



Automated Medical Payments

Medicaid Bulletin Colorado Title XIX

Fiscal Agent

CONSULTEC

600 Seventeenth Street
Suite 600 North
Denver, CO 80202

Medicaid Provider Services

303-534-0146
1-800-237-0757

Mailing Addresses

Claims & PARs
P.O. Box 30
Denver, CO 80201-0030

Correspondence, Inquiries & Adjustments

P.O. Box 90
Denver, CO 80201-0090

Provider enrollment, Provider information, Changes, Signature authorization, and Claim requisitions

P.O. Box 1100
Denver, CO 80201-1100

Medicaid Fiscal Agent Information on the Internet

WWW.CONSULTEC-GCRO.COM

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

Distribution: Supply and Pharmacy providers March 2000

Reference: B0000058

Urgent Read Immediately

Incontinence Product Benefit Changes

Effective for services provided on and after March 1, 2000, changes to the benefit package for incontinence products have been made. The existing code X2021 remains in effect, but the description of the service has been changed to "Child pull-up briefs (sizes small, medium, and large)."

In addition, the following codes have been added to represent new services:

PROC CODE	DESCRIPTION	PRIOR AUTH	ALLOWABLE
X2028	Adolescent pull-up training brief, medium	Yes	\$ 0.83 each
X2029	Adolescent pull-up training brief, large	Yes	\$ 1.02 each
X2030	Adolescent pull-up training brief, extra large	Yes	\$ 1.02 each
X2031	Child pull-up brief, extra large	No	\$ 0.65 each

Prior authorization requests should indicate the following types of information, as appropriate to the client:

- Number of briefs needed per day (required)
- The weight of the child (required)
- Medical and independence needs that will be addressed by using this product
- Medical need for higher level of absorption
- Medical need for increased leakage protection (e.g., school attendance, decubitus ulcers, other)
- Medical inability to utilize other products (e.g., allergies, etc.)
- Reason for better fit of brief (e.g., contractures, conformity with body contours, etc.)
- If other pull-up briefs have been tried and did not meet the needs of the client, provide an explanation of the problem.

Please direct questions about Medicaid billing or the information in this bulletin to Medicaid Provider Services at:

303-534-0146 or
1-800-237-0757 (toll free Colorado).