

Durable Medical Equipment Codes Requiring Prior Authorization

Code	Description	Effective Date
A4226	Supplies For Maintenance Of Insulin Infusion Pump With Dosage Rate Adjustment Using Therapeutic Continuous Glucose Sensing, Per Week	7/1/2020
A4238	Supply Allowance For Adjunctive, Non-Implanted Continuous Glucose Monitor (Cgm), Includes All Supplies And Accessories, 1 Month Supply = 1 Unit Of Service	4/1/2022
A4239	Supply Allowance For Non-Adjunctive, Non-Implanted Continuous Glucose Monitor (Cgm), Includes All Supplies And Accessories, 1 Month Supply = 1 Unit Of Service	1/1/2023
A9152	Single Vitamin/Mineral/Trace Element	6/11/2012
A9153	Multiple Vitamins, With Or Without Minerals And Trace Elements	6/11/2012
A9274	External Ambulatory Insulin Delivery System, Disposable, Includes All Supplies And Accessories	1/1/2020
A9276	Sensor; Invasive (E.G., Subcutaneous), Disposable, For Use With Non-Durable Medical Equipment Interstitial Continuous Glucose Monitoring System, One Unit = 1 Day Supply	11/1/2020
A9277	Transmitter; External, For Use With Non-Durable Medical Equipment Interstitial Continuous Glucose Monitoring System	1/1/2020
A9278	Receiver (Monitor); External, For Use With Non-Durable Medical Equipment Interstitial Continuous Glucose Monitoring System	1/1/2020
A9280	Alert/Alarm Device, Not Otherwise Classified	6/11/2012
E0118	Crutch Substitute, Lower Leg Platform, With Or Without Wheels; Each	9/1/2018
E0240	Bath/Shower Chair, With Or Without Wheels, Any Size	9/1/2013
E0245	Tub Stool Or Bench	9/1/2013
E0247	Transfer Bench For Tub Or Toilet With Or Without Commode Opening	9/1/2013



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E0248	Transfer Bench, Heavy Duty, Tub Or Stool, With Or Without Commode Opening	9/1/2013
E0300	Pediatric Crib, Hospital Grade, Fully Enclosed	9/1/2018
E0328	Hospital Bed, Pediatric, Manual, 360 Degree Side Enclosures, Top Of Headboard, Footboard And Side Rails Up To 24 Inches Above The Spring, Includes Mat Tress	9/1/2018
E0329	Hospital Bed, Pediatric, Electric Or Semi-Electric, 360 Degree Side Enclosures, Top Of Headboard, Footboard And Side Rails Up To 24 Inches Above The S Pring, Includes Mattress	9/1/2018
E0483	High Frequency Chest Wall Oscillation System, With Full Anterior And/or Posterior Thoracic Region Receiving Simultaneous External Oscillation, Includes All Accessories And Supplies, Each	9/1/2018
E0486	Oral Device/Appliance Used To Reduce Upper Airway Collapsibility, Adjustable	12/1/2020
E0635	Patient Lift, Electric With Seat Or Sling	9/1/2018
E0639	Pt. Lift, Moveable From Room To Room With Disassembly And Reassembly, Includes All Components/Accessories	9/1/2018
E0640	Patient Lift, Fixed Sys, Includes All Components/Accessories	9/1/2013
E0652	Pneumatic Compressor, Segmental Home Model With Calibrated Gradient Pressure	7/1/2021
E0677	Non-Pneumatic Sequential Compression Garment, Trunk	4/1/2023
E0784	External Ambulatory Infusion Pump, Insulin	9/1/2018
E0787	External Ambulatory Infusion Pump, Insulin, Dosage Rate Adjustment Using Therapeutic Continuous Glucose Sensing	7/1/2020
E2101	Blood Glucose Monitor With Integrated Lancing/Blood Sample	7/1/2021
E2103	Non-Adjunctive, Non-Implanted Continuous Glucose Monitor Or Receiver	1/1/2023
E2331	Power Wheelchair Accessory, Attendant Control, Proportional, Including All Related Electronics And Fixed Mounting Hardware	1/1/2014
K0606	Automated External Defibrillator With Integrated Electrocardiogram Analysis Garment Type	7/1/2021
L1834	Ko, Without Knee Joint, Rigid, Molded To Patient Model	7/1/2021



Code	Description	Effective Date
L1840	Ko, Derotat Fab To Pt Mdl Lennox Hill Or Scott Spiral Types	7/1/2021
L1844	Knee Orthosis, Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial- Lateral And Rotation Control, W/Wo Varus/Valgus Adjustment, Custom Fa	7/1/2021
L1846	Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial- Lateral And Rotation Control, W/Wo Varus/Valgus Adjustment, Custom Fab	7/1/2021
L1860	KO, modification of supracondylar prosthetic socket, custom fabricated (SK)	6/1/2022
L2861	Addition To Lower Extremity Joint, Knee Or Ankle, Concentric Adjustable Tor Sion Style Mechanism For Custom Fabricated Orthotics Only, Each	7/1/2021
L5859	Addition To Lower Extremity Prosthesis, Endoskeletal Knee-Shin System, Powered And Programmable Flexion/Extension Assist Control, Includes Any Type Motor(S)	7/1/2021
L5969	Addition, Endoskeletal Ankle-Foot Or Ankle System, Power Assist, Includes Any Type Motor(S)	6/1/2022
L5973	Endoskeletal ankle foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes power source	7/1/2023
L6026	Transcarpal/Metacarpal Or Partial Hand Disarticulation Prosthesis; External Power; Self-Suspended; Inner Socket W/Removable Forearm Section; Electrodes And Cables; Two Batteries; Charger; Excludes Ter	12/1/2020
L6611	Addition To Upper Extremity Prosthesis, External Powered,AdditionalSitch, Any Type	1/1/2024
L6677	Upper Extremity Addition, Harness, Triple Control, Simultaneous Operation O	10/1/2024
L6715	Terminal Device, Multiple Articulating Digit, Includes Motor(S), Initial Issue Or Replacement	9/1/2022
L6880	Electric Hand, Switch Or Myoelectric Controlled, Independently Articulating digits, Any Grasp Pattern Or Combination Of Grasp Patterns, Includes Motor(S)	9/1/2022



Code	Description	Effective Date
L6881	Automatic Grasp Feature, Addition To Upper Limb Prosthetic Terminal Device	9/1/2022
L6882	Microprocessor Control Feature, Addition To Upper Limb Prosthetic Terminal Device	9/1/2022
L6925	Wrist Disarticulation, External Power, Self-Suspended Inner Socket, Removable Forearm Shell, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Termin	9/1/2022
L6935	Below Elbow, External Power, Self-Suspended Inner Socket, Removable Fore- Arm Shell, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Terminal Devic	9/1/2022
L6945	Elbow Disarticulation, Ext. Power, Molded Inner Socket, Removable Humeral Shell, Outside Locking Hinges, Forearm, Otto Bock Or Equal Electrodes, Cables, 2 Batteries & 1 Charger, Myoelectronic C	1/1/2013
L6955	Above Elbow, External Power, Molded Inner Socket, Removable Humeral Shell, Internal Locking Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables, 2 Batteries And 1 Charger, Myoelectronic Control O	9/1/2018
L6965	Shoulder Disarticulation, Ext. Power, Molded Inner Socket, Removable Sh. Shell, Sh. Bulkhead, Humeral Sect., Mech. Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables, 2 Batt. & 1 Charger, M	9/1/2018
L6975	Interscapular-Thoracic, External Power, Molded Inner Socket, Removable Shoulder Shell, Shoulder Bulkhead, Humeral Section, Mechanical Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables,	1/1/2024
L7007	Electric Hand, Switch Or Myoelectric Controlled, Adult	1/1/2024
L7008	Electric Hand, Switch Or Myoelectric, Controlled, Pediatric	1/1/2024
L7009	Electric Hook, Switch Or Myoelectric Controlled, Adult	1/1/2024
L7045	Electronic Hook, Child, Michigan Or Equal, Switch Controlled	1/1/2024
L7180	Electronic Elbow, Boston, Utah Or Equal, Myoelectronically Controlled	1/1/2024



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L7181	Electronic Elbow, Microprocessor Simultaneous Control Of Elbow And Terminal Device	1/1/2024
L7190	Electronic Elbow, Adolescent, Variety Village Or Equal, Myoelectronically Controlled	1/1/2024
L7191	Electronic Elbow, Child, Variety Village Or Equal, Myoelectronically Controlled	1/1/2024
L8031	Breast Prosthesis, Silicone Or Equal, With Integral Adhesive	1/1/2024
L8032	Nipple Prosthesis, Reusable, Any Type, Each	1/1/2024
L8614	Cochlear Device/System	1/1/2024
L8619	Cochlear Implant External Speech Processor, Replacement	1/1/2024
L8627	Cochlear Implant, External Speech Processor, Component, Replacement	1/1/2024
L8628	Cochlear Implant, External Controller Component, Replacement	1/1/2024
L8679	Implantable Neurostimulator, Pulse Generator, Any Type	1/1/2024
L8701	Powered Upper Extremity Range Of Motion Assist Device, Elbow, Wrist, Hand With Single Or Double Upright(S), Includes Microprocessor, Sensors, All Components And Accessories, Custom Fabricated	1/1/2024
L8702	Powered Upper Extremity Range Of Motion Assist Device, Elbow, Wrist, Hand, Finger, Single Or Double Upright(S), Includes Microprocessor, Sensors, All Components And Accessories, Custom Fabricated	1/1/2024
Q0478	Power Adapter For Use With Electric Or Electric/Pneumatic Ventricular Assis T Device, Vehicle Type	1/1/2024
Q0479	Power Module For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	1/1/2024
Q0480	Driver For Use With Pneumatic Ventricular Assist Device, Replacement Only	1/1/2024
Q0481	Microprocessor Control Unit For Use With Electric Ventricular Assist Device	3/18/2020
Q0482	Microprocessor Control Unit For Use With Electric/Pneumatic Combination	9/1/2018



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Q0483	Monitor/Display Module For Use With Electric Ventricular Assist Device,	2/1/2021
Q0484	Monitor/display module for use with electric or electric/pneumatic ventricular assist device, replacement only	6/11/2012
Q0485	Monitor Control Cable For Use With Electric Ventricular Assist Device,	3/18/2020
Q0486	Monitor Control Cable For Use With Electric/Pneumatic Ventricular Assist	3/18/2020
Q0487	Leads (Pneumatic/Electrical) For Use With Any Type Electric/Pneumatic	8/1/2024
Q0488	Power Pack Base For Use With Electric Ventricular Assist Device, Replacement	1/1/2019
Q0489	Power Pack Base For Use With Electric/Pneumatic Ventricular Assist Device,	1/1/2019
Q0506	Battery, Lithium-Ion, For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	6/1/2022
Q0508	Miscellaneous Supply Or Accessory For Use With An Implanted Ventricular Assist Device	7/1/2013
Q0509	Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist Device For Which Payment Was Not Made Under Medicare Part A	8/1/2022
S1040	Cranial remolding orthotic, pediatric, rigid, with soft interface material, custom fabricated, includes fitting and adjustment(s)	12/1/2023
S5160	Emergency response system; installation and testing	7/1/2013
S5161	Emergency response system; service fee, per month (excludes installation and testing)	7/1/2013
S5185	Medication reminder service, nonface-to-face; per month	6/11/2012
S5199	Personal care item, NOS, each	7/1/2013
S8185	Flutter device	6/1/2022
L1006	Scoliosis orthosis, sagittal-coronal control provided by a rigid lateral frame, extends from axilla to trochanter, includes all accessory	10/1/2024



Code	Description	Effective Date
	pads, straps and interface, prefabricated item that has been trimmed, bent, molded,	