



American Association for Homecare
New HCPCS Codes for Intermittent Catheters, Effective January 1, 2026

Until recently, more than 1300 intermittent catheter (IC) products were constrained to three HCPCS codes with minimal product differentiation. This negatively impacted access to ICs with advanced hydrophilic coating technology. On August 16, 2024, The Centers for Medicare and Medicaid Services ([CMS](#)) [announced a decision¹](#) to differentiate catheters with hydrophilic coating by revamping the HCPCS codes.

<i>Current Codes</i>	<i>New Codes: Effective January 1, 2026</i>
A4351 Intermittent urinary catheter; straight tip, with or without coating (teflon, silicone, silicone elastomer, or hydrophilic, etc.), each	A4351 (revised)* Intermittent urinary catheter; straight tip, with or without coating (teflon, silicone, silicone elastomer, etc.), each
	A4295 (new) Intermittent urinary catheter; straight tip, hydrophilic coating , each
A4352 Intermittent urinary catheter; coude (curved) tip, with or without coating (teflon, silicone, silicone elastomer, or hydrophilic, etc.), each	A4352 (revised)* Intermittent urinary catheter; coude (curved) tip, with or without coating (teflon, silicone, silicone elastomer, etc.), each
	A4296 (new) Intermittent urinary catheter; coude (curved tip), hydrophilic coating each
A4353 Intermittent urinary catheter, with insertion supplies	A4353 (unchanged)* Intermittent urinary catheter, with insertion supplies
	A4297 (new) Intermittent urinary catheter; hydrophilic coating , with insertion supplies

*Hydrophilic catheters cannot be billed with A4351, A4352 or A4353 as of 1/1/26.

Intermittent catheters are medically necessary for individuals with urinary retention. Individuals with conditions such as spina bifida, multiple sclerosis, spinal cord injury, Parkinson's disease, diabetes, bladder outlet obstruction, benign prostate hyperplasia (BPH), bladder cancer, and urethral strictures often rely on intermittent catheters to void urine and maintain urological health. Catheters are used to empty the bladder at regular prescribed intervals, typically 4-6 times per day².

Choosing a catheter is a complex clinical decision and certain catheter features can lead to better clinical outcomes, improved compliance, reduced complications and a better quality of life. It is crucial to provide access to catheters that meet medical and physical needs.

On behalf of our members, we strongly support CMS' decision to differentiate catheters with hydrophilic coating. To eliminate disruptions in care we encourage you implement the new and modified codes into your systems and to assign sustainable reimbursement to guarantee uninterrupted access to innovative hydrophilic catheters. This must be done prior to January 1, 2026, when the new coding goes into effect.

1. CMS HCPCS public meeting decision (page 5)<https://www.cms.gov/files/document/2024-hcpcs-application-summary-biannual-1-2024-non-drug-and-non-biological-items-and-services.pdf>
2. Rognoni C, Tarricone R. Intermittent catheterisation with hydrophilic and non-hydrophilic urinary catheters: systematic literature review and meta-analyses. BMC Urol. Jan 10 2017;17(1):4. doi:10.1186/s12894-016-0191-

