

Urological Supplies Documentation Requirements

Valid written order that contains: (Prescription)

- Beneficiary's name
- Item(s) to be dispensed i.e. (straight tip catheters, coude catheters)
- Qty to be used per day i.e. (how many times patient will self cath)
- Length of need i.e. (lifetime, 6 months)
- Treating physician's signature
- Date the treating physician signed the order

Qualifying Documented Criteria for Straight tip catheters' *(Well documented in the patient chart notes)*

- Urinary catheters and external urinary collection devices are covered to drain or collect urine if patient has a permanent urinary incontinence or permanent urinary retention. For at least 3 months
- A maximum of six catheters may be used per day (up to 200 per month) and needs to be documented in the patients file

Qualifying Documented Criteria for Coude tip catheters' *(Well documented in the patient chart notes)*

- Must qualify for catheters **and**
- Documentation* that supports the medical necessity for a curved rather than straight tip catheter