Fee Schedule*.

The provider will be paid the lesser of this allowed amount or the provider's charge, minus the member's cost-share. This represents payment in full and providers are not allowed to balance bill the member for the difference between the allowed amount and the charge.

<sup>1</sup> 2009 Terms & Conditions – <http://www.bcbsm.com/ma/>

## Member cost-sharing

- Deemed providers must agree to collect from the member only the cost-sharing amounts. They may not otherwise charge or bill the member.
- If the member elects to receive a noncovered service, he or she is responsible for the entire charge associated with the noncovered service.

For detailed information about BCBSM Medicare Advantage member's benefits and cost-share, review the group plan's [Summary of Benefits](#).

Beginning April 1, 2009, MPSERS Medicare Advantage members will see changes in their benefits related to durable medical equipment, prosthetics and orthotics and medical supplies.

DMEension Benefit Management is our Medicare Advantage DME network provider and has a nationwide network of 2,700 DME, P&O and medical supply providers. Members who obtain their DME, P&O or medical supplies from a network provider will have their services covered at 100 percent. Services rendered by an out-of-network provider will have a 20 percent coinsurance that does not apply to the out-of-pocket maximum.

Note: Although the DME network will become effective April 1, 2009, the 20 percent coinsurance will be applied to out-of-network claims beginning May 1, 2009.

The chart below identifies members with adult diapers and incontinence liners coverage:

Group name and number
MPSERS 59000

## Billing instructions

1. Bill services on the CMS 1500 (8/05) claim form consistent with the local Blue Cross Blue Shield plan direction.
2. Use the Medicare Advantage private fee-for-service unique billing requirements.
3. Report CPT/HCPCS codes and diagnosis codes to the highest level of specificity.
4. Report your Medicare Supplier Identification Number and National Provider Identifier.
5. Send your paper claim to DMEensions Benefit Management at the following address:

Medicare Advantage  
DMEension Benefit Management, P.O. Box 81700  
Rochester, MI 48308-1700