

310-P MEDICAL SUPPLIES, DURABLE MEDICAL EQUIPMENT, AND PROSTHETIC DEVICES (ACUTE CARE SERVICES)

REVISION DATE: 3/25/2016, 7/3/2015, 9/15/2014

EFFECTIVE DATE: June 30, 1994

REFERENCES: §36-2907; Laws 2015, Chapter 264, Section 3 (HB 2373); §36-2907.

- A. Medical supplies, durable medical equipment (DME) orthotic and prosthetic devices provided to members who are eligible for Arizona Long Term Care System (ALTCS) services qualify as covered services if prescribed by a, specialist physician, practitioner or dentist upon referral by a Primary Care Provider (PCP). Medical supplies and DME include:
1. Surgical dressings, splints, casts, and other disposable items covered by Medicare (Title XVIII).
 2. Rental or purchase of DME, including, customized equipment.
 3. Other items as determined medically necessary by joint consultation of the Medical Directors of the health plan and the Division.
- B. Requirements for specific services:
1. Incontinence Briefs
 - a. Incontinence briefs for members over the Age of 21 Years:
 - i. The Division's acute care contracted health plans shall provide incontinence briefs, including pull-ups, for members 21 years of age and older to treat a medical condition or to prevent skin breakdown when all the following are met:
 - The member is incontinent due to a documented medical condition that causes incontinence of bowel and/or bladder.
 - The Primary Care Provider (PCP) or attending physician has issued a prescription ordering the incontinence briefs.
 - Incontinence briefs do not exceed 180 briefs per month unless the prescribing physician presents evidence of medical necessity for more than 180 briefs per month.
 - The member obtains incontinence briefs from vendors within the Contractor's network.

Orthotics are covered within certain limitations if all of the following apply:

- The use of the orthotic is medically necessary as the preferred treatment option consistent with Medicare Guidelines.
- The orthotic is less expensive than all other treatment options or surgical procedures to treat the same diagnosed condition.
- The orthotic is ordered by a Physician or Primary Care Practitioner.

ii. Members under 21 years of age:

Orthotics are covered for members under the age of 21 as outlined in the *Division Medical Policy Manual Chapter 400 Section 430-C*.

iii. Orthotics Limitations- Reasonable repairs or adjustments of purchased orthotics are covered for all members to make the orthotic serviceable and/or when the repair cost is less than purchasing another unit. The component will be replaced if, at the time authorization is sought, documentation is provided to establish that the component is not operating effectively.