Medical Supply Quantity Update

The following changes in maximum quantities will be effective for dates of service on or after August 1, 2017 Current reimbursement rates are still in effect.

Code	Brief Description	Maximum Quantity
A4310	Insertion tray w/o drainage bag and w/o catheter (accessories only)	4/month
A4311	Insertion tray w/o drainage bag and w/indwelling catheter, Foley type, two-way latex	4/month
A4314	Insertion tray w/drainage bag w/indwelling catheter, Foley type, two-way latex	4/month
A4320	Irrigation tray w/bulb or piston syringe, any purpose	15/month
A4322	Irrigation syringe, bulb or piston, each	15/month
A4334	Urinary catheter anchoring device, leg strap, each	8/month
A4338	Indwelling catheter; Foley type, two-way latex with coating	4/month
A4344	Indwelling catheter, Foley type, two-way all silicone	4/month
A4346	Indwelling catheter, Foley type, three-way for continuous irrigation	4/month
A4349	Male external catheter, with or without adhesive, disposable	40/month
A4354	Insertion tray with drainage bag but w/o catheter	4/month
A4357	Bedside drainage bag, day or night, with or without tube	4/month
A4358	Urinary drainage bag; leg or abdomen, vinyl, with or without tube, with straps	4/month

For questions related to policy and coverage guidelines contact the Division of OHIP Operations at 1-800-342-3005 or by email at <u>OHIPMEDPA@health.ny.gov.</u>