

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A4206	SYRINGE WITH NEEDLE, STER	No
HCPCS	A4207	SYRINGE WITH NEEDLE, STER	No
HCPCS	A4208	SYRINGE WITH NEEDLE, STER	No
HCPCS	A4209	SYRINGE WITH NEEDLE, STER	No
HCPCS	A4210	NEEDLE-FREE INJECTION DEV	No
HCPCS	A4211	SUPPLIES FOR SELF ADMINIS	Yes
HCPCS	A4212	NON CORING NEEDLE	No
HCPCS	A4213	SYRINGE, STERILE, 20 CC O	No
HCPCS	A4215	NEEDLES ONLY, STERILE, AN	No
HCPCS	A4216	STERILE WATER/SALINE, 500	No
HCPCS	A4217	STERILE WATER/SALINE, 500	No
HCPCS	A4220	REFILL KIT FOR IMPLANTABL	Yes
HCPCS	A4221	SUPPLIES FOR MAINTENANCE	Yes
HCPCS	A4230	INFUSION SET FOR EXTERNAL	Yes
HCPCS	A4231	INFUSION SET FOR EXTERNAL	Yes
HCPCS	A4232	SYRINGE WITH NEEDLE FOR E	Yes
HCPCS	A4233	ALKALIN BATT FOR GLUCOSE	No
HCPCS	A4234	J-CELL BATT FOR GLUCOSE M	No
HCPCS	A4235	LITHIUM BATT FOR GLUCOSE	No
HCPCS	A4236	SILVR OXIDE BATT GLUCOSE	No
HCPCS	A4244	ALCOHOL OR PEROXIDE, PER	No
HCPCS	A4245	ALCOHOL WIPES, PER BOX	No
HCPCS	A4245 52	ALCOHOL WIPES, PER BOX 10	No
HCPCS	A4245 U1	ALCOHOL WIPES, PER BOX 20	No
HCPCS	A4245 U2	ALCOHOL WIPES, PER BOX; L	No
HCPCS	A4245 U3	ALCOHOL WIPES, PER BOX;CO	No
HCPCS	A4245 U4	ALCOHOL WIPES, PER BOX; C	No
HCPCS	A4245 U5	ALCOHOL WIPES, PER BOX; Q	No
HCPCS	A4246	BETADINE OR PHISOHEX SOLU	No
HCPCS	A4247	BETADINE OR IODINE SWABS/	No
HCPCS	A4250	URINE TEST OR REAGENT STR	No
HCPCS	A4250 52	URINE TEST OR REAGENT STR	No
HCPCS	A4252	BLOOD KETONE TEST OR STRI	No
HCPCS	A4253	BLOOD GLUCOSE TEST OR REA	No
HCPCS	A4253 U1	CHEMSTRIPS BG 100'S	No
HCPCS	A4255	PLATFORMS FOR BLD GLU MON	Yes
HCPCS	A4256	NORMAL, LOW AND HIGH CALI	No
HCPCS	A4257	REPLACE LENS SHIELD CARTRI	No
HCPCS	A4258	SPRING POWERED DEVICE FOR	No
HCPCS	A4259	LANCETS, PER BOX OF 100	No
HCPCS	A4262	TEMPORARY, ABSORBABLE LAC	No
HCPCS	A4263	PERMANENT, LONG TERM, NON	No
HCPCS	A4270	DISPOSABLE ENDOSCOPE SHEA	No
HCPCS	A4300	IMPLANTABLE ACCESS CATHET	No
HCPCS	A4300 52	IMPLANTABLE ACCESS CATHET	No
HCPCS	A4301	IMPLANTABLE ACCESS TOTAL	No
HCPCS	A4306	DISPOSABLE DRUG DELIVERY	Yes
HCPCS	A4310	INSERTION TRAY WITHOUT DR	No
HCPCS	A4311	INSERTION TRAY WITHOUT DR	No

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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A4313	INSERTION TRAY WITHOUT DR	No
HCPCS	A4314	INSERTION TRAY WITH DRAIN	No
HCPCS	A4315	INSERTION TRAY WITH DRAIN	No
HCPCS	A4316	INSERTION TRAY WITH DRAIN	No
HCPCS	A4320	IRRIGATION TRAY WITH BULB	No
HCPCS	A4321	THERAPEUTIC AGENT FOR URI	Yes
HCPCS	A4322	IRRIGATION SYRINGE, BULB	No
HCPCS	A4326	MALE EXTERNAL CATHETER SP	No
HCPCS	A4327	FEMALE EXTERNAL URINARY C	No
HCPCS	A4328	FEMALE EXTERNAL URINARY C	No
HCPCS	A4330	PERIANAL FECAL COLLECTION	No
HCPCS	A4331	EXTENSION DRAINAGE TUBING	No
HCPCS	A4332	LUBRICANT FOR CATH INSERT	No
HCPCS	A4335	INCONTINENCE SUPPLY; MISC	No
HCPCS	A4338	INDWELLING CATHETER; FOLE	No
HCPCS	A4340	INDWELLING CATHETER; SPEC	No
HCPCS	A4344	INDWELLING CATHETER, FOLE	No
HCPCS	A4346	INDWELLING CATHETER; FOLE	No
HCPCS	A4349	MALE EXTERNAL CATHETER W/	No
HCPCS	A4351	INTERMITTENT URINARY CATH	No
HCPCS	A4351 52	INTERMITTANT URINARY CATH	No
HCPCS	A4352	INTERMITTENT URINARY CATH	No
HCPCS	A4353	INTERMITTENT URINARY CATH	No
HCPCS	A4354	INSERTION TRAY WITH DRAIN	No
HCPCS	A4355	IRRIGATION TUBING SET FOR	No
HCPCS	A4356	EXTERNAL URETHRAL CLAMP O	No
HCPCS	A4357	BEDSIDE DRAINAGE BAG, DAY	No
HCPCS	A4358	URINARY LEG BAG; VINYL, W	No
HCPCS	A4361	OSTOMY FACEPLATE, EACH	No
HCPCS	A4362	SKIN BARRIER; SOLID, FOUR	No
HCPCS	A4363	SKIN BARRIER; LIQUID (SPR	No
HCPCS	A4364	ADHESIVE, LIQUID, OR EQUA	No
HCPCS	A4365	ADHESIVE REMOVER WIPES, A	No
HCPCS	A4366	OSTOMY VENT, ANY TYPE, EA	No
HCPCS	A4367	OSTOMY BELT, EACH	No
HCPCS	A4368	OSTOMY FILTER, ANY TYPE,	No
HCPCS	A4369	OSTOMY SKIN BARRIER LIQUI	No
HCPCS	A4369 U1	OSTOMY SKIN BARRIER, LIQU	No
HCPCS	A4371	SKIN BARRIER POWDER PER O	No
HCPCS	A4372	OSTOMY SKIN BARRIER, SOLI	No
HCPCS	A4373	SKIN BARRIER WITH FLANGE	No
HCPCS	A4375	OSTOMY POUCH, DRAINABLE,	No
HCPCS	A4376	OSTOMY POUCH DRAINABLE W	No
HCPCS	A4377	OSTOMY POUCH DRAINABLE FO	No
HCPCS	A4378	OSTOMY POUCH DRAINABLE FO	No
HCPCS	A4379	OST URINARY PLASTIC POUCH	No
HCPCS	A4380	OSTOMY POUCH URINARY W FA	No
HCPCS	A4381	OSTOMY POUCH URINARY FOR	No
HCPCS	A4382	OST POUCH URINARY FOR FAC	No

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HCPCS	A4383	OST POUCH URINARY FOR FAC	No
HCPCS	A4384	OSTOMY FACEPLATE EQUIV SI	No
HCPCS	A4385	OST SKN BARRIER SOLID EXT	No
HCPCS	A4387	OST POUCH CLOSED W BARRIE	No
HCPCS	A4388	OST POUCH DRAINABLE W EXT	No
HCPCS	A4389	OST POUCH DRAINABL W BARR	No
HCPCS	A4390	OST POUCH DRAINBL EXT WEA	No
HCPCS	A4391	OST POUCH URINARY W EXTEN	No
HCPCS	A4392	URINARY POUCH W STD WEAR	No
HCPCS	A4393	OST POUCH URINARY W EX WE	No
HCPCS	A4394	OSTOMY LIQUID DEODORANT F	No
HCPCS	A4395	OSTOMY DEODORANT SOLID FO	No
HCPCS	A4396	OSTOMY BELT W PERISTOMAL	No
HCPCS	A4397	IRRIGATION SUPPLY; SLEEVE	No
HCPCS	A4398	OSTOMY IRRIGATION SUPPLY;	No
HCPCS	A4399	OSTOMY IRRIGATION SUPPLY;	No
HCPCS	A4400	OSTOMY IRRIGATION SET	No
HCPCS	A4402	LUBRICANT, PER OUNCE (OST	No
HCPCS	A4404	OSTOMY RING, EACH	No
HCPCS	A4405	OSTOMY SKIN BARRIER NONPE	No
HCPCS	A4406	OST SKIN BARRIER PECTIN B	No
HCPCS	A4407	OST SKIN BARRIER W FLANGE	No
HCPCS	A4408	OSTOMY SKIN BARRIER W FLA	No
HCPCS	A4409	OST SKN BARR CONVEX <=4 S	No
HCPCS	A4410	OST SKN BARR EXTND >4 SQ	No
HCPCS	A4411	OST SKN BARR EXTND =4SQ	No
HCPCS	A4412	OST POUCH DRAIN HIGH OUTP	No
HCPCS	A4413	2 PC DRAINABLE OST POUCH	No
HCPCS	A4414	OST SKNBAR W/O CONV<=4 SQ	No
HCPCS	A4415	OST SKN BARR W/O CONV >4	No
HCPCS	A4416	OST PCH CLSD W BARRIER/FI	No
HCPCS	A4417	OST PCH W BAR/BLTINCONV/F	No
HCPCS	A4418	OST PCH CLSD W/O BAR W FI	No
HCPCS	A4419	OST PCH FOR BAR W FLANGE/	No
HCPCS	A4420	OSTOMY POUCH, CLOSED; FOR	No
HCPCS	A4421	OSTOMY SUPPLY; MISCELLANE	Yes
HCPCS	A4422	OST POUCH ABSORBENT MATER	No
HCPCS	A4423	OST PCH FOR BAR W LK FL/F	No
HCPCS	A4424	OST PCH DRAIN W BAR & FIL	No
HCPCS	A4425	OST PCH DRAIN FOR BARRIER	No
HCPCS	A4426	OST PCH DRAIN 2 PIECE SYS	No
HCPCS	A4427	OST PCH DRAIN/BARR LK FLN	No
HCPCS	A4428	URINE OST POUCH W FAUCET/	No
HCPCS	A4429	URINE OST POUCH W BLTINCO	No
HCPCS	A4430	OSTOMY POUCH, URINARY, WI	No
HCPCS	A4431	OST PCH URINE W BARRIER/T	No
HCPCS	A4432	OS PCH URINE W BAR/FANGE/	No
HCPCS	A4433	URINE OST PCH BAR W LOCK	No
HCPCS	A4434	OST PCH URINE W LOCK FLNG	No

DME/POS Procedure Codes
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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A4450	TAPE, NON-WATERPROOF, PER	No
HCPCS	A4450 52	TAPE, NON-WATERPROOF, PER	No
HCPCS	A4450 U1	TAPE NON-WATERPROOF PER 1	No
HCPCS	A4450 U2	TAPE, NON-WATERPROOF, PER	No
HCPCS	A4450 U3	TAPE, NON-WATERPROOF, PER	No
HCPCS	A4450 U4	TAPE, NON-WATERPROOF, PER	No
HCPCS	A4452	TAPE, WATERPROOF, PER 18	No
HCPCS	A4455	ADHESIVE REMOVER OR SOLVE	No
HCPCS	A4461	SURGICL DRESS HOLD NON-RE	No
HCPCS	A4463	SURGICAL DRESS HOLDER REU	No
HCPCS	A4465	NON-ELASTIC BINDER FOR EX	No
HCPCS	A4465 U1	NONELASTIC BINDER; SURE H	Yes
HCPCS	A4465 U2	NONELASTIC BINDER; RING Z	Yes
HCPCS	A4465 U3	NONELASTIC BINDER; UTENSI	Yes
HCPCS	A4465 U4	NONELASTIC BINDER; UNIVER	Yes
HCPCS	A4465 U5	NONELASTIC BINDER; BUTTON	Yes
HCPCS	A4465 U6	NONELASTIC BINDER; ONE HA	Yes
HCPCS	A4465 U7	NONELASTIC BINDER; SOCK &	Yes
HCPCS	A4481	THRACHEOSTOMA FILTER, ANY	No
HCPCS	A4500	SURGICAL STOCKINGS BELOW	No
HCPCS	A4520	INCONTINENCE GARMENT, ANY	No
HCPCS	A4550	SURGICAL TRAYS	No
HCPCS	A4554	DISPOSABLE UNDERPADS ALL	No
HCPCS	A4556	ELECTRODES, (E.G., APNEA	No
HCPCS	A4556 TG	ELECTRODES (E.G. APNEA MO	No
HCPCS	A4557	LEAD WIRES, (E.G.,APNEA M	No
HCPCS	A4558	CONDUCTIVE PASTE OR GEL	Yes
HCPCS	A4559	COUPLING GEL OR PASTE	No
HCPCS	A4565	SLINGS	No
HCPCS	A4570	SPLINT	No
HCPCS	A4570 SC	SPLINT; MEDICALLY NECESSA	No
HCPCS	A4580	CAST SUPPLIES (E.G. PLAST	No
HCPCS	A4580 52	CAST SUPPLIES (EG PLASTER	No
HCPCS	A4590	SPECIAL CASTING MATERIAL	No
HCPCS	A4595	TENS SUPPLIES, 2 LEAD, PE	No
HCPCS	A4600	SLEEVE, INTER LIMB COMP D	Yes
HCPCS	A4601	LITH ION BATT, NON-PROS U	Yes
HCPCS	A4604	TUBING WITH HEATING ELEME	No
HCPCS	A4605	TRACH SUCTION CATH CLOSE	Yes
HCPCS	A4606	OXYGEN PROBE USED W OXIME	Yes
HCPCS	A4615	CANNULA, NASAL	No
HCPCS	A4616	TUBING (OXYGEN), PER FOOT	No
HCPCS	A4617	MOUTH PIECE	No
HCPCS	A4618	BREATHING CIRCUITS	No
HCPCS	A4620	VARIABLE CONCENTRATION MA	No
HCPCS	A4623	TRACHEOSTOMY, INNER CANNU	No
HCPCS	A4624	TRACHEAL SUCTION CATHETER	No
HCPCS	A4625	TRACHEOSTOMY CARE OR CLEA	No
HCPCS	A4626	TRACHEOSTOMY CLEANING BRU	No

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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A4627	SPACER, BAG OR RESERVOIR,	No
HCPCS	A4628	OROPHARYNGEAL SUCTION CAT	No
HCPCS	A4629	TRACHEOSTOMY CARE KIT FOR	No
HCPCS	A4630	REPLACEMENT BATTERIES. M	No
HCPCS	A4633	UVL REPLACEMENT BULB	No
HCPCS	A4635	UNDERARM PAD, CRUTCH, RE	No
HCPCS	A4636	REPLACEMENT, HANDGRIP, CA	No
HCPCS	A4636 UA	REPLACEMENT, HANDGRIP, CA	Yes
HCPCS	A4637	REPLACEMENT, TIP, CANE, C	No
HCPCS	A4639	INFRARED HT SYS REPLCMNT	No
HCPCS	A4640	REPLACEMENT PAD FOR USE	No
HCPCS	A4641	SUPPLY OF RADIOPHARMACEUT	No
HCPCS	A4642	SUPPLY OF SATUMOMAB PENDE	No
HCPCS	A4648	IMPLANTABLE TISSUE MARKER	No
HCPCS	A4649	SURGICAL SUPPLY; MISCELLA	Yes
HCPCS	A4649 SC	SURGICAL SUPPLY; MISCELLA	No
HCPCS	A4657	DIALYSIS SYRINGE W/WO NEE	No
HCPCS	A4660	SPHYGMOMANOMETER/BL PRESS	No
HCPCS	A4663	BLOOD PRESSURE CUFF ONLY	No
HCPCS	A4670	AUTOMATIC BLOOD PRESSURE	Yes
HCPCS	A4672	DRAINAGE EXT LINE, DIALYS	No
HCPCS	A4673	EXT LINE W EASY LOCK CONN	No
HCPCS	A4674	CHEM/ANTISEPT SOLUTION, 8	No
HCPCS	A4728	DIALYSATE SOLUTION, NON-D	No
HCPCS	A4730	FISTULA CANNULATION SET F	No
HCPCS	A4750	BLOOD TUBING, ARTERIAL OR	No
HCPCS	A4772	DEXTROSTICK OR GLUCOSE TE	No
HCPCS	A4860	DISPOSABLE CATHETER CAPS	No
HCPCS	A4927	GLOVES, NON-STERILE, PER	No
HCPCS	A4927 U1	GLOVES, DISPOS, NON-STERI	No
HCPCS	A4927 U2	GLOVES, STERILE, PER 100	No
HCPCS	A5051	OSTO POUCH CLOSED; WITH B	No
HCPCS	A5052	OSTOMY POUCH, CLOSED; WIT	No
HCPCS	A5053	OST POUCH, CLOSED; FOR US	No
HCPCS	A5054	OSTO POUCH, CLOSED; FOR B	No
HCPCS	A5055	STOMA CAP	No
HCPCS	A5061	OST POUCH, DRAINABLE; WIT	No
HCPCS	A5062	OST POUCH, DRAINABLE; WIT	No
HCPCS	A5063	OST POUCH DRAINABLE FOR B	No
HCPCS	A5071	OST POUCH, URINARY WITH B	No
HCPCS	A5072	OSTOMY POUCH, URINARY; WI	No
HCPCS	A5073	OST POUCH, URINARY; FOR B	No
HCPCS	A5081	CONTINENT DEVICE;PLUG F C	No
HCPCS	A5082	CONTINENT DEVICE CATH F C	No
HCPCS	A5093	OSTOMY ACCESSORY; CONVEX	No
HCPCS	A5102	BEDSIDE DRAINAGE BOTTLE W	No
HCPCS	A5105	URINARY SUSPENSORY; WITH	No
HCPCS	A5112	URINARY LEG BAG; LATEX	No
HCPCS	A5113	LEG STRAP; LATEX, REPLACE	No

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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A5114	LEG STRAP; FOAM OR FABRIC	No
HCPCS	A5120	SKIN BARRIER, WIPE OR SWA	No
HCPCS	A5121	SKIN BARRIER; SOLID, 6 X	No
HCPCS	A5122	SKIN BARRIER; SOLID, 8 X	No
HCPCS	A5126	ADHESIVE OR NON-ADHESIV D	No
HCPCS	A5131	APPLIANCE CLEANER INCONT	No
HCPCS	A5500	FOR DIABETICS ONLY, FITTI	No
HCPCS	A5501	FOR DIABETICS ONLY, FITTI	Yes
HCPCS	A5503	FOR DIABETICS ONLY, MODIF	No
HCPCS	A5504	FOR DIABETICS ONLY, MODIF	No
HCPCS	A5505	FOR DIABETICS ONLY, MODIF	No
HCPCS	A5506	FOR DIABETICS ONLY, MODIF	No
HCPCS	A5507	FOR DIABETICS ONLY, NOT O	No
HCPCS	A5512	MULTI DEN INSERT DIRECT F	Yes
HCPCS	A5513	MULTI DEN INSERT CUSTOM M	Yes
HCPCS	A6011	COLLAGEN GEL/PASTE WOUND	No
HCPCS	A6025	SILICONE GEL SHEET, EACH	No
HCPCS	A6154	WOUND POUCH, EACH	No
HCPCS	A6196	ALGINATE DRESSING <=16 SQ	No
HCPCS	A6197	ALGINATE DRSG >16 <=48 SQ	No
HCPCS	A6198	ALGINATE DRESSING > 48 SQ	No
HCPCS	A6199	ALGINATE DRSG WOUND FILL	No
HCPCS	A6203	COMPOSITE DRSG <= 16 SQ I	No
HCPCS	A6203 52	COMPOSITE DRESSING 16 SQ.	No
HCPCS	A6204	COMPOSITE DRSG >16<=48 SQ	No
HCPCS	A6205	COMPOSITE DRSG > 48 SQ IN	No
HCPCS	A6206	CONTACT LAYER <= 16 SQ IN	No
HCPCS	A6207	CONTACT LAYER >16<= 48 SQ	No
HCPCS	A6208	CONTACT LAYER > 48 SQ IN	No
HCPCS	A6209	FOAM DRSG <=16 SQ IN W/O	No
HCPCS	A6210	FOAM DRG >16<=48 SQ IN W/	No
HCPCS	A6211	FOAM DRG > 48 SQ IN W/O B	No
HCPCS	A6212	FOAM DRG <=16 SQ IN W/BOR	No
HCPCS	A6213	FOAM DRG >16<=48 SQ IN W/	No
HCPCS	A6214	FOAM DRG > 48 SQ IN W/BOR	No
HCPCS	A6215	FOAM DRESSING WOUND FILL	No
HCPCS	A6216	GAUZE NON IMPREGNATED NON	No
HCPCS	A6216 52	GAUZE, NON-IMPREGNATED, N	No
HCPCS	A6217	GAUZE, NON IMPREGNATED, N	No
HCPCS	A6218	GAUZE, NON IMPREGNATED, N	No
HCPCS	A6219	GAUZE <= 16 SQ IN W/BORDE	No
HCPCS	A6220	GAUZE >16 <=48 SQ IN W/BO	No
HCPCS	A6221	GAUZE > 48 SQ IN W/BORDER	No
HCPCS	A6222	GAUZE <=16 IN NO W/SAL W/	No
HCPCS	A6223	GAUZE >16<=48 NO W/SAL W/	No
HCPCS	A6223 52	GAUZE, IMPREGNATED, 16-48	No
HCPCS	A6223 U1	GAUZE, IMPREGNATED, 16-48	No
HCPCS	A6223 U2	GAUZE, IMPREGNATED, 16-48	No
HCPCS	A6224	GAUZE > 48 IN NO W/SAL W/	No

DME/POS Procedure Codes
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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A6228	GAUZE <= 16 SQ IN WATER/S	No
HCPCS	A6229	GAUZE >16<=48 SQ IN WATR/	No
HCPCS	A6230	GAUZE > 48 SQ IN WATER/SA	No
HCPCS	A6234	HYDROCOLLD DRG <=16 W/O B	No
HCPCS	A6235	HYDROCOLLD DRG >16<=48 W/	No
HCPCS	A6236	HYDROCOLLD DRG > 48 IN W/	No
HCPCS	A6237	HYDROCOLLD DRG <=16 IN W/	No
HCPCS	A6238	HYDROCOLLD DRG >16<=48 W/	No
HCPCS	A6239	HYDROCOLLD DRG > 48 IN W/	No
HCPCS	A6240	HYDROCOLLD DRG FILLER PAS	No
HCPCS	A6241	HYDROCOLLOID DRG FILLER D	No
HCPCS	A6242	HYDROGEL DRG <=16 IN W/O	No
HCPCS	A6243	HYDROGEL DRG >16<=48 W/O	No
HCPCS	A6244	HYDROGEL DRG >48 IN W/O B	No
HCPCS	A6245	HYDROGEL DRG <= 16 IN W/B	No
HCPCS	A6246	HYDROGEL DRG >16<=48 IN W	No
HCPCS	A6247	HYDROGEL DRG > 48 SQ IN W	No
HCPCS	A6248	HYDROGEL DRSG GEL FILLER	No
HCPCS	A6250	SKIN SEALANTS, PROTECTANT	No
HCPCS	A6250 52	SKIN SEALANTS, PROTECTANT	No
HCPCS	A6251	ABSORPT DRG <=16 SQ IN W/	No
HCPCS	A6252	ABSORPT DRG >16 <=48 W/O	No
HCPCS	A6252 U1	SPECIALTY ABSORPTIVE DRES	No
HCPCS	A6253	ABSORPT DRG > 48 SQ IN W/	No
HCPCS	A6253 52	SPECIALTY ABSORPTIVE DRES	No
HCPCS	A6253 U1	SPECIALTY ABSORPTIVE DRES	No
HCPCS	A6254	ABSORPT DRG <=16 SQ IN W/	No
HCPCS	A6255	ABSORPT DRG >16<=48 IN W/	No
HCPCS	A6256	ABSORPT DRG > 48 SQ IN W/	No
HCPCS	A6257	TRANSPARENT FILM <= 16 SQ	No
HCPCS	A6258	TRANSPARENT FILM >16<=48	No
HCPCS	A6259	TRANSPARENT FILM > 48 SQ	No
HCPCS	A6260	WOUND CLEANSER ANY TYPE/S	No
HCPCS	A6261	WOUND FILLER GEL/PASTE /O	No
HCPCS	A6262	WOUND FILLER DRY FORM / G	No
HCPCS	A6266	IMPREG GAUZE NO H20/SAL/Y	No
HCPCS	A6266 52	GAUZE, IMPREGNATED, PER L	No
HCPCS	A6402	GAUZE, NON IMPREGNATED, S	No
HCPCS	A6402 52	GAUZE, NON-IMPREGNATED, S	No
HCPCS	A6402 SC	GAUZE, NON-IMPREGNATED, 1	No
HCPCS	A6402 TF	GAUZE, NON-IMPREGNATED, 1	No
HCPCS	A6402 TG	GAUZE, NON-IMPREGNATED, S	No
HCPCS	A6403	GAUZE, NON IMPREGNATED, S	No
HCPCS	A6403 TG	GAUZE NONIMPREGNATED STER	No
HCPCS	A6404	GAUZE, NON IMPREGNATED, S	No
HCPCS	A6410	EYE PAD, STERILE, EACH	No
HCPCS	A6411	NON-STERILE EYE PAD	No
HCPCS	A6441	PADDING BANDA÷ <5÷/YD	No
HCPCS	A6443	CONFORM BAND N/S W>=3÷<5÷	No

DME/POS Procedure Codes
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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A6443 TF	CONFORMING BANDAGE N/S W>	No
HCPCS	A6444	CONFORM BAND N/S W>=5÷/YD	No
HCPCS	A6446	CONFORM BAND S W>=3÷ <5÷/	No
HCPCS	A6446 52	CONFORMING BANDAGE, NON-E	No
HCPCS	A6446 TF	CONFORMING BANDAGE, NON-E	No
HCPCS	A6446 TG	CONFORMING BANDAGE, NON-E	No
HCPCS	A6447	CONFORM BAND S W >=5÷/YD	No
HCPCS	A6449	LT COMPRES BAND >=3÷ <5÷/	No
HCPCS	A6450	LT COMPRES BAND >=5÷/YD	No
HCPCS	A6451	MOD COMPRES BAND W>=3÷<5÷	No
HCPCS	A6452	HIGH COMPRES BAND W>=3÷<5	No
HCPCS	A6456	ZINC PASTE BAND W >=3÷<5÷	No
HCPCS	A6457	TUBULAR DRESSING	No
HCPCS	A6501	COMPRES BURNGARMENT BODY	No
HCPCS	A6502	COMPRES BURNGARMENT CHINS	No
HCPCS	A6503	COMPRES BURNGARMENT FACEH	No
HCPCS	A6504	CMPRSBURNGARMENT GLOVE-WR	No
HCPCS	A6505	CMPRSBURNGARMENT GLOVE-EL	No
HCPCS	A6506	CMPRSBURNGRMNT GLOVE-AXIL	No
HCPCS	A6507	CMPRS BURNGARMENT FOOT-KN	No
HCPCS	A6508	CMPRS BURNGARMENT FOOT-TH	No
HCPCS	A6509	COMPRES BURN GARMENT JACK	No
HCPCS	A6510	COMPRES BURN GARMENT LEOT	No
HCPCS	A6511	COMPRES BURN GARMENT PANT	No
HCPCS	A6530	COMPRESSION STOCKING BK18	No
HCPCS	A6531	COMPRESSION STOCKING BK30	No
HCPCS	A6532	COMPRESSION STOCKING BK40	No
HCPCS	A6533	GC STOCKING THIGHLNGTH 18	No
HCPCS	A6534	GC STOCKING THIGHLNGTH 30	No
HCPCS	A6535	GC STOCKING THIGHLNGTH 40	No
HCPCS	A6536	GC STOCKING FULL LNGTH 18	No
HCPCS	A6537	GC STOCKING FULL LNGTH 30	No
HCPCS	A6538	GC STOCKING FULL LNGTH 40	No
HCPCS	A6539	GC STOCKING WAISTLNGTH 18	No
HCPCS	A6540	GC STOCKING WAISTLNGTH 30	No
HCPCS	A6541	GC STOCKING WAISTLNGTH 40	No
HCPCS	A6542	GC STOCKING CUSTOM MADE	No
HCPCS	A6543	GC STOCKING LYMPHEDEMA	No
HCPCS	A6544	GC STOCKING GARTER BELT	No
HCPCS	A6545	GRAD COMP NON-ELASTIC BK	No
HCPCS	A6549	G COMPRESSION STOCKING	Yes
HCPCS	A6550	NEG PRES WOUND THER DRSG	No
HCPCS	A7000	DISPOSABLE CANISTER FOR P	No
HCPCS	A7001	NONDISPOSABLE PUMP CANIST	No
HCPCS	A7002	TUBING USED W SUCTION PUM	No
HCPCS	A7003	NEBULIZER ADMINISTRATION	No
HCPCS	A7005	NONDISPOSABLE NEBULIZER S	No
HCPCS	A7007	LG VOL NEBULIZER DISPOSAB	Yes
HCPCS	A7008	DISPOSABLE NEBULIZER PREF	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A7010	DISPOSABLE CORRUGATED TUB	Yes
HCPCS	A7011 SC	CORRUGATED TUBING FOR LG	No
HCPCS	A7012	NEBULIZER WATER COLLEC DE	Yes
HCPCS	A7013	DISPOSABLE COMPRESSOR FIL	Yes
HCPCS	A7015	AEROSOL MASK USED W NEBUL	No
HCPCS	A7018	WATER DISTILLED W/NEBULIZ	No
HCPCS	A7025	REPLACE CHEST COMPRESS VE	No
HCPCS	A7026	REPLACE CHST CMPRSS SYS H	No
HCPCS	A7027	COMBINATION ORAL/NASAL MA	No
HCPCS	A7028	REPL ORAL CUSHION COMBO M	No
HCPCS	A7029	REPL NASAL PILLOW COMB MA	No
HCPCS	A7030	CPAP FULL FACE MASK	No
HCPCS	A7031	REPLACEMENT FACEMASK INTE	No
HCPCS	A7032	REPLACEMENT NASAL CUSHION	No
HCPCS	A7033	REPLACEMENT NASAL PILLOWS	No
HCPCS	A7034	NASAL APPLICATION DEVICE	No
HCPCS	A7035	POS AIRWAY PRESS HEADGEAR	No
HCPCS	A7036	POS AIRWAY PRESS CHINSTR	No
HCPCS	A7037	POS AIRWAY PRESSURE TUBIN	No
HCPCS	A7038	POS AIRWAY PRESSURE FILTE	No
HCPCS	A7039	FILTER, NON DISPOSABLE W	No
HCPCS	A7040	ONE WAY CHEST DRAIN VALVE	Yes
HCPCS	A7041	WATER SEAL DRAIN CONTAIN	Yes
HCPCS	A7042	IMPLANTED PLEURAL CATHETE	No
HCPCS	A7043	VACUUM DRAINAGEBOTTLE/TUB	No
HCPCS	A7044	PAP ORAL INTERFACE	No
HCPCS	A7045	REPL EXHALATION PORT FOR	Yes
HCPCS	A7046	REPL WATER CHAMBER, PAP D	Yes
HCPCS	A7507	INTEGRATED FILTER & HOLDE	No
HCPCS	A7520	TRACH/LARYN TUBE NON-CUFF	No
HCPCS	A7521	TRACH/LARYN TUBE CUFFED	Yes
HCPCS	A7525	TRACHEOSTOMY MASK, EACH	No
HCPCS	A7526	TRACHEOSTOMY TUBE COLLAR	Yes
HCPCS	A7527	TRACH/LARYN TUBE PLUG/STO	Yes
HCPCS	A8000	SOFT PROTECT HELMET PREFA	No
HCPCS	A8001	HARD PROTECT HELMET PREFA	No
DME RENTAL	A8001 RR	HARD PROTECT HELMET PREFA	No
HCPCS	A8002	SOFT PROTECT HELMET CUSTO	Yes
DME RENTAL	A8002 RR	SOFT PROTECT HELMET CUSTO	Yes
HCPCS	A8003	HARD PROTECT HELMET CUSTO	Yes
DME RENTAL	A8003 RR	HARD PROTECT HELMET CUSTO	Yes
HCPCS	A8004	REPL SOFT INTERFACE, HELM	Yes
DME RENTAL	A8004 RR	REPL SOFT INTERFACE, HELM	Yes
HCPCS	A9155	ARTIFICIAL SALIVA	No
HCPCS	A9274	EXT AMB INSULIN DELIVERY	No
HCPCS	A9276	DISPOSABLE SENSOR, CGM SY	No
HCPCS	A9277	EXTERNAL TRANSMITTER, CGM	No
HCPCS	A9278	EXTERNAL RECEIVER, CGM SY	No
HCPCS	A9280	ALERT OR ALARM DEVICE, NO	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	A9283	FOOT PRESS OFF LOAD SUPP	No
HCPCS	A9284	NON-ELECTRONIC SPIROMETER	No
HCPCS	A9300	EXERCISE EQUIPMENT	No
HCPCS	A9300 U1	EXERCISE EQUIPMENT; REACH	Yes
HCPCS	A9300 U2	EXERCISE EQUIPMENT; PAGE	Yes
HCPCS	A9300 U3	EXERCISE EQUIPMENT; STEAD	Yes
HCPCS	A9300 U4	EXERCISE EQUIPMENT; RING-	Yes
HCPCS	A9300 U5	EXERCISE EQUIPMENT; WEIGH	Yes
HCPCS	A9300 U6	EXERCISE EQUIPMENT; RING	Yes
HCPCS	A9300 U7	EXERCISE EQUIPMENT; WRITI	Yes
HCPCS	A9300 U8	EXERCISE EQUIPMENT; WRITI	Yes
HCPCS	A9300 U9	EXERCISE EQUIPMENT; TYPIN	Yes
HCPCS	A9300 UA	EXERCISE EQUIPMENT; TYPIN	Yes
HCPCS	A9300 UB	EXERCISE EQUIPMENT; TYPIN	Yes
HCPCS	A9300 UC	EXERCISE EQUIPMENT; TYPIN	Yes
HCPCS	A9500	SUPPLY OF RADIOPHARMACEUT	No
HCPCS	A9502	TC99M TETROFOSMIN	No
HCPCS	A9503	SUPPLY OF RADIOPHARMACEUT	No
HCPCS	A9505	SUPPLY OF RADIOPHARMACEUT	No
HCPCS	A9509	IODINE I-123 SOD IODIDE M	No
HCPCS	A9526	AMMONIA N-13, PER DOSE	No
HCPCS	A9528	DX I131 SO IODIDE CAP MIL	No
HCPCS	A9529	DX I131 SO IODIDE SOL MIL	No
HCPCS	A9530	TH I131 SO IODIDE SOL MIL	No
HCPCS	A9531	DX I131 SO IODIDE MICROCU	No
HCPCS	A9532	I-125 SERUM ALBUMIN MICRO	No
HCPCS	A9569	TECHNETIUM TC-99M AUTO WB	No
HCPCS	A9570	INDIUM IN-111 AUTO WBC	No
HCPCS	A9571	INDIUM IN-111 AUTO PLATEL	No
HCPCS	A9572	INDIUM IN-111 PENTETREOTI	No
HCPCS	A9576	INJ PROHANCE MULTIPACK	No
HCPCS	A9577	INJ MULTIHANCE	No
HCPCS	A9578	INJ MULTIHANCE MULTIPACK	No
HCPCS	A9580	SODIUM FLUORIDE F-18	No
HCPCS	A9600	SUPPLY OF THERAPEUTIC RAD	No
HCPCS	A9900 U1	MISCELLANEOUS DME SUPPLY;	Yes
HCPCS	A9900 U2	MISCELLANEOUS DME; SCOOP	Yes
HCPCS	A9900 U3	MISCELLANEOUS DME; PLATE	Yes
HCPCS	A9900 U4	MISCELLANEOUS DME SUPPLY;	Yes
HCPCS	A9900 U5	MISCELLANEOUS DME; LONG-S	Yes
HCPCS	A9900 U6	MISCELLANEOUS DME; PLASTI	Yes
HCPCS	A9900 U7	MISCELLANEOUS DME;TRIANGL	Yes
HCPCS	A9900 U8	MISCELLANEOUS DME; CUTTIN	Yes
HCPCS	B4034	ENTERAL FEEDING SUPPLY KI	Yes
HCPCS	B4035	ENTERAL FEEDING SUPPLY KI	No
HCPCS	B4036	ENTERAL FEEDING SUPPLY KI	No
HCPCS	B4081	NASOGASTRIC TUBING WITH S	Yes
HCPCS	B4082	NASOGASTRIC TUBING WITHOU	No
HCPCS	B4083	STOMACH TUBE - LEVINE TYP	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	B4087	GASTRO/JEJUNO TUBE, STD	No
HCPCS	B4088	GASTRO/JEJUNO TUBE, LOW-P	No
HCPCS	B4102	EF ADULT FLUIDS AND ELECT	Yes
HCPCS	B4103	EF PED FLUID AND ELECTROL	Yes
HCPCS	B4104	ADDITIVE FOR ENTERAL FORM	Yes
HCPCS	B4149	EF BLENDERIZED FOODS	Yes
HCPCS	B4150	ENTERAL FORMULAE; CATEGOR	Yes
HCPCS	B4152	ENTERAL FORMULAE; CATEGOR	Yes
HCPCS	B4153	ENTERAL FORMULAE; CATEGOR	Yes
HCPCS	B4154	ENTERAL FORMULAE; CATEGOR	Yes
HCPCS	B4155	ENTERAL FORMULAE; CATEGOR	Yes
HCPCS	B4157	EF SPECIAL METABOLIC INHE	Yes
HCPCS	B4158	EF PED COMPLETE INTACT NU	Yes
HCPCS	B4159	ENTERAL FORMULA, FOR PEDS	Yes
HCPCS	B4160	EF PED CALORIC DENSE>/=0.	Yes
HCPCS	B4161	ENTERAL FORMULA, FOR PEDS	Yes
HCPCS	B4162	EF PED SPECMETABOLIC INHE	Yes
HCPCS	B4164	PARENTERAL NUTRITION SOLU	Yes
HCPCS	B4168	PARENTERAL NUTRITION SOLU	Yes
HCPCS	B4178	PARENTERAL NUTRITION SOLU	No
HCPCS	B4185	PARENTERAL SOL 10 GM LIPI	Yes
HCPCS	B4189	PARENTERAL NUTRITION SOLU	No
HCPCS	B4193	PARENTERAL NUTRITION SOLU	No
HCPCS	B4197	PARENTERAL NUTRITION SOLU	No
HCPCS	B4199	PARENTERAL NUTRITION SOLU	No
HCPCS	B4222	PARENTERAL NUTRITION SUPP	Yes
HCPCS	B5000	PARENTERAL NUTRITION SOLU	No
HCPCS	B5100	PARENTERAL NUTRITION SOLU	No
HCPCS	B5200	PARENTERAL NUTRITION SOLU	No
HCPCS	B9000	ENTERAL NUTRITION INFUSION	Yes
DME RENTAL	B9000 RR	ENTERAL NUTRITION INF. PU	No
HCPCS	B9002	ENTERAL NUTRITION INF. PU	Yes
DME RENTAL	B9002 RR	ENTERAL NUT. INF. PUMP WI	No
HCPCS	B9004	PARENTERAL NUTRITION INFU	Yes
HCPCS	B9006	PARENTERAL NUTRITION INFU	No
HCPCS	B9998	NOC FOR ENTERAL SUPPLIES	Yes
HCPCS	B9999	NOC FOR PARENTERAL SUPPLI	Yes
HCPCS	E0100	CANE, INCLUDES CANES OF A	No
HCPCS	E0105	CANE, QUAD OR THREE PRONG	No
HCPCS	E0110	CRUTCHES, FOREARM, INCLUD	No
DME RENTAL	E0110 RR	CRUTCHES,ALUMINUM,FOREARM	Yes
HCPCS	E0111	CRUTCH FOREARM, INCLUDES	No
HCPCS	E0112	CRUTCHES UNDERARM, WOOD,	No
DME RENTAL	E0112 RR	CRUTCHES,UNDER ARM,PAIR (Yes
HCPCS	E0113	CRUTCH UNDERARM, WOOD, AD	No
HCPCS	E0114	CRUTCHES UNDERARM, OTHER	No
DME RENTAL	E0114 RR	CRUTCHES UNDERARM, ALUMIN	Yes
HCPCS	E0116	CRUTCH UNDERARM, OTHER TH	No
HCPCS	E0117	UNDERARM SPRINGASSIST CRU	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
DME RENTAL	E0117 RR	CRUTCH UNDERARM ARTICULAT	No
HCPCS	E0130	WALKER, RIGID (PICKUP), A	No
DME RENTAL	E0130 RR	WALKER,NON FOLDING,STANDA	Yes
HCPCS	E0135	WALKER, FOLDING (PICKUP),	No
DME RENTAL	E0135 RR	WALKER,FOLDING,STANDARD (Yes
HCPCS	E0141	RIGID WALKER, WHEELED, WI	No
DME RENTAL	E0141 RR	WALKER WHEELED, WITHOUT S	Yes
HCPCS	E0143	FOLDING WALKER, WHEELED,	No
DME RENTAL	E0143 RR	FOLDING WALKER, WHEELED,	Yes
HCPCS	E0144	ENCLOSED WALKER W REAR SE	No
HCPCS	E0147	HEAVY DUTY, MULTIPLE BREA	No
DME RENTAL	E0147 RR	HEAVY DUTY, VARIABLE WHEE	Yes
HCPCS	E0148	WALKER, HEAVY DUTY, WITHO	No
HCPCS	E0149	HEAVY DUTY WHEELED WALKER	No
HCPCS	E0153	PLATFORM ATTACHMENT, FORE	No
HCPCS	E0154	PLATFORM ATTACHMENT, WALK	No
HCPCS	E0154 52	PLATFORM ATTACHMENT, WALK	Yes
HCPCS	E0154 TF	PLATFORM ATTACHMENT, WALK	Yes
HCPCS	E0154 UA	PLATFORM ATTACHMENT, WALK	Yes
HCPCS	E0155	WHEEL ATTACHMENT, RIGID P	No
DME RENTAL	E0155 RR	WALKER,WHEEL LEG HGT EXT	No
HCPCS	E0156	SEAT ATTACHMENT, WALKER	No
HCPCS	E0158	LEG EXTENSIONS FOR A WALK	No
DME RENTAL	E0158 RR	WALKER,LEG HEIGHT EXTENSI	No
HCPCS	E0159	BRAKE ATTACHMENT FOR WHEE	No
HCPCS	E0160	SITZ TYPE BATH OR EQUIPME	No
DME RENTAL	E0160 RR	SITZ BATH,DISPOSABLE (P)	No
HCPCS	E0163	COMMODE CHAIR, STATIONARY	No
DME RENTAL	E0163 RR	COMMODE, STD FIXED ARMS (Yes
HCPCS	E0165	COMMODE CHAIR, STATIONARY	No
DME RENTAL	E0165 RR	COMMODE,STATIONARY W/ DET	Yes
HCPCS	E0167	PAIL OR PAN FOR USE WITH	No
DME RENTAL	E0167 RR	COMMODE PAIL REPLACEMENT	No
HCPCS	E0168	HEAVYDUTY/WIDE COMMODOE CH	No
DME RENTAL	E0170 RR	COMMODE CHAIR ELECTRIC	No
DME RENTAL	E0171 RR	COMMODE CHAIR NON-ELECTRI	No
HCPCS	E0181	PRESSURE PAD, ALTERNATING	No
DME RENTAL	E0181 RR	PRESSURE PAD, ALTERNATING	Yes
HCPCS	E0184	DRY PRESSURE MATTRESS	No
DME RENTAL	E0184 RR	FLOATATION PAD OR GEL PAD	No
HCPCS	E0185	GEL OR GEL LIKE PRESSURE	No
DME RENTAL	E0186 RR	GEL PAD FOR USE WITH WHEE	No
HCPCS	E0187	WATER PRESSURE MATTRESS	No
HCPCS	E0188	SYNTHETIC SHEEPSKIN PAD	No
DME RENTAL	E0188 RR	RESTON FOAM PADS, EACH (P	No
HCPCS	E0189	LAMBSWOOL SHEEPSKIN PAD,	No
DME RENTAL	E0189 RR	LAMBS WOOL PAD,30X60 (P)	No
HCPCS	E0190	POSITIONING CUSHION/PILLO	No
HCPCS	E0191	HEEL OR ELBOW PROTECTOR,	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0193	POWERED AIR FLOTATION BED	No
DME RENTAL	E0193 RR	POWERED AIR FLOTATION BED	No
HCPCS	E0194	AIR FLUIDIZED BED	Yes
DME RENTAL	E0194 RR	AIR FLUIDIZED BED; DME RE	Yes
HCPCS	E0196	GEL PRESSURE MATTRESS	No
DME RENTAL	E0196 RR	GEL PRESSURE MATTRESS; DM	No
HCPCS	E0197	AIR PRESSURE PAD FOR MATT	No
HCPCS	E0198	WATER PRESSURE PAD FOR MA	No
HCPCS	E0199	DRY PRESSURE PAD FOR MATT	No
HCPCS	E0200	HEAT LAMP, WITHOUT STAND	No
DME RENTAL	E0200 RR	HEAT LAMP (P); DME RENTAL	No
HCPCS	E0205	HEAT LAMP, WITH STAND, IN	No
DME RENTAL	E0205 RR	HEAT LAMP KIT (P)	No
HCPCS	E0210	ELECTRIC HEAT PAD, STANDA	No
DME RENTAL	E0210 RR	HEATING PAD,ELECTRIC (P)	No
HCPCS	E0215	ELECTRIC HEAT PAD, MOIST	No
DME RENTAL	E0215 RR	THERMOPHORE HEATING PAD (No
HCPCS	E0217	WATER CIRCULATING HEAT PA	Yes
HCPCS	E0218	WATER CIRCULATING COLD PA	No
HCPCS	E0221	INFRARED HEATING PAD SYST	Yes
HCPCS	E0225	HYDROCOLLATOR UNIT, INCLU	No
HCPCS	E0230	ICE CAP OR COLLAR	No
HCPCS	E0235	PARAFFIN BATH UNIT, PORTA	No
DME RENTAL	E0235 RR	PARAFFIN BATH PORTABLE (R	Yes
HCPCS	E0239	HYDROCOLLATOR UNIT, PORTA	No
HCPCS	E0240	BATH/SHOWER CHAIR	No
HCPCS	E0241	BATH TUB WALL RAIL, EACH	No
DME RENTAL	E0241 RR	GRAB BAR,L-SHAPED (P)	No
HCPCS	E0242	BATH TUB RAIL, FLOOR BASE	No
DME RENTAL	E0242 RR	SAFETY RAILS,BATHTUB (P)	No
HCPCS	E0243	TOILET RAIL, EACH	No
DME RENTAL	E0243 RR	SAFETY RAIL,COMMODE (P)	No
HCPCS	E0243 U1	TOILET RAIL, EACH; REDEFI	No
HCPCS	E0243 UA	TOILET RAIL REDEFINED AS	Yes
HCPCS	E0244	RAISED TOILET SEAT	No
DME RENTAL	E0244 RR	COMMODE RISER,ADJUSTABLE	No
HCPCS	E0245	TUB STOOL OR BENCH	No
DME RENTAL	E0245 RR	BATH TUB SEAT WITH BACK (No
HCPCS	E0245 TF	TUB STOOL OR BENCH; INTER	No
HCPCS	E0245 TG	TUB STOOL OR BENCH;COMPLE	No
HCPCS	E0246	TRANSFER TUB RAIL ATTACHM	No
DME RENTAL	E0246 RR	BATH TUB TRANSFER SEAT (P	No
HCPCS	E0250	HOSPITAL BED, FIXED HEIGH	No
DME RENTAL	E0250 RR	HOSPITAL BED W/MATTRESS A	Yes
HCPCS	E0255	HOSPITAL BED, VARIABLE HE	No
DME RENTAL	E0255 RR	HOSPITAL BED,WITH SIDE RA	Yes
HCPCS	E0256	HOSPITAL BED, VARIABLE HE	No
HCPCS	E0260	HOSPITAL BED, SEMI-ELECTR	Yes
DME RENTAL	E0260 RR	HOSPITAL BED, WITH SIDE	Yes

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0261	HOSPITAL BED, SEMI-ELECTR	Yes
HCPCS	E0265	HOSPITAL BED, TOTAL ELECT	No
DME RENTAL	E0265 RR	HOSP BED,TOTAL ELECTRIC W	Yes
DME RENTAL	E0266 RR	HOSP BED ELEC W/O MATTRES	Yes
HCPCS	E0270	HOSPITAL BED, INSTITUTION	No
HCPCS	E0271	MATTRESS, INNERSPRING	No
DME RENTAL	E0271 RR	MATTRESS, INNERSPRING	Yes
HCPCS	E0273	BED BOARD	No
DME RENTAL	E0273 RR	BED BOARD,FOLDING (P)	No
HCPCS	E0274	OVER BED TABLE	No
DME RENTAL	E0274 RR	TABLE,OVER BED (P); DME R	Yes
HCPCS	E0275	BED PAN, STANDARD, METAL	No
DME RENTAL	E0275 RR	BED PAN,STANDARD (P)	No
HCPCS	E0276	BED PAN, FRACTURE, METAL	No
DME RENTAL	E0276 RR	BED PAN,FRACTURE(P)	No
DME RENTAL	E0277 RR	POWERED PRESSURE REDUCING	Yes
HCPCS	E0280	BED CRADLE, ANY TYPE	No
DME RENTAL	E0280 RR	BLANKET SUPPORT (P)	No
HCPCS	E0280 TG	BED CRADLE ANY TYPE COMPL	Yes
HCPCS	E0290	HOSPITAL BED, FIXED HEIGH	No
HCPCS	E0291	HOSPITAL BED, FIXED HEIGH	No
HCPCS	E0292	HOSPITAL BED, VARIABLE HE	No
HCPCS	E0293	HOSPITAL BED, VARIABLE HE	No
HCPCS	E0294	HOSPITAL BED, SEMI-ELECTR	No
HCPCS	E0295	HOSPITAL BED,SEMI-ELECTRI	No
DME RENTAL	E0295 RR	HOSPITAL BED, SEMI-ELECTR	No
HCPCS	E0296	HOSPITAL BED, TOTAL ELECT	No
DME RENTAL	E0296 RR	HOSPITAL BED, TOTAL ELECT	Yes
HCPCS	E0297	HOSPITAL BED, TOTAL ELECT	No
DME RENTAL	E0297 RR	HOSPITAL BED, TOTAL ELECT	Yes
HCPCS	E0303	HOSP BED HVY DTY XTRA WID	Yes
DME RENTAL	E0303 RR	HOSP BED HVY DTY EXTRA WI	No
DME RENTAL	E0304 RR	HOSP BED XTRA HVY DTY X W	Yes
HCPCS	E0310	BED SIDE RAILS, FULL LENG	No
DME RENTAL	E0310 RR	BED RAILS,STANDARD; DME R	Yes
HCPCS	E0315 U1	BED ACCESSORY: BOARD, TAB	Yes
HCPCS	E0315 U2	BED ACCESSORY: BOARD, TAB	Yes
HCPCS	E0315 U3	BED ACCESSORY: BOARD, TAB	Yes
HCPCS	E0315 U4	BED ACCESSORY: BOARD, TAB	Yes
HCPCS	E0315 U5	BED ACCESSORY: BOARD, TAB	Yes
HCPCS	E0316	BED SAFETY ENCLOSURE	No
HCPCS	E0325	URINAL; MALE, JUG TYPE, A	No
DME RENTAL	E0325 RR	URINAL,PLASTIC,MALE (P)	No
DME RENTAL	E0326 RR	URINAL,PLASTIC,FEMALE (P)	No
HCPCS	E0328	PED HOSPITAL BED, MANUAL	No
HCPCS	E0329	PED HOSPITAL BED SEMI/ELE	No
HCPCS	E0350	CONTROL UNIT FOR ELECTRON	No
HCPCS	E0352	DISPOSABLE PACK (WATER RE	No
HCPCS	E0370	AIR PRESSURE ELEVATOR FO	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0372	POWERED AIR OVERLAY FOR M	Yes
DME RENTAL	E0424 RR	STATIONARY COMPRESSED GAS	Yes
DME RENTAL	E0425 RR	STATIONARY GASEOUS OXYGEN	Yes
HCPCS	E0430	PORTABLE GASEOUS OXYGEN S	Yes
DME RENTAL	E0430 RR	PORTABLE OXYGEN UNIT (R)	Yes
HCPCS	E0431	PORTABLE GASEOUS OXYGEN S	Yes
DME RENTAL	E0431 RR	PORTABLE GASEOUS OXYGEN S	No
DME RENTAL	E0434 RR	PORTABLE LIQUID OXYGEN	Yes
DME RENTAL	E0439 RR	LIQUID STATIONARY OXYGEN	Yes
HCPCS	E0441	OXYGEN CONTENTS, GASEOUS,	No
HCPCS	E0442	OXYGEN CONTENTS, LIQUID,	No
HCPCS	E0443	PORTABLE OXYGEN CONTENTS,	No
DME RENTAL	E0445 RR	OXYGEN CONCENTRATOR OR EX	Yes
HCPCS	E0450	VOLUME VENTILATOR	Yes
DME RENTAL	E0450 RR	VOLUME VENTILATOR; STATIO	Yes
DME RENTAL	E0455 RR	OXYGEN TENT, EXCLUDING CR	No
HCPCS	E0457	CHEST SHELL (CUIRASS)	No
DME RENTAL	E0459 RR	CHEST WRAP; DME RENTAL	No
DME RENTAL	E0460 RR	NEGATIVE PRESSURE VENTILA	No
HCPCS	E0462	ROCKING BED WITH OR WITHO	No
DME RENTAL	E0462 RR	ROCKING BED, WITH OR WITH	No
DME RENTAL	E0463 RR	PRESS SUPP VENT INVASIVE	Yes
HCPCS	E0464	PRESS SUPP VENT NONINV IN	Yes
DME RENTAL	E0470 RR	RESPIRATORY ASSIST DEVICE	No
DME RENTAL	E0471 RR	RAD W/BACKUP NON INV INTR	Yes
HCPCS	E0480	PERCUSSOR, ELECTRIC OR PN	No
DME RENTAL	E0480 RR	PERCUSSOR, ELECTRIC OR PN	Yes
DME RENTAL	E0482 RR	COUGH STIMULATING DEVICE;	No
DME RENTAL	E0483 RR	HIGH FREQ CHEST WALL OSCI	No
HCPCS	E0484	NON-ELEC OSCILLATORY PEP	No
DME RENTAL	E0484 RR	OSCILLATORY POSITIVE EXPI	No
HCPCS	E0487	ELECTRONIC SPIROMETER	No
HCPCS	E0500	IPPB MACHINE, ALL TYPES,	Yes
DME RENTAL	E0500 RR	IPPB MACHINES WITH MANUAL	Yes
HCPCS	E0550	HUMIDIFIER, DURABLE FOR E	Yes
DME RENTAL	E0550 RR	CASCADE HEATER (R)	Yes
HCPCS	E0560	HUMIDIFIER, DURABLE FOR S	No
DME RENTAL	E0560 RR	PURITAN BENNETT HUMIDIFIE	No
HCPCS	E0561	HUMIDIFIER NONHEATED W PA	No
HCPCS	E0562	HUMIDIFIER HEATED USED W	No
DME RENTAL	E0562 RR	HUMIDIFIER HEATED USED W	No
HCPCS	E0565	COMPRESSOR, AIR POWER SOU	No
DME RENTAL	E0565 RR	COMPRESSOR TRIMETER SILEN	Yes
HCPCS	E0570	NEBULIZER, WITH COMPRESSO	No
DME RENTAL	E0570 RR	NEBULIZER, WITH COMPRESSO	Yes
HCPCS	E0580	NEBULIZER, DURABLE, GLASS	No
DME RENTAL	E0580 RR	JET NEBULIZER, EACH (P)	No
HCPCS	E0585	NEBULIZER, WITH COMPRESSO	No
DME RENTAL	E0585 RR	NEBULIZER W/COMPRESSOR &	Yes

DME/POS Procedure Codes
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Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0600	RESPIRATORY SUCTION PUMP,	No
DME RENTAL	E0600 RR	SUCTION PUMP, HOME MODEL,	Yes
HCPCS	E0601	CONTINUOUS AIRWAY PRESSUR	Yes
HCPCS	E0601 52	CONTINUOUS AIRWAY PRESSUR	No
DME RENTAL	E0601 RR	NASAL CONTINUOUS AIRWAY P	Yes
HCPCS	E0602	MANUAL BREAST PUMP	No
DME RENTAL	E0603 RR	ELECTRIC BREAST PUMP	No
HCPCS	E0604	HOSP GRADE ELEC BREAST PU	Yes
DME RENTAL	E0604 RR	HOSP GRADE ELEC BREAST PU	Yes
HCPCS	E0605	VAPORIZER, ROOM TYPE	No
DME RENTAL	E0605 RR	VAPORIZER (COLD) (P)	No
HCPCS	E0607	HOME BLOOD GLUCOSE MONITO	No
DME RENTAL	E0607 RR	ACCUMETER	Yes
HCPCS	E0617	EXTERN DEFRIB W ELECTROCA	No
HCPCS	E0618	APNEA MONITOR, WITHOUT RE	No
DME RENTAL	E0618 RR	APNEA MONITOR, WITHOUT RE	No
DME RENTAL	E0619 RR	APNEA MONITOR WITH RECORD	No
HCPCS	E0620	SKIN PIERCE LASER FOR COL	No
DME RENTAL	E0620 RR	SKIN PIERCE DEVICE FOR CO	No
HCPCS	E0621	SLING OR SEAT, PATIENT LI	No
DME RENTAL	E0621 RR	PATIENT LIFT,1PC SEAT W/H	Yes
HCPCS	E0627	SEAT LIFT MECHANISM INCOR	No
HCPCS	E0628	SEPARATE SEAT LIFT MECHAN	No
HCPCS	E0629	SEPARATE SEAT LIFT MECHAN	No
HCPCS	E0630	PATIENT LIFT, HYDRAULIC,	No
DME RENTAL	E0630 RR	PATIENT LIFT,STANDARD (R)	No
DME RENTAL	E0636 RR	MULTIPOSITIONAL PATIENT S	No
HCPCS	E0639	MOVEABLE PATIENT LIFT SYS	Yes
HCPCS	E0640	FIXED PATIENT LIFT SYSTEM	Yes
HCPCS	E0650	PNEUMATIC COMPRESSOR, NON	No
DME RENTAL	E0650 RR	PNEUMATIC COMPRESSOR, NON	Yes
HCPCS	E0651	PNEUMATIC COMPRESSOR, SEG	No
DME RENTAL	E0651 RR	PNEUMATIC COMPRESSOR, SEG	Yes
HCPCS	E0652	PNEUMATIC COMPRESSOR, SEG	No
DME RENTAL	E0652 RR	PNEUMATIC COMPRESSOR, SEG	Yes
HCPCS	E0655	NON SEGMENTAL PNEUMATIC A	Yes
HCPCS	E0656	SEGMENTAL PNEUMATIC TRUNK	No
DME RENTAL	E0656 RR	SEGMENTAL PNEUMATIC TRUNK	No
HCPCS	E0657	SEGMENTAL PNEUMATIC CHEST	No
DME RENTAL	E0657 RR	SEGMENTAL PNEUMATIC CHEST	No
HCPCS	E0660	NON SEGMENTAL PNEUMATIC A	No
DME RENTAL	E0660 RR	PNEUMATIC APPLIANCE FOR	Yes
HCPCS	E0665	NON SEGMENTAL PNEUMATIC A	No
DME RENTAL	E0665 RR	PNUEMATIC APPLIANCE FOR F	Yes
HCPCS	E0666	NON SEGMENTAL PNEUMATIC A	No
HCPCS	E0667	SEGMENTAL PNEUMATIC APPLI	Yes
HCPCS	E0668	SEGMENTAL PNEUMATIC APP/	Yes
HCPCS	E0669	SEGMENTAL PNEUMATIC APPLI	Yes
HCPCS	E0671	SEGMENTAL GRADIENT PRESSU	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0672	SEGMENTAL GRADIENT PRESSU	No
HCPCS	E0673	SEGMENTAL GRADIENT PRESSU	No
HCPCS	E0676	INTER LIMB COMPRESS DEV N	Yes
HCPCS	E0691	UVL PNL 2 SQ FT OR LESS	No
DME RENTAL	E0691 RR	ULTRAVIOLET LIGHT THERAPY	No
HCPCS	E0692	UVL SYS PANEL 4 FT	No
DME RENTAL	E0692 RR	ULTRAVIOLET LIGHT THERAPY	No
HCPCS	E0693	UVL SYS PANEL 6 FT	Yes
DME RENTAL	E0693 RR	ULTRAVIOLET LIGHT THERAPY	No
HCPCS	E0694	UVL MD CABINET SYS 6 FT	Yes
DME RENTAL	E0694 RR	ULTRAVIOL MULTIDIR LIGHT	No
HCPCS	E0705	TRANSFER BOARD OR DEVICE	No
HCPCS	E0710	RESTRAINTS, ANY TYPE (BOD	No
DME RENTAL	E0710 RR	MONTGOMERY STRAPS 24'S (P	No
HCPCS	E0720	TENS, TWO LEAD, LOCALIZED	Yes
HCPCS	E0730	TENS, FOUR LEAD, LARGER A	No
DME RENTAL	E0730 RR	TRANSCUTANEOUS NERVE STIMU	Yes
HCPCS	E0740	INCONTINENCE TREATMENT SY	Yes
HCPCS	E0744	NEUROMUSCULAR STIMULATOR	No
HCPCS	E0746	ELECTROMYOGRAPHY (EMG), B	No
HCPCS	E0748	OSTEOGENIC STIMULATOR, NO	No
HCPCS	E0755	ELECTRONIC SALIVARY REFLE	No
HCPCS	E0760	OSTOGENESIS STIMULATOR, L	No
DME RENTAL	E0760 RR	OSTEOGENESIS STIMU LOW IN	No
HCPCS	E0769	ELECTRIC WOUND TREATMENT	Yes
HCPCS	E0776	IV POLE	Yes
DME RENTAL	E0776 RR	IV STAND,FLOOR BASE (R)	No
HCPCS	E0784	EXTERNAL AMBULATORY INFUS	No
DME RENTAL	E0784 RR	EXTERNAL AMBULATORY INFUS	No
HCPCS	E0791	PARENTERAL INFUSION PUMP,	No
HCPCS	E0840	TRACTION FRAME, ATTACHED	No
DME RENTAL	E0840 RR	CERVICAL TRACTION,ATTACHE	Yes
HCPCS	E0849	CERVICAL PNEUM TRAC EQUIP	Yes
HCPCS	E0850	TRACTION STAND, FREE STAN	No
DME RENTAL	E0850 RR	CERVICAL TRACTION,FLOOR B	Yes
HCPCS	E0855	CERVICAL TRACTION EQUIPME	No
HCPCS	E0856	CERVIC COLLAR W AIR BLADD	No
HCPCS	E0860	TRACTION EQUIPMENT, OVERD	No
HCPCS	E0870	TRACTION FRAME, ATTACHED	No
DME RENTAL	E0870 RR	TRACTION FRAME, ATTACHED	Yes
HCPCS	E0890	TRACTION FRAME, ATTACHED	No
HCPCS	E0900	TRACTION STAND, FREE STAN	No
HCPCS	E0910	TRAPEZE BARS, A/K/A PATIE	No
DME RENTAL	E0910 RR	TRAPEZE BAR (R)	Yes
DME RENTAL	E0911 RR	HD TRAPEZE BAR ATTACH TO	Yes
DME RENTAL	E0912 RR	HD TRAPEZE BAR FREE STAND	Yes
HCPCS	E0920	FRACTURE FRAME, ATTACHED	No
DME RENTAL	E0935 RR	PASSIVE MOTION EXERCISE D	No
HCPCS	E0936	CPM DEVICE, OTHER THAN KN	Yes

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E0940	TRAPEZE BAR, FREE STANDIN	No
DME RENTAL	E0940 RR	TRAPEZE, ATTACHED OR FLOOR	Yes
HCPCS	E0941	GRAVITY ASSISTED TRACTION	No
HCPCS	E0942	CERVICAL HEAD HARNESS/HAL	No
HCPCS	E0942 U1	CERVICAL HEAD HARNESS/HAL	Yes
HCPCS	E0942 U2	CERVICAL HEAD HARNESS/HAL	Yes
HCPCS	E0944	PELVIC BELT/HARNESS/BOOT	No
DME RENTAL	E0944 RR	PELVIC TRACTION KIT (P)	No
HCPCS	E0945	EXTREMITY BELT/HARNESS	No
DME RENTAL	E0945 RR	EXTREMITY TRACTION ACCESS	No
HCPCS	E0946	FRACTURE, FRAME, DUAL WIT	Yes
HCPCS	E0950	WHEELCHAIR TRAY, EACH	No
HCPCS	E0950 52	WHEELCHAIR ACCESSORY, CUP	No
DME RENTAL	E0950 RR	LAP BOARD (P)	No
HCPCS	E0950 UA	WHEELCHAIR ACCESSORY; SEE	No
HCPCS	E0951	LOOP HEEL, EACH	No
DME RENTAL	E0951 RR	HEEL LOOPS (P)	No
HCPCS	E0952	LOOP TOE, EACH	No
HCPCS	E0955	CUSHIONED HEADREST	Yes
HCPCS	E0956	W/C LATERAL TRUNK/HIP SUP	No
HCPCS	E0957	W/C MEDIAL THIGH SUPPORT	No
HCPCS	E0958	WHEELCHAIR ATTACHMENT TO	Yes
DME RENTAL	E0958 RR	W/CHAIR, STD, ONE ARM DRIVE	Yes
HCPCS	E0959	AMPUTEE ADAPTER (DEVICE U	No
DME RENTAL	E0959 RR	WHEELCHAIR AMPUTEE, ADAPTO	No
HCPCS	E0960	W/C SHOULDER HARNESS/STRA	Yes
HCPCS	E0961	BRAKE EXTENSION, FOR WHEE	No
HCPCS	E0966	HOOK ON HEAD REST EXTENSI	No
HCPCS	E0967	WHEELCHAIR HAND RIMS WITH	No
HCPCS	E0967 U1	WHEELCHAIR HAND RIMS WITH	Yes
HCPCS	E0969	NARROWING DEVICE, WHEELCH	No
HCPCS	E0970	NO.2 FOOTPLATES, EXCEPT F	No
HCPCS	E0971	ANTI-TIPPING DEVICE WHEEL	No
DME RENTAL	E0971 RR	ANTI-TIPPING DEVICE WHEEL	No
HCPCS	E0973	ADJUSTABLE HEIGHT DETACHA	No
HCPCS	E0974	GRADE-AID (DEVICE TO PR	No
HCPCS	E0978	BELT, SAFETY WITH AIRPLAN	No
HCPCS	E0980	SAFETY VEST, WHEELCHAIR	Yes
HCPCS	E0981	SEAT UPHOLSTERY, REPLACEM	No
HCPCS	E0981 52	SEAT UPHOLSTERY FOR WHEEL	No
HCPCS	E0982	BACK UPHOLSTERY, REPLACEM	No
HCPCS	E0986	MAN W/C PUSH-RIM POW ASSI	Yes
DME RENTAL	E0986 RR	MAN W/C PUSH-RIM POW ASSI	Yes
HCPCS	E0990	ELEVATING LEG REST, EACH	No
DME RENTAL	E0990 RR	WHEELCHAIR ELEVATING LEG	No
HCPCS	E0992	SOLID SEAT INSERT	No
DME RENTAL	E0992 RR	SOLID SEAT INSERT (P)	No
HCPCS	E0994	ARM REST, EACH	No
HCPCS	E0995	CALF REST, EACH	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E1002	PWR SEAT TILT	Yes
HCPCS	E1005	WHEELCHAIR ACCESSORY, POW	Yes
HCPCS	E1007	PWR SEAT COMBO W/SHEAR	Yes
HCPCS	E1008	PWR SEAT COMBO PWR SHEAR	Yes
DME RENTAL	E1008 RR	PWR SEAT COMBO PWR SHEAR	Yes
HCPCS	E1009	ADD MECH LEG ELEVATION	Yes
HCPCS	E1010	WHEELCHAIR ACCESSORY, ADD	Yes
HCPCS	E1011	PED WC MODIFY WIDTH ADJUS	No
HCPCS	E1014	RECLINING BACK ADD PED W/	No
DME RENTAL	E1014 RR	RECLINING BACK ADDN TO PE	No
HCPCS	E1015	SHOCK ABSORBER FOR MAN W/	No
DME RENTAL	E1015 RR	SHOCK ABSORBER FOR MANUAL	No
HCPCS	E1016	SHOCK ABSORBER FOR POWER	No
DME RENTAL	E1016 RR	SHOCK ABSORBER FOR POWER	No
HCPCS	E1017	HD SHCK ABSRBR FOR HD MAN	No
HCPCS	E1028	W/C MANUAL SWINGAWAY	No
HCPCS	E1031	ROLLABOUT CHAIR, ANY AND	Yes
DME RENTAL	E1031 RR	ROLLABOUT CHAIR, ANY AND	Yes
DME RENTAL	E1035 RR	WHEELCHAIR, GERIATRIC (P)	Yes
DME RENTAL	E1037 RR	TRANSPORT CHAIR, PEDIATRI	No
DME RENTAL	E1038 RR	TRANSPORT CHAIR, ADULT SI	No
HCPCS	E1039	TRANSPORT CHAIR PT WT>=25	Yes
HCPCS	E1050	FULLY-RECLINING WHEELCHAI	Yes
DME RENTAL	E1050 RR	WHEELCHAIR FULL,RECLINING	Yes
HCPCS	E1060	FULLY-RECLINING WHEELCHAI	Yes
DME RENTAL	E1060 RR	WHEELCHAIR FULL,RECL BA,	Yes
HCPCS	E1083	HEMI-WHEELCHAIR, FIXED FU	Yes
HCPCS	E1084	HEMI-WHEELCHAIR, DETACHAB	Yes
DME RENTAL	E1084 RR	HEMI WHEELCHAIR, DETACHA	No
HCPCS	E1086	HEMI-WHEELCHAIR DETACHABL	Yes
DME RENTAL	E1086 RR	HEMI WHEELCHAIR DETACHAB	Yes
HCPCS	E1087	HIGH STRENGTH LIGHTWEIGHT	Yes
DME RENTAL	E1087 RR	W CHAIR,ACT DTY W/DET ARM	Yes
HCPCS	E1088	HIGH STRENGTH LIGHTWEIGHT	Yes
DME RENTAL	E1088 RR	W CHAIR ACT DTY W/DET ARM	Yes
HCPCS	E1090	HIGH STRENGTH LIGHTWEIGHT	Yes
DME RENTAL	E1090 RR	HIGH STRENGTH LIGHTWEIGH	Yes
HCPCS	E1092	WIDE HEAVY DUTY WHEEL CHA	Yes
DME RENTAL	E1092 RR	WIDE HEAVY DUTY WHEEL CHA	Yes
HCPCS	E1093	WIDE HEAVY DUTY WHEELCHAI	Yes
DME RENTAL	E1093 RR	WIDE HEAVY DUTY WHEELCHAI	Yes
HCPCS	E1130	STANDARD WHEELCHAIR, FIXE	Yes
DME RENTAL	E1130 RR	WHEELCHAIR,STANDARD,DET L	Yes
HCPCS	E1140	WHEELCHAIR, DETACHABLE AR	Yes
DME RENTAL	E1140 RR	W/CHAIR DET ARM & ELEV LE	Yes
HCPCS	E1150	WHEELCHAIR, DETACHABLE AR	Yes
DME RENTAL	E1150 RR	WHEELCHAIR,STANDARD.DETAC	Yes
HCPCS	E1160	WHEELCHAIR, FIXED FULL LE	Yes
DME RENTAL	E1160 RR	WHEELCHAIR,STD.,DET.ARMS	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E1161	MANUAL ADULT WC W TILTINS	Yes
DME RENTAL	E1161 RR	MANUAL ADULT SIZE WHEELCH	No
HCPCS	E1171	AMPUTEE WHEELCHAIR, FIXED	Yes
HCPCS	E1180	AMPUTEE WHEELCHAIR, DETAC	Yes
HCPCS	E1190	AMPUTEE WHEELCHAIR, DETAC	Yes
DME RENTAL	E1190 RR	AMPUTEE WHEELCHAIR, DETAC	No
HCPCS	E1195	HEAVY DUTY WHEELCHAIR, FI	Yes
DME RENTAL	E1195 RR	WHEELCHAIR HEAVY DUTY, STA	Yes
HCPCS	E1220	WHEELCHAIR; SPECIALLY SIZ	Yes
DME RENTAL	E1220 RR	SPECIALLY SIZED OR CONST	Yes
DME RENTAL	E1221 RR	WHEELCHAIR,NARROW ADULT (Yes
HCPCS	E1225	SEMI-RECLINING BACK FOR C	No
DME RENTAL	E1225 RR	SEMI-RECLINING BACK FOR	No
HCPCS	E1226	FULL RECLINING BACK FOR C	No
HCPCS	E1229	PEDIATRIC WHEELCHAIR NOS	Yes
HCPCS	E1230	POWER OPERATED VEHICLE (T	Yes
HCPCS	E1231	RIGID PED W/C TILT-IN-SPA	No
HCPCS	E1232	FOLDING PED WC TILT-IN-SP	Yes
DME RENTAL	E1232 RR	WHEELCHAIR PEDIATRIC FOLD	No
HCPCS	E1233	RIG PED WC TLTNSPC W/O SE	Yes
DME RENTAL	E1233 RR	WHEELCHAIR PEDIATRIC TILT	No
HCPCS	E1234	FLD PED WC TLTNSPC W/O SE	Yes
DME RENTAL	E1234 RR	WHEELCHAIR PEDIATRIC TILT	No
HCPCS	E1235	RIGID PED WC ADJUSTABLE	Yes
DME RENTAL	E1235 RR	WHEELCHAIR PEDIATRIC RIGI	No
HCPCS	E1236	FOLDING PED WC ADJUSTABLE	Yes
DME RENTAL	E1236 RR	WHEELCHAIR PEDIATRIC FOLD	No
HCPCS	E1237	RGD PED WC ADJSTABL W/O S	Yes
DME RENTAL	E1237 RR	WHEELCHAIR PEDIAT RIGID A	No
HCPCS	E1238	FLD PED WC ADJSTABL W/O S	Yes
DME RENTAL	E1238 RR	WHEELCHAIR PEDIAT FOLD AD	No
HCPCS	E1240	LIGHTWEIGHT WHEELCHAIR, D	Yes
DME RENTAL	E1240 RR	WHEELCHAIR,LGT WGT/WITH D	Yes
HCPCS	E1250	LIGHTWEIGHT WHEELCHAIR, F	Yes
DME RENTAL	E1250 RR	WHEELCHAIR,LIGHTWEIGHT,ST	Yes
HCPCS	E1260	LIGHTWEIGHT WHEELCHAIR, D	Yes
DME RENTAL	E1260 RR	WHEELCHAIR,LGTWGT,W/DET A	Yes
HCPCS	E1270	LIGHTWEIGHT WHEELCHAIR, F	Yes
DME RENTAL	E1270 RR	LIGHTWGT WHEELCHAIR, FIXE	Yes
HCPCS	E1280	HEAVY DUTY WHEELCHAIR, DE	Yes
DME RENTAL	E1280 RR	HEAVY DUTY WHEELCHAIR, DE	Yes
HCPCS	E1290	HEAVY DUTY WHEELCHAIR, DE	Yes
DME RENTAL	E1290 RR	HEAVY DUTY WHEELCHAIR, DE	Yes
HCPCS	E1295	HEAVY DUTY WHEELCHAIR, FI	Yes
HCPCS	E1300	WHIRLPOOL, PORTABLE (OVER	No
DME RENTAL	E1300 RR	WHIRLPOOL BATH,PORTABLE (Yes
HCPCS	E1340	REPAIR OR NONROUTINE SERV	Yes
HCPCS	E1353	REGULATOR	Yes
DME RENTAL	E1353 RR	OXYGEN REGULATOR (R)	Yes

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E1354	WHEELED CART, PORT CYL/CO	No
HCPCS	E1355	STAND/RACK	No
DME RENTAL	E1355 RR	STAND/RACK	Yes
HCPCS	E1356	BATT PACK/CART, PORT CONC	No
HCPCS	E1357	BATTERY CHARGER, PORT CON	No
HCPCS	E1358	DC POWER ADAPTER, PORT CO	No
HCPCS	E1372	IMMERSION EXTERNAL HEATER	No
DME RENTAL	E1390 RR	OXYGEN CONCENTRATOR 85% O	Yes
HCPCS	E1391	OXYGEN CONCENTRATOR, DUAL	No
DME RENTAL	E1392 RR	PORTABLE OXYGEN CONCENTRA	No
HCPCS	E1399	DURABLE MEDICAL EQUIPMENT	Yes
HCPCS	E1405	O2/WATER VAPOR ENRICH W/H	No
HCPCS	E1406	O2/WATER VAPOR ENRICH W/O	No
HCPCS	E1700	JAW MOTION REHABILITATION	No
HCPCS	E1800	DYNAMIC ADJUSTABLE ELBOW	No
HCPCS	E1801	SPS ELBOW DEVICE	No
DME RENTAL	E1802 RR	DYNAMIC ADJUSTABLE FOREAR	No
HCPCS	E1805	DYNAMIC ADJUSTABLE WRIST	No
HCPCS	E1806	SPS WRIST DEVICE	No
HCPCS	E1810	DYNAMIC ADJUSTABLE KNEE E	No
HCPCS	E1811	SPS KNEE DEVICE	No
HCPCS	E1815	DYNAMIC ADJUSTABLE ANKLE	No
HCPCS	E1816	SPS ANKLE DEVICE	No
HCPCS	E1818	SPS FOREARM DEVICE	No
HCPCS	E1820	SOFT INTERFACE MATERIAL,	No
HCPCS	E1821	REPLACEMENT INTERFACE SPS	No
HCPCS	E1825	DYNAMIC ADJUSTABLE FINGER	No
HCPCS	E1830	DYNAMIC ADJUSTABLE TOE EX	No
HCPCS	E1840	ADJ SHOULDER EXT/FLEX DEV	No
HCPCS	E1841	STATIC STR SHLDR DEV ROM	Yes
HCPCS	E1902 52	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 U1	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 U2	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 U3	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 U4	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 U5	COMMUNICATION BOARD, NON-	Yes
HCPCS	E1902 UA	COMMUNICATION BOARD, NON-	Yes
HCPCS	E2000	GASTRIC SUCTION PUMP HME	No
HCPCS	E2100	BLD GLUCOSE MONITOR W VOI	No
HCPCS	E2101	BLD GLUCOSE MONITOR W LAN	No
HCPCS	E2201	MAN W/CH ACC SEAT W>=20÷<	No
HCPCS	E2203	FRAME DEPTH LESS THAN 22	No
DME RENTAL	E2203 RR	FRAM DEPTH LESS THAN 22 I	Yes
HCPCS	E2205	MANUAL WC ACCESSORY, HAND	Yes
HCPCS	E2206	COMPLETE WHEEL LOCK ASSEM	Yes
HCPCS	E2207	CRUTCH AND CANE HOLDER	No
DME RENTAL	E2207 RR	CRUTCH AND CANE HOLDER	No
HCPCS	E2208	CYLINDER TANK CARRIER	No
DME RENTAL	E2208 RR	CYLINDER TANK CARRIER	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E2209	ARM TROUGH EACH	No
DME RENTAL	E2209 RR	ARM TROUGH EACH	No
HCPCS	E2210	WHEELCHAIR BEARINGS	No
DME RENTAL	E2210 RR	WHEELCHAIR BEARINGS	No
HCPCS	E2211	PNEUMATIC PROPULSION TIRE	No
DME RENTAL	E2211 RR	PNEUMATIC PROPULSION TIRE	No
HCPCS	E2212	PNEUMATIC PROP TIRE TUBE	No
DME RENTAL	E2212 RR	PNEUMATIC PROP TIRE TUBE	No
HCPCS	E2213	PNEUMATIC PROP TIRE INSER	No
DME RENTAL	E2213 RR	PNEUMATIC PROP TIRE INSER	No
HCPCS	E2214	PNEUMATIC CASTER TIRE EAC	No
DME RENTAL	E2214 RR	PNEUMATIC CASTER TIRE EAC	No
HCPCS	E2215	PNEUMATIC CASTER TIRE TUB	No
DME RENTAL	E2215 RR	PNEUMATIC CASTER TIRE TUB	No
HCPCS	E2219	FOAM CASTER TIRE ANY SIZE	No
DME RENTAL	E2219 RR	FOAM CASTER TIRE ANY SIZE	No
HCPCS	E2220	SOLID PROPULSION TIRE EAC	No
DME RENTAL	E2220 RR	SOLID PROPULSION TIRE EAC	No
HCPCS	E2221	SOLID CASTER TIRE EACH	No
DME RENTAL	E2221 RR	SOLID CASTER TIRE EACH	No
HCPCS	E2222	SOLID CASTER INTEGRATED W	No
DME RENTAL	E2222 RR	SOLID CASTER INTEGRATED W	No
HCPCS	E2223	VALVE REPLACEMENT ONLY EA	No
DME RENTAL	E2223 RR	VALVE REPLACEMENT ONLY EA	No
HCPCS	E2224	PROPULSION WHL EXCLUDES T	No
DME RENTAL	E2224 RR	PROPULSION WHL EXCLUDES T	No
HCPCS	E2225	CASTER WHEEL EXCLUDES TIR	No
DME RENTAL	E2225 RR	CASTER WHEEL EXCLUDES TIR	Yes
HCPCS	E2226	CASTER FORK REPLACEMENT O	Yes
DME RENTAL	E2226 RR	CASTER FORK REPLACEMENT O	Yes
HCPCS	E2227	GEAR REDUCTION DRIVE WHEE	No
HCPCS	E2228	MWC ACC, WHEELCHAIR BRAKE	No
HCPCS	E2230	MANUAL STANDING SYSTEM	No
HCPCS	E2231	SOLID SEAT SUPPORT BASE	No
DME RENTAL	E2231 RR	SOLID SEAT SUPPORT BASE	No
HCPCS	E2291	PLANAR BACK FOR PED SIZE	Yes
HCPCS	E2292	PLANAR SEAT FOR PED SIZE	Yes
HCPCS	E2293	CONTOUR BACK FOR PED SIZE	Yes
HCPCS	E2294	CONTOUR SEAT FOR PED SIZE	Yes
HCPCS	E2295	PED DYNAMIC SEATING FRAME	No
HCPCS	E2300	PWR SEAT ELEVATION SYS	Yes
HCPCS	E2310	ELECTRO CONNECT BTW CONTR	Yes
HCPCS	E2311	ELECTRO CONNECT BTW 2 SYS	Yes
HCPCS	E2312	MINI-PROP REMOTE JOYSTICK	Yes
DME RENTAL	E2312 RR	MINI-PROP REMOTE JOYSTICK	Yes
HCPCS	E2313	PWC HARNESS, EXPAND CONTR	No
DME RENTAL	E2313 RR	PWC HARNESS, EXPAND CONTR	No
HCPCS	E2321	HAND INTERFACE JOYSTICK	Yes
HCPCS	E2324	CHIN CUP INTERFACE	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
DME RENTAL	E2324 RR	CHIN CUP INTERFACE	No
HCPCS	E2327	HEAD CONTROL INTERFACE ME	Yes
HCPCS	E2328	HEAD/EXTREMITY CONTROL IN	Yes
HCPCS	E2340	W/C WDTN 20-23 IN SEAT FR	No
HCPCS	E2341	W/C WDTN 24-27 IN SEAT FR	No
HCPCS	E2342	W/C DPTH 20-21 IN SEAT FR	Yes
DME RENTAL	E2342 RR	W/C DPTH 20-21 IN SEAT FR	Yes
HCPCS	E2343	W/C DPTH 22-25 IN SEAT FR	No
HCPCS	E2360	22NF NONSEALED LEADACID	No
HCPCS	E2361	22NF SEALED LEADACID BATT	No
HCPCS	E2362	GR24 NONSEALED LEADACID	No
HCPCS	E2363	GR24 SEALED LEADACID BATT	No
HCPCS	E2364	U1NONSEALED LEADACID BATT	No
HCPCS	E2365	U1 SEALED LEADACID BATTER	No
HCPCS	E2366	BATTERY CHARGER, SINGLE M	No
HCPCS	E2367	BATTERY CHARGER, DUAL MOD	No
HCPCS	E2368	POWER WC MOTOR REPLACEMEN	Yes
HCPCS	E2369	PWR WC GEAR BOX REPLACEME	Yes
HCPCS	E2370	PWR WC MOTOR/GEAR BOX COM	Yes
HCPCS	E2371	GR27 SEALED LEADACID BATT	Yes
DME RENTAL	E2371 RR	GR27 SEALED LEADACID BATT	Yes
HCPCS	E2373	HAND/CHIN CTRL SPEC JOYST	Yes
DME RENTAL	E2373 RR	HAND/CHIN CTRL SPEC JOYST	Yes
HCPCS	E2374	HAND/CHIN CTRL STD JOYSTI	No
DME RENTAL	E2374 RR	HAND/CHIN CTRL STD JOYSTI	No
HCPCS	E2375	NON-EXPANDABLE CONTROLLER	Yes
DME RENTAL	E2375 RR	NON-EXPANDABLE CONTROLLER	Yes
HCPCS	E2376	EXPANDABLE CONTROLLER, RE	Yes
DME RENTAL	E2376 RR	EXPANDABLE CONTROLLER, RE	Yes
HCPCS	E2377	EXPANDABLE CONTROLLER, IN	No
DME RENTAL	E2377 RR	EXPANDABLE CONTROLLER, IN	No
HCPCS	E2381	PNEUM DRIVE WHEEL TIRE	No
DME RENTAL	E2381 RR	PNEUM DRIVE WHEEL TIRE	No
HCPCS	E2382	TUBE, PNEUM WHEEL DRIVE T	No
DME RENTAL	E2382 RR	TUBE, PNEUM WHEEL DRIVE T	No
HCPCS	E2383	INSERT, PNEUM WHEEL DRIVE	No
DME RENTAL	E2383 RR	INSERT, PNEUM WHEEL DRIVE	No
HCPCS	E2384	PNEUMATIC CASTER TIRE	No
DME RENTAL	E2384 RR	PNEUMATIC CASTER TIRE	No
HCPCS	E2385	TUBE, PNEUMATIC CASTER TI	No
DME RENTAL	E2385 RR	TUBE, PNEUMATIC CASTER TI	No
HCPCS	E2386	FOAM FILLED DRIVE WHEEL T	No
DME RENTAL	E2386 RR	FOAM FILLED DRIVE WHEEL T	No
HCPCS	E2387	FOAM FILLED CASTER TIRE	No
DME RENTAL	E2387 RR	FOAM FILLED CASTER TIRE	No
HCPCS	E2388	FOAM DRIVE WHEEL TIRE	No
DME RENTAL	E2388 RR	FOAM DRIVE WHEEL TIRE	No
HCPCS	E2389	FOAM CASTER TIRE	No
DME RENTAL	E2389 RR	FOAM CASTER TIRE	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E2390	SOLID DRIVE WHEEL TIRE	No
DME RENTAL	E2390 RR	SOLID DRIVE WHEEL TIRE	No
HCPCS	E2391	SOLID CASTER TIRE	No
DME RENTAL	E2391 RR	SOLID CASTER TIRE	No
HCPCS	E2392	SOLID CASTER TIRE, INTEGR	No
DME RENTAL	E2392 RR	SOLID CASTER TIRE, INTEGR	No
HCPCS	E2393	VALVE, PNEUMATIC TIRE TUB	Yes
DME RENTAL	E2393 RR	VALVE, PNEUMATIC TIRE TUB	Yes
HCPCS	E2394	DRIVE WHEEL EXCLUDES TIRE	No
DME RENTAL	E2394 RR	DRIVE WHEEL EXCLUDES TIRE	No
HCPCS	E2395	CASTER WHEEL EXCLUDES TIR	No
DME RENTAL	E2395 RR	CASTER WHEEL EXCLUDES TIR	No
HCPCS	E2396	CASTER FORK	No
DME RENTAL	E2396 RR	CASTER FORK	No
HCPCS	E2397	PWC ACC, LITH-BASED BATTE	No
HCPCS	E2399	NOC INTERFACE	Yes
DME RENTAL	E2402 RR	NEGATIVE PRESSURE WOUND T	Yes
HCPCS	E2500	SGD DIGITIZED PRE-REC <=8	Yes
DME RENTAL	E2500 RR	SGD DIGITIZED PRE-REC <=8	Yes
HCPCS	E2504	SGD PREREC MSG>20MIN <=40	Yes
HCPCS	E2506	NEW COMMUNICATION DEVICE	Yes
DME RENTAL	E2506 RR	NEW COMMUNICATION DEVICE	Yes
HCPCS	E2508	SGD SPELLING PHYS CONTACT	No
HCPCS	E2510	SGD W MULTI METHODS MSG/A	Yes
DME RENTAL	E2510 RR	SGD W MULTI METHODS MSG/A	Yes
HCPCS	E2599	SGD ACCESSORY NOC	No
HCPCS	E2601	GEN W/C CUSHION WIDTH < 22	Yes
HCPCS	E2602	GEN W/C CUSHION WIDTH >=22	Yes
HCPCS	E2603	SKIN PROTECT WC CUS WD <2	No
HCPCS	E2603 U1	SKIN PROTECT WC CUS WD <2	No
HCPCS	E2603 U2	SKIN PROTECT WC CUS-FOAM	No
HCPCS	E2604	SKIN PROTECT WC CUS WD>=2	Yes
HCPCS	E2605	POSITION WC CUSH WIDTH <22	Yes
HCPCS	E2606	POSITION WC CUSH WIDTH>=22	Yes
HCPCS	E2607	SKIN PRO/POS WC CUS WD <2	Yes
HCPCS	E2608	SKIN PRO/POS WC CUS WD>=2	Yes
HCPCS	E2609	CUSTOM FABRICATE W/C CUSH	Yes
HCPCS	E2610	POWERED W/C CUSHION	Yes
HCPCS	E2611	GEN USE BACK CUSH WIDTH <2	Yes
HCPCS	E2612	GEN USE BACK CUSH WIDTH>=2	Yes
HCPCS	E2613	POSITION BACK CUSH WD <22	Yes
HCPCS	E2614	POSITION BACK CUSH WD>=22	Yes
HCPCS	E2615	POS BACK POST/LAT WIDTH <2	Yes
HCPCS	E2616	POS BACK POST/LAT WIDTH>=2	Yes
HCPCS	E2617	CUSTOM FAB W/C BACK CUSHI	Yes
HCPCS	E2619	REPLACE COVER W/C SEAT CU	Yes
HCPCS	E2620	WC PLANAR BACK CUSH WD <2	Yes
HCPCS	E2621	WC PLANAR BACK CUSH WD>=2	Yes
HCPCS	E8000	POSTERIOR GAIT TRAINER	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	E8001	UPRIGHT GAIT TRAINER	Yes
HCPCS	E8002	ANTERIOR GAIT TRAINER	Yes
HCPCS	K0001	STANDARD WHEELCHAIR BASE	No
DME RENTAL	K0001 RR	STANDARD WHEELCHAIR	Yes
HCPCS	K0002	STANDARD HEMI (LOW SEAT)	Yes
DME RENTAL	K0002 RR	STANDARD HEMI LOW SEAT WH	Yes
HCPCS	K0003	LIGHTWEIGHT WHEELCHAIR	Yes
DME RENTAL	K0003 RR	LIGHT WEIGHT STRENGTH WHE	Yes
HCPCS	K0004	HIGH STRENGTH, LIGHTWEIGH	Yes
DME RENTAL	K0004 RR	HIGH STRENGTH LIGHT WEIGH	Yes
HCPCS	K0005	ULTRALIGHTWEIGHT WHEELCHA	Yes
DME RENTAL	K0005 RR	ULTRALIGHT WHEELCHAIR (RE	Yes
HCPCS	K0006	HEAVY DUTY WHEELCHAIR	Yes
DME RENTAL	K0006 RR	HEAVY DUTY WHEELCHAIR	Yes
HCPCS	K0007	EXTRA HEAVY DUTY WHEELCHA	Yes
DME RENTAL	K0007 RR	EXTRA HEAVY DUTY WHEELCHA	Yes
HCPCS	K0009	OTHER MANUAL WHEELCHAIR/B	Yes
DME RENTAL	K0009 RR	MANUAL WHEELCHAIR/BASE	Yes
HCPCS	K0010	STANDARD WEIGHT FRAME MOT	Yes
DME RENTAL	K0010 RR	STANDARD WEIGHT FRAME MOT	Yes
HCPCS	K0011	STANDARD WEIGHT FRAME MOT	Yes
DME RENTAL	K0011 RR	STD WGT FRAME MOTORIZED C	Yes
HCPCS	K0012	LIGHTWEIGHT PORTABLE MOTO	Yes
DME RENTAL	K0012 RR	LIGHTWEIGHT MOTORIZED WHE	Yes
HCPCS	K0014	OTHER MOTORIZED/POWER WHE	Yes
HCPCS	K0015	DETACHABLE, NON ADJUSTABL	Yes
HCPCS	K0017	DETACHABLE, ADJUSTABLE HE	Yes
HCPCS	K0018	DETACHABLE, ADJUSTABLE HE	Yes
HCPCS	K0019	ARM PAD, EACH	No
HCPCS	K0020	ADJUSTABLE HEIGHT ARMREST	Yes
HCPCS	K0037	HIGH MOUNT FLIP UP FOOTRE	Yes
HCPCS	K0038	LEG STRAP, EACH	No
HCPCS	K0038 U1	LEG STRAP, EACH; CINCHING	No
HCPCS	K0039	LEG STRAP, H STYLE, EACH	No
HCPCS	K0040	ADJUSTABLE ANGLE FOOTPLAT	Yes
HCPCS	K0041	LARGE SIZE FOOTPLATE, EAC	Yes
HCPCS	K0042	STANDARD SIZE FOOTPLATE,	Yes
HCPCS	K0043	FOOTREST, LOWER EXTENSION	Yes
HCPCS	K0044	FOOTREST, UPPER HANGER BR	No
HCPCS	K0045	FOOTREST, COMPLTE ASSEM E	Yes
DME RENTAL	K0045 RR	COMPLETE FOOTREST ASSEMBL	No
HCPCS	K0046	ELEVATING LEGREST, LOWER	Yes
HCPCS	K0047	ELEVATING LEGREST, UPPER	Yes
HCPCS	K0050	RATCHET ASSEMBLY	Yes
HCPCS	K0051	CAM RELEASE ASSEMBLY, FOO	No
HCPCS	K0052	SWINGAWAY, DETACHABLE FOO	No
HCPCS	K0053	ELEVATING FOOTRESTS, ARTI	Yes
HCPCS	K0056	SEAT HEIGHT (17" OR EQUAL	No
HCPCS	K0065	SPOKE PROTECTORS	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	K0069	REAR WHEEL ASSEMBLY, COMP	Yes
HCPCS	K0070	REAR WHEEL ASSEMBLY, COMP	No
HCPCS	K0071	FRONT CASTER ASSEMBLY, CO	No
HCPCS	K0072	FRONT CASTER ASSEMBLY, CO	Yes
HCPCS	K0073	CASTER PIN LOCK,EACH	Yes
HCPCS	K0077	FRONT CASTER ASSEMBLY, CO	No
HCPCS	K0105	IV HANGER	No
HCPCS	K0108	OTHER ACCESSORIES	Yes
HCPCS	K0108 U1	OTHER ACCESSORIES; WHEELC	No
HCPCS	K0108 U2	OTHER ACCESSORIES; STRAIG	Yes
HCPCS	K0108 U3	OTHER ACCESSORIES; HEADSW	Yes
HCPCS	K0195	ELEVATING LEG RESTS, PAIR	Yes
DME RENTAL	K0195 RR	ELEVATING LEG RESTS, COMP	Yes
HCPCS	K0455	INFUSION PUMP USED FOR UN	Yes
HCPCS	K0672	REMOVABLE SOFT INTERFACE	No
HCPCS	K0733	12-24HR SEALED LEAD ACID	No
DME RENTAL	K0733 RR	12-24HR SEALED LEAD ACID	No
HCPCS	K0734	ADJ SKIN PRO W/C CUS WD<2	No
DME RENTAL	K0734 RR	ADJ SKIN PRO W/C CUS WD<2	No
HCPCS	K0735	ADJ SKIN PRO WC CUS WD>=2	No
DME RENTAL	K0735 RR	ADJ SKIN PRO WC CUS WD>=2	No
HCPCS	K0736	ADJ SKIN PRO/POS WC CUS<2	No
DME RENTAL	K0736 RR	ADJ SKIN PRO/POS WC CUS<2	No
HCPCS	K0737	ADJ SKIN PRO/POS WC CUS>=	No
DME RENTAL	K0737 RR	ADJ SKIN PRO/POS WC CUS>=	No
DME RENTAL	K0738 RR	PORTABLE GAS OXYGEN SYSTE	No
HCPCS	K0800	POV GROUP 1 STD UP TO 300	Yes
DME RENTAL	K0800 RR	PDV GROUP 1 STD UP TO 300	Yes
HCPCS	K0801	POV GROUP 1 HD 301-450 LB	No
HCPCS	K0802	POV GROUP 1 VHD 451-600 L	Yes
HCPCS	K0806	POV GROUP 2 STD UP TO 300	Yes
HCPCS	K0807	POV GROUP 2 HD 301-450 LB	Yes
HCPCS	K0808	POV GROUP 2 VHD 451-600 L	Yes
HCPCS	K0812	POWER OPERATED VEHICLE NO	Yes
HCPCS	K0813	PWC GP 1 STD PORT SEAT/BA	Yes
DME RENTAL	K0813 RR	PWC GP 1 STD PORT SEAT/BA	Yes
HCPCS	K0814	PWC GP 1 STD PORT CAP CHA	Yes
DME RENTAL	K0814 RR	PWC GP 1 STD PORT CAP CHA	Yes
HCPCS	K0815	PWC GP 1 STD SEAT/BACK	Yes
DME RENTAL	K0815 RR	PWC GP 1 STD SEAT/BACK	Yes
HCPCS	K0816	PWC GP 1 STD CAP CHAIR	Yes
DME RENTAL	K0816 RR	PWC GP 1 STD CAP CHAIR	Yes
HCPCS	K0820	PWC GP 2 STD PORT SEAT/BA	Yes
DME RENTAL	K0820 RR	PWC GP 2 STD PORT SEAT/BA	Yes
HCPCS	K0821	PWC GP 2 STD PORT CAP CHA	Yes
DME RENTAL	K0821 RR	PWC GP 2 STD PORT CAP CHA	Yes
HCPCS	K0822	PWC GP 2 STD SEAT/BACK	Yes
DME RENTAL	K0822 RR	PWC GP 2 STD SEAT/BACK	Yes
HCPCS	K0823	PWC GP 2 STD CAP CHAIR	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
DME RENTAL	K0823 RR	PWC GP 2 STD CAP CHAIR	Yes
HCPCS	K0824	PWC GP 2 HD SEAT/BACK	Yes
DME RENTAL	K0824 RR	PWC GP 2 HD SEAT/BACK	Yes
HCPCS	K0825	PWC GP 2 HD CAP CHAIR	Yes
DME RENTAL	K0825 RR	PWC GP 2 HD CAP CHAIR	Yes
HCPCS	K0826	PWC GP 2 VHD SEAT/BACK	Yes
DME RENTAL	K0826 RR	PWC GP 2 VHD SEAT/BACK	Yes
HCPCS	K0827	PWC GP VHD CAP CHAIR	Yes
DME RENTAL	K0827 RR	PWC GP VHD CAP CHAIR	Yes
HCPCS	K0828	PWC GP 2 XTRA HD SEAT/BAC	Yes
DME RENTAL	K0828 RR	PWC GP 2 XTRA HD SEAT/BAC	Yes
HCPCS	K0829	PWC GP 2 XTRA HD CAP CHAI	Yes
DME RENTAL	K0829 RR	PWC GP 2 XTRA HD CAP CHAI	Yes
HCPCS	K0830	PWC GP2 STD SEAT ELEVATE	Yes
DME RENTAL	K0830 RR	PWC GP2 STD SEAT ELEVATE	Yes
HCPCS	K0831	PWC GP2 STD SEAT ELEVATE	Yes
DME RENTAL	K0831 RR	PWC GP2 STD SEAT ELEVATE	Yes
HCPCS	K0835	PWC GP2 STD SING POW OPT	Yes
DME RENTAL	K0835 RR	PWC GP2 STD SING POW OPT	Yes
HCPCS	K0836	PWC GP2 STD SING POW OPT	Yes
DME RENTAL	K0836 RR	PWC GP2 STD SING POW OPT	Yes
HCPCS	K0837	PWC GP 2 HD SING POW OPT	Yes
DME RENTAL	K0837 RR	PWC GP 2 HD SING POW OPT	Yes
HCPCS	K0838	PWC GP 2 HD SING POW OPT	Yes
DME RENTAL	K0838 RR	PWC GP 2 HD SING POW OPT	Yes
HCPCS	K0839	PWC GP2 VHD SING POW OPT	Yes
DME RENTAL	K0839 RR	PWC GP2 VHD SING POW OPT	Yes
HCPCS	K0840	PWC GP2 XHD SING POW OPT	Yes
DME RENTAL	K0840 RR	PWC GP2 XHD SING POW OPT	Yes
HCPCS	K0841	PWC GP2 STD MULT POW OPT	Yes
DME RENTAL	K0841 RR	PWC GP2 STD MULT POW OPT	Yes
HCPCS	K0842	PWC GP2 STD MULT POW OPT	Yes
DME RENTAL	K0842 RR	PWC GP2 STD MULT POW OPT	Yes
HCPCS	K0843	PWC GP2 HD MULT POW OPT S	Yes
DME RENTAL	K0843 RR	PWC GP2 HD MULT POW OPT S	Yes
HCPCS	K0848	PWC GP 3 STD SEAT/BACK	Yes
DME RENTAL	K0848 RR	PWC GP 3 STD SEAT/BACK	Yes
HCPCS	K0849	PWC GP 3 STD CAP CHAIR	Yes
DME RENTAL	K0849 RR	PWC GP 3 STD CAP CHAIR	Yes
HCPCS	K0850	PWC GP 3 HD SEAT/BACK	Yes
DME RENTAL	K0850 RR	PWC GP 3 HD SEAT/BACK	Yes
HCPCS	K0851	PWC GP 3 HD CAP CHAIR	Yes
DME RENTAL	K0851 RR	PWC GP 3 HD CAP CHAIR	Yes
HCPCS	K0852	PWC GP 3 VHD SEAT/BACK	Yes
DME RENTAL	K0852 RR	PWC GP 3 VHD SEAT/BACK	Yes
HCPCS	K0853	PWC GP 3 VHD CAP CHAIR	Yes
DME RENTAL	K0853 RR	PWC GP 3 VHD CAP CHAIR	Yes
HCPCS	K0854	PWC GP 3 XHD SEAT/BACK	Yes
DME RENTAL	K0854 RR	PWC GP 3 XHD SEAT/BACK	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	K0855	PWC GP 3 XHD CAP CHAIR	Yes
DME RENTAL	K0855 RR	PWC GP 3 XHD CAP CHAIR	Yes
HCPCS	K0856	PWC GP3 STD SING POW OPT	Yes
DME RENTAL	K0856 RR	PWC GP3 STD SING POW OPT	Yes
HCPCS	K0857	PWC GP3 STD SING POW OPT	Yes
DME RENTAL	K0857 RR	PWC GP3 STD SING POW OPT	Yes
HCPCS	K0858	PWC GP3 HD SING POW OPT S	Yes
DME RENTAL	K0858 RR	PWC GP3 HD SING POW OPT S	Yes
HCPCS	K0859	PWC GP3 HD SING POW OPT C	Yes
DME RENTAL	K0859 RR	PWC GP3 HD SING POW OPT C	Yes
HCPCS	K0860	PWC GP3 VHD SING POW OPT	Yes
DME RENTAL	K0860 RR	PWC GP3 VHD SING POW OPT	Yes
HCPCS	K0861	PWC GP3 STD MULT POW OPT	Yes
DME RENTAL	K0861 RR	PWC GP3 STD MULT POW OPT	Yes
HCPCS	K0862	PWC GP3 HD MULT POW OPT S	Yes
DME RENTAL	K0862 RR	PWC GP3 HD MULT POW OPT S	Yes
HCPCS	K0863	PWC GP3 VHD MULT POW OPT	Yes
DME RENTAL	K0863 RR	PWC GP3 VHD MULT POW OPT	Yes
HCPCS	K0864	PWC GP3 XHD MULT POW OPT	Yes
DME RENTAL	K0864 RR	PWC GP3 XHD MULT POW OPT	Yes
DME RENTAL	K0868 RR	PWC GP 4 STD SEAT/BACK	Yes
DME RENTAL	K0869 RR	PWC GP 4 STD CAP CHAIR	Yes
DME RENTAL	K0870 RR	PWC GP 4 HD SEAT/BACK	Yes
DME RENTAL	K0871 RR	PWC GP 4 VHD SEAT/BACK	Yes
DME RENTAL	K0877 RR	PWC GP4 STD SING POW OPT	Yes
DME RENTAL	K0878 RR	PWC GP4 STD SING POW OPT	Yes
DME RENTAL	K0879 RR	PWC GP4 HD SING POW OPT S	Yes
DME RENTAL	K0880 RR	PWC GP4 VHD SING POW OPT	Yes
DME RENTAL	K0884 RR	PWC GP4 STD MULT POW OPT	Yes
DME RENTAL	K0885 RR	PWC GP4 STD MULT POW OPT	Yes
DME RENTAL	K0886 RR	PWC GP4 HD MULT POW S/B	Yes
DME RENTAL	K0890 RR	PWC GP5 PED SING POW OPT	Yes
DME RENTAL	K0891 RR	PWC GP5 PED MULT POW OPT	Yes
DME RENTAL	K0898 RR	POWER WHEELCHAIR NOC	Yes
DME RENTAL	K0899 RR	POW MOBIL DEV NO SADMERC	Yes
HCPCS	L0113	CRANIAL CERVICAL TORTICOL	Yes
HCPCS	L0120	CERVICAL, FLEXIBLE, NON A	No
HCPCS	L0130	CERVICAL, FLEXIBLE, THERM	No
HCPCS	L0140	CERVICAL, SEMI RIGID, ADJ	No
HCPCS	L0160	CERVICAL, SEMI-RIGID, WIR	No
HCPCS	L0170	CERVICAL, COLLAR, MOLDED	Yes
HCPCS	L0172	CERVICAL, COLLAR, SEMI-RI	No
HCPCS	L0190	CERVICAL, MULTIPLE POST C	No
HCPCS	L0210	THORACIC, RIB BELT, CUSTO	No
HCPCS	L0450	TLSO FLEX PREFAB THORACIC	No
HCPCS	L0454	TLSO FLEX PREFAB SACROCOC	No
HCPCS	L0456	TLSO FLEX PREFAB	No
HCPCS	L0458	TLSO 2MOD SYMPHIS-XIPHO P	No
HCPCS	L0460	TLSO2MOD SYMPHYSIS-STERN	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L0462	TLSO 3MOD SACRO-SCAP PRE	No
HCPCS	L0464	TLSO 4MOD SACRO-SCAP PRE	No
HCPCS	L0466	TLSO RIGID FRAME PRE SOFT	No
HCPCS	L0468	TLSO RIGID FRAME PREFAB P	No
HCPCS	L0470	TLSO RIGID FRAME PRE SUBC	No
HCPCS	L0472	TLSO RIGID FRAME HYPEREX	No
HCPCS	L0480	TLSO RIGID PLASTIC CUSTOM	No
HCPCS	L0482	TLSO RIGID LINED CUSTOM F	No
HCPCS	L0484	TLSO RIGID PLASTIC CUST F	No
HCPCS	L0486	TLSO RIGIDLINED CUST FAB	No
HCPCS	L0488	TLSO RIGID LINED PRE ONE	Yes
HCPCS	L0490	TLSO RIGID PLASTIC PRE ON	No
HCPCS	L0491	TLSO 2 PIECE RIGID SHELL	No
HCPCS	L0492	TLSO 3 PIECE RIGID SHELL	Yes
HCPCS	L0621	SIO FLEX PELVISACRAL PREF	Yes
HCPCS	L0622	SIO FLEX PELVISACRAL CUST	Yes
HCPCS	L0625	LO FLEXIBL L1-BELOW L5 PR	Yes
HCPCS	L0626	LO SAG STAYS/PANELS PRE-F	No
HCPCS	L0627	LO SAGITT RIGID PANEL PRE	Yes
HCPCS	L0628	LO FLEX W/O RIGID STAYS P	No
HCPCS	L0630	LSO POST RIGID PANEL PRE	No
HCPCS	L0631	LSO SAG-CORO RIGID FRAME	Yes
HCPCS	L0633	LSO FLEXION CONTROL PREFA	No
HCPCS	L0635	LSO SAGIT RIGID PANEL PRE	No
HCPCS	L0636	LSO SAGITTAL RIGID PANEL	No
HCPCS	L0637	LSO SAG-CORONAL PANEL PRE	No
HCPCS	L0638	LSO SAG-CORONAL PANEL CUS	No
HCPCS	L0639	LSO S/C SHELL/PANEL PREFA	No
HCPCS	L0640	LSO S/C SHELL/PANEL CUSTO	No
HCPCS	L0700	CERVICAL THORACIC LUMBAR	Yes
HCPCS	L0710	CTLSO, ANTERIOR POSTERIOR	No
HCPCS	L0810	HALO PROCEDURE, CERVICAL	Yes
HCPCS	L0820	HALO PROCEDURE, CERVICAL	Yes
HCPCS	L0859	MRI COMPATIBLE SYSTEM	No
HCPCS	L0974	TLSO, FULL CORSET	Yes
HCPCS	L0984	PROTECTIVE BODY SOCK, EAC	No
HCPCS	L0999	ADDITION TO SPINAL ORTHOS	No
HCPCS	L1000	CERVICAL THORACIC LUMBAR	Yes
HCPCS	L1001	CTLSO INFANT IMMOBILIZER	No
HCPCS	L1005	TENSION BASED SCOLIOSIS O	Yes
HCPCS	L1025	ADDITION TO CTLSO OR SCOL	Yes
HCPCS	L1040	ADDITION TO CTLSO OR SCOL	No
HCPCS	L1060	ADDITION TO CTLSO OR SCOL	No
HCPCS	L1070	ADDITION TO CTLSO OR SCOL	No
HCPCS	L1090	ADDITION TO CTLSO OR SCOL	No
HCPCS	L1120	ADDITION TO CTLSO, SCOLIO	No
HCPCS	L1210	ADDITION TO TLSO, (LOW PR	Yes
HCPCS	L1220	ADDITION TO TLSO, (LOW PR	No
HCPCS	L1240	ADDITION TO TLSO, (LOW PR	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L1250	ADDITION TO TLSO, (LOW PR	No
HCPCS	L1260	ADDITION TO TLSO, (LOW PR	No
HCPCS	L1270	ADDITION TO TLSO, (LOW PR	No
HCPCS	L1290	ADDITION TO TLSO, (LOW PR	No
HCPCS	L1300	OTHER SCOLIOSIS PROCEDURE	Yes
HCPCS	L1499	SPINAL ORTHOSIS, NOT OTHE	No
HCPCS	L1500	THORACIC HIP KNEE ANKLE O	Yes
HCPCS	L1520	THKAO, SWIVEL WALKER	Yes
HCPCS	L1652	HO BI THIGHCUFFS W SPRDR	No
HCPCS	L1680	HO, ABDUCTION CONTROL OF	Yes
HCPCS	L1686	HO, ABDUCTION CONTROL OF	No
HCPCS	L1800	KNEE ORTHOSIS (KO), ELAST	Yes
HCPCS	L1810	KO, ELASTIC WITH JOINTS	No
HCPCS	L1815	KO, ELASTIC OR OTHER ELAS	No
HCPCS	L1820	KO, ELASTIC WITH CONDYLAR	No
HCPCS	L1825	KO, ELASTIC KNEE CAP	No
HCPCS	L1830	KO, IMMOBILIZER, CANVAS L	No
HCPCS	L1832	KO, ADJUSTABLE KNEE JOINT	No
HCPCS	L1836	RIGID KO WO JOINTS	No
HCPCS	L1840	KO, DEROTATION, MEDIAL-LA	No
HCPCS	L1844	KO, SINGLE UPRIGHT, THIGH	Yes
HCPCS	L1846	KO, DOUBLE UPRIGHT, THIGH	No
HCPCS	L1850	KO, SWEDISH TYPE	No
HCPCS	L1860	KO, MODIFICATION OF SUPRA	Yes
HCPCS	L1900	ANKLE FOOT ORTHOSIS (AFO)	No
HCPCS	L1901	PREFAB ANKLE ORTHOSIS	No
HCPCS	L1902	AFO, ANKLE GAUNTLET, CUST	No
HCPCS	L1906	AFO, MULTILIGAMENTUS ANKL	No
HCPCS	L1907	AFO SUPRAMALLEOLAR CUSTOM	Yes
HCPCS	L1930	AFO, PLASTIC	No
HCPCS	L1932	AFO RIG ANT TIB PREFAB TC	Yes
HCPCS	L1940	AFO, MOLDED TO PATIENT MO	No
HCPCS	L1945	AFO, MOLDED TO PATIENT MO	No
HCPCS	L1950	AFO, SPIRAL, MOLDED TO PA	No
HCPCS	L1960	AFO, POSTERIOR SOLID ANKL	No
HCPCS	L1970	AFO, PLASTIC MOLDED TO PA	Yes
HCPCS	L1980	AFO, SINGLE UPRIGHT FREE	Yes
HCPCS	L1990	AFO, DOUBLE UPRIGHT FREE	No
HCPCS	L2000	KNEE ANKLE FOOT ORTHOSES	No
HCPCS	L2005	KAFO SNG/DBL MECHANICAL A	No
HCPCS	L2020	KAFO, DOUBLE UPRIGHT, FRE	Yes
HCPCS	L2030	KAFO, DOUBLE UPRIGHT, FRE	Yes
HCPCS	L2036	KAFO, FULL PLASTIC, DOUBL	Yes
HCPCS	L2037	KAFO, FULL PLASTIC, SINGL	No
HCPCS	L2038	KAFO, FULL PLASTIC, WITHO	Yes
HCPCS	L2050	HKAFO, TORSION CONTROL, B	Yes
HCPCS	L2108	AFO, FRACTURE ORTHOSIS, T	No
HCPCS	L2112	AFO, FRACTURE ORTHOSIS, T	No
HCPCS	L2114	AFO, FRACTURE ORTHOSIS, T	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L2116	AFO, FRACTURE ORTHOSIS, T	No
HCPCS	L2132	KAFO, FRACTURE ORTHOSIS,	No
HCPCS	L2134	KAFO, FRACTURE ORTHOSIS,	No
HCPCS	L2136	KAFO, FRACTURE ORTHOSIS,	No
HCPCS	L2180	ADDITION TO LOWER EXTREMI	No
HCPCS	L2182	ADDITION TO LOWER EXTREMI	No
HCPCS	L2200	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2210	ADDITION TO LOWER EXTREMI	No
HCPCS	L2220	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2230	ADDITION TO LOWER EXTREMI	No
HCPCS	L2232	ROCKER BOTTOM, CONTACT AF	No
HCPCS	L2240	ADDITION TO LOWER EXTREMI	No
HCPCS	L2250	ADDITION TO LOWER EXTREM	No
HCPCS	L2260	ADDITION TO LOWER EXTREM	No
HCPCS	L2265	ADDITION TO LOWER EXTREMI	No
HCPCS	L2270	ADDITION TO LOWER EXTREM	No
HCPCS	L2275	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2280	ADDITION TO LOWER EXTREM	No
HCPCS	L2300	ADDITION TO LOWER EXTREM	No
HCPCS	L2310	ADDITION TO LOWER EXTREM	No
HCPCS	L2320	ADDITION TO LOWER EXTREM	No
HCPCS	L2335	ADDITION TO LOWER EXTREM	Yes
HCPCS	L2340	ADDITION TO LOWER EXTREM	Yes
HCPCS	L2350	ADDITION TO LOWER EXTREM	Yes
HCPCS	L2360	ADDITION TO LOWER EXTREM	No
HCPCS	L2370	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2380	ADDITION TO LOWER EXTREM	No
HCPCS	L2385	ADDITION TO LOWER EXTREM	Yes
HCPCS	L2395	ADDITION TO LOWER EXTREM	No
HCPCS	L2397	ADDITION TO LOWER EXTREMI	No
HCPCS	L2405	ADDITION TO KNEE JOINT,	Yes
HCPCS	L2415	ADDITION TO KNEE JOINT, C	No
HCPCS	L2425	ADDITION TO KNEE JOINT, D	No
HCPCS	L2430	ADDITIONS TO LOWER EXTREM	No
HCPCS	L2526	ADDITION TO LOWER EXTREMI	No
HCPCS	L2530	ADDITION TO LOWER EXTREM	No
HCPCS	L2550	ADDITION TO LOWER EXTREM	Yes
HCPCS	L2600	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2610	ADDITION TO LOWER EXTREMI	No
HCPCS	L2620	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2624	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2627	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2640	ADDITION TO LOWER EXTREMI	No
HCPCS	L2680	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2755	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2760	ADDITION TO LOWER EXTREMI	No
HCPCS	L2768	ORTHO SIDEBAR DISCONNECT	No
HCPCS	L2770	ADDITION TO LOWER EXTREMI	No
HCPCS	L2780	ADDITION TO LOWER EXTREMI	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L2785	ADDITION TO LOWER EXTREMI	No
HCPCS	L2795	ADDITION TO LOWER EXTREMI	No
HCPCS	L2810	ADDITION TO LOWER EXTREMI	No
HCPCS	L2820	ADDITION TO LOWER EXTREMI	No
HCPCS	L2830	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L2999	LOWER EXTREMITY ORTHOSES,	No
HCPCS	L2999 LT	LOWER EXTREMITY ORTHOSES,	Yes
HCPCS	L2999 RT	LOWER EXTREMITY ORTHSES,	Yes
HCPCS	L3000	FOOT, INSERT, REMOVABLE,	No
HCPCS	L3001	FOOT, INSERT, REMOVABLE,	Yes
HCPCS	L3002	FOOT, INSERT, REMOVABLE,	No
HCPCS	L3010	FOOT, INSERT, REMOVABLE,	Yes
HCPCS	L3020	FOOT, INSERT, REMOVABLE,	No
HCPCS	L3030	FOOT, INSERT, REMOVABLE,	No
HCPCS	L3031	FOOT LAMIN/PREPREG COMPOS	Yes
HCPCS	L3050	FOOT, ARCH SUPPORT, REMOV	No
HCPCS	L3060	FOOT, ARCH SUPPORT, REMOV	No
HCPCS	L3090	FOOT, ARCH SUPPORT, NON-R	No
HCPCS	L3100	HALLUS-VALGUS NIGHT DYNAM	No
HCPCS	L3140	FOOT, ABDUCTION ROTATION	No
HCPCS	L3150	FOOT, ABDUCTION ROTATATIO	Yes
HCPCS	L3170	FOOT, PLASTIC HEEL STABIL	No
HCPCS	L3201	ORTHOPEDIC SHOE, OXFORD W	No
HCPCS	L3202	ORTHOPEDIC SHOE, OXFORD W	No
HCPCS	L3206	ORTHOPEDIC SHOE, HIGHTOP	No
HCPCS	L3207	ORTHOPEDIC SHOE, HIGHTOP	No
HCPCS	L3209	SURGICAL BOOT, EACH, CHIL	No
HCPCS	L3211	SURGICAL BOOT, EACH, JUNI	No
HCPCS	L3215	ORTHOPEDIC FOOTWEAR, LADI	No
HCPCS	L3216	ORTHOPEDIC FOOTWEAR, LADI	No
HCPCS	L3217	ORTHOPEDIC FOOTWEAR, LADI	No
HCPCS	L3219	ORTHOPEDIC FOOTWEAR, MENS	No
HCPCS	L3221	ORTHOPEDIC FOOTWEAR, MENS	No
HCPCS	L3222	ORTHOPEDIC FOOTWEAR, MENS	No
HCPCS	L3224	ORTHOPEDIC FOOTWEAR, WOMA	No
HCPCS	L3225	ORTHOPEDIC FOOTWEAR, MAN'	No
HCPCS	L3230	ORTHOPEDIC FOOTWEAR, CUST	Yes
HCPCS	L3250	ORTHOPEDIC FOOTWEAR, CUST	No
HCPCS	L3251	FOOT, SHOE MOLDED TO PATI	No
HCPCS	L3252	FOOT, SHOE MOLDED TO PATI	Yes
HCPCS	L3253	FOOT, MOLDED SHOE PLASTAZ	No
HCPCS	L3254	NON STANDARD SIZE OR WIDT	No
HCPCS	L3255	NON-STANDARD SIZE OR LENG	No
HCPCS	L3260	AMBULATORY SURGICAL BOOT,	Yes
HCPCS	L3265	PLASTAZOTE SANDAL, EACH	Yes
HCPCS	L3300	LIFT, ELEVATION, HEEL, TA	No
HCPCS	L3310	LIFT, ELEVATION, HEEL AND	No
HCPCS	L3320	LIFT, ELEVATION, HEEL AND	No
HCPCS	L3330	LIFT, ELEVATION, METAL EX	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L3332	LIFT, ELEVATION, INSIDE S	No
HCPCS	L3334	LIFT, ELEVATION, HEEL, PE	No
HCPCS	L3340	HEEL WEDGE, SACH	No
HCPCS	L3350	HEEL WEDGE	No
HCPCS	L3370	SOLE WEDGE, BETWEEN SOLE	No
HCPCS	L3390	OUTFLARE WEDGE	No
HCPCS	L3400	METATARSAL BAR WEDGE, ROC	No
HCPCS	L3410	METATARSAL BAR WEDGE, BET	No
HCPCS	L3420	FULL SOLE AND HEEL WEDGE,	No
HCPCS	L3430	HEEL, COUNTER, PLASTIC RE	No
HCPCS	L3455	HEEL, NEW LEATHER, STANDA	No
HCPCS	L3500	MISCELLANEOUS SHOE ADDITI	No
HCPCS	L3540	MISCELLANEOUS SHOE ADDITI	No
HCPCS	L3580	MISCELLANEOUS SHOE ADDITI	No
HCPCS	L3595	MISCELLANEOUS SHOE ADDITI	No
HCPCS	L3600	TRANSFER OF AN ORTHOSIS	No
HCPCS	L3610	TRANSFER OF AN ORTHOSIS	Yes
HCPCS	L3620	TRANSFER OF AN ORTHOSIS	No
HCPCS	L3630	TRANSFER OF AN ORTHOSIS	No
HCPCS	L3649	ORTHOPEDIC SHOE, MODIFICA	Yes
HCPCS	L3649 U1	ORTHOPEDIC SHOE ADDITION;	No
HCPCS	L3649 U2	ORTHOPEDIC SHOE ADDITION;	Yes
HCPCS	L3649 U3	ORTHOPEDIC SHOE ADDITION;	Yes
HCPCS	L3649 U4	ORTHOPEDIC SHOE ADDITION;	Yes
HCPCS	L3650	SHOULDER ORTHOSIS, (SO),	Yes
HCPCS	L3651	PREFAB SHOULDER ORTHOSIS	No
HCPCS	L3652	PREFAB DBL SHOULDER ORTHO	No
HCPCS	L3660	SO, FIGURE OF '8' DESIGN	Yes
HCPCS	L3670	SO, ACROMIO/CLAVICULAR (C	No
HCPCS	L3700	ELBOW ORTHOSES (EO), ELAS	No
HCPCS	L3701	PREFAB ELBOW ORTHOSIS	No
HCPCS	L3720	EO, DOUBLE UPRIGHT WITH F	Yes
HCPCS	L3762	RIGID EO WO JOINTS	No
HCPCS	L3806	WHFO W/JOINT(S) CUSTOM FA	No
HCPCS	L3807	WHFO,NO JOINT, PREFABRICA	No
HCPCS	L3808	WHFO, RIGID W/O JOINTS	No
HCPCS	L3900	WHFO, DYNAMIC FLEXOR HING	No
HCPCS	L3906	WHFO, WRIST GAUNTLET, MOL	Yes
HCPCS	L3908	WHO, WRIST EXTENSION CONT	No
HCPCS	L3909	PREFAB WRIST ORTHOSIS	No
HCPCS	L3915	WHO W NONTOR JNT(S) PREFA	No
HCPCS	L3923	HFO, NO JOINT, PREFABRICA	No
HCPCS	L3925	FO PIP/DIP WITH JOINT/SPR	No
HCPCS	L3927	FO PIP/DIP W/O JOINT/SPRI	No
HCPCS	L3929	HFO NONTORSION JOINT, PRE	No
HCPCS	L3931	WHFO NONTORSION JOINT PRE	No
HCPCS	L3956	ADDITION OF JOINT TO UPPE	No
HCPCS	L3960	SHOULDER ELBOW WRIST HAND	No
HCPCS	L3964	SEO, MOBILE ARM SUPPORT A	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L3968	SEO, MOBILE ARM SUPPORT A	Yes
DME RENTAL	L3968 RR	SEO, MOBILE ARM SUPPORT A	Yes
HCPCS	L3969	SEO, MOBILE ARM SUPPORT,	No
HCPCS	L3980	UPPER EXTREMITY FRACTURE	No
HCPCS	L3982	UPPER EXTREMITY FRACTURE	No
HCPCS	L3999	UPPER LIMB ORTHOSIS, NOT	Yes
HCPCS	L4002	REPLACE STRAP, ANY ORTHOS	No
HCPCS	L4040	REPLACE MOLDED THIGH LACE	No
HCPCS	L4070	REPLACE PROXIMAL AND DIST	Yes
HCPCS	L4090	REPLACE METAL BANDS KAFO-	No
HCPCS	L4100	REPLACE LEATHER CUFF KAFO	No
HCPCS	L4110	REPLACE LEATHER CUFF KAFO	No
HCPCS	L4205	REPAIR OF ORTHOTIC DEVICE	No
HCPCS	L4210	REPAIR OF ORTHOTIC DEVICE	Yes
HCPCS	L4350	PNEUMATIC ANKLE CONTROL S	No
HCPCS	L4360	PNEUMATI WALKING BOOT PRE	Yes
HCPCS	L4386	NON-PNEUMATIC WALKING SPL	No
HCPCS	L4392	REPLACE SOFT INTERFACE MA	No
HCPCS	L4394	REPLACE SOFT INTERFACE MA	No
HCPCS	L4396	ANKLE CONTRACTURE SPLINT	No
HCPCS	L4398	FOOT DROP SPINT, RECUMBEN	No
HCPCS	L5000	PARTIAL FOOT, SHOE INSERT	No
HCPCS	L5010	PARTIAL FOOT, MOLDED SOCK	No
HCPCS	L5020	PARTIAL FOOT, MOLDED SOCK	Yes
HCPCS	L5050	ANKLE, SYMES, MOLDED SOCK	No
HCPCS	L5100	BELOW KNEE, MOLDED SOCKET	Yes
HCPCS	L5105	BELOW KNEE, PLASTIC SOCKE	Yes
HCPCS	L5150	KNEE DISARTICULATION (OR	Yes
HCPCS	L5200	ABOVE KNEE, MOLDED SOCKET	Yes
HCPCS	L5210	ABOVE KNEE, SHORT PROSTHE	Yes
HCPCS	L5301	BK MOLD SOCKET SACH FT EN	Yes
HCPCS	L5311	KNEE DISART, SACH FT, END	Yes
HCPCS	L5321	AK OPEN END SACH	Yes
HCPCS	L5331	HIP DISART CANADIAN SACH	Yes
HCPCS	L5341	HEMIPELVECTOMY CANADIAN S	Yes
HCPCS	L5505	INITIAL, ABOVE KNEE - KNE	Yes
HCPCS	L5510	PREPARATORY, BELOW KNEE	Yes
HCPCS	L5520	PREPARATORY, BELOW KNEE "	Yes
HCPCS	L5530	PREPARATORY, BELOW KNEE "	Yes
HCPCS	L5540	PREPARATORY, BELOW KNEE "	Yes
HCPCS	L5560	PREPARATORY, ABOVE KNEE-	Yes
HCPCS	L5585	PREPARATORY, ABOVE KNEE K	Yes
HCPCS	L5590	PREPARATORY, ABOVE KNEE K	Yes
HCPCS	L5611	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5613	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5614	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5617	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5618	ADDITION TO LOWER EXTREMI	No
HCPCS	L5620	ADDITION TO LOWER EXTREMI	Yes

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L5622	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5624	ADDITION TO LOWER EXTREMI	No
HCPCS	L5626	ADDITION TO LOWER EXTREMI	No
HCPCS	L5628	ADDITION TO LOWER EXTREMI	No
HCPCS	L5629	ADDITION TO LOWER EXTREMI	No
HCPCS	L5630	ADDITION TO LOWER EXTREMI	No
HCPCS	L5631	ADDITION TO LOWER EXTREMI	Yes
HCPCS	L5632	ADDITION TO LOWER EXTREMI	No
HCPCS	L5634	ADDITION TO LOWER EXTREMI	No
HCPCS	L5636	ADDITION TO LOWER EXTREM	No
HCPCS	L5637	ADDITION TO LOWER EXTREMI	No
HCPCS	L5643	ADDITION TO LOWER EXTREM	No
HCPCS	L5645	ADDITION TO LOWER EXTREM	No
HCPCS	L5647	ADDITION TO LOWER EXTREM	Yes
HCPCS	L5649	ADDITION TO LOWER EXTREM	Yes
HCPCS	L5650	ADDITIONS TO LOWER EXTREM	No
HCPCS	L5651	ADDITION TO LOWER EXTREM	No
HCPCS	L5652	ADDITION TO LOWER EXTREM	No
HCPCS	L5654	ADDITION TO LOWER EXTREM	No
HCPCS	L5655	ADDITION TO LOWER EXTREM	No
HCPCS	L5656	ADDITION TO LOWER EXTREM	No
HCPCS	L5658	ADDITION TO LOWER EXTREM	No
HCPCS	L5661	ADDITION TO LOWER EXTREM	Yes
HCPCS	L5665	ADDITION TO LOWER EXTREM	No
HCPCS	L5666	ADDITION TO LOWER EXTREM	No
HCPCS	L5668	ADDITION TO LOWER EXTREM	No
HCPCS	L5670	ADDITION TO LOWER EXTREM	No
HCPCS	L5671	BK/AK LOCKING MECHANISM	No
HCPCS	L5672	ADDITION TO LOWER EXTREM	No
HCPCS	L5673	SOCKET INSERT W LOCK MECH	No
HCPCS	L5676	ADDITIONS TO LOWER EXTREM	No
HCPCS	L5679	SOCKET INSERT W/O LOCK ME	No
HCPCS	L5681	INTL CUSTM CONG/LATYP INS	No
HCPCS	L5683	INITIAL CUSTOM SOCKET INS	No
HCPCS	L5684	ADDITION TO LOWER EXTREM	No
HCPCS	L5685	BELOW KNEE SUS/SEAL SLEEV	No
HCPCS	L5686	ADDITION TO LOWER EXTREM	No
HCPCS	L5688	ADDITION TO LOWER EXTREM	Yes
HCPCS	L5690	ADDITION TO LOWER EXTREM	No
HCPCS	L5692	ADDITION TO LOWER EXTREM	No
HCPCS	L5694	ADDITION TO LOWER EXTREM	No
HCPCS	L5695	ADDITION TO LOWER EXTREMI	No
HCPCS	L5697	ADDITION TO LOWER EXTREM	No
HCPCS	L5698	ADDITION TO LOWER EXTREM	No
HCPCS	L5699	ALL LOWER EXTREMITY PROST	No
HCPCS	L5700	REPALCEMENT SKT B/K, MOLD	No
HCPCS	L5701	REPLACEMENT, SOCKET, ABOV	Yes
HCPCS	L5702	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5704	CUSTOM SHAPED PROTECTIVE	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L5705	CUSTOM SHAPED PROTECTIVE	Yes
HCPCS	L5706	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5707	REPLACEMENT, CUSTOM SHAPE	No
HCPCS	L5710	ADDITION, EXOSKELETAL KN	No
HCPCS	L5711	ADDITIONS EXOSKELETAL KNE	Yes
HCPCS	L5712	ADDITION, EXOSKELETAL KN	No
HCPCS	L5714	ADDITION, EXOSKELETAL KN	No
HCPCS	L5716	ADDITION, EXOSKELETAL KN	No
HCPCS	L5718	ADDITION, EXOSKELETAL KN	No
HCPCS	L5722	ADDITION, EXOSKELETAL KN	No
HCPCS	L5724	ADDITION, EXOSKELETAL KN	No
HCPCS	L5726	ADDITION, EXOSKELETAL KN	Yes
HCPCS	L5728	ADDITION, EXOSKELETAL KN	Yes
HCPCS	L5781	LOWER LIMB PROS VACUUM PU	Yes
HCPCS	L5782	HD LOW LIMB PROS VACUUM P	Yes
HCPCS	L5785	ADDITION, EXOSKELETAL SYS	No
HCPCS	L5790	ADDITION, EXOSKELETAL SYS	Yes
HCPCS	L5811	ADDITION, ENDOSKELETAL KN	No
HCPCS	L5812	ADDITION, ENDOSKELETAL KN	No
HCPCS	L5814	ADDITION, ENDOSKELETAL KN	Yes
HCPCS	L5816	ADDITION, ENDOSKELETAL KN	No
HCPCS	L5818	ADDITION, ENDOSKELETAL KN	No
HCPCS	L5822	ADDITION, ENDOSKELETAL KN	No
HCPCS	L5824	ADDITION, ENDOSKELETAL KN	Yes
HCPCS	L5828	ADDITION, ENDOSKELETAL KN	Yes
HCPCS	L5840	ADDITION, ENDOSKELETAL KN	Yes
HCPCS	L5845	ADDITION, ENDOSKELETAL, K	Yes
HCPCS	L5848	KNEE-SHIN SYS HYDRAUL STA	No
HCPCS	L5850	ADDITION, ENDOSKELETAL S	Yes
HCPCS	L5855	ADDITION, ENDOSKELETAL SY	No
HCPCS	L5856	ELEC KNEE-SHIN SWING/STAN	No
HCPCS	L5857	ELEC KNEE-SHIN SWING ONLY	Yes
HCPCS	L5910	ADDITION, ENDOSKELETAL S	Yes
HCPCS	L5920	ADDITION, ENDOSKELETAL SY	No
HCPCS	L5930	ADDITION, ENDOSKELETAL SY	No
HCPCS	L5940	ADDITION, ENDOSKELETAL S	No
HCPCS	L5950	ADDITION, ENDOSKELETAL S	Yes
HCPCS	L5960	ADDITION, ENDOSKELETAL S	Yes
HCPCS	L5962	ADDITION, ENDOSKELETAL SY	No
HCPCS	L5964	ADDITION, ENDOSKELETAL SY	Yes
HCPCS	L5970	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5972	ALL LOWER EXTREMITY PROST	No
HCPCS	L5974	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5976	ALL LOWER EXTREMITY PROST	No
HCPCS	L5979	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5980	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5981	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5982	ALL EXOSKELETAL LOWER EXT	Yes
HCPCS	L5984	ALL ENDOSKELETAL LOWER EX	Yes

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L5985	ALL ENDOSKELETAL LOWER EX	No
HCPCS	L5986	ALL LOWER EXTREMITY PROST	No
HCPCS	L5987	ALL LOWER EXTREMITY PROST	Yes
HCPCS	L5988	VERTICAL SHOCK REDUCING P	Yes
HCPCS	L5990	USER ADJUSTABLE HEEL HEIG	Yes
HCPCS	L5999	LOWER EXTREMITY PROSTHESI	Yes
HCPCS	L6020	PARTIAL HAND, ROBIN-AIDS,	No
HCPCS	L6025	PART HAND DISART MYOELECT	Yes
HCPCS	L6100	BELOW ELBOW, MOLDED SOCKE	Yes
HCPCS	L6110	BELOW ELBOW, MOLDED SOCKE	Yes
HCPCS	L6120	BELOW ELBOW, MOLDED DOUBL	Yes
HCPCS	L6130	BELOW ELBOW, MOLDED DOUBL	Yes
HCPCS	L6200	ELBOW DISARTICULATION, MO	Yes
HCPCS	L6250	ABOVE ELBOW, MOLDED DOUBL	Yes
HCPCS	L6300	SHOULDER DISARTICULATION,	Yes
HCPCS	L6600	UPPER EXTREMITY ADDITIONS	Yes
HCPCS	L6610	UPPER EXTREMITY ADDITIONS	No
HCPCS	L6611	ADDITIONAL SWITCH, EXT PO	No
HCPCS	L6615	UPPER EXTREMITY ADDITION,	No
HCPCS	L6620	UPPER EXTREMITY ADDITION,	No
HCPCS	L6623	UPPER EXTREMITY ADDITION,	No
HCPCS	L6624	FLEX/EXT/ROTATION WRIST U	No
HCPCS	L6625	UPPER EXTREMITY ADDITION,	No
HCPCS	L6629	UPPER EXTREMITY ADDITION,	Yes
HCPCS	L6630	UPPER EXTREMITY ADDITION,	No
HCPCS	L6632	UPPER EXTREMITY ADDITION,	No
HCPCS	L6638	ELEC LOCK ON MANUAL PW EL	Yes
HCPCS	L6639	HEAVY DUTY ELBOW FEATURE	No
HCPCS	L6646	MULTIPO LOCKING SHOULDER	Yes
HCPCS	L6647	SHOULDER LOCK ACTUATOR	Yes
HCPCS	L6648	EXT PWRD SHLDER LOCK/UNLO	Yes
HCPCS	L6655	UPPER EXTREMITY ADDITION,	No
HCPCS	L6660	UPPER EXTREMITY ADDITION,	No
HCPCS	L6665	UPPER EXTREMITY ADDITION,	No
HCPCS	L6672	UPPER EXTREMITY ADDITION,	No
HCPCS	L6675	UPPER EXTREMITY ADDITION,	No
HCPCS	L6676	UPPER EXTREMITY ADDITION,	No
HCPCS	L6680	UPPER EXTREMITY ADDITION,	No
HCPCS	L6684	UPPER EXTREMITY ADDITION,	Yes
HCPCS	L6686	UPPER EXTREMITY ADDITION,	No
HCPCS	L6689	UPPER EXTREMITY ADDITION,	Yes
HCPCS	L6691	UPPER EXTREMITY ADDITION,	No
HCPCS	L6694	ELBOW SOCKET INS USE W/LO	Yes
HCPCS	L6695	ELBOW SOCKET INS USE W/O	No
HCPCS	L6696	CUS ELBO SKT IN FOR CON/A	Yes
HCPCS	L6697	CUS ELBO SKT IN NOT CON/A	Yes
HCPCS	L6698	BELOW/ABOVE ELBOW LOCK ME	Yes
HCPCS	L6703	TERM DEV, PASSIVE HAND MI	Yes
HCPCS	L6704	TERM DEV, SPORT/REC/WORK	No

DME/POS Procedure Codes
Included in the DHCF Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L6706	TERM DEV MECH HOOK VOL OP	No
HCPCS	L6707	TERM DEV MECH HOOK VOL CL	Yes
HCPCS	L6708	TERM DEV MECH HAND VOL OP	No
HCPCS	L6709	TERM DEV MECH HAND VOL CL	Yes
HCPCS	L6711	PED TERM DEV, HOOK, VOL O	Yes
HCPCS	L6712	PED TERM DEV, HOOK, VOL C	Yes
HCPCS	L6713	PED TERM DEV, HAND, VOL O	No
HCPCS	L6714	PED TERM DEV, HAND, VOL C	Yes
HCPCS	L6721	HOOK/HAND, HVY DTY, VOL O	Yes
HCPCS	L6722	HOOK/HAND, HVY DTY, VOL C	Yes
HCPCS	L6810	TERMINAL DEVICE, PINCHER	Yes
HCPCS	L6881	AUTOGRASP FEATURE UL TERM	Yes
HCPCS	L6882	MICROPROCESSOR CONTROL UP	Yes
HCPCS	L6890	TERMINAL DEVICE, GLOVE FO	No
HCPCS	L6890 U1	TERMINAL DEVICE, GLOVE FO	Yes
HCPCS	L6895	TERMINAL DEVICE, GLOVE FO	Yes
HCPCS	L6900	HAND RESTORATION (CASTS,	Yes
HCPCS	L6905	HAND RESTORATION (CASTS,	Yes
HCPCS	L6910	HAND RESTORATION (CASTS,	Yes
HCPCS	L6915	HAND RESTORATION (SHADING	No
HCPCS	L6935	BELOW ELBOW, EXTERNAL POW	Yes
HCPCS	L7007	ADULT ELECTRIC HAND	Yes
HCPCS	L7008	PEDIATRIC ELECTRIC HAND	Yes
HCPCS	L7009	ADULT ELECTRIC HOOK	Yes
HCPCS	L7181	ELECTRONIC ELBO SIMULTANE	Yes
HCPCS	L7260	ELECTRONIC WRIST ROTATOR,	Yes
HCPCS	L7272	ANALOGUE CONTROL, UNB OR	Yes
HCPCS	L7274	PROPORTIONAL CONTROL, 6 1	Yes
HCPCS	L7367	REPLACEMNT LITHIUM IONBAT	Yes
HCPCS	L7368	LITHIUM ION BATTERY CHARG	No
HCPCS	L7499	UPPER EXTREMITY PROSTHESI	No
HCPCS	L7500	REPAIR OF PROSTHETIC DEVI	No
HCPCS	L7510	REPAIR OF PROSTHETIC DEVI	Yes
HCPCS	L7520	PROTHESIS DEVICE REPAIR,	Yes
HCPCS	L8000	BREAST PROSTHESIS, MASTEC	Yes
HCPCS	L8001	BREAST PROSTHESIS BRA & F	No
HCPCS	L8010	BREAST PROSTHESIS, MASTEC	No
HCPCS	L8020	BREAST PROSTHESIS, MASTEC	No
HCPCS	L8030	BREAST PROSTHESIS, SILICO	No
HCPCS	L8035	CUSTOM BREAST PROSTHESIS	No
HCPCS	L8300	TRUSS, SINGLE WITH STANDA	No
HCPCS	L8400	PROSTHETIC SHEATH, BELOW	No
HCPCS	L8410	PROSTHETIC SHEATH, ABOVE	No
HCPCS	L8417	PROSTHETIC SHEATH/SOCK, I	No
HCPCS	L8420	PROSTHETIC SOCK, WOOL, BE	No
HCPCS	L8430	PROSTHETIC SOCK, WOOL, AB	No
HCPCS	L8435	PROSTHETIC SOCK, WOOL, UP	No
HCPCS	L8440	PROSTHETIC SHRINKER, BELO	No
HCPCS	L8460	PROSTHETIC SHRINKER, ABOV	No

DME/POS Procedure Codes
Included in the DHC Fee Schedule

Type of Code	Procedure Code	Description	Is Prior Authorization Required?
HCPCS	L8465	PROSTHETIC SHRINKER, UPPE	Yes
HCPCS	L8470	STUMP SOCK, SINGLE PLY, F	No
HCPCS	L8480	STUMP SOCK, SINGLE PLY, F	No
HCPCS	L8485	STUMP SOCK, SINGLE PLY, F	No
HCPCS	L8499	UNLISTED PROCEDURE FOR MI	Yes
HCPCS	L8500	ARTIFICIAL LARYNX, ANY TY	No
HCPCS	L8501	TRACHEOSTOMY SPEAKING VAL	No
HCPCS	L8507	TRACH-ESOPH VOICE PROS PT	No
HCPCS	L8509	TRACH-ESOPH VOICE PROS MD	No
HCPCS	L8510	VOICE AMPLIFIER	No
HCPCS	L8515	GEL CAP APP DEVICE FOR TR	Yes
HCPCS	L8600	IMPLANTABLE BREAST PROSTH	No
HCPCS	L8603	COLLAGEN IMPLANT, URINARY	No
HCPCS	L8604	DEXTRANOMER/HYALURONIC AC	No
HCPCS	L8609	ARTIFICIAL CORNEA	Yes
HCPCS	L8610	OCULAR IMPLANT	No
HCPCS	L8612	AQUEOUS SHUNT	No
HCPCS	L8613	OSSICULA IMPLANT	No
HCPCS	L8614	COCHLEAR DEVICE/SYSTEM	Yes
HCPCS	L8615	HEADSET/HEADPIECE FOR USE	No
HCPCS	L8616	MICROPHONE FOR USE WITH C	Yes
HCPCS	L8617	TRANSMITTING COIL FOR USE	Yes
HCPCS	L8618	TRANSMITTER CABLE FOR USE	Yes
HCPCS	L8619	COCHLEAR IMPLANT EXTERNAL	Yes
HCPCS	L8622	ALKALINE BATTERY FOR USE	Yes
HCPCS	L8630	METACARPOPHALANGEAL JOINT	Yes
HCPCS	L8641	METATARSAL JOINT IMPLANT	No
HCPCS	L8642	HALLUX IMPLANT	No
HCPCS	L8658	INTERPHALANGEAL JOINT IMP	No
HCPCS	L8670	VASCULAR GRAFT MATERIAL,	No
HCPCS	L8680	IMPLANTABLE NEUROSTIMULAT	No
HCPCS	L8682	IMPLT NEUROSTIM RADIOFQ R	No
HCPCS	L8683	RADIOFQ TRSMTR FOR IMPLT	Yes
HCPCS	L8690	AUD OSSEO DEV, INT/EXT CO	Yes
HCPCS	L8691	AUD OSSEO DEV EXT SND PRO	Yes
HCPCS	L8695	EXTERNAL RECHARG SYS EXTE	Yes
HCPCS	L8699	PROSTHETIC IMPLANT, NOT O	No