

OSTOMY SUPPLIES

Service Authorization: None

CMN: None

DURABLE MEDICAL EQUIPMENT MANUAL

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: November 2023

OSTOMY SUPPLIES

Indications and limitations of coverage and medical appropriateness:

Coverage allowed if the following conditions are present:

- Colostomy
- Ileostomy
- Urinary Ostomies

Supplies:

- Quantity of supplies will vary depending on the type of ostomy, location, construction, and the condition of the skin around the stoma.
- Liquid barrier is allowed ([A4369](#)).
- Continent stoma members may use one of the following to prevent/manage drainage: stoma cap ([A5055](#)), stoma plug ([A5081](#)), or gauze pads ([A6216](#)).
- No more than one type of supply would be medically necessary on a given day.
- Urinary ostomy members may use either a bag ([A4357](#)) or bottle ([A5102](#)) for drainage at night. It is not medically necessary to have both.

Documentation Requirements:

- A prescription from prescribing physician/practitioner.
- Medical documentation supporting the need.
- Physician/practitioner exam per current DME Manual's requirements.



Health & Human Services

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Date Revised	Revisions
February 2017	Reviewed and reformatted.
February 2020	Added new logo.
December 27, 2022	<p>Added to Document Required section:</p> <ul style="list-style-type: none"> • A prescription from prescribing physician/practitioner. • Medical documentation supporting the need. • Physician/practitioner exam per current DME Manual's requirements. <p>Deleted from Document Required section:</p> <ul style="list-style-type: none"> • Reference the DME Manual and the General Information Provider Manual for required documents for the member's file needed for post pay audit purposes.
November 29, 2023	Reviewed and reformatted. No changes.