

Clinic Name:_

Fax: 1.800.945.4093

Toll Free Phone: 1.800.480.2092

Patient Demographics									
Name				Phone					
Address				Email					
Date of Birth					🗌 Mal	е		Female	
Diagnosis & Justification									
Causal Diagn	osis:	🗌 🗆 R32 U	□ R32 Urinary Incontinence □ K59.2 Neurogenic Bow				owel		
🗆 Spinal Cor	rosis 🛛 R33.9	□ R33.9 Urinary Retention □ Other:							
🗆 Spina Bifid	🗆 Spina Bifida 🛛 🗆 Cancer			🗌 N35.9 Urethral Stricture					
Benign Pro Hyperplasi		N31.9 Neurogenic Bladder							
Length of Need? OTHER									
Number of Re	fills? 🗌 1 🗌 2 🗌 3	□ 4 □ 5 [□6□7	□ 8 □	9 🗆 1	0 🗆	11	□ 12	
Does the patient have a history of UTIs (2 w/in a 12 month duration) while on CIC regimen 🗌 Yes 🗌 No									
Does the patient have permanent urinary incontinence?									
Does the patient have <i>permanent urinary retention?</i>									
Does the patient have radiologically documented vesico-ureteral reflux?									
Is the patient immunosuppressed?									
***PLEASE INCLUDE MOST RECENT PROGRESS NOTES *** Date:									
	I	Medical Supply	/ Informat	ion					
		Size	Qty / Day	Qty / Month	HCI	PC	Manuf. Ref # (not required)		
Straight tip uri					A435	1			
Coudé tip urin					A435	2			
Straight or coudé tip w/ sterile insertion supplies						A435	3		
W/ lubricant packet (1 per each catheterization)						A433	2		
Other:									
Physician Information									
Physician		NPI:	Physician name: NPI:						
	Physician name: NPI:		Physician name:				NPI:		
Physician	name:	NPI:	Physician name: NPI:						

Physician Signature (NO STAMPS PLEASE)

Signature Date

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

Medicare intermittent catheter (IC) documentation check list:

General	Medicare	documentation	check list ^{2,3}
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Prescription: Patients' information (name, date of birth) Type of IC prescribed (HCPCS code, description of IC type: straight, coudé, closed) Catheterization frequency per day and quantity of IC (specific number) Prescribing clinicians' signature Clinician name or National Provider Identifier (NPI) Order date		 Medical Record: * Documentation of permanent urinary incontinence or permanent urinary retention (not expected to be medically or surgically corrected within 3 months) Primary diagnosis to support medical necessity for an intermittent catheter Must match the prescription (frequency of IC, quantity of IC, type of IC, length of need) * Might be requested by the DME supplier to have on file (12 months prior to IC) to show continued need/use if applicable 			
Documentation required by int	ermittent catheter type ^{2,3}				
A4351: Straight Tip, with or without coating A4352: Coudé Tip, with or without coating □ Everything in the general Medicare documentation check list □ Everything in the general Medicare documentation check list □ Documentation indicating patient has tried and is una pass a straight tip catheter □ Documented medical need catheter *Use of a Coudé tip catheter is beneficiaries is rarely reasonal		that able to r d for a coudé in female	 A4353: Closed System or sterile kit Everything in the general Medicare documentation check list. Patient meets one of 5 criteria: Patient resides in a nursing facility Patient is immunosuppressed Patient has documented vesico-ureteral reflux Patient is a spinal cord injured female with neurogenic bladder who is pregnant Patient has had 2 documented urinary tract infections (UTI) while on a straight or coudé tip IC within 12-months 		
Required documentation for U	Extensive selection of				
 Urine culture showing greater the One additional symptom: Fever Systemic leukocytosis Change is urinary urgency, fi Appearance of new or increation (sweating, bradycardia, bloop) 		name brand cath			
 Physical signs of prostatitis, e Increased muscle spasms Pyuria (greater than 5 white 	ered field)	🍪 BD	CURE		

2. LCD - Urological Supplies (L33803). www.cms.gov. Accessed March 8, 2022. https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33803&ContrlD=140 3. Article - Urological Supplies - Policy Article (A52521). www.cms.gov. Accessed March 8, 2022. https://www.cms.gov/medicare-coverage-database/view/article.

aspx?articleId=52521&ver=33

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