**Title:**

NY incontinence supply age restriction policy

**Unresolved Sub Rule Description:**

If any of the following incontinence products is billed by any provider and patient’s age is less than 3 years then deny the billed code with reason HCPCS Inappropriate For Age.

HCPCS: A4554, T4521, T4522, T4523, T4524, T4529, T4530, T4533, T4535, T4537, T4539, T4540, and T4543.

**Resolved Sub Rule Description:**

If any of the following incontinence products is billed by any provider and patient’s age is less than 3 years then deny the billed code with reason inappropriate billing.

HCPCS: A4554, T4521, T4522, T4523, T4524, T4529, T4530, T4533, T4535, T4537, T4539, T4540, and T4543.

**Reason Code and Description:**

CPTAG- HCPCS Inappropriate For Age*.*

**Sub Rule Notes:**

This rule is based on NY state Medicaid Guidelines.

**Script:**

The billed item, <CPT> (<CPT\_DESC>), was denied because it was reported for child of age less than 3 years, per our policy, which is based on New York Medicaid Guidelines.

**Rationale:**

According to our policy, which is based on New York Medicaid Guidelines, the incontinence products are not payable for children below 3 years of age.

**Claim Types:**

P, A, F, I, O, S

**Subrule DOS From (in Props Tab):**

01/01/1753

**Subrule DOS To (in Props Tab):**

12/31/9999

**Links:**

DME Procedure Codes - Version 2017-1 (05/01/2017)

<https://www.emedny.org/ProviderManuals/DME/PDFS/DME_Procedure_Codes.pdf>

**Reference Details:**

On page 23, under section “UNDERPADS/DIAPERS/LINERS”, sub section “Non-Covered Indications” – “Diapers/Liners will not be covered for children under the age of three as they are needed as part of the developmental process”.

**Client Grid:**

