

**Affected Programs:** BadgerCare Plus

**To:** Federally Qualified Health Centers, Home Health Agencies, Individual Medical Supply Providers, Medical Equipment Vendors, Nursing Homes, Pharmacies, HMOs and Other Managed Care Programs

## Ostomy Supplies Are Covered by BadgerCare Plus Benchmark Plan

Effective for dates of service on and after September 1, 2008, the BadgerCare Plus Benchmark Plan covers ostomy supplies.

Effective for dates of service (DOS) on and after September 1, 2008, the BadgerCare Plus Benchmark Plan covers ostomy supplies under the disposable medical supplies (DMS) benefit, which includes the following Healthcare Common Procedure Coding System codes:

- A4361 – A4367.
- A4369 – A4395.
- A4397 – A4399.
- A4402 – A4412.
- A4414 – A4420.
- A4423 – A4434.
- A5051 – A5055.
- A5062, A5062 with modifier “22,” and A5062 with modifier “59.”
- A5063 – A5093.
- A5126.
- A5131.

Providers who have received payment from Benchmark Plan members for ostomy supplies for DOS on and after September 1, 2008, are required to refund the entire amount paid by the member and submit claims to ForwardHealth.

Providers are reminded that DMS do not have a copayment under the Benchmark Plan.

The interactive maximum allowable fee schedule includes a Benchmark Plan indicator for all DMS procedure codes covered by the Benchmark Plan. The Attachment of this *ForwardHealth Update* also provides a complete list of DMS covered by the Benchmark Plan.

### Information Regarding Managed Care Organizations

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

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# ATTACHMENT

## Disposable Medical Supplies Covered by the BadgerCare Plus Benchmark Plan

The following table lists Healthcare Common Procedure Coding System procedure codes and modifiers for disposable medical supplies (DMS) covered by the BadgerCare Plus Benchmark Plan for dates of service on and after September 1, 2008. Refer to the DMS interactive maximum allowable fee schedule, available on the ForwardHealth Portal at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/), for maximum allowable fees for the following procedure codes. Disposable medical supplies covered under the Benchmark Plan are subject to change.

Procedure Code	Modifier	Description
A4215	22	Insulin pen needles
A4230	—	Infusion set for external insulin pump, non needle cannula type
A4231	—	Infusion set for external insulin pump, needle type
A4232	—	Syringe with needle for external insulin pump, sterile, 3cc
A4233	—	Replacement battery, alkaline (other than j cell), for use with medically necessary home blood glucose monitor owned by patient, each
A4234	—	Replacement battery, alkaline, j cell, for use with medically necessary home blood glucose monitor owned by patient, each
A4235	—	Replacement battery, lithium, for use with medically necessary home blood glucose monitor owned by patient, each
A4236	—	Replacement battery, silver oxide, for use with medically necessary home blood glucose monitor owned by patient, each
A4250	—	Urine test or reagent strips or tablets (100 tablets or strips)
A4253	KS	Blood glucose test or reagent strips for home blood glucose monitor, per 50 strips TYPE II Diabetics
A4253	KX	Blood glucose test or reagent strips for home blood glucose monitor, per 50 strips TYPE I Diabetics
A4256	—	Normal, low and high calibrator solution/chips
A4258	—	Spring powered device for lancet, each
A4258	22	Insulin pen
A4259	KS	Lancets, per box of 100 TYPE II Diabetics
A4259	KX	Lancets, per box of 100 TYPE I Diabetics
A4361	—	Ostomy faceplate, each
A4362	—	Skin barrier; solid, 4 x 4 or equivalent; each
A4363	—	Ostomy clamp, any type, replacement only, each
A4364	—	Adhesive, liquid or equal, any type, per 50
A4365	—	Adhesive remover wipes, any type, per 50
A4366	—	Ostomy vent, any type, each

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>
A4367	—	Ostomy belt, each
A4369	—	Ostomy skin barrier, liquid (spray, brush, etc.), per oz.
A4371	—	Ostomy skin barrier, powder, per oz.
A4372	—	Ostomy skin barrier, solid 4 x 4 or equivalent, standard wear, with built-in convexity, each
A4373	—	Ostomy skin barrier, with flange (solid, flexible or accordion), with built-in convexity, any size, each
A4375	—	Ostomy pouch, drainable, with faceplate attached, plastic, each
A4376	—	Ostomy pouch, drainable, with faceplate attached, rubber, each
A4377	—	Ostomy pouch, drainable, for use on faceplate, plastic, each
A4378	—	Ostomy pouch, drainable, for use on faceplate, rubber, each
A4379	—	Ostomy pouch, urinary, with faceplate attached, plastic, each
A4380	—	Ostomy pouch, urinary, with faceplate attached, rubber, each
A4381	—	Ostomy pouch, urinary, for use on faceplate, plastic, each
A4382	—	Ostomy pouch, urinary, for use on faceplate, heavy plastic, each
A4383	—	Ostomy pouch, urinary, for use on faceplate, rubber, each
A4384	—	Ostomy faceplate equivalent, silicone ring, each
A4385	—	Ostomy skin barrier, solid 4 x 4 or equivalent, extended wear, without built-in convexity, each
A4387	—	Ostomy pouch, closed, with barrier attached, with built-in convexity (1 piece), each
A4388	—	Ostomy pouch, drainable, with extended wear barrier attached, (1 piece), each
A4389	—	Ostomy pouch, drainable, with barrier attached, with built-in convexity (1 piece), each
A4390	—	Ostomy pouch, drainable, with extended wear barrier attached, with built-in convexity (1 piece), each
A4391	—	Ostomy pouch, urinary, with extended wear barrier attached, (1 piece), each
A4392	—	Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity (1 piece), each
A4393	—	Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity (1 piece), each
A4394	—	Ostomy deodorant, with or without lubricant, for use in ostomy pouch, per fluid ounce
A4395	—	Ostomy deodorant for use in ostomy pouch, solid, per tablet
A4397	—	Irrigation supply; sleeve, each
A4398	—	Ostomy irrigation supply; bag, each
A4399	—	cone/catheter, including brush

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>
A4402	—	Lubricant, per ounce
A4404	—	Ostomy ring, each
A4405	—	Ostomy skin barrier, non-pectin based, paste, per ounce
A4406	—	Ostomy skin barrier, pectin-based, paste, per ounce
A4407	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, with built-in convexity, 4 x 4 inches or smaller, each
A4408	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, with built-in convexity, larger than 4 x 4 inches, each
A4409	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, without built-in convexity, 4 x 4 inches or smaller, each
A4410	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), extended wear, without built-in convexity, larger than 4 x 4 inches, each
A4411	—	Ostomy skin barrier, solid 4x4 or equivalent, extended wear, with built-in convexity, each
A4412	—	Ostomy pouch, drainable, high output, for use on a barrier with flange (2 piece system), without filter, each
A4414	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), without built-in convexity, 4 x 4 inches or smaller, each
A4415	—	Ostomy skin barrier, with flange (solid, flexible, or accordion), without built-in convexity, larger than 4 x 4 inches, each
A4416	—	Ostomy pouch, closed, with barrier attached, with filter (1 piece), each
A4417	—	Ostomy pouch, closed; with barrier attached, with built-in convexity, with filter (1 piece), each
A4418	—	Ostomy pouch, closed; without barrier attached, with filter (1 piece), each
A4419	—	Ostomy pouch, closed; for use on barrier with non-locking flange, with filter (2 piece), each
A4420	—	Ostomy pouch, closed; for use on barrier with locking flange (2 piece), each
A4423	—	Ostomy pouch, closed; for use on barrier with locking flange, with filter (2 piece), each
A4424	—	Ostomy pouch, drainable, with barrier attached, with filter (1 piece), each
A4425	—	Ostomy pouch, drainable; for use on barrier with non-locking flange, with filter (2 piece system), each
A4426	—	Ostomy pouch, drainable; for use on barrier with locking flange (2 piece system), each
A4427	—	Ostomy pouch, drainable; for use on barrier with locking flange, with filter (2 piece system), each

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>
A4428	—	Ostomy pouch, urinary, with extended wear barrier attached, with faucet-type tap with valve (1 piece), each
A4429	—	Ostomy pouch, urinary, with barrier attached, with built-in convexity, with faucet-type tap with valve (1 piece), each
A4430	—	Ostomy pouch, urinary, with extended wear barrier attached, with built-in convexity, with faucet-type tap with valve (1 piece), each
A4431	—	Ostomy pouch, urinary; with barrier attached, with faucet-type tap with valve (1 piece), each
A4432	—	Ostomy pouch, urinary; for use on barrier with non-locking flange, with faucet-type tap with valve (2 piece), each
A4433	—	Ostomy pouch, urinary; for use on barrier with locking flange (2 piece), each
A4434	—	Ostomy pouch, urinary; for use on barrier with locking flange, with faucet-type tap with valve (2 piece), each
A4556	—	Electrodes (e.g., apnea monitor), per pair
A4557	—	Lead wires, (e.g., apnea monitor), per pair
A4595	—	Electrical stimulator supplies, 2 lead, per month, (e.g. TENS, NMES)
A4605	—	Tracheal suction catheter, closed system, each
A4606	—	Oxygen probe for use with oximeter device, replacement
A4624	—	Tracheal suction catheter, any type other than closed system, each
A4628	—	Oropharyngeal suction catheter, each
A5051	—	Ostomy pouch, closed; with barrier attached (1 piece), each
A5052	—	without barrier attached (1 piece), each
A5053	—	for use on faceplate, each
A5054	—	for use on barrier with flange (2 piece), each
A5055	—	Stoma cup
A5062	—	Ostomy pouch, drainable; without barrier attached (1 piece), each
A5062	22	Ostomy pouch, drainable with karaya based barrier attached, without built-in convexity, (1 piece), each
A5062	59	Ostomy pouch, drainable with standard wear barrier attached, without built-in convexity, (1 piece), each
A5063	—	Ostomy pouch, drainable; for use on barrier with flange (2-piece system), each
A5071	—	Ostomy pouch, urinary; with barrier attached (1 piece), each
A5072	—	without barrier attached (1 piece), each
A5073	—	for use on barrier with flange (2 piece), each
A5081	—	Continent device; plug for continent stoma
A5082	—	catheter for continent stoma
A5083	—	Continent device, stoma absorptive cover for continent stoma
A5093	—	Ostomy accessory; convex insert

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>
A5126	—	Adhesive or non-adhesive; disk or foam pad
A5131	—	Appliance cleaner, incontinence and ostomy appliances, per 16 oz.
A7000	—	Canister, disposable, used with suction pump, each
A7001	—	Canister, non-disposable, used with suction pump, each
A7002	—	Tubing, used with suction pump, each
A7003	—	Administration set, with small volume nonfiltered pneumatic nebulizer, disposable
A7004	—	Small volume nonfiltered pneumatic nebulizer, disposable
A7005	—	Administration set, with small volume nonfiltered pneumatic nebulizer, non-disposable
A7006	—	Administration set, with small volume filtered pneumatic nebulizer
A7007	—	Large volume nebulizer, disposable, unfilled, used with aerosol compressor
A7007	22	Sterile water or sterile saline, 1000 ml used with large volume nebulizer
A7008	—	Large volume nebulizer, disposable, prefilled, used with aerosol compressor
A7008	22	Sterile water, heated humidifier use 1650 - 2000 cc
A7008	59	Sterile water, autofeed/heated humidifier use 1650 - 2000 cc
A7009	—	Reservoir bottle, non-disposable, used with large volume ultrasonic nebulizer
A7010	—	Corrugated tubing, disposable, used with large volume nebulizer, 100 feet
A7011	—	Corrugated tubing, non-disposable, used with large volume nebulizer, 10 feet
A7012	—	Water collection device, used with large volume nebulizer
A7013	—	Filter, disposable, used with aerosol compressor
A7014	—	Filter, non-disposable, used with aerosol compressor or ultrasonic generator
A7015	—	Aerosol mask, used with DME nebulizer
A7016	—	Dome and mouthpiece, used with small volume ultrasonic nebulizer
A7018	—	Water, distilled, used with large volume nebulizer, 1000 ml
A7027	—	Combination oral/nasal mask, used with continuous positive airway pressure device, each
A7028	—	Oral cushion for combination oral/nasal mask, replacement only, each
A7029	—	Nasal pillows for combination oral/nasal mask, replacement only, pair
A7030	—	Full face mask used with positive airway pressure device, each
A7031	—	Face mask interface, replacement for full face mask, each
A7032	—	Cushion for use on nasal mask interface, replacement only, each
A7033	—	Pillow for use on nasal cannula type interface, replacement only, pair
A7034	—	Nasal interface (mask or cannula type) used with positive airway pressure device, with or without head strap
A7035	—	Headgear used with positive airway pressure device
A7036	—	Chinstrap used with positive airway pressure device
A7037	—	Tubing used with positive airway pressure device
A7038	—	Filter, disposable, used with positive airway pressure device
A7039	—	Filter, non-disposable, used with positive airway pressure device

<b>Procedure Code</b>	<b>Modifier</b>	<b>Description</b>
A7046	—	Water chamber for humidifier, used with positive airway pressure device, replacement, each
A7525	—	Tracheostomy mask, each
B4035	—	Enteral feeding supply kit; pump fed, per day
S8490	—	Insulin syringes (100 syringes, any size)