

**Medicare-Medicaid DME Services that require Prior Authorization List formerly called DME REFERRAL REQUIREMENT LIST**

This list is inclusive of all possible HCPC codes as identified by HAP. In an unlikely event that a HCPC code is not on the list it will require HAP review and an authorization number.

Vendors must be contracted for the member's plan in order for the Services that require Prior Authorization rules to apply. HFHS ASO members seeking service outside of Henry Ford Health Products will continue to require prior approval from HAP's Referral management team. Contact the assigned TPA, as indicated on the member's card, for appropriate authorization requirements.

To determine if a procedure is a covered benefit and meets criteria, providers must utilize HAP's online Member Eligibility Application (MEA) and the Benefit Administration Manual (BAM). It is imperative that you verify benefit coverage prior to rendering service, as failure to do so may result in denial of payment and Members must be held harmless.

**HAP's Benefit Coverage Policies and Procedure Reference Lists apply to all HAP lines of business offered through any HAP affiliate including insured and self-funded plans except for the following: These Benefit Coverage Policies and Procedure Reference Lists do not apply to lines of business offered through HAP affiliates ASR and Midwest Health Plan.**

HAP continuously reviews and monitors all codes to determine if any potential changes to coverage would affect current lists. The DME Services that require Prior Authorization list will be reviewed and updated on a monthly basis. Always check the list on the HAP website, as it is the most current list and printed copies may be incomplete or outdated. If you would like to suggest additional services to be added to the DME Services that require Prior Authorization list, please contact us and we will take your request into consideration for the next scheduled revision. Any suggestions or questions should be directed in writing to:

Sr Project Consultant, T14 4th floor  
Health Alliance Plan  
2850 West Grand Boulevard  
Detroit, MI 48202

or email

[lmijat@hap.org](mailto:lmijat@hap.org)

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Providers shall not modify, translate, decompile, disclose, create nor attempt to create any derivative work in the DME Services that require Prior Authorization list.

**Medicare Comp (Wrap) Members for outpatient services no longer require an authorization and pass through as long as the Member is IN PLAN for ODS (Open delivery system) and In Network for IDS (Integrated deliver system).**

<b>Key:</b>	
*	Specific coverage criteria applies. Refer to BAM policy for coverage criteria.

<b>Product Line Key:</b>	
<b>MMP</b>	Medicare-Medicaid Plan

<b>DME Services that require Prior Authorization List</b>						
<b>Code</b>	<b>Equip/Supply</b>	<b>Description</b>	<b>Authorization Required</b>	<b>Key</b>	<b>Rider Requirement</b>	<b>Product Lines</b>
A4206	Supply	SYRINGE WITH NEEDLE, STERILE, 1 CC OR LESS, EACH	No			MMP
A4207	Supply	SYRINGE WITH NEEDLE, STERILE 2CC, EACH	Not Covered			MMP
A4208	Supply	SYRINGE WITH NEEDLE, STERILE 3CC, EACH	Not Covered			MMP
A4209	Supply	SYRINGE WITH NEEDLE, STERILE 5CC OR GREATER, EACH	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4211	Supply	SUPPLIES FOR SELF-ADMINISTERED INJECTIONS	Not Covered			MMP
A4212	Supply	NON-CORING NEEDLE OR STYLET WITH OR WITHOUT CATHETER	No			MMP
A4213	Supply	SYRINGE, STERILE, 20 CC OR GREATER, EACH	Not Covered			MMP
A4215	Supply	NEEDLE ONLY, STERILE, ANY SIZE, EACH	Not Covered			MMP
A4216	Supply	STERILE WATER, SALINE AND/OR DEXTROSE (DILUENT), 10 ML	Yes			MMP
A4217	Supply	STERILE WATER/SALINE, 500 ML	Yes			MMP
A4218	Supply	STERILE SALINE OR WATER, METERED DOSE DISPENSER, 10 ML	No			MMP
A4220	Supply	REFILL KIT FOR IMPLANTABLE INFUSION PUMP	Not Covered			MMP
A4221	Supply	SUPPLIES FOR MAINTENANCE OF DRUG INFUSION CATHETER, PER WEEK (LIST DRUG SEPARATELY)	Not Covered			MMP
A4221	Supply	SUPPLIES FOR MAINTENANCE OF DRUG INFUSION CATHETER, PER WEEK (LIST DRUG SEPARATELY)	Yes			MMP
A4222	Supply	INFUSION SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)	Not Covered			MMP
A4222	Supply	INFUSION SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)	Yes			MMP
A4223	Supply	INFUSION SUPPLIES NOT USED WITH EXTERNAL INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)	Not Covered			MMP
A4230	Supply	INFUSION SET FOR EXTERNAL INSULIN PUMP, NON NEEDLE CANNULA TYPE	No			MMP
A4231	Supply	INFUSION SET FOR EXTERNAL INSULIN PUMP, NEEDLE TYPE	No			MMP
A4232	Supply	SYRINGE WITH NEEDLE FOR EXTERNAL INSULIN PUMP, STERILE, 3CC	No			MMP
A4233	Supply	REPLACEMENT BATTERY, ALKALINE (OTHER THAN J CELL), FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	Yes			MMP
A4234	Supply	REPLACEMENT BATTERY, ALKALINE, J CELL, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	Yes			MMP
A4235	Supply	REPLACEMENT BATTERY, LITHIUM, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	Yes			MMP
A4236	Supply	REPLACEMENT BATTERY, SILVER OXIDE, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	Yes			MMP
A4244	Supply	ALCOHOL OR PEROXIDE, PER PINT	Not Covered			MMP
A4245	Supply	ALCOHOL WIPES, PER BOX	Not Covered			MMP
A4246	Supply	BETADINE OR PHISOHEX SOLUTION, PER PINT	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4247	Supply	BETADINE OR IODINE SWABS/WIPES, PER BOX	Not Covered			MMP
A4248	Supply	CHLORHEXIDINE CONTAINING ANTISEPTIC, 1 ML	No			MMP
A4250	Supply	URINE TEST OR REAGENT STRIPS OR TABLETS (100 TABLETS OR STRIPS)	No			MMP
A4252	Supply	BLOOD KETONE TEST OR REAGENT STRIP, EACH	No			MMP
A4253	Supply	BLOOD GLUCOSE TEST OR REAGENT STRIPS FOR HOME BLOOD GLUCOSE MONITOR, PER 50 STRIPS	Yes			MMP
A4255	Supply	PLATFORMS FOR HOME BLOOD GLUCOSE MONITOR, 50 PER BOX	Yes			MMP
A4256	Supply	NORMAL, LOW AND HIGH CALIBRATOR SOLUTION / CHIPS	Yes			MMP
A4257	Supply	REPLACEMENT LENS SHIELD CARTRIDGE FOR USE WITH LASER SKIN PIERCING DEVICE, EACH	Yes			MMP
A4258	Supply	SPRING-POWERED DEVICE FOR LANCET, EACH	Yes			MMP
A4259	Supply	LANCETS, PER BOX OF 100	Yes			MMP
A4265	Supply	PARAFFIN, PER POUND	Yes			MMP
A4267	Supply	CONTRACEPTIVE SUPPLY, CONDOM, MALE, EACH	Not Covered			MMP
A4280	Supply	ADHESIVE SKIN SUPPORT ATTACHMENT FOR USE WITH EXTERNAL BREAST PROSTHESIS, EACH	Yes			MMP
A4281	Supply	TUBING FOR BREAST PUMP, REPLACEMENT	No			MMP
A4282	Supply	ADAPTER FOR BREAST PUMP, REPLACEMENT	No			MMP
A4283	Supply	CAP FOR BREAST PUMP BOTTLE, REPLACEMENT	No			MMP
A4284	Supply	BREAST SHIELD AND SPLASH PROTECTOR FOR USE WITH BREAST PUMP, REPLACEMENT	No			MMP
A4285	Supply	POLYCARBONATE BOTTLE FOR USE WITH BREAST PUMP, REPLACEMENT	No			MMP
A4286	Supply	LOCKING RING FOR BREAST PUMP, REPLACEMENT	No			MMP
A4305	Supply	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 50 ML OR GREATER PER HOUR	Not Covered			MMP
A4306	Supply	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 5 ML OR LESS PER HOUR	Not Covered			MMP
A4310	Supply	INSERTION TRAY WITHOUT DRAINAGE BAG AND WITHOUT CATHETER (ACCESSORIES ONLY)	Yes			MMP
A4311	Supply	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER OR HYDROPHILIC, ETC.)	Yes			MMP
A4312	Supply	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, ALL SILICONE	Yes			MMP
A4313	Supply	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4314	Supply	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER OR HYDROPHILIC, ETC.)	Yes			MMP
A4315	Supply	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, ALL SILICONE	Yes			MMP
A4316	Supply	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	Yes			MMP
A4320	Supply	IRRIGATION TRAY WITH BULB OR PISTON SYRINGE, ANY PURPOSE	Yes			MMP
A4321	Supply	THERAPEUTIC AGENT FOR URINARY CATHETER IRRIGATION	Not Covered			MMP
A4322	Supply	IRRIGATION SYRINGE, BULB OR PISTON, EACH	Yes			MMP
A4326	Supply	MALE EXTERNAL CATHETER SPECIALTY TYPE WITH INTEGRAL COLLECTION CHAMBER, EACH	Yes			MMP
A4327	Supply	FEMALE EXTERNAL URINARY COLLECTION DEVICE; MEATAL CUP, EACH	Yes			MMP
A4328	Supply	FEMALE EXTERNAL URINARY COLLECTION DEVICE; POUCH, EACH	Yes			MMP
A4330	Supply	PERIANAL FECAL COLLECTION POUCH WITH ADHESIVE, EACH	Yes			MMP
A4331	Supply	EXTENSION DRAINAGE TUBING, ANY TYPE, ANY LENGTH, WITH CONNECTOR/ADAPTOR, FOR USE WITH URINARY LEG BAG OR UROSTOMY POUCH, EACH	Yes			MMP
A4332	Supply	LUBRICANT, INDIVIDUAL STERILE PACKET, EACH	Yes			MMP
A4333	Supply	URINARY CATHETER ANCHORING DEVICE, ADHESIVE SKIN ATTACHMENT, EACH	Yes			MMP
A4334	Supply	URINARY CATHETER ANCHORING DEVICE, LEG STRAP, EACH	Yes			MMP
A4335	Supply	INCONTINENCE SUPPLY; MISCELLANEOUS	Yes			MMP
A4336	Supply	INCONTINENCE SUPPLY, URETHRAL INSERT, ANY TYPE, EACH	Yes			MMP
A4338	Supply	INDWELLING CATHETER; FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH	Yes			MMP
A4340	Supply	INDWELLING CATHETER; SPECIALTY TYPE, EG; COUDE, MUSHROOM, WING, ETC.), EACH	Yes			MMP
A4344	Supply	INDWELLING CATHETER, FOLEY TYPE,	Yes			MMP
A4346	Supply	INDWELLING CATHETER; FOLEY TYPE, THREE WAY FOR CONTINUOUS IRRIGATION, EACH DEVICE; PER DOZEN	Yes			MMP
A4349	Supply	MALE EXTERNAL CATHETER, WITH OR WITHOUT ADHESIVE, DISPOSABLE, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4351	Supply	INTERMITTENT URINARY CATHETER; STRAIGHT TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.), EACH	Yes			MMP
A4352	Supply	INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP, WITH OR WITHOUT COATING (TEFLON, SILICONE, SILICONE ELASTOMERIC, OR HYDROPHILIC, ETC.), EACH	Yes			MMP
A4353	Supply	INTERMITTENT URINARY CATHETER, WITH INSERTION SUPPLIES	Yes			MMP
A4354	Supply	INSERTION TRAY WITH DRAINAGE BAG BUT WITHOUT CATHETER	Yes			MMP
A4355	Supply	IRRIGATION TUBING SET FOR CONTINUOUS BLADDER IRRIGATION THROUGH A THREE-WAY INDWELLING FOLEY CATHETER, EACH	Yes			MMP
A4356	Supply	EXTERNAL URETHRAL CLAMP OR COMPRESSION DEVICE (NOT TO BE USED FOR CATHETER CLAMP), EACH	Yes			MMP
A4357	Supply	BEDSIDE DRAINAGE BAG, DAY OR NIGHT, WITH OR WITHOUT ANTI-REFLUX DEVICE, WITH OR WITHOUT TUBE, EACH	Yes			MMP
A4358	Supply	URINARY DRAINAGE BAG, LEG OR ABDOMEN, VINYL, WITH OR WITHOUT TUBE, WITH STRAPS, EACH	Yes			MMP
A4360	Supply	DISPOSABLE EXTERNAL URETHRAL CLAMP OR COMPRESSION DEVICE, WITH PAD AND/OR POUCH, EACH	Yes			MMP
A4361	Supply	OSTOMY FACEPLATE, EACH	Yes			MMP
A4362	Supply	SKIN BARRIER; SOLID, 4 X 4 OR EQUIVALENT; EACH	Yes			MMP
A4363	Supply	OSTOMY CLAMP, ANY TYPE, REPLACEMENT ONLY, EACH	Yes			MMP
A4364	Supply	ADHESIVE, LIQUID OR EQUAL, ANY TYPE, PER OZ	Yes			MMP
A4366	Supply	OSTOMY VENT, ANY TYPE, EACH	Yes			MMP
A4367	Supply	OSTOMY BELT, EACH	Yes			MMP
A4368	Supply	OSTOMY FILTER, ANY TYPE, EACH	Yes			MMP
A4369	Supply	OSTOMY SKIN BARRIER, LIQUID (SPRAY, BRUSH, ETC), PER OZ	Yes			MMP
A4371	Supply	OSTOMY SKIN BARRIER, POWDER, PER OZ	Yes			MMP
A4372	Supply	OSTOMY SKIN BARRIER, SOLID 4X4 OR EQUIVALENT, STANDARD WEAR, WITH BUILT-IN CONVEXITY, EACH	Yes			MMP
A4373	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDIAN), WITH BUILT-IN CONVEXITY, ANY SIZE, EACH	Yes			MMP
A4375	Supply	OSTOMY POUCH, DRAINABLE, WITH FACEPLATE ATTACHED, PLASTIC, EACH	Yes			MMP
A4376	Supply	OSTOMY POUCH, DRAINABLE, WITH FACEPLATE ATTACHED, RUBBER, EACH	Yes			MMP
A4377	Supply	OSTOMY POUCH, DRAINABLE, FOR USE ON FACEPLATE, PLASTIC, EACH	Yes			MMP
A4378	Supply	OSTOMY POUCH, DRAINABLE, FOR USE ON FACEPLATE, RUBBER, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4379	Supply	OSTOMY POUCH, URINARY, WITH FACEPLATE ATTACHED, PLASTIC, EACH	Yes			MMP
A4380	Supply	OSTOMY POUCH, URINARY, WITH FACEPLATE ATTACHED, RUBBER, EACH	Yes			MMP
A4381	Supply	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, PLASTIC, EACH	Yes			MMP
A4382	Supply	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, HEAVY PLASTIC, EACH	Yes			MMP
A4383	Supply	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, RUBBER, EACH	Yes			MMP
A4384	Supply	OSTOMY FACEPLATE EQUIVALENT, SILICONE RING, EACH	Yes			MMP
A4385	Supply	OSTOMY SKIN BARRIER, SOLID 4X4 OR EQUIVALENT, EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, EACH	Yes			MMP
A4387	Supply	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), each	Yes			MMP
A4388	Supply	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, (1 PIECE), EACH	Yes			MMP
A4389	Supply	OSTOMY POUCH, DRAINABLE, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	Yes			MMP
A4390	Supply	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	Yes			MMP
A4391	Supply	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A4392	Supply	OSTOMY POUCH, URINARY, WITH STANDARD WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	Yes			MMP
A4393	Supply	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	Yes			MMP
A4394	Supply	OSTOMY DEODORANT FOR USE IN OSTOMY POUCH, LIQUID, PER FLUID OUNCE	Yes			MMP
A4395	Supply	OSTOMY DEODORANT FOR USE IN OSTOMY POUCH, SOLID, PER TABLET	Yes			MMP
A4396	Supply	OSTOMY BELT WITH PERISTOMAL HERNIA SUPPORT	Yes			MMP
A4397	Supply	IRRIGATION SUPPLY; SLEEVE, EACH	Yes			MMP
A4398	Supply	OSTOMY IRRIGATION SUPPLY; BAG, EACH	Yes			MMP
A4399	Supply	OSTOMY IRRIGATION SUPPLY; CONE/CATHETER, WITH OR WITHOUT BRUSH	Yes			MMP
A4400	Supply	OSTOMY IRRIGATION SET	Yes			MMP
A4402	Supply	LUBRICANT, PER OUNCE	Yes			MMP
A4404	Supply	OSTOMY RING, EACH	Yes			MMP
A4405	Supply	OSTOMY SKIN BARRIER, NON-PECTIN BASED, PASTE, PER OUNCE	Yes			MMP
A4406	Supply	OSTOMY SKIN BARRIER, PECTIN-BASED, PASTE, PER OUNCE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4407	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE, OR ACCORDION), EXTENDED WEAR, WITH BUILT-IN CONVEXITY, 4 X 4 INCHES OR SMALLER, EACH	Yes			MMP
A4408	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), EXTENDED WEAR, WITH BUILT-IN CONVEXITY, LARGER THAN 4 X 4 INCHES, EACH	Yes			MMP
A4409	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, 4 X 4 INCHES OR SMALLER, EACH	Yes			MMP
A4410	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, LARGER THAN 4 X 4 INCHES, EACH	Yes			MMP
A4411	Supply	OSTOMY SKIN BARRIER, SOLID 4X4 OR EQUIVALENT, EXTENDED WEAR, WITH BUILT-IN CONVEXITY, EACH	Yes			MMP
A4412	Supply	OSTOMY POUCH, DRAINABLE, HIGH OUTPUT, FOR USE ON A BARRIER WITH FLANGE (2 PIECE SYSTEM), WITHOUT FILTER, EACH	Yes			MMP
A4413	Supply	OSTOMY POUCH, DRAINABLE, HIGH OUTPUT, FOR USE ON A BARRIER WITH FLANGE (2 PIECE SYSTEM), WITH FILTER, EACH	Yes			MMP
A4414	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITHOUT BUILT-IN CONVEXITY, 4 X 4 INCHES OR SMALLER, EACH	Yes			MMP
A4415	Supply	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITHOUT BUILT-IN CONVEXITY, LARGER THAN 4X4 INCHES, EACH	Yes			MMP
A4416	Supply	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	Yes			MMP
A4417	Supply	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FILTER (1 PIECE), EACH	Yes			MMP
A4418	Supply	OSTOMY POUCH, CLOSED; WITHOUT BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	Yes			MMP
A4419	Supply	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FILTER (2 PIECE), EACH	Yes			MMP
A4420	Supply	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE), EACH	No			MMP
A4421	Supply	OSTOMY SUPPLY; MISCELLANEOUS	Yes			MMP
A4422	Supply	OSTOMY ABSORBENT MATERIAL (SHEET/PAD/CRYSTAL PACKET) FOR USE IN OSTOMY POUCH TO THICKEN LIQUID STOMAL OUTPUT, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4423	Supply	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FILTER (2 PIECE), EACH	Yes			MMP
A4424	Supply	OSTOMY POUCH, DRAINABLE, WITH BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	Yes			MMP
A4425	Supply	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FILTER (2 PIECE SYSTEM), EACH	Yes			MMP
A4426	Supply	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE SYSTEM), EACH	Yes			MMP
A4427	Supply	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FILTER (2 PIECE SYSTEM), EACH	Yes			MMP
A4428	Supply	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	Yes			MMP
A4429	Supply	OSTOMY POUCH, URINARY, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	Yes			MMP
A4430	Supply	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	Yes			MMP
A4431	Supply	OSTOMY POUCH, URINARY; WITH BARRIER ATTACHED, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	Yes			MMP
A4432	Supply	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FAUCET-TYPE TAP WITH VALVE (2 PIECE), EACH	Yes			MMP
A4433	Supply	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE), EACH	Yes			MMP
A4434	Supply	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FAUCET-TYPE TAP WITH VALVE (2 PIECE), EACH	Yes			MMP
A4435	Supply	Ostomy pouch, drainable, high output, with extended wear barrier (one-piece system), with or without filter, each	Yes			MMP
A4450	Supply	TAPE, NON-WATERPROOF, PER 18 SQUARE INCHES	Yes			MMP
A4452	Supply	TAPE, WATERPROOF, PER 18 SQUARE INCHES	Yes			MMP
A4455	Supply	ADHESIVE REMOVER OR SOLVENT (FOR TAPE, CEMENT OR OTHER ADHESIVE), PER OUNCE	Yes			MMP
A4456	Supply	ADHESIVE REMOVER, WIPES, ANY TYPE, EACH	Yes			MMP
A4458	Supply	ENEMA BAG WITH TUBING, REUSABLE	Not Covered			MMP
A4459	Supply	Manual pump-operated enema system, includes balloon, catheter and all accessories, reusable, any type	Not Covered			MMP
A4461	Supply	SURGICAL DRESSING HOLDER, NON-REUSABLE, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4463	Supply	SURGICAL DRESSING HOLDER, REUSABLE, EACH	Yes			MMP
A4465	Supply	NON-ELASTIC BINDER FOR EXTREMITY	Not Covered			MMP
A4466	Equipment	GARMENT, BELT, SLEEVE OR OTHER	Not Covered			MMP
A4481	Supply	TRACHEOSTOMA FILTER, ANY TYPE, ANY SIZE, EACH	Yes			MMP
A4483	Supply	MOISTURE EXCHANGER, DISPOSABLE, FOR USE WITH INVASIVE MECHANICAL VENTILATION	No			MMP
A4490	Equipment	SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH	No			MMP
A4495	Equipment	SURGICAL STOCKINGS THIGH LENGTH, EACH	No			MMP
A4500	Equipment	SURGICAL STOCKINGS BELOW KNEE LENGTH, EACH	No			MMP
A4510	Equipment	SURGICAL STOCKINGS FULL LENGTH,	No			MMP
A4520	Supply	INCONTINENCE GARMENT, ANY TYPE, (E.G. BRIEF, DIAPER), EACH	Not Covered			MMP
A4550	Supply	SURGICAL TRAYS	Not Covered			MMP
A4554	Supply	DISPOSABLE UNDERPADS, ALL SIZES	Not Covered			MMP
A4556	Supply	ELECTRODES, (E.G., APNEA MONITOR), PER PAIR	Yes			MMP
A4557	Supply	LEAD WIRES, (E.G., APNEA MONITOR), PER PAIR	Yes			MMP
A4558	Supply	CONDUCTIVE PASTE OR GEL	Yes			MMP
A4559	Supply	COUPLING GEL OR PASTE, FOR USE WITH ULTRASOUND DEVICE	Yes			MMP
A4565	Supply	SLINGS	Yes			MMP
A4566	Equipment	SHOULDER SLING OR VEST DESIGN, ABDUCTION RESTRAINER, WITH OR WITHOUT SWATHE CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	No			MMP
A4570	Supply	SPLINT	No			MMP
A4575	Supply	TOPICAL HYPERBARIC OXYGEN CHAMBER, DISPOSABLE	Not Covered			MMP
A4580	Supply	CAST SUPPLIES (E.G. PLASTER)	No			MMP
A4590	Supply	SPECIAL CASTING MATERIAL (E.G. FIBERGLASS)	No			MMP
A4595	Supply	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G. TENS, NMES)	Yes			MMP
A4600	Supply	SLEEVE FOR INTERMITTENT LIMB COMPRESSION DEVICE, REPLACEMENT ONLY, EACH	No			MMP
A4601	Supply	LITHIUM ION BATTERY FOR NON-PROSTHETIC USE, REPLACEMENT	Not Covered			MMP
A4602	Supply	Replacement battery for external infusion pump owned by patient, lithium, 1.5 volt, each	Yes			MMP
A4604	Supply	TUBING WITH INTEGRATED HEATING ELEMENT FOR USE WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
A4605	Supply	TRACHEAL SUCTION CATHETER, CLOSED SYSTEM, EACH	Yes			MMP
A4606	Supply	OXYGEN PROBE FOR USE WITH OXIMETER DEVICE, REPLACEMENT	No			MMP
A4608	Supply	TRANSTRACHEAL OXYGEN CATHETER, EACH	Yes			MMP
A4611	Supply	BATTERY, HEAVY DUTY; REPLACEMENT FOR PATIENT OWNED VENTILATOR	Not Covered			MMP
A4612	Supply	BATTERY CABLES; REPLACEMENT FOR PATIENT-OWNED VENTILATOR	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A4613	Supply	BATTERY CHARGER; REPLACEMENT FOR PATIENT-OWNED VENTILATOR	Not Covered			MMP
A4614	Supply	PEAK EXPIRATORY FLOW RATE METER, HAND HELD	Yes			MMP
A4615	Supply	CANNULA, NASAL	Yes			MMP
A4616	Supply	TUBING (OXYGEN), PER FOOT	Yes			MMP
A4617	Supply	MOUTH PIECE	Yes			MMP
A4618	Supply	BREATHING CIRCUITS	Yes			MMP
A4619	Supply	FACE TENT	Yes			MMP
A4620	Supply	VARIABLE CONCENTRATION MASK	Yes			MMP
A4623	Supply	TRACHEOSTOMY, INNER CANNULA	Yes			MMP
A4624	Supply	TRACHEAL SUCTION CATHETER, ANY TYPE OTHER THAN CLOSED SYSTEM, EACH	Yes			MMP
A4625	Supply	TRACHEOSTOMY CARE KIT FOR NEW TRACHEOSTOMY	Yes			MMP
A4626	Supply	TRACHEOSTOMY CLEANING BRUSH, EACH	Yes			MMP
A4627	Supply	SPACER, BAG OR RESERVOIR, WITH OR WITHOUT MASK, FOR USE WITH METERED DOSE INHALER	No			MMP
A4628	Supply	OROPHARYNGEAL SUCTION CATHETER, EACH	Yes			MMP
A4629	Supply	TRACHEOSTOMY CARE KIT FOR ESTABLISHED TRACHEOSTOMY	Yes			MMP
A4630	Supply	REPLACEMENT BATTERIES, MEDICALLY NECESSARY, TRANSCUTANEOUS ELECTRICAL STIMULATOR, OWNED BY PATIENT	Yes			MMP
A4633	Supply	REPLACEMENT BULB/LAMP FOR ULTRAVIOLET LIGHT THERAPY SYSTEM, EACH	Yes			MMP
A4634	Supply	REPLACEMENT BULB FOR THERAPEUTIC LIGHT BOX, TABLETOP MODEL	Not Covered			MMP
A4635	Supply	UNDERARM PAD, CRUTCH, REPLACEMENT, EACH	Yes			MMP
A4636	Supply	REPLACEMENT, HANDGRIP, CANE, CRUTCH, OR WALKER, EACH	Yes			MMP
A4637	Supply	REPLACEMENT, TIP, CANE, CRUTCH, WALKER, EACH.	Yes			MMP
A4638	Supply	REPLACEMENT BATTERY FOR PATIENT-OWNED EAR PULSE GENERATOR, EACH	Not Covered			MMP
A4639	Supply	REPLACEMENT PAD FOR INFRARED HEATING PAD SYSTEM, EACH	Not Covered			MMP
A4639	Supply	REPLACEMENT PAD FOR INFRARED HEATING PAD SYSTEM, EACH	Yes			MMP
A4640	Supply	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	Yes			MMP
A4660	Supply	SPHYGMOMANOMETER/BLOOD PRESSURE APPARATUS WITH CUFF AND STETHOSCOPE	No			MMP
A4663	Supply	BLOOD PRESSURE CUFF ONLY	No			MMP
A4670	Supply	AUTOMATIC BLOOD PRESSURE MONITOR	No			MMP
A4927	Supply	GLOVES, NON-STERILE, PER 100	No			MMP
A4928	Supply	SURGICAL MASK, PER 20	No			MMP
A4930	Supply	GLOVES, STERILE, PER PAIR	Not Covered			MMP
A4931	Supply	ORAL THERMOMETER, REUSABLE, ANY TYPE, EACH	Not Covered			MMP
A4932	Supply	RECTAL THERMOMETER, REUSABLE, ANY TYPE, EACH	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A5051	Supply	OSTOMY POUCH, CLOSED; WITH BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A5052	Supply	OSTOMY POUCH, CLOSED; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A5053	Supply	OSTOMY POUCH, CLOSED; FOR USE ON FACEPLATE, EACH	Yes			MMP
A5054	Supply	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH	Yes			MMP
A5055	Supply	STOMA CAP	Yes			MMP
A5056	Supply	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH FILTER, (1 PIECE), EACH	Yes			MMP
A5057	Supply	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT IN CONVEXITY, WITH FILTER, (1 PIECE), EACH	Yes			MMP
A5061	Supply	OSTOMY POUCH, DRAINABLE; WITH BARRIER ATTACHED, (1 PIECE), EACH	Yes			MMP
A5062	Supply	OSTOMY POUCH, DRAINABLE; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A5063	Supply	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH FLANGE (2 PIECE SYSTEM), EACH	Yes			MMP
A5071	Supply	OSTOMY POUCH, URINARY; WITH BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A5072	Supply	OSTOMY POUCH, URINARY; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	Yes			MMP
A5073	Supply	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH	Yes			MMP
A5081	Supply	CONTINENT DEVICE; PLUG FOR CONTINENT STOMA	Yes			MMP
A5082	Supply	CONTINENT DEVICE; CATHETER FOR CONTINENT STOMA	Yes			MMP
A5083	Supply	CONTINENT DEVICE, STOMA ABSORPTIVE COVER FOR CONTINENT STOMA	Yes			MMP
A5093	Supply	OSTOMY ACCESSORY; CONVEX INSERT	Yes			MMP
A5102	Supply	BEDSIDE DRAINAGE BOTTLE WITH OR WITHOUT TUBING, RIGID OR EXPANDABLE, EACH	Yes			MMP
A5105	Supply	URINARY SUSPENSORY WITH LEG BAG, WITH OR WITHOUT TUBE, EACH	Yes			MMP
A5112	Supply	URINARY DRAINAGE BAG, LEG OR ABDOMEN, LATEX, WITH OR WITHOUT TUBE, WITH STRAPS, EACH	Yes			MMP
A5113	Supply	LEG STRAP; LATEX, REPLACEMENT ONLY, PER SET	Yes			MMP
A5114	Supply	LEG STRAP; FOAM OR FABRIC, REPLACEMENT ONLY, PER SET	Yes			MMP
A5120	Supply	SKIN BARRIER, WIPES OR SWABS, EACH	Yes			MMP
A5121	Supply	SKIN BARRIER; SOLID, 6 X 6 OR EQUIVALENT, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A5122	Supply	SKIN BARRIER; SOLID, 8 X 8 OR EQUIVALENT, EACH	Yes			MMP
A5126	Supply	ADHESIVE OR NON-ADHESIVE; DISK OR FOAM PAD	Yes			MMP
A5131	Supply	APPLIANCE CLEANER, INCONTINENCE AND OSTOMY APPLIANCES, PER 16 OZ.	Yes			MMP
A5200	Supply	PERCUTANEOUS CATHETER/TUBE ANCHORING DEVICE, ADHESIVE SKIN ATTACHMENT	Yes			MMP
A5500	Equipment	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF OFF-THE-SHELF DEPTH-INLAY SHOE MANUFACTURED TO ACCOMMODATE MULTI-DENSITY INSERT(S), PER SHOE.	Yes			MMP
A5501	Equipment	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF SHOE MOLDED FROM CAST(S) OF PATIENT'S FOOT (CUSTOM MOLDED SHOE), PER shoe	Yes			MMP
A5503	Equipment	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH ROLLER OR RIGID ROCKER BOTTOM, PER shoe	Yes			MMP
A5504	Equipment	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH WEDGE(S), PER SHOE	Yes			MMP
A5505	Equipment	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH METATARSAL BAR, PER SHOE	Yes			MMP
A5506	Equipment	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH OFF-SET HEEL(S), PER SHOE	Yes			MMP
A5507	Equipment	FOR DIABETICS ONLY, NOT OTHERWISE SPECIFIED MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE, PER SHOE	Yes			MMP
A5508	Equipment	FOR DIABETICS ONLY, DELUXE FEATURE OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE, PER SHOE	Not Covered			MMP
A5510	Equipment	FOR DIABETICS ONLY, DIRECT FORMED, COMPRESSION MOLDED TO PATIENT'S FOOT WITHOUT EXTERNAL HEAT SOURCE, MULTIPLE-DENSITY INSERT(S) PREFABRICATED, PER SHOE	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A5512	Equipment	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, DIRECT FORMED, MOLDED TO FOOT AFTER EXTERNAL HEAT SOURCE OF 230 DEGREES FAHRENHEIT OR HIGHER, TOTAL CONTACT WITH PATIENT'S FOOT, INCLUDING ARCH, BASE LAYER MINIMUM OF 1/4 INCH MATERIAL OF SHORE A 35 DUROMETER OR 3/16 INCH MATERIAL OF SHORE A 40 DUROMETER (OR HIGHER), PREFABRICATED, EACH	Yes			MMP
A5513	Equipment	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, CUSTOM MOLDED FROM MODEL OF PATIENT'S FOOT, TOTAL CONTACT WITH PATIENT'S FOOT, INCLUDING ARCH, BASE LAYER MINIMUM OF 1/4 INCH MATERIAL OF SHORE A 35 DUROMETER OR 3/16 INCH MATERIAL OF SHORE A 40 DUROMETER (OR HIGHER), INCLUDES ARCH FILLER AND OTHER SHAPING MATERIAL, CUSTOM FABRICATED, EACH	Yes			MMP
A6000	Supply	NON-CONTACT WOUND WARMING WOUND COVER FOR USE WITH THE NON-CONTACT WOUND WARMING DEVICE AND WARMING CARD	Not Covered			MMP
A6010	Supply	COLLAGEN BASED WOUND FILLER, DRY FORM, PER GRAM OF COLLAGEN	Yes			MMP
A6011	Supply	COLLAGEN BASED WOUND FILLER, GEL/PASTE, PER GRAM OF COLLAGEN	Yes			MMP
A6021	Supply	COLLAGEN DRESSING, PAD SIZE 16 SQ. IN. OR LESS, EACH	Yes			MMP
A6022	Supply	COLLAGEN DRESSING, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH	Yes			MMP
A6023	Supply	COLLAGEN DRESSING, PAD SIZE MORE THAN 48 SQ. IN., EACH	Yes			MMP
A6024	Supply	COLLAGEN DRESSING WOUND FILLER, PER 6 INCHES	Yes			MMP
A6025	Supply	GEL SHEET FOR DERMAL OR EPIDERMAL APPLICATION, (E.G., SILICONE, HYDROGEL, OTHER), EACH	No			MMP
A6154	Supply	WOUND POUCH, EACH	Yes			MMP
A6196	Supply	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, EACH DRESSING	Yes			MMP
A6197	Supply	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH DRESSING	Yes			MMP
A6198	Supply	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., EACH DRESSING	No			MMP
A6199	Supply	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND FILLER, PER 6 INCHES	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6203	Supply	COMPOSITE DRESSING, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6204	Supply	COMPOSITE DRESSING, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6205	Supply	COMPOSITE DRESSING, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	No			MMP
A6206	Supply	CONTACT LAYER, 16 SQ. IN. OR LESS, EACH DRESSING	No			MMP
A6207	Supply	CONTACT LAYER, MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH DRESSING	Yes			MMP
A6208	Supply	CONTACT LAYER, MORE THAN 48 SQ. IN., EACH DRESSING	No			MMP
A6209	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6210	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6211	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6212	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6213	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	No			MMP
A6214	Supply	FOAM DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6215	Supply	FOAM DRESSING, WOUND FILLER, PER GRAM	No			MMP
A6216	Supply	GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6217	Supply	GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	No			MMP
A6218	Supply	GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	No			MMP
A6219	Supply	GAUZE, NON-IMPREGNATED, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6220	Supply	GAUZE, NON-IMPREGNATED, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6221	Supply	GAUZE, NON-IMPREGNATED, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	No			MMP
A6222	Supply	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6223	Supply	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, PAD SIZE MORE THAN 16 SQUARE INCHES, BUT LESS THAN OR EQUAL TO 48 SQUARE INCHES, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6224	Supply	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, PAD SIZE MORE THAN 48 SQUARE INCHES, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6228	Supply	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Not Covered			MMP
A6229	Supply	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6230	Supply	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Not Covered			MMP
A6231	Supply	GAUZE, IMPREGNATED, HYDROGEL, FOR DIRECT WOUND CONTACT, PAD SIZE 16 SQ. IN. OR LESS, EACH DRESSING	Yes			MMP
A6232	Supply	GAUZE, IMPREGNATED, HYDROGEL, FOR DIRECT WOUND CONTACT, PAD SIZE GREATER THAN 16 SQ. IN., BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH DRESSING	Yes			MMP
A6233	Supply	GAUZE, IMPREGNATED, HYDROGEL FOR DIRECT WOUND CONTACT, PAD SIZE MORE THAN 48 SQ. IN., EACH DRESSING	Yes			MMP
A6234	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6235	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6236	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6237	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6238	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6239	Supply	HYDROCOLLOID DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	No			MMP
A6240	Supply	HYDROCOLLOID DRESSING, WOUND FILLER, PASTE, PER FLUID OUNCE	Yes			MMP
A6241	Supply	HYDROCOLLOID DRESSING, WOUND FILLER, DRY FORM, PER GRAM	Yes			MMP
A6242	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6243	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6244	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6245	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6246	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6247	Supply	HYDROGEL DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6248	Supply	HYDROGEL DRESSING, WOUND FILLER, GEL, PER FLUID OUNCE	Yes			MMP
A6250	Supply	SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, OINTMENTS, ANY TYPE, ANY SIZE	Not Covered			MMP
A6251	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6252	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6253	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6254	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6255	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6256	Supply	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	No			MMP
A6257	Supply	TRANSPARENT FILM, 16 SQ. IN. OR LESS, EACH DRESSING	Yes			MMP
A6258	Supply	TRANSPARENT FILM, MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH DRESSING	Yes			MMP
A6259	Supply	TRANSPARENT FILM, MORE THAN 48 SQ. IN., EACH DRESSING	Yes			MMP
A6260	Supply	WOUND CLEANSERS, ANY TYPE, ANY SIZE	Not Covered			MMP
A6261	Supply	WOUND FILLER, GEL/PASTE, PER FLUID OUNCE, NOT OTHERWISE SPECIFIED	No			MMP
A6262	Supply	WOUND FILLER, DRY FORM, PER GRAM, NOT OTHERWISE SPECIFIED	No			MMP
A6266	Supply	GAUZE, IMPREGNATED, OTHER THAN WATER, NORMAL SALINE, OR ZINC PASTE, ANY WIDTH, PER LINEAR YARD	Yes			MMP
A6402	Supply	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6403	Supply	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ. IN. LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	Yes			MMP
A6404	Supply	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	No			MMP
A6407	Supply	PACKING STRIPS, NON-IMPREGNATED, UP TO 2 INCHES IN WIDTH, PER LINEAR YARD	Yes			MMP
A6410	Supply	EYE PAD, STERILE, EACH	Yes			MMP
A6411	Supply	EYE PAD, NON-STERILE, EACH	No			MMP
A6412	Supply	EYE PATCH, OCCLUSIVE, EACH	No			MMP
A6413	Supply	ADHESIVE BANDAGE, FIRST-AID TYPE, ANY SIZE, EACH	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6441	Supply	PADDING BANDAGE, NON-ELASTIC, NON-WOVEN/NON-KNITTED, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6442	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, NON-STERILE, WIDTH LESS THAN THREE INCHES, PER YARD	Yes			MMP
A6443	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, NON-STERILE, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6444	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, NON-STERILE, WIDTH GREATER THAN OR EQUAL TO 5 INCHES, PER YARD	Yes			MMP
A6445	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, STERILE, WIDTH LESS THAN THREE INCHES, PER YARD	Yes			MMP
A6446	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, STERILE, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6447	Supply	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, STERILE, WIDTH GREATER THAN OR EQUAL TO FIVE INCHES, PER YARD	Yes			MMP
A6448	Supply	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH LESS THAN THREE INCHES, PER YARD	Yes			MMP
A6449	Supply	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6450	Supply	LIGHT COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO FIVE INCHES, PER YARD	Yes			MMP
A6451	Supply	MODERATE COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, LOAD RESISTANCE OF 1.25 TO 1.34 FOOT POUNDS AT 50% MAXIMUM STRETCH, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6452	Supply	HIGH COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, LOAD RESISTANCE GREATER THAN OR EQUAL TO 1.35 FOOT POUNDS AT 50% MAXIMUM STRETCH, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6453	Supply	SELF-ADHERENT BANDAGE, ELASTIC, NON-KNITTED/NON-WOVEN, WIDTH LESS THAN THREE INCHES, PER YARD	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6454	Supply	SELF-ADHERENT BANDAGE, ELASTIC, NON-KNITTED/NON-WOVEN, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6455	Supply	SELF-ADHERENT BANDAGE, ELASTIC, NON-KNITTED/NON-WOVEN, WIDTH GREATER THAN OR EQUAL TO FIVE INCHES, PER YARD	Yes			MMP
A6456	Supply	ZINC PASTE IMPREGNATED BANDAGE, NON-ELASTIC, KNITTED/WOVEN, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	Yes			MMP
A6457	Supply	TUBULAR DRESSING WITH OR WITHOUT ELASTIC, ANY WIDTH, PER LINEAR YARD	Yes			MMP
A6501	Equipment	COMPRESSION BURN GARMENT, BODYSUIT (HEAD TO FOOT), CUSTOM FABRICATED	No			MMP
A6502	Equipment	COMPRESSION BURN GARMENT, CHIN STRAP, CUSTOM FABRICATED	No			MMP
A6503	Equipment	COMPRESSION BURN GARMENT, FACIAL HOOD, CUSTOM FABRICATED	No			MMP
A6504	Equipment	COMPRESSION BURN GARMENT, GLOVE TO WRIST, CUSTOM FABRICATED	No			MMP
A6505	Equipment	COMPRESSION BURN GARMENT, GLOVE TO ELBOW, CUSTOM FABRICATED	No			MMP
A6506	Equipment	COMPRESSION BURN GARMENT, GLOVE TO AXILLA, CUSTOM FABRICATED	No			MMP
A6507	Equipment	COMPRESSION BURN GARMENT, FOOT TO KNEE LENGTH, CUSTOM FABRICATED	No			MMP
A6508	Equipment	COMPRESSION BURN GARMENT, FOOT TO THIGH LENGTH, CUSTOM FABRICATED	No			MMP
A6509	Equipment	COMPRESSION BURN GARMENT, UPPER TRUNK TO WAIST INCLUDING ARM OPENINGS (VEST), CUSTOM FABRICATED	No			MMP
A6510	Equipment	COMPRESSION BURN GARMENT, TRUNK, INCLUDING ARMS DOWN TO LEG OPENINGS (LEOTARD), CUSTOM FABRICATED	No			MMP
A6511	Equipment	COMPRESSION BURN GARMENT, LOWER TRUNK INCLUDING LEG OPENINGS (PANTY), CUSTOM FABRICATED	No			MMP
A6512	Equipment	COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED	Yes			MMP
A6513	Equipment	COMPRESSION BURN MASK, FACE AND/OR NECK, PLASTIC OR EQUAL, CUSTOM FABRICATED	No			MMP
A6530	Equipment	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MMHG, EACH	Yes			MMP
A6531	Equipment	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 30-40 MMHG, EACH	Yes			MMP
A6532	Equipment	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 40-50 MMHG, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A6534	Equipment	GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 30-40 MMHG, EACH	No			MMP
A6535	Equipment	GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 40-50 MMHG, EACH	No			MMP
A6537	Equipment	GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 30-40 MMHG, EACH	No			MMP
A6538	Equipment	GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH	No			MMP
A6540	Equipment	GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 30-40 MMHG, EACH	No			MMP
A6541	Equipment	GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 40-50 MMHG, EACH	No			MMP
A6544	Equipment	GRADIENT COMPRESSION STOCKING, GARTER BELT	No			MMP
A6545	Equipment	GRADIENT COMPRESSION WRAP, NON-ELASTIC, BELOW KNEE, 30-50 MM HG, EACH	Yes			MMP
A6549	Equipment	GRADIENT COMPRESSION STOCKING, NOT OTHERWISE SPECIFIED	Yes			MMP
A6550	Supply	WOUND CARE SET, FOR NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, INCLUDES ALL SUPPLIES AND ACCESSORIES	Yes			MMP
A7000	Supply	CANISTER, DISPOSABLE, USED WITH SUCTION PUMP, EACH	Yes			MMP
A7001	Supply	CANISTER, NON-DISPOSABLE, USED WITH SUCTION PUMP, EACH	Yes			MMP
A7002	Supply	TUBING, USED WITH SUCTION PUMP, EACH	Yes			MMP
A7003	Supply	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, DISPOSABLE	Yes			MMP
A7004	Supply	SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, DISPOSABLE	Yes			MMP
A7005	Supply	ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NON-DISPOSABLE	Yes			MMP
A7006	Supply	ADMINISTRATION SET, WITH SMALL VOLUME FILTERED PNEUMATIC NEBULIZER	Yes			MMP
A7007	Supply	LARGE VOLUME NEBULIZER, DISPOSABLE, UNFILLED, USED WITH AEROSOL COMPRESSOR	Yes			MMP
A7008	Supply	LARGE VOLUME NEBULIZER, DISPOSABLE, PREFILLED, USED WITH AEROSOL COMPRESSOR	Yes			MMP
A7009	Supply	RESERVOIR BOTTLE, NON-DISPOSABLE, USED WITH LARGE VOLUME ULTRASONIC NEBULIZER	Yes			MMP
A7010	Supply	CORRUGATED TUBING, DISPOSABLE, USED WITH LARGE VOLUME NEBULIZER, 100 FEET	Yes			MMP
A7012	Supply	WATER COLLECTION DEVICE, USED WITH LARGE VOLUME NEBULIZER	No			MMP
A7012	Supply	WATER COLLECTION DEVICE, USED WITH LARGE VOLUME NEBULIZER	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A7013	Supply	FILTER, DISPOSABLE, USED WITH AEROSOL COMPRESSOR OR ULTRASONIC GENERATOR	Yes			MMP
A7014	Supply	FILTER, NONDISPOSABLE, USED WITH AEROSOL COMPRESSOR OR ULTRASONIC GENERATOR	Yes			MMP
A7015	Supply	AEROSOL MASK, USED WITH DME NEBULIZER	Yes			MMP
A7016	Supply	DOME AND MOUTHPIECE, USED WITH SMALL VOLUME ULTRASONIC NEBULIZER	Yes			MMP
A7017	Equipment	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, NOT USED WITH OXYGEN	Yes			MMP
A7018	Supply	WATER, DISTILLED, USED WITH LARGE VOLUME NEBULIZER, 1000 ML	Yes			MMP
A7020	Equipment	INTERFACE FOR COUGH STIMULATING DEVICE, INCLUDES ALL COMPONENTS, REPLACEMENT ONLY	Yes			MMP
A7025	Supply	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM VEST, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH	Yes			MMP
A7026	Supply	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM HOSE, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH	Yes			MMP
A7027	Supply	COMBINATION ORAL/NASAL MASK, USED WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE, EACH	Yes			MMP
A7028	Supply	ORAL CUSHION FOR COMBINATION ORAL/NASAL MASK, REPLACEMENT ONLY, EACH	Yes			MMP
A7029	Supply	NASAL PILLOWS FOR COMBINATION ORAL/NASAL MASK, REPLACEMENT ONLY, PAIR	Yes			MMP
A7030	Supply	FULL FACE MASK USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH	Yes			MMP
A7031	Supply	FACE MASK INTERFACE, REPLACEMENT FOR FULL FACE MASK, EACH	Yes			MMP
A7032	Supply	CUSHION FOR USE ON NASAL MASK INTERFACE, REPLACEMENT ONLY, EACH	Yes			MMP
A7033	Supply	PILLOW FOR USE ON NASAL CANNULA TYPE INTERFACE, REPLACEMENT ONLY, PAIR	Yes			MMP
A7034	Supply	NASAL INTERFACE (MASK OR CANNULA TYPE) USED WITH POSITIVE AIRWAY PRESSURE DEVICE, WITH OR WITHOUT HEAD STRAP	Yes			MMP
A7035	Supply	HEADGEAR USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
A7036	Supply	CHINSTRAP USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
A7037	Supply	TUBING USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A7038	Supply	FILTER, DISPOSABLE, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
A7039	Supply	FILTER, NON DISPOSABLE, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
A7040	Supply	ONE WAY CHEST DRAIN VALVE	Yes			MMP
A7041	Supply	WATER SEAL DRAINAGE CONTAINER AND TUBING FOR USE WITH IMPLANTED CHEST TUBE	Yes			MMP
A7044	Supply	ORAL INTERFACE USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH	Yes			MMP
A7045	Supply	EXHALATION PORT WITH OR WITHOUT SWIVEL USED WITH ACCESSORIES FOR POSITIVE AIRWAY DEVICES, REPLACEMENT ONLY	Yes			MMP
A7046	Supply	WATER CHAMBER FOR HUMIDIFIER, USED WITH POSITIVE AIRWAY PRESSURE DEVICE, REPLACEMENT, EACH	Yes			MMP
A7048	Supply	Vacuum drainage collection unit and tubing kit, including all supplies needed for collection unit change, for use with implanted catheter, each	Yes			MMP
A7501	Supply	TRACHEOSTOMA VALVE, INCLUDING DIAPHRAGM, EACH	Yes			MMP
A7502	Supply	REPLACEMENT DIAPHRAGM/FACEPLATE FOR TRACHEOSTOMA VALVE, EACH	Yes			MMP
A7503	Supply	FILTER HOLDER OR FILTER CAP, REUSABLE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	Yes			MMP
A7504	Supply	FILTER FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	Yes			MMP
A7505	Supply	HOUSING, REUSABLE WITHOUT ADHESIVE, FOR USE IN A HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH A TRACHEOSTOMA VALVE, EACH	Yes			MMP
A7506	Supply	ADHESIVE DISC FOR USE IN A HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH TRACHEOSTOMA VALVE, ANY TYPE EACH	Yes			MMP
A7507	Supply	FILTER HOLDER AND INTEGRATED FILTER WITHOUT ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	Yes			MMP
A7508	Supply	HOUSING AND INTEGRATED ADHESIVE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH A TRACHEOSTOMA VALVE, EACH	Yes			MMP
A7509	Supply	FILTER HOLDER AND INTEGRATED FILTER HOUSING, AND ADHESIVE, FOR USE AS A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A7520	Supply	TRACHEOSTOMY/LARYNGECTOMY TUBE, NON-CUFFED, POLYVINYLCHLORIDE (PVC), SILICONE OR EQUAL, EACH	Yes			MMP
A7521	Supply	TRACHEOSTOMY/LARYNGECTOMY TUBE, CUFFED, POLYVINYLCHLORIDE (PVC), SILICONE OR EQUAL, EACH	Yes			MMP
A7522	Supply	TRACHEOSTOMY/LARYNGECTOMY TUBE, STAINLESS STEEL OR EQUAL (STERILIZABLE AND REUSABLE), EACH	Yes			MMP
A7523	Supply	TRACHEOSTOMY SHOWER PROTECTOR, EACH	Not Covered			MMP
A7524	Supply	TRACHEOSTOMA STENT/STUD/BUTTON, EACH	Yes			MMP
A7525	Supply	TRACHEOSTOMY MASK, EACH	Yes			MMP
A7526	Supply	TRACHEOSTOMY TUBE COLLAR/HOLDER, EACH	Yes			MMP
A7527	Supply	TRACHEOSTOMY/LARYNGECTOMY TUBE PLUG/STOP, EACH	Yes			MMP
A8000	Supply	HELMET, PROTECTIVE, SOFT, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
A8001	Supply	HELMET, PROTECTIVE, HARD, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
A8002	Supply	HELMET, PROTECTIVE, SOFT, CUSTOM FABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	Not Covered			MMP
A8003	Supply	HELMET, PROTECTIVE, HARD, CUSTOM FABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	Not Covered			MMP
A8004	Supply	SOFT INTERFACE FOR HELMET, REPLACEMENT ONLY	No			MMP
A9155	Supply	ARTIFICIAL SALIVA, 30 ML	No			MMP
A9270	Supply	NON-COVERED ITEM OR SERVICE	Not Covered			MMP
A9272	Equipment	MECHANICAL WOUND SUCTION, DISPOSABLE, INCLUDES DRESSING, ALL ACCESSORIES AND COMPONENTS, EACH	No			MMP
A9273	Equipment	HOT WATER BOTTLE, ICE CAP OR COLLAR, HEAT AND/OR COLD WRAP, ANY TYPE	Not Covered			MMP
A9274	Supply	EXTERNAL AMBULATORY INSULIN DELIVERY SYSTEM, DISPOSABLE, EACH, INCLUDES ALL SUPPLIES AND ACCESSORIES	No			MMP
A9275	Supply	HOME GLUCOSE DISPOSABLE MONITOR, INCLUDES TEST STRIPS	Not Covered			MMP
A9276	Supply	SENSOR; INVASIVE (E.G. SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ONE UNIT = 1 DAY SUPPLY	No			MMP
A9277	Supply	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM	No			MMP
A9278	Supply	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
A9279	Supply	MONITORING FEATURE/DEVICE, STAND-ALONE OR INTEGRATED, ANY TYPE, INCLUDES ALL ACCESSORIES, COMPONENTS AND ELECTRONICS, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
A9280	Supply	ALERT OR ALARM DEVICE, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
A9281	Supply	REACHING/GRABBING DEVICE, ANY TYPE, ANY LENGTH, EACH	Not Covered			MMP
A9282	Equipment	WIG, ANY TYPE, EACH	No			MMP
A9283	Equipment	FOOT PRESSURE OFF LOADING/SUPPORTIVE DEVICE, ANY TYPE, EACH	Not Covered			MMP
A9284	Equipment	SPIROMETER, NON-ELECTRONIC, INCLUDES ALL ACCESSORIES	No			MMP
A9300	Supply	EXERCISE EQUIPMENT	Not Covered			MMP
A9900	Supply	MISCELLANEOUS DME SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS CODE	Not Covered			MMP
A9901	Supply	DME DELIVERY, SET UP, AND/OR DISPENSING SERVICE COMPONENT OF ANOTHER HCPCS CODE	Not Covered			MMP
A9999	Supply	MISCELLANEOUS DME SUPPLY OR ACCESSORY, NOT OTHERWISE SPECIFIED	Yes			MMP
B4034	Supply	ENTERAL FEEDING SUPPLY KIT; SYRINGE FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	Yes			MMP
B4035	Supply	ENTERAL FEEDING SUPPLY KIT; PUMP FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	Yes			MMP
B4036	Supply	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	Yes			MMP
B4081	Supply	NASOGASTRIC TUBING WITH STYLET	Yes			MMP
B4082	Supply	NASOGASTRIC TUBING WITHOUT STYLET	Yes			MMP
B4083	Supply	STOMACH TUBE - LEVINE TYPE	Yes			MMP
B4087	Supply	GASTROSTOMY/JEJUNOSTOMY TUBE, STANDARD, ANY MATERIAL, ANY TYPE, EACH	Yes			MMP
B4088	Supply	GASTROSTOMY/JEJUNOSTOMY TUBE, LOW-PROFILE, ANY MATERIAL, ANY TYPE, EACH	Yes			MMP
B4100	Supply	FOOD THICKENER, ADMINISTERED ORALLY, PER OUNCE	Not Covered			MMP
B4102	Supply	ENTERAL FORMULA, FOR ADULTS, USED TO REPLACE FLUIDS AND ELECTROLYTES (E.G. CLEAR LIQUIDS), 500 ML = 1 UNIT	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
B4103	Supply	ENTERAL FORMULA, FOR PEDIATRICS, USED TO REPLACE FLUIDS AND ELECTROLYTES (E.G. CLEAR LIQUIDS), 500 ML = 1 UNIT	Not Covered			MMP
B4104	Supply	ADDITIVE FOR ENTERAL FORMULA (E.G. FIBER)	Not Covered			MMP
B4149	Supply	ENTERAL FORMULA, MANUFACTURED BLENDERIZED NATURAL FOODS WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	Yes			MMP
B4150	Supply	ENTERAL FORMULAE; CATEGORY I; SEMI-SYNTHETIC INTACT PROTEIN/PROTEIN ISOLATES, 100 CALORIES = 1 UNIT	Yes			MMP
B4152	Supply	ENTERAL FORMULAE; CATEGORY II: INTACT PROTEIN/PROTEIN ISOLATES (CALORICALLY DENSE), 100 CALORIES = 1 UNIT	Yes			MMP
B4153	Supply	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, HYDROLYZED PROTEINS (AMINO ACIDS AND PEPTIDE CHAIN), INCLUDES FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	Yes			MMP
B4154	Supply	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM, INCLUDES ALTERED COMPOSITION OF PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND/OR MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	Yes			MMP
B4155	Supply	ENTERAL FORMULA, NUTRITIONALLY INCOMPLETE/MODULAR NUTRIENTS, INCLUDES SPECIFIC NUTRIENTS, CARBOHYDRATES (E.G. GLUCOSE POLYMERS), PROTEINS/AMINO ACIDS (E.G. GLUTAMINE, ARGININE), FAT (E.G. MEDIUM CHAIN TRIGLYCERIDES) OR COMBINATION, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	Yes			MMP
B4164	Supply	PARENTERAL NUTRITION SOLUTION: CARBOHYDRATES (DEXTROSE), 50% OR LESS (500 ML = 1 UNIT) - HOMEMIX	Yes			MMP
B4168	Supply	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 3.5%, (500 ML = 1 UNIT) - HOMEMIX	Yes			MMP
B4172	Supply	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 5.5% THROUGH 7%, (500 ML = 1 UNIT) - HOMEMIX	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
B4176	Supply	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 7% THROUGH 8.5%, (500 ML = 1 UNIT) - HOMEMIX	Yes			MMP
B4178	Supply	PARENTERAL NUTRITION SOLUTION: AMINO ACID, GREATER THAN 8.5% (500 ML = 1 UNIT) - HOMEMIX	Yes			MMP
B4180	Supply	PARENTERAL NUTRITION SOLUTION; CARBOHYDRATES (DEXTROSE), GREATER THAN 50% (500 ML=1 UNIT) - HOMEMIX	Yes			MMP
B4185	Supply	PARENTERAL NUTRITION SOLUTION, PER 10 GRAMS LIPIDS	Yes			MMP
B4189	Supply	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 10 TO 51 GRAMS OF PROTEIN - PREMIX	Yes			MMP
B4193	Supply	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 52 TO 73 GRAMS OF PROTEIN - PREMIX	Yes			MMP
B4197	Supply	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 74 TO 100 GRAMS OF PROTEIN - PREMIX	Yes			MMP
B4199	Supply	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, OVER 100 GRAMS OF PROTEIN - PREMIX	Yes			MMP
B4216	Supply	PARENTERAL NUTRITION; ADDITIVES (VITAMINS, TRACE ELEMENTS, HEPARIN, ELECTROLYTES) HOMEMIX PER DAY	Yes			MMP
B4220	Supply	PARENTERAL NUTRITION SUPPLY KIT; PREMIX, PER DAY	Yes			MMP
B4222	Supply	PARENTERAL NUTRITION SUPPLY KIT; HOME MIX, PER DAY	Yes			MMP
B4224	Supply	PARENTERAL NUTRITION ADMINISTRATION KIT, PER DAY	Yes			MMP
B5000	Supply	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, RENAL - AMIROSYN RF, NEPHRAMINE, RENAMINE - PREMIX	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
B5100	Supply	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, HEPATIC - FREAMINE HBC, HEPATAMINE - PREMIX	Yes			MMP
B5200	Supply	PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, STRESS - BRANCH CHAIN AMINO ACIDS - PREMIX	Not Covered			MMP
B9000	Equipment	ENTERAL NUTRITION INFUSION PUMP - WITHOUT ALARM	No			MMP
B9002	Equipment	ENTERAL NUTRITION INFUSION PUMP - WITH ALARM	Yes			MMP
B9004	Equipment	PARENTERAL NUTRITION INFUSION PUMP, PORTABLE	Yes			MMP
B9006	Equipment	PARENTERAL NUTRITION INFUSION PUMP, STATIONARY	Yes			MMP
B9998	Supply	NOC FOR ENTERAL SUPPLIES	Yes			MMP
B9999	Supply	NOC FOR PARENTERAL SUPPLIES	Not Covered			MMP
E0100	Equipment	CANE, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIP	Yes			MMP
E0105	Equipment	CANE, QUAD OR THREE PRONG, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIPS	Yes			MMP
E0110	Equipment	CRUTCHES, FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, PAIR, COMPLETE WITH TIPS AND HANDGRIPS	Yes			MMP
E0111	Equipment	CRUTCH FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, EACH, WITH TIP AND HANDGRIPS	Yes			MMP
E0112	Equipment	CRUTCHES UNDERARM, WOOD, ADJUSTABLE OR FIXED, PAIR, WITH PADS, TIPS AND HANDGRIPS	Yes			MMP
E0113	Equipment	CRUTCH UNDERARM, WOOD, ADJUSTABLE OR FIXED, EACH, WITH PAD, TIP AND HANDGRIP	Yes			MMP
E0114	Equipment	CRUTCHES UNDERARM, OTHER THAN WOOD, ADJUSTABLE OR FIXED, PAIR, WITH PADS, TIPS AND HANDGRIPS	Yes			MMP
E0116	Equipment	CRUTCH, UNDERARM, OTHER THAN WOOD, ADJUSTABLE OR FIXED, WITH PAD, TIP, HANDGRIP, WITH OR WITHOUT SHOCK ABSORBER, EACH	Yes			MMP
E0117	Equipment	CRUTCH, UNDERARM, ARTICULATING, SPRING ASSISTED, EACH	Yes			MMP
E0118	Equipment	CRUTCH SUBSTITUTE, LOWER LEG PLATFORM, WITH OR WITHOUT WHEELS, EACH	No			MMP
E0130	Equipment	WALKER, RIGID (PICKUP), ADJUSTABLE OR FIXED HEIGHT	Yes			MMP
E0135	Equipment	WALKER, FOLDING (PICKUP), ADJUSTABLE OR FIXED HEIGHT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0140	Equipment	WALKER, WITH TRUNK SUPPORT, ADJUSTABLE OR FIXED HEIGHT, ANY TYPE	Yes			MMP
E0141	Equipment	WALKER, RIGID, WHEELED, ADJUSTABLE OR FIXED HEIGHT	Yes			MMP
E0143	Equipment	WALKER, FOLDING, WHEELED, ADJUSTABLE OR FIXED HEIGHT	Yes			MMP
E0144	Equipment	WALKER, ENCLOSED, FOUR SIDED FRAMED, RIGID OR FOLDING, WHEELED WITH POSTERIOR SEAT	Yes			MMP
E0147	Equipment	WALKER, HEAVY DUTY, MULTIPLE BRAKING SYSTEM, VARIABLE WHEEL RESISTANCE	Yes			MMP
E0148	Equipment	WALKER, HEAVY DUTY, WITHOUT WHEELS, RIGID OR FOLDING, ANY TYPE, EACH	Yes			MMP
E0149	Equipment	WALKER, HEAVY DUTY, WHEELED, RIGID OR FOLDING, ANY TYPE	Yes			MMP
E0153	Equipment	PLATFORM ATTACHMENT, FOREARM CRUTCH, EACH	Yes			MMP
E0154	Equipment	PLATFORM ATTACHMENT, WALKER, EACH	Yes			MMP
E0155	Equipment	WHEEL ATTACHMENT, RIGID PICK-UP WALKER, PER PAIR	Yes			MMP
E0156	Equipment	SEAT ATTACHMENT, WALKER	Yes			MMP
E0157	Equipment	CRUTCH ATTACHMENT, WALKER, EACH	Yes			MMP
E0158	Equipment	LEG EXTENSIONS FOR WALKER, PER SET OF FOUR (4)	Yes			MMP
E0159	Equipment	BRAKE ATTACHMENT FOR WHEELED WALKER, REPLACEMENT, EACH	Yes			MMP
E0160	Equipment	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	Yes			MMP
E0161	Equipment	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	Yes			MMP
E0162	Equipment	SITZ BATH CHAIR	Yes			MMP
E0163	Equipment	COMMODE CHAIR, STATIONARY, WITH FIXED ARMS	Yes			MMP
E0165	Equipment	COMMODE CHAIR, STATIONARY, WITH DETACHABLE ARMS	Yes			MMP
E0167	Equipment	PAIL OR PAN FOR USE WITH COMMODE CHAIR	Yes			MMP
E0168	Equipment	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	Yes			MMP
E0170	Equipment	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	Yes			MMP
E0171	Equipment	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	Yes			MMP
E0172	Equipment	SEAT LIFT MECHANISM PLACED OVER OR ON TOP OF TOILET, ANY TYPE	Not Covered			MMP
E0175	Equipment	FOOT REST, FOR USE WITH COMMODE CHAIR, EACH	Yes			MMP
E0181	Equipment	PRESSURE PAD, ALTERNATING WITH PUMP, HEAVY DUTY	Yes			MMP
E0182	Supply	PUMP FOR ALTERNATING PRESSURE PAD	Yes			MMP
E0184	Equipment	DRY PRESSURE MATTRESS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0185	Equipment	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0186	Equipment	AIR PRESSURE MATTRESS	Yes			MMP
E0187	Equipment	WATER PRESSURE MATTRESS	Yes			MMP
E0188	Equipment	SYNTHETIC SHEEPSKIN PAD	Yes			MMP
E0189	Equipment	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	Yes			MMP
E0190	Equipment	POSITIONING CUSHION/PILLOW/WEDGE, ANY SHAPE OR SIZE	Not Covered			MMP
E0191	Equipment	HEEL OR ELBOW PROTECTOR, EACH	Yes			MMP
E0193	Equipment	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	Yes			MMP
E0194	Equipment	AIR FLUIDIZED BED	Yes			MMP
E0196	Equipment	GEL PRESSURE MATTRESS	Yes			MMP
E0197	Equipment	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0198	Equipment	WATER PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0199	Equipment	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0200	Equipment	HEAT LAMP, WITHOUT STAND (TABLE MODEL), INCLUDES BULB, OR INFRARED ELEMENT	Yes			MMP
E0202	Equipment	PHOTOTHERAPY (BILIRUBIN) LIGHT WITH PHOTOMETER	Yes			MMP
E0203	Equipment	THERAPEUTIC LIGHTBOX, MINIMUM 10,000 LUX, TABLE TOP MODEL	Not Covered			MMP
E0205	Equipment	HEAT LAMP, WITH STAND, INCLUDES BULB, OR INFRARED ELEMENT	Yes			MMP
E0210	Equipment	ELECTRIC HEAT PAD, STANDARD	No			MMP
E0217	Equipment	WATER CIRCULATING HEAT PAD WITH PUMP	Yes			MMP
E0218	Equipment	WATER CIRCULATING COLD PAD WITH PUMP	Not Covered			MMP
E0221	Equipment	INFRARED HEATING PAD SYSTEM	Not Covered			MMP
E0225	Equipment	HYDROCOLLATOR UNIT, INCLUDES PADS	Yes			MMP
E0231	Equipment	NON-CONTACT WOUND WARMING DEVICE (TEMPERATURE CONTROL UNIT, AC ADAPTER AND POWER CORD) FOR USE WITH WARMING CARD AND WOUND COVER	Not Covered			MMP
E0232	Equipment	WARMING CARD FOR USE WITH THE NON CONTACT WOUND WARMING DEVICE AND NON CONTACT WOUND WARMING WOUND COVER	Not Covered			MMP
E0235	Equipment	PARAFFIN BATH UNIT, PORTABLE	Yes			MMP
E0236	Equipment	PUMP FOR WATER CIRCULATING PAD	Yes			MMP
E0239	Equipment	HYDROCOLLATOR UNIT, PORTABLE	Yes			MMP
E0240	Equipment	BATH/SHOWER CHAIR, WITH OR WITHOUT WHEELS, ANY SIZE	Not Covered			MMP
E0241	Equipment	BATH TUB WALL RAIL, EACH	Not Covered			MMP
E0242	Equipment	BATH TUB RAIL, FLOOR BASE	Not Covered			MMP
E0243	Equipment	TOILET RAIL, EACH	Not Covered			MMP
E0244	Equipment	RAISED TOILET SEAT	Not Covered			MMP
E0245	Equipment	TUB STOOL OR BENCH	Not Covered			MMP
E0246	Equipment	TRANSFER TUB RAIL ATTACHMENT	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0247	Equipment	TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING	Not Covered			MMP
E0248	Equipment	TRANSFER BENCH, HEAVY DUTY, FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING	Not Covered			MMP
E0249	Equipment	PAD FOR WATER CIRCULATING HEAT UNIT	Yes			MMP
E0250	Equipment	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0251	Equipment	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0255	Equipment	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0256	Equipment	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0260	Equipment	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0261	Equipment	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0265	Equipment	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0266	Equipment	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0270	Equipment	HOSPITAL BED, INSTITUTIONAL TYPE INCLUDES: OSCILLATING, CIRCULATING AND STRYKER FRAME, WITH MATTRESS	No			MMP
E0271	Equipment	MATTRESS, INNERSPRING	Yes			MMP
E0272	Equipment	MATTRESS, FOAM RUBBER	Yes			MMP
E0273	Equipment	BED BOARD	Not Covered			MMP
E0274	Equipment	OVER-BED TABLE	Not Covered			MMP
E0275	Equipment	BED PAN, STANDARD, METAL OR PLASTIC	Yes			MMP
E0276	Equipment	BED PAN, FRACTURE, METAL OR PLASTIC	Yes			MMP
E0277	Equipment	POWERED PRESSURE-REDUCING AIR MATTRESS	Yes			MMP
E0280	Equipment	BED CRADLE, ANY TYPE	Yes			MMP
E0290	Equipment	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	Yes			MMP
E0291	Equipment	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0292	Equipment	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	Yes			MMP
E0293	Equipment	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0294	Equipment	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	Yes			MMP
E0295	Equipment	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0296	Equipment	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS). WITHOUT SIDE RAILS, WITH MATTRESS	Yes			MMP
E0297	Equipment	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITHOUT SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0300	Equipment	PEDIATRIC CRIB, HOSPITAL GRADE, FULLY ENCLOSED	Yes			MMP
E0301	Equipment	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0302	Equipment	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	Yes			MMP
E0303	Equipment	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0304	Equipment	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	Yes			MMP
E0305	Equipment	BED SIDE RAILS, HALF LENGTH	Yes			MMP
E0310	Equipment	BED SIDE RAILS, FULL LENGTH	Yes			MMP
E0315	Equipment	BED ACCESSORY: BOARD, TABLE, OR SUPPORT DEVICE, ANY TYPE	Not Covered			MMP
E0316	Equipment	SAFETY ENCLOSURE FRAME/CANOPY FOR USE WITH HOSPITAL BED, ANY TYPE	Yes			MMP
E0325	Equipment	URINAL; MALE, JUG-TYPE, ANY MATERIAL	Yes			MMP
E0326	Equipment	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	Yes			MMP
E0328	Equipment	HOSPITAL BED, PEDIATRIC, MANUAL, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SPRING, INCLUDES MATTRESS	No			MMP
E0329	Equipment	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SPRING, INCLUDES MATTRESS	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0370	Equipment	AIR PRESSURE ELEVATOR FOR HEEL	Not Covered			MMP
E0371	Equipment	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0372	Equipment	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	Yes			MMP
E0373	Equipment	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	Yes			MMP
E0424	Equipment	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	Yes			MMP
E0425	Equipment	STATIONARY COMPRESSED GAS SYSTEM, PURCHASE; INCLUDES REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	Not Covered			MMP
E0430	Equipment	PORTABLE GASEOUS OXYGEN SYSTEM, PURCHASE; INCLUDES REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	Not Covered			MMP
E0431	Equipment	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	Yes			MMP
E0433	Equipment	PORTABLE LIQUID OXYGEN SYSTEM, RENTAL; HOME LIQUEFIER USED TO FILL PORTABLE LIQUID OXYGEN CONTAINERS, INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK AND TUBING, WITH OR WITHOUT SUPPLY RESERVOIR AND CONTENTS GAUGE	Yes			MMP
E0434	Equipment	PORTABLE LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, HUMIDIFIER, FLOWMETER, REFILL ADAPTOR, CONTENTS GAUGE, CANNULA OR MASK, AND TUBING	Yes			MMP
E0435	Equipment	PORTABLE LIQUID OXYGEN SYSTEM, PURCHASE; INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, FLOWMETER, HUMIDIFIER, CONTENTS GAUGE, CANNULA OR MASK, TUBING AND REFILL ADAPTOR	Not Covered			MMP
E0439	Equipment	STATIONARY LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, & TUBING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0440	Equipment	STATIONARY LIQUID OXYGEN SYSTEM, PURCHASE; INCLUDES USE OF RESERVOIR, CONTENTS INDICATOR, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	Not Covered			MMP
E0441	Supply	OXYGEN CONTENTS, GASEOUS (FOR USE WITH OWNED GASEOUS STATIONARY SYSTEMS OR WHEN BOTH A STATIONARY AND PORTABLE GASEOUS SYSTEM ARE OWNED), 1 MONTH'S SUPPLY = 1 UNIT	Yes			MMP
E0442	Supply	OXYGEN CONTENTS, LIQUID (FOR USE WITH OWNED LIQUID STATIONARY SYSTEMS OR WHEN BOTH A STATIONARY AND PORTABLE LIQUID SYSTEM ARE OWNED), 1 MONTH'S SUPPLY = 1 UNIT	Yes			MMP
E0443	Supply	PORTABLE OXYGEN CONTENTS, GASEOUS (FOR USE ONLY WITH PORTABLE GASEOUS SYSTEMS WHEN NO STATIONARY GAS OR LIQUID SYSTEM IS USED), 1 MONTH'S SUPPLY = 1 UNIT	Yes			MMP
E0444	Supply	PORTABLE OXYGEN CONTENTS, LIQUID (FOR USE ONLY WITH PORTABLE LIQUID SYSTEMS WHEN NO STATIONARY GAS OR LIQUID SYSTEM IS USED), 1 MONTH'S SUPPLY = 1 UNIT	Yes			MMP
E0445	Equipment	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NON-INVASIVELY	No			MMP
E0446	Equipment	TOPICAL OXYGEN DELIVERY SYSTEM, NOT OTHERWISE SPECIFIED, INCLUDES ALL SUPPLIES AND ACCESSORIES	Not Covered			MMP
E0455	Equipment	OXYGEN TENT, EXCLUDING CROUP OR PEDIATRIC TENTS	No			MMP
E0457	Equipment	CHEST SHELL (CUIRASS)	No			MMP
E0459	Equipment	CHEST WRAP	No			MMP
E0462	Equipment	ROCKING BED WITH OR WITHOUT SIDE RAILS	Yes			MMP
E0465	Equipment	Home ventilator, any type, used with invasive interface, (e.g., tracheostomy tube)	Yes			MMP
E0466	Equipment	Home ventilator, any type, used with non-invasive interface, (e.g., mask, chest shell)	Yes			MMP
E0470	Equipment	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0471	Equipment	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACK-UP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	Yes			MMP
E0472	Equipment	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACKUP RATE FEATURE, USED WITH INVASIVE INTERFACE, E.G., TRACHEOSTOMY TUBE (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	Yes			MMP
E0480	Equipment	PERCUSSOR, ELECTRIC OR PNEUMATIC, HOME MODEL	Yes			MMP
E0481	Equipment	INTRAPULMONARY PERCUSSIVE VENTILATION SYSTEM AND RELATED ACCESSORIES	Not Covered			MMP
E0482	Equipment	COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND NEGATIVE AIRWAY PRESSURE	Yes			MMP
E0483	Equipment	HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH	Yes			MMP
E0484	Equipment	OSCILLATORY POSITIVE EXPIRATORY PRESSURE DEVICE, NON-ELECTRIC, ANY TYPE, EACH	Yes			MMP
E0487	Equipment	SPIROMETER, ELECTRONIC, INCLUDES ALL ACCESSORIES	No			MMP
E0500	Equipment	IPPB MACHINE, ALL TYPES, WITH BUILT-IN NEBULIZATION; MANUAL OR AUTOMATIC VALVES; INTERNAL OR EXTERNAL POWER SOURCE	Yes			MMP
E0550	Equipment	HUMIDIFIER, DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENTS OR OXYGEN DELIVERY	Yes			MMP
E0555	Equipment	HUMIDIFIER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER	Not Covered			MMP
E0560	Equipment	HUMIDIFIER, DURABLE FOR SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENT OR OXYGEN DELIVERY	Yes			MMP
E0561	Equipment	HUMIDIFIER, NON-HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
E0562	Equipment	HUMIDIFIER, HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	Yes			MMP
E0565	Equipment	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF-CONTAINED OR CYLINDER DRIVEN	Yes			MMP
E0570	Equipment	NEBULIZER, WITH COMPRESSOR	Yes			MMP
E0572	Equipment	AEROSOL COMPRESSOR, ADJUSTABLE PRESSURE, LIGHT DUTY FOR INTERMITTENT USE	Yes			MMP
E0574	Equipment	ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SMALL VOLUME NEBULIZER	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0575	Equipment	NEBULIZER, ULTRASONIC, LARGE VOLUME	Yes			MMP
E0580	Equipment	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER	Yes			MMP
E0585	Equipment	NEBULIZER, WITH COMPRESSOR AND HEATER	Yes			MMP
E0600	Equipment	RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC	Yes			MMP
E0601	Equipment	CONTINUOUS AIRWAY PRESSURE (CPAP) DEVICE	Yes			MMP
E0602	Equipment	BREAST PUMP, MANUAL, ANY TYPE	Yes			MMP
E0603	Equipment	BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE	No			MMP
E0604	Equipment	BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR DC), ANY TYPE	No			MMP
E0605	Equipment	VAPORIZER, ROOM TYPE	Yes			MMP
E0606	Equipment	POSTURAL DRAINAGE BOARD	Yes			MMP
E0607	Supply	HOME BLOOD GLUCOSE MONITOR	Yes			MMP
E0610	Supply	PACEMAKER MONITOR, SELF-CONTAINED, (CHECKS BATTERY DEPLETION, INCLUDES AUDIBLE AND VISIBLE CHECK SYSTEMS)	Yes			MMP
E0615	Supply	PACEMAKER MONITOR, SELF CONTAINED, CHECKS BATTERY DEPLETION AND OTHER PACEMAKER COMPONENTS, INCLUDES DIGITAL/VISIBLE CHECK SYSTEMS	Yes			MMP
E0617	Equipment	EXTERNAL DEFIBRILLATOR WITH	Not Covered			MMP
E0617	Equipment	EXTERNAL DEFIBRILLATOR WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS	Yes			MMP
E0618	Equipment	APNEA MONITOR, WITHOUT RECORDING FEATURE	Yes			MMP
E0619	Equipment	APNEA MONITOR, WITH RECORDING FEATURE	No			MMP
E0620	Supply	SKIN PIERCING DEVICE FOR COLLECTION OF CAPILLARY BLOOD, LASER, EACH	Yes			MMP
E0621	Equipment	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	Yes			MMP
E0625	Equipment	PATIENT LIFT, BATHROOM OR TOILET, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
E0627	Equipment	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	Yes			MMP
E0628	Equipment	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-ELECTRIC	No			MMP
E0629	Equipment	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	Yes			MMP
E0630	Equipment	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	Yes			MMP
E0635	Equipment	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0636	Equipment	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	Yes			MMP
E0637	Equipment	COMBINATION SIT TO STAND SYSTEM, ANY SIZE INCLUDING PEDIATRIC, WITH SEATLIFT FEATURE, WITH OR WITHOUT WHEELS	Not Covered			MMP
E0638	Equipment	STANDING FRAME SYSTEM, ONE POSITION (E.G. UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS	No			MMP
E0639	Equipment	PATIENT LIFT, MOVEABLE FROM ROOM TO ROOM WITH DISASSEMBLY AND REASSEMBLY, INCLUDES ALL COMPONENTS/ACCESSORIES	Yes			MMP
E0640	Equipment	PATIENT LIFT, FIXED SYSTEM, INCLUDES ALL COMPONENTS/ACCESSORIES	Yes			MMP
E0641	Equipment	STANDING FRAME SYSTEM, MULTI-POSITION (E.G. THREE-WAY STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS	Yes			MMP
E0642	Equipment	STANDING FRAME SYSTEM, MOBILE (DYNAMIC STANDER), ANY SIZE INCLUDING PEDIATRIC	No			MMP
E0650	Equipment	PNEUMATIC COMPRESSOR, NON-SEGMENTAL HOME MODEL	Yes			MMP
E0651	Equipment	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITHOUT CALIBRATED GRADIENT PRESSURE	Yes			MMP
E0652	Equipment	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE	Yes			MMP
E0655	Equipment	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF ARM	Yes			MMP
E0660	Equipment	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG	Yes			MMP
E0665	Equipment	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM	Yes			MMP
E0666	Equipment	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG	Yes			MMP
E0667	Equipment	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG	Yes			MMP
E0668	Equipment	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM	Yes			MMP
E0669	Equipment	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG	Yes			MMP
E0670	Equipment	Segmental pneumatic appliance for use with pneumatic compressor, integrated, 2 full legs and trunk	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0671	Equipment	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, FULL LEG	Yes			MMP
E0672	Equipment	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, FULL ARM	Yes			MMP
E0673	Equipment	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, HALF LEG	Yes			MMP
E0676	Equipment	INTERMITTENT LIMB COMPRESSION DEVICE (INCLUDES ALL ACCESSORIES), NOT OTHERWISE SPECIFIED	Yes			MMP
E0691	Equipment	ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION; TREATMENT AREA 2 SQUARE FEET OR LESS	Yes			MMP
E0692	Equipment	ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION; TREATMENT AREA 2 SQUARE FEET OR LESS	Yes			MMP
E0693	Equipment	ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION, 6 FOOT PANEL	Yes			MMP
E0694	Equipment	ULTRAVIOLET MULTIDIRECTIONAL LIGHT THERAPY SYSTEM IN 6 FOOT CABINET, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION	Yes			MMP
E0700	Equipment	SAFETY EQUIPMENT (E.G., BELT, HARNESS OR VEST)	Not Covered			MMP
E0705	Equipment	TRANSFER DEVICE, ANY TYPE, EACH	Yes			MMP
E0710	Equipment	RESTRAINTS, ANY TYPE (BODY, CHEST, WRIST OR ANKLE)	Not Covered			MMP
E0720	Equipment	TENS, TWO LEAD, LOCALIZED STIMULATION	Yes			MMP
E0730	Equipment	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION DEVICE, FOUR OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION	Yes			MMP
E0731	Equipment	FORM FITTING CONDUCTIVE GARMENT FOR DELIVERY OF TENS OR NMES (WITH CONDUCTIVE FIBERS SEPARATED FROM THE PATIENT'S SKIN BY LAYERS OF FABRIC)	Yes			MMP
E0740	Equipment	INCONTINENCE TREATMENT SYSTEM, PELVIC FLOOR STIMULATOR, MONITOR, SENSOR AND/OR TRAINER	Yes			MMP
E0744	Equipment	NEUROMUSCULAR STIMULATOR FOR SCOLIOSIS	Yes			MMP
E0745	Equipment	NEUROMUSCULAR STIMULATOR, ELECTRONIC SHOCK UNIT	Yes			MMP
E0746	Equipment	ELECTROMYOGRAPHY (EMG), BIOFEEDBACK DEVICE	Not Covered			MMP
E0747	Equipment	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, OTHER THAN SPINAL APPLICATIONS	Yes			MMP
E0748	Equipment	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, SPINAL APPLICATIONS	Yes			MMP
E0749	Equipment	OSTEOGENESIS STIMULATOR, ELECTRICAL, SURGICALLY IMPLANTED NEUROSTIMULATOR PULSE GENERATOR	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0760	Equipment	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NON-INVASIVE	Yes			MMP
E0761	Equipment	NON-THERMAL PULSED HIGH FREQUENCY RADIOWAVES, HIGH PEAK POWER ELECTROMAGNETIC ENERGY TREATMENT DEVICE	Not Covered			MMP
E0762	Equipment	TRANSCUTANEOUS ELECTRICAL JOINT STIMULATION DEVICE SYSTEM, INCLUDES ALL ACCESSORIES	Yes			MMP
E0766	Equipment	Electrical stimulation device used for cancer treatment, includes all accessories, any type	Yes			MMP
E0769	Equipment	ELECTRICAL STIMULATION OR ELECTROMAGNETIC WOUND TREATMENT DEVICE, NOT OTHERWISE CLASSIFIED	Yes			MMP
E0776	Equipment	IV POLE	Yes			MMP
E0779	Equipment	AMBULATORY INFUSION PUMP, MECHANICAL, REUSABLE, FOR INFUSION 8 HOURS OR GREATER	Yes			MMP
E0780	Equipment	AMBULATORY INFUSION PUMP, MECHANICAL, REUSABLE, FOR INFUSION LESS THAN 8 HOURS	Yes			MMP
E0781	Equipment	AMBULATORY INFUSION PUMP, SINGLE OR MULTIPLE CHANNELS, ELECTRIC OR BATTERY OPERATED, WITH ADMINISTRATIVE EQUIPMENT, WORN BY PATIENT	Not Covered			MMP
E0781	Equipment	AMBULATORY INFUSION PUMP, SINGLE OR MULTIPLE CHANNELS, ELECTRIC OR BATTERY OPERATED, WITH ADMINISTRATIVE EQUIPMENT, WORN BY PATIENT	Yes			MMP
E0784	Supply	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN	Yes			MMP
E0791	Equipment	PARENTERAL INFUSION PUMP, STATIONARY, SINGLE OR MULTI-CHANNEL	Yes			MMP
E0830	Equipment	AMBULATORY TRACTION DEVICE, ALL TYPES, EACH	Not Covered			MMP
E0840	Equipment	TRACTION FRAME, ATTACHED TO HEADBOARD, CERVICAL TRACTION	Yes			MMP
E0849	Equipment	TRACTION EQUIPMENT, CERVICAL, FREE-STANDING STAND/FRAME, PNEUMATIC, APPLYING TRACTION FORCE TO OTHER THAN MANDIBLE	Yes			MMP
E0850	Equipment	TRACTION STAND, FREE STANDING, CERVICAL TRACTION	Yes			MMP
E0855	Equipment	CERVICAL TRACTION EQUIPMENT NOT REQUIRING ADDITIONAL STAND OR FRAME	Yes			MMP
E0856	Equipment	CERVICAL TRACTION DEVICE, CERVICAL COLLAR WITH INFLATABLE AIR BLADDER	Yes			MMP
E0860	Equipment	TRACTION EQUIPMENT, OVERDOOR, CERVICAL	Yes			MMP
E0870	Equipment	TRACTION FRAME, ATTACHED TO FOOTBOARD, EXTREMITY TRACTION, (E.G. BUCK'S)	Yes			MMP
E0880	Equipment	TRACTION STAND, FREE STANDING, EXTREMITY TRACTION, (E.G., BUCK'S)	Yes			MMP
E0890	Equipment	TRACTION FRAME, ATTACHED TO FOOTBOARD, PELVIC TRACTION	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0900	Equipment	TRACTION STAND, FREE STANDING, PELVIC TRACTION, (E.G., BUCK'S)	Yes			MMP
E0910	Equipment	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	Yes			MMP
E0911	Equipment	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	Yes			MMP
E0912	Equipment	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	Yes			MMP
E0920	Equipment	FRACTURE FRAME, ATTACHED TO BED, INCLUDES WEIGHTS	Yes			MMP
E0930	Equipment	FRACTURE FRAME, FREE STANDING, INCLUDES WEIGHTS	Yes			MMP
E0935	Equipment	CONTINUOUS PASSIVE MOTION EXERCISE DEVICE FOR USE ON KNEE ONLY	Yes			MMP
E0936	Equipment	CONTINUOUS PASSIVE MOTION EXERCISE DEVICE FOR USE OTHER THAN KNEE	No			MMP
E0940	Equipment	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	Yes			MMP
E0941	Equipment	GRAVITY ASSISTED TRACTION DEVICE, ANY TYPE	Yes			MMP
E0942	Equipment	CERVICAL HEAD HARNESS/HALTER	Yes			MMP
E0944	Equipment	PELVIC BELT/HARNESS/BOOT	Yes			MMP
E0945	Equipment	EXTREMITY BELT/HARNESS	Yes			MMP
E0946	Equipment	FRACTURE, FRAME, DUAL WITH CROSS BARS, ATTACHED TO BED, (E.G. BALKEN, 4 POSTER)	Yes			MMP
E0947	Equipment	FRACTURE FRAME, ATTACHMENTS FOR COMPLEX PELVIC TRACTION	Yes			MMP
E0948	Equipment	FRACTURE FRAME, ATTACHMENTS FOR COMPLEX CERVICAL TRACTION	Yes			MMP
E0950	Equipment	WHEELCHAIR ACCESSORY, TRAY, EACH	Not Covered			MMP
E0951	Equipment	HEEL LOOP/HOLDER, ANY TYPE, WITH OR WITHOUT ANKLE STRAP, EACH	Yes			MMP
E0952	Equipment	TOE LOOP/HOLDER, ANY TYPE, EACH	Yes			MMP
E0953	Equipment	Wheelchair accessory, lateral thigh or knee support, any type including fixed mounting hardware, each	No			MMP
E0954	Equipment	Wheelchair accessory, foot box, any type, includes attachment and mounting hardware, each foot	No			MMP
E0955	Equipment	WHEELCHAIR ACCESSORY, HEADREST, CUSHIONED, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	Yes			MMP
E0956	Equipment	WHEELCHAIR ACCESSORY, LATERAL TRUNK OR HIP SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	Yes			MMP
E0957	Equipment	WHEELCHAIR ACCESSORY, MEDIAL THIGH SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	Yes			MMP
E0958	Equipment	MANUAL WHEELCHAIR ACCESSORY, ONE-ARM DRIVE ATTACHMENT, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E0959	Equipment	MANUAL WHEELCHAIR ACCESSORY, ADAPTER FOR AMPUTEE, EACH	Yes			MMP
E0960	Equipment	WHEELCHAIR ACCESSORY, SHOULDER HARNESS/STRAPS OR CHEST STRAP, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E0961	Equipment	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK BRAKE EXTENSION (HANDLE), EACH	Yes			MMP
E0966	Equipment	MANUAL WHEELCHAIR ACCESSORY, HEADREST EXTENSION, EACH	Yes			MMP
E0967	Equipment	MANUAL WHEELCHAIR ACCESSORY, HAND RIM WITH PROJECTIONS, ANY TYPE, REPLACEMENT ONLY, EACH	Yes			MMP
E0968	Equipment	COMMUNE SEAT, WHEELCHAIR	Yes			MMP
E0969	Equipment	NARROWING DEVICE, WHEELCHAIR	Yes			MMP
E0970	Equipment	NO.2 FOOTPLATES, EXCEPT FOR ELEVATING LEG REST	Not Covered			MMP
E0971	Equipment	MANUAL WHEELCHAIR ACCESSORY, ANTI-TIPPING DEVICE, EACH	Yes			MMP
E0973	Equipment	WHEELCHAIR ACCESSORY, ADJUSTABLE HEIGHT, DETACHABLE ARMREST, COMPLETE ASSEMBLY, EACH	Yes			MMP
E0974	Equipment	MANUAL WHEELCHAIR ACCESSORY, ANTI-ROLLBACK DEVICE, EACH	Yes			MMP
E0978	Equipment	WHEELCHAIR ACCESSORY, POSITIONING BELT/SAFETY BELT/PELVIC STRAP, EACH	Yes			MMP
E0980	Equipment	SAFETY VEST, WHEELCHAIR	Yes			MMP
E0981	Equipment	WHEELCHAIR ACCESSORY, SEAT UPHOLSTERY, REPLACEMENT ONLY, EACH	Yes			MMP
E0982	Equipment	WHEELCHAIR ACCESSORY, BACK UPHOLSTERY, REPLACEMENT ONLY, EACH	Yes			MMP
E0983	Equipment	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, JOYSTICK CONTROL	Yes			MMP
E0984	Equipment	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, TILLER CONTROL	Yes			MMP
E0985	Equipment	WHEELCHAIR ACCESSORY, SEAT LIFT MECHANISM	Yes			MMP
E0988	Equipment	MANUAL WHEELCHAIR ACCESSORY, LEVER-ACTIVATED, WHEEL DRIVE, PAIR	Yes			MMP
E0990	Equipment	WHEELCHAIR ACCESSORY, ELEVATING LEG REST, COMPLETE ASSEMBLY, EACH	Yes			MMP
E0992	Equipment	MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT INSERT	Yes			MMP
E0994	Equipment	ARM REST, EACH	Yes			MMP
E0995	Equipment	WHEELCHAIR ACCESSORY, CALF REST/PAD, EACH	Yes			MMP
E1002	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, TILT ONLY	Yes			MMP
E1003	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITHOUT SHEAR REDUCTION	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1004	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITH MECHANICAL SHEAR REDUCTION	Yes			MMP
E1005	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITH POWER SHEAR REDUCTION	Yes			MMP
E1006	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITHOUT SHEAR REDUCTION	Yes			MMP
E1007	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH MECHANICAL SHEAR REDUCTION	Yes			MMP
E1008	Equipment	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH POWER SHEAR REDUCTION	Yes			MMP
E1009	Equipment	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, MECHANICALLY LINKED LEG ELEVATION SYSTEM, INCLUDING PUSHROD AND LEG REST, EACH	Yes			MMP
E1010	Equipment	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, POWER LEG ELEVATION SYSTEM, INCLUDING LEG REST, EACH	Yes			MMP
E1011	Equipment	MODIFICATION TO PEDIATRIC SIZE WHEELCHAIR, WIDTH ADJUSTMENT PACKAGE (NOT TO BE DISPENSED WITH INITIAL CHAIR)	No			MMP
E1012	Equipment	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each	Yes			MMP
E1014	Equipment	RECLINING BACK, ADDITION TO PEDIATRIC SIZE WHEELCHAIR	Yes			MMP
E1015	Equipment	SHOCK ABSORBER FOR MANUAL WHEELCHAIR, EACH	Yes			MMP
E1016	Equipment	SHOCK ABSORBER FOR POWER WHEELCHAIR, EACH	Yes			MMP
E1017	Equipment	HEAVY DUTY SHOCK ABSORBER FOR HEAVY DUTY OR EXTRA HEAVY DUTY MANUAL WHEELCHAIR, EACH	No			MMP
E1018	Equipment	HEAVY DUTY SHOCK ABSORBER FOR HEAVY DUTY OR EXTRA HEAVY DUTY POWER WHEELCHAIR, EACH	No			MMP
E1020	Equipment	RESIDUAL LIMB SUPPORT SYSTEM FOR WHEELCHAIR	Yes			MMP
E1028	Equipment	WHEELCHAIR ACCESSORY, MANUAL SWINGAWAY, RETRACTABLE OR REMOVABLE MOUNTING HARDWARE FOR JOYSTICK, OTHER CONTROL INTERFACE OR POSITIONING ACCESSORY	Yes			MMP
E1029	Equipment	WHEELCHAIR ACCESSORY, VENTILATOR TRAY, FIXED	Yes			MMP
E1030	Equipment	WHEELCHAIR ACCESSORY, VENTILATOR TRAY, GIMBALED	Yes			MMP
E1031	Equipment	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5" OR GREATER	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1035	Equipment	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER	Yes			MMP
E1036	Equipment	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	Yes			MMP
E1037	Equipment	TRANSPORT CHAIR, PEDIATRIC SIZE	Yes			MMP
E1038	Equipment	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
E1039	Equipment	TRANSPORT CHAIR, ADULT SIZE, HEAVY DUTY, PATIENT WEIGHT CAPACITY GREATER THAN 300 POUNDS	Yes			MMP
E1050	Equipment	FULLY-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP
E1060	Equipment	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1070	Equipment	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	Yes			MMP
E1083	Equipment	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG REST	Yes			MMP
E1084	Equipment	HEMI-WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP
E1085	Equipment	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOT RESTS	Not Covered			MMP
E1086	Equipment	HEMI-WHEELCHAIR DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS	Not Covered			MMP
E1087	Equipment	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP
E1088	Equipment	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP
E1089	Equipment	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	Not Covered			MMP
E1090	Equipment	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOT RESTS	Not Covered			MMP
E1092	Equipment	WIDE HEAVY DUTY WHEEL CHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH), SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1093	Equipment	WIDE HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTRESTS	Yes			MMP
E1100	Equipment	SEMI-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	Yes			MMP
E1110	Equipment	SEMI-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEG REST	Yes			MMP
E1130	Equipment	STANDARD WHEELCHAIR, FIXED FULL LENGTH ARMS, FIXED OR SWING AWAY DETACHABLE FOOTRESTS	Not Covered			MMP
E1140	Equipment	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS	Not Covered			MMP
E1150	Equipment	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1160	Equipment	WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1161	Equipment	MANUAL ADULT SIZE WHEELCHAIR, INCLUDES TILT IN SPACE	Yes			MMP
E1170	Equipment	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1171	Equipment	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, WITHOUT FOOTRESTS OR LEGREST	Yes			MMP
E1172	Equipment	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) WITHOUT FOOTRESTS OR LEGREST	Yes			MMP
E1180	Equipment	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTRESTS	Yes			MMP
E1190	Equipment	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1195	Equipment	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGREST	Yes			MMP
E1200	Equipment	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	Yes			MMP
E1220	Equipment	WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED, (INDICATE BRAND NAME, MODEL NUMBER, IF ANY) AND JUSTIFICATION	Not Covered			MMP
E1221	Equipment	WHEELCHAIR WITH FIXED ARM, FOOTRESTS	Yes			MMP
E1222	Equipment	WHEELCHAIR WITH FIXED ARM, ELEVATING LEGRESTS	Yes			MMP
E1223	Equipment	WHEELCHAIR WITH DETACHABLE ARMS, FOOTRESTS	Yes			MMP
E1224	Equipment	WHEELCHAIR WITH DETACHABLE ARMS, ELEVATING LEGRESTS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1225	Equipment	WHEELCHAIR ACCESSORY, MANUAL SEMI-RECLINING BACK, (RECLINE GREATER THAN 15 DEGREES, BUT LESS THAN 80 DEGREES), EACH	Yes			MMP
E1226	Equipment	WHEELCHAIR ACCESSORY, MANUAL FULLY RECLINING BACK, (RECLINE GREATER THAN 80 DEGREES), EACH	Yes			MMP
E1227	Equipment	SPECIAL HEIGHT ARMS FOR WHEELCHAIR	Yes			MMP
E1228	Equipment	SPECIAL BACK HEIGHT FOR WHEELCHAIR	Yes			MMP
E1229	Equipment	WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED	Not Covered			MMP
E1230	Equipment	POWER OPERATED VEHICLE (THREE OR FOUR WHEEL NONHIGHWAY) SPECIFY BRAND NAME AND MODEL NUMBER	Yes			MMP
E1231	Equipment	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM	No			MMP
E1232	Equipment	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITH SEATING	Yes			MMP
E1233	Equipment	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITHOUT SEATING	Yes			MMP
E1234	Equipment	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITHOUT SEATING	Yes			MMP
E1235	Equipment	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM	Yes			MMP
E1236	Equipment	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM	Yes			MMP
E1237	Equipment	WHEELCHAIR PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM	Yes			MMP
E1238	Equipment	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM	Yes			MMP
E1239	Equipment	POWER WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED	Not Covered			MMP
E1240	Equipment	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS, (DESK OR FULL LENGTH) SWING AWAY DETACHABLE, ELEVATING LEGREST	Yes			MMP
E1250	Equipment	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	Not Covered			MMP
E1260	Equipment	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	Not Covered			MMP
E1270	Equipment	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	Yes			MMP
E1280	Equipment	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEGRESTS	Yes			MMP
E1285	Equipment	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1290	Equipment	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	Not Covered			MMP
E1295	Equipment	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, ELEVATING LEGREST	Yes			MMP
E1296	Equipment	SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR	Yes			MMP
E1297	Equipment	SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY	Yes			MMP
E1298	Equipment	SPECIAL WHEELCHAIR SEAT DEPTH AND/OR WIDTH, BY CONSTRUCTION	Yes			MMP
E1300	Equipment	WHIRLPOOL, PORTABLE (OVERTUB TYPE)	Not Covered			MMP
E1352	Equipment	Oxygen accessory, flow regulator capable of positive inspiratory pressure	No			MMP
E1353	Supply	REGULATOR	Yes			MMP
E1354	Equipment	OXYGEN ACCESSORY, WHEELED	No			MMP
E1355	Supply	STAND/RACK	Yes			MMP
E1356	Equipment	OXYGEN ACCESSORY, BATTERY PACK/CARTRIDGE FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	No			MMP
E1357	Equipment	OXYGEN ACCESSORY, BATTERY CHARGER FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	No			MMP
E1358	Equipment	OXYGEN ACCESSORY, DC POWER ADAPTER FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	Not Covered			MMP
E1372	Equipment	IMMERSION EXTERNAL HEATER FOR NEBULIZER	Yes			MMP
E1390	Equipment	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE	Yes			MMP
E1391	Equipment	OXYGEN CONCENTRATOR, DUAL DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE, EACH	Yes			MMP
E1392	Equipment	PORTABLE OXYGEN CONCENTRATOR, RENTAL	Yes			MMP
E1399	Equipment	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS	Yes			MMP
E1405	Equipment	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITH HEATED DELIVERY	Yes			MMP
E1406	Equipment	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITHOUT HEATED DELIVERY	Yes			MMP
E1500	Supply	CENTRIFUGE, FOR DIALYSIS	No			MMP
E1510	Supply	KIDNEY, DIALYSATE DELIVERY SYST. KIDNEY MACHINE, PUMP RECIRCULATING, AIR REMOVAL SYST, FLOWRATE METER, POWER OFF, HEATER AND TEMPERATURE CONTROL WITH ALARM, I.V. POLES, PRESSURE GAUGE, CONCENTRATE CONTAINER	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1520	Supply	HEPARIN INFUSION PUMP FOR HEMODIALYSIS	No			MMP
E1530	Supply	AIR BUBBLE DETECTOR FOR HEMODIALYSIS, EACH, REPLACEMENT	No			MMP
E1540	Supply	PRESSURE ALARM FOR HEMODIALYSIS, EACH, REPLACEMENT	No			MMP
E1550	Supply	BATH CONDUCTIVITY METER FOR HEMODIALYSIS, EACH	No			MMP
E1560	Supply	BLOOD LEAK DETECTOR FOR HEMODIALYSIS, EACH, REPLACEMENT	No			MMP
E1570	Supply	ADJUSTABLE CHAIR, FOR ESRD PATIENTS	No			MMP
E1575	Supply	TRANSDUCER PROTECTORS/FLUID BARRIERS, FOR HEMODIALYSIS, ANY SIZE, PER 10	No			MMP
E1580	Supply	UNIPUNCTURE CONTROL SYSTEM FOR HEMODIALYSIS	No			MMP
E1590	Supply	HEMODIALYSIS MACHINE	No			MMP
E1592	Supply	AUTOMATIC INTERMITTENT PERITONEAL DIALYSIS SYSTEM	Not Covered			MMP
E1594	Supply	CYCLER DIALYSIS MACHINE FOR PERITONEAL DIALYSIS	No			MMP
E1600	Supply	DELIVERY AND/OR INSTALLATION CHARGES FOR HEMODIALYSIS EQUIPMENT	No			MMP
E1610	Supply	REVERSE OSMOSIS WATER PURIFICATION SYSTEM, FOR HEMODIALYSIS	No			MMP
E1615	Supply	DEIONIZER WATER PURIFICATION SYSTEM, FOR HEMODIALYSIS	No			MMP
E1620	Supply	BLOOD PUMP FOR HEMODIALYSIS, REPLACEMENT	No			MMP
E1625	Supply	WATER SOFTENING SYSTEM, FOR HEMODIALYSIS	No			MMP
E1630	Supply	RECIPROCATING PERITONEAL DIALYSIS SYSTEM	No			MMP
E1632	Supply	WEARABLE ARTIFICIAL KIDNEY, EACH	Not Covered			MMP
E1634	Supply	PERITONEAL DIALYSIS CLAMPS, EACH	No			MMP
E1635	Supply	COMPACT (PORTABLE) TRAVEL HEMODIALYZER SYSTEM	Not Covered			MMP
E1636	Supply	SORBENT CARTRIDGES, FOR HEMODIALYSIS, PER 10	No			MMP
E1637	Supply	HEMOSTATS, EACH	No			MMP
E1639	Supply	SCALE, EACH	No			MMP
E1699	Supply	DIALYSIS EQUIPMENT, NOT OTHERWISE SPECIFIED	Yes			MMP
E1700	Equipment	JAW MOTION REHABILITATION SYSTEM	Yes			MMP
E1701	Supply	REPLACEMENT CUSHIONS FOR JAW MOTION REHABILITATION SYSTEM, PKG. OF 6	Yes			MMP
E1702	Supply	REPLACEMENT MEASURING SCALES FOR JAW MOTION REHABILITATION SYSTEM, PKG. OF 200	Yes			MMP
E1800	Equipment	DYNAMIC ADJUSTABLE ELBOW EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1801	Equipment	STATIC PROGRESSIVE STRETCH ELBOW DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1802	Equipment	DYNAMIC ADJUSTABLE FOREARM PRONATION/SUPINATION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1805	Equipment	DYNAMIC ADJUSTABLE WRIST EXTENSION / FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1806	Equipment	STATIC PROGRESSIVE STRETCH WRIST DEVICE, FLEXION AND/OR EXTENSION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1810	Equipment	DYNAMIC ADJUSTABLE KNEE EXTENSION / FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1811	Equipment	STATIC PROGRESSIVE STRETCH KNEE DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1812	Equipment	DYNAMIC KNEE, EXTENSION/FLEXION DEVICE WITH ACTIVE RESISTANCE CONTROL	Yes			MMP
E1815	Equipment	DYNAMIC ADJUSTABLE ANKLE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1816	Equipment	STATIC PROGRESSIVE STRETCH ANKLE DEVICE, FLEXION AND/OR EXTENSION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1818	Equipment	STATIC PROGRESSIVE STRETCH FOREARM PRONATION / SUPINATION DEVICE, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1820	Supply	REPLACEMENT SOFT INTERFACE MATERIAL, DYNAMIC ADJUSTABLE EXTENSION/FLEXION DEVICE	Yes			MMP
E1821	Supply	REPLACEMENT SOFT INTERFACE MATERIAL/CUFFS FOR BI-DIRECTIONAL STATIC PROGRESSIVE STRETCH DEVICE	Yes			MMP
E1825	Equipment	DYNAMIC ADJUSTABLE FINGER EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1830	Equipment	DYNAMIC ADJUSTABLE TOE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E1831	Equipment	STATIC PROGRESSIVE STRETCH TOE DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1840	Equipment	DYNAMIC ADJUSTABLE SHOULDER FLEXION / ABDUCTION / ROTATION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	Yes			MMP
E1841	Equipment	STATIC PROGRESSIVE STRETCH SHOULDER DEVICE, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	Yes			MMP
E1902	Equipment	COMMUNICATION BOARD, NON-ELECTRONIC AUGMENTATIVE OR ALTERNATIVE COMMUNICATION DEVICE	Not Covered			MMP
E2000	Equipment	GASTRIC SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC	Yes			MMP
E2100	Supply	BLOOD GLUCOSE MONITOR WITH INTEGRATED VOICE SYNTHESIZER	Yes			MMP
E2101	Supply	BLOOD GLUCOSE MONITOR WITH INTEGRATED LANCING/BLOOD SAMPLE	Yes			MMP
E2120	Equipment	PULSE GENERATOR SYSTEM FOR TYMPANIC TREATMENT OF INNER EAR ENDOLYMPHATIC FLUID	Yes			MMP
E2201	Equipment	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME, WIDTH GREATER THAN OR EQUAL TO 20 INCHES AND LESS THAN 24 INCHES	Yes			MMP
E2202	Equipment	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 24-27 INCHES	Yes			MMP
E2203	Equipment	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 TO LESS THAN 22 INCHES	Yes			MMP
E2204	Equipment	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 22 TO 25 INCHES	Yes			MMP
E2205	Equipment	MANUAL WHEELCHAIR ACCESSORY, HANDRIM WITHOUT PROJECTIONS (INCLUDES ERGONOMIC OR CONTOURED), ANY TYPE, REPLACEMENT ONLY, EACH	Yes			MMP
E2206	Equipment	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK ASSEMBLY, COMPLETE, EACH	Yes			MMP
E2207	Equipment	WHEELCHAIR ACCESSORY, CRUTCH AND CANE HOLDER, EACH	Yes			MMP
E2208	Equipment	WHEELCHAIR ACCESSORY, CYLINDER TANK CARRIER, EACH	Yes			MMP
E2209	Equipment	WHEELCHAIR ACCESSORY, ARM TROUGH, EACH	Yes			MMP
E2210	Equipment	WHEELCHAIR ACCESSORY, BEARINGS, ANY TYPE, REPLACEMENT ONLY, EACH	Yes			MMP
E2211	Equipment	MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2212	Equipment	MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH	Yes			MMP
E2213	Equipment	MANUAL WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC PROPULSION TIRE (REMOVABLE), ANY TYPE, ANY SIZE, EACH	Yes			MMP
E2214	Equipment	MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH	Yes			MMP
E2215	Equipment	MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC CASTER TIRE, ANY SIZE, EACH	Yes			MMP
E2216	Equipment	MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED PROPULSION TIRE, ANY SIZE, EACH	No			MMP
E2217	Equipment	MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, EACH	No			MMP
E2218	Equipment	MANUAL WHEELCHAIR ACCESSORY, FOAM PROPULSION TIRE, ANY SIZE, EACH	No			MMP
E2219	Equipment	MANUAL WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, EACH	Yes			MMP
E2220	Equipment	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) PROPULSION TIRE, ANY SIZE, EACH	Yes			MMP
E2221	Equipment	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, EACH	Yes			MMP
E2222	Equipment	MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, EACH	Yes			MMP
E2224	Equipment	MANUAL WHEELCHAIR ACCESSORY, PROPULSION WHEEL EXCLUDES TIRE, ANY SIZE, EACH	Yes			MMP
E2225	Equipment	MANUAL WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2226	Equipment	MANUAL WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2227	Equipment	MANUAL WHEELCHAIR ACCESSORY, GEAR REDUCTION DRIVE WHEEL, EACH	Yes			MMP
E2228	Equipment	MANUAL WHEELCHAIR ACCESSORY, WHEEL BRAKING SYSTEM AND LOCK, COMPLETE, EACH	Yes			MMP
E2230	Equipment	MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM	Not Covered			MMP
E2231	Equipment	MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT SUPPORT BASE (REPLACES SLING SEAT), INCLUDES ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2291	Equipment	BACK, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE	No			MMP
E2292	Equipment	SEAT, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE	No			MMP
E2293	Equipment	BACK, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2294	Equipment	SEAT, CONTOURED, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE	No			MMP
E2295	Equipment	MANUAL WHEELCHAIR ACCESSORY, FOR PEDIATRIC SIZE WHEELCHAIR, DYNAMIC SEATING FRAME, ALLOWS COORDINATED MOVEMENT OF MULTIPLE POSITIONING FEATURES	No			MMP
E2300	Equipment	POWER WHEELCHAIR ACCESSORY, POWER SEAT ELEVATION SYSTEM	Not Covered			MMP
E2301	Equipment	POWER WHEELCHAIR ACCESSORY, POWER STANDING SYSTEM	Not Covered			MMP
E2310	Equipment	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND ONE POWER SEATING SYSTEM MOTOR, INCLUDING ALL RELATED ELECTRONICS, INDICATOR FEATURE, MECHANICAL FUNCTION SELECTION SWITCH, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2311	Equipment	POWER WHEELCHAIR ACCESSORY, ELECTRONIC CONNECTION BETWEEN WHEELCHAIR CONTROLLER AND TWO OR MORE POWER SEATING SYSTEM MOTORS, INCLUDING ALL RELATED ELECTRONICS, INDICATOR FEATURE, MECHANICAL FUNCTION SELECTION SWITCH, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2312	Equipment	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, MINI-PROPORTIONAL REMOTE JOYSTICK, PROPORTIONAL, INCLUDING FIXED MOUNTING HARDWARE	Yes			MMP
E2313	Equipment	POWER WHEELCHAIR ACCESSORY, HARNESS FOR UPGRADE TO EXPANDABLE CONTROLLER, INCLUDING ALL FASTENERS, CONNECTORS AND MOUNTING HARDWARE, EACH	Yes			MMP
E2321	Equipment	POWER WHEELCHAIR ACCESSORY, HAND CONTROL INTERFACE, REMOTE JOYSTICK, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2322	Equipment	POWER WHEELCHAIR ACCESSORY, HAND CONTROL INTERFACE, MULTIPLE MECHANICAL SWITCHES, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2323	Equipment	POWER WHEELCHAIR ACCESSORY, SPECIALTY JOYSTICK HANDLE FOR HAND CONTROL INTERFACE, PREFABRICATED	Yes			MMP
E2324	Equipment	POWER WHEELCHAIR ACCESSORY, CHIN CUP FOR CHIN CONTROL INTERFACE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2325	Equipment	POWER WHEELCHAIR ACCESSORY, SIP AND PUFF INTERFACE, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, AND MANUAL SWINGAWAY MOUNTING HARDWARE	Yes			MMP
E2326	Equipment	POWER WHEELCHAIR ACCESSORY, BREATH TUBE KIT FOR SIP AND PUFF INTERFACE	Yes			MMP
E2327	Equipment	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, MECHANICAL, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL DIRECTION CHANGE SWITCH, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2328	Equipment	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL OR EXTREMITY CONTROL INTERFACE, ELECTRONIC, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE	Yes			MMP
E2329	Equipment	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, CONTACT SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, MECHANICAL DIRECTION CHANGE SWITCH, HEAD ARRAY, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2330	Equipment	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, PROXIMITY SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, MECHANICAL DIRECTION CHANGE SWITCH, HEAD ARRAY, AND FIXED MOUNTING HARDWARE	Yes			MMP
E2331	Equipment	POWER WHEELCHAIR ACCESSORY, ATTENDANT CONTROL, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE	No			MMP
E2340	Equipment	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 20-23 INCHES	Yes			MMP
E2341	Equipment	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 24-27 INCHES	Yes			MMP
E2342	Equipment	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 OR 21 INCHES	Yes			MMP
E2343	Equipment	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 22-25 INCHES	Yes			MMP
E2351	Equipment	POWER WHEELCHAIR ACCESSORY, ELECTRONIC INTERFACE TO OPERATE SPEECH GENERATING DEVICE USING POWER WHEELCHAIR CONTROL INTERFACE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2358	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 34 NON-SEALED LEAD ACID BATTERY, EACH	Not Covered			MMP
E2359	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 34 SEALED LEAD ACID BATTERY, EACH (E.G. GEL CELL, ABSORBED GLASSMAT)	Yes			MMP
E2360	Equipment	POWER WHEELCHAIR ACCESSORY, 22 NF NON-SEALED LEAD ACID BATTERY, EACH	Yes			MMP
E2361	Equipment	POWER WHEELCHAIR ACCESSORY, 22NF SEALED LEAD ACID BATTERY, EACH, (E.G. GEL CELL, ABSORBED GLASSMAT)	Yes			MMP
E2362	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 24 NON-SEALED LEAD ACID BATTERY, EACH	Yes			MMP
E2363	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 24 SEALED LEAD ACID BATTERY, EACH (E.G. GEL CELL, ABSORBED GLASSMAT)	Yes			MMP
E2364	Equipment	POWER WHEELCHAIR ACCESSORY, U-1 NON-SEALED LEAD ACID BATTERY, EACH	Yes			MMP
E2365	Equipment	POWER WHEELCHAIR ACCESSORY, U-1 SEALED LEAD ACID BATTERY, EACH (E.G. GEL CELL, ABSORBED GLASSMAT)	Yes			MMP
E2366	Equipment	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, SINGLE MODE, FOR USE WITH ONLY ONE BATTERY TYPE, SEALED OR NON-SEALED, EACH	Yes			MMP
E2367	Equipment	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, DUAL MODE, FOR USE WITH EITHER BATTERY TYPE, SEALED OR NON-SEALED, EACH	Yes			MMP
E2368	Equipment	POWER WHEELCHAIR COMPONENT, MOTOR, REPLACEMENT ONLY	Yes			MMP
E2369	Equipment	POWER WHEELCHAIR COMPONENT, GEAR BOX, REPLACEMENT ONLY	Yes			MMP
E2370	Equipment	POWER WHEELCHAIR COMPONENT, MOTOR AND GEAR BOX COMBINATION, REPLACEMENT ONLY	Yes			MMP
E2371	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 27 SEALED LEAD ACID BATTERY, (E.G. GEL CELL, ABSORBED GLASSMAT), EACH	Yes			MMP
E2372	Equipment	POWER WHEELCHAIR ACCESSORY, GROUP 27 NON-SEALED LEAD ACID BATTERY, EACH	Not Covered			MMP
E2373	Equipment	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, COMPACT REMOTE JOYSTICK, PROPORTIONAL, INCLUDING FIXED MOUNTING HARDWARE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2374	Equipment	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, STANDARD REMOTE JOYSTICK (NOT INCLUDING CONTROLLER), PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE, REPLACEMENT ONLY	Yes			MMP
E2375	Equipment	POWER WHEELCHAIR ACCESSORY, NON-EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY	Yes			MMP
E2376	Equipment	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY	Yes			MMP
E2377	Equipment	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, UPGRADE PROVIDED AT INITIAL ISSUE	Yes			MMP
E2378	Equipment	Power wheelchair component, actuator, replacement only	Yes			MMP
E2381	Equipment	POWER WHEELCHAIR ACCESSORY, PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2382	Equipment	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2383	Equipment	POWER WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC DRIVE WHEEL TIRE (REMOVABLE), ANY TYPE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2384	Equipment	POWER WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2385	Equipment	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2386	Equipment	POWER WHEELCHAIR ACCESSORY, FOAM FILLED DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2387	Equipment	POWER WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2388	Equipment	POWER WHEELCHAIR ACCESSORY, FOAM DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2389	Equipment	POWER WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2390	Equipment	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2391	Equipment	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2392	Equipment	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2394	Equipment	POWER WHEELCHAIR ACCESSORY, DRIVE WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2395	Equipment	POWER WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2396	Equipment	POWER WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH	Yes			MMP
E2397	Equipment	POWER WHEELCHAIR ACCESSORY, LITHIUM-BASED BATTERY, EACH	Yes			MMP
E2402	Equipment	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE	Yes			MMP
E2500	Equipment	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, LESS THAN OR EQUAL TO 8 MINUTES RECORDING TIME	Yes			MMP
E2502	Equipment	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 8 MINUTES BUT LESS THAN OR EQUAL TO 20 MINUTES RECORDING TIME	Yes			MMP
E2504	Equipment	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 20 MINUTES BUT LESS THAN OR EQUAL TO 40 MINUTES RECORDING TIME	Yes			MMP
E2506	Equipment	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 40 MINUTES RECORDING TIME	Yes			MMP
E2508	Equipment	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, REQUIRING MESSAGE FORMULATION BY SPELLING AND ACCESS BY PHYSICAL CONTACT WITH THE DEVICE	Yes			MMP
E2510	Equipment	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS OF DEVICE ACCESS	Yes			MMP
E2511	Equipment	SPEECH GENERATING SOFTWARE PROGRAM, FOR PERSONAL COMPUTER OR PERSONAL DIGITAL ASSISTANT	No			MMP
E2512	Equipment	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2599	Equipment	ACCESSORY FOR SPEECH GENERATING DEVICE, NOT OTHERWISE CLASSIFIED	Yes			MMP
E2601	Equipment	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2602	Equipment	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2603	Equipment	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2604	Equipment	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2605	Equipment	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2606	Equipment	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2607	Equipment	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2608	Equipment	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2609	Equipment	CUSTOM FABRICATED WHEELCHAIR SEAT CUSHION, ANY SIZE	No			MMP
E2610	Equipment	WHEELCHAIR SEAT CUSHION, POWERED	Not Covered			MMP
E2611	Equipment	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2612	Equipment	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2613	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2614	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2615	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2616	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2617	Equipment	CUSTOM FABRICATED WHEELCHAIR BACK CUSHION, ANY SIZE, INCLUDING ANY TYPE MOUNTING HARDWARE	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2619	Equipment	REPLACEMENT COVER FOR WHEELCHAIR SEAT CUSHION OR BACK CUSHION, EACH	Yes			MMP
E2620	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2621	Equipment	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	Yes			MMP
E2622	Equipment	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2623	Equipment	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2624	Equipment	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 INCHES, ANY DEPTH	Yes			MMP
E2625	Equipment	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 INCHES OR GREATER, ANY DEPTH	Yes			MMP
E2626	Equipment	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, ADJUSTABLE	Yes			MMP
E2627	Equipment	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, ADJUSTABLE	Yes			MMP
E2628	Equipment	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, ADJUSTABLE	Yes			MMP
E2629	Equipment	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, FRICTION ARM SUPPORT (FRICTION DAMPENING TO PROXIMAL AND DISTAL JOINTS)	Yes			MMP
E2630	Equipment	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT, MONOSUSPENSION ARM AND HAND SUPPORT, OVERHEAD ELBOW FOREARM HAND SLING SUPPORT, YOKE TYPE SUSPENSION SUPPORT	Yes			MMP
E2631	Equipment	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, ELEVATING PROXIMAL ARM	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
E2632	Equipment	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, OFFSET OR LATERAL ROCKER ARM WITH ELASTIC BALANCE CONTROL	Yes			MMP
E2633	Equipment	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, SUPINATOR	Yes			MMP
E8000	Equipment	GAIT TRAINER, PEDIATRIC SIZE, POSTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	No			MMP
E8001	Equipment	GAIT TRAINER, PEDIATRIC SIZE, UPRIGHT SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	No			MMP
E8002	Equipment	GAIT TRAINER, PEDIATRIC SIZE, ANTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	No			MMP
G0249	Supply	PROVISION OF TEST MATERIALS AND EQUIPMENT FOR HOME INR MONITORING OF PATIENT WITH EITHER MECHANICAL HEART VALVE(s), chronic atrial fibrillation, or venous thromboembolism who meets Medicare coverage criteria; includes: provision of materials for use in the home and reporting of test results to physician; testing not occurring more frequently than once a week; testing material, billing units of service include 4 tests	No			MMP
K0001	Equipment	STANDARD WHEELCHAIR	Yes			MMP
K0002	Equipment	STANDARD HEMI (LOW SEAT) WHEELCHAIR	Yes			MMP
K0003	Equipment	LIGHTWEIGHT WHEELCHAIR	Yes			MMP
K0004	Equipment	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR	Yes			MMP
K0005	Equipment	ULTRALIGHTWEIGHT WHEELCHAIR	Yes			MMP
K0006	Equipment	HEAVY DUTY WHEELCHAIR	Yes			MMP
K0007	Equipment	EXTRA HEAVY DUTY WHEELCHAIR	Yes			MMP
K0008	Equipment	CUSTOM MANUAL WHEELCHAIR BASE	Yes			MMP
K0009	Equipment	OTHER MANUAL WHEELCHAIR/BASE	Yes			MMP
K0010	Equipment	Std Wt Frame Power Whlchr	Yes			MMP
K0011	Equipment	Std Wt Pwr Whlchr W Control	Yes			MMP
K0012	Equipment	Ltwt Portbl Power Whlchr	Yes			MMP
K0013	Equipment	CUSTOM MOTORIZED/POWER WHEELCHAIR BASE	Yes			MMP
K0014	Equipment	Other Power Whlchr Base	Yes			MMP
K0015	Equipment	DETACHABLE, NON-ADJUSTABLE HEIGHT ARMREST, EACH	Yes			MMP
K0017	Equipment	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, BASE, EACH	Yes			MMP
K0018	Equipment	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, UPPER PORTION, EACH	Yes			MMP
K0019	Equipment	ARM PAD, EACH	Yes			MMP
K0020	Equipment	FIXED, ADJUSTABLE HEIGHT ARMREST, PAIR	Yes			MMP
K0037	Equipment	HIGH MOUNT FLIP-UP FOOTREST, EACH	Yes			MMP
K0038	Equipment	LEG STRAP, EACH	Yes			MMP
K0039	Equipment	LEG STRAP, H STYLE, EACH	Yes			MMP
K0040	Equipment	ADJUSTABLE ANGLE FOOTPLATE, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0041	Equipment	LARGE SIZE FOOTPLATE, EACH	Yes			MMP
K0042	Equipment	STANDARD SIZE FOOTPLATE, EACH	Yes			MMP
K0043	Equipment	FOOTREST, LOWER EXTENSION TUBE, EACH	Yes			MMP
K0044	Equipment	FOOTREST, UPPER HANGER BRACKET, EACH	Yes			MMP
K0045	Equipment	FOOTREST, COMPLETE ASSEMBLY	Yes			MMP
K0046	Equipment	ELEVATING LEGREST, LOWER EXTENSION TUBE, EACH	Yes			MMP
K0047	Equipment	ELEVATING LEGREST, UPPER HANGER BRACKET, EACH	Yes			MMP
K0050	Equipment	RATCHET ASSEMBLY	Yes			MMP
K0051	Equipment	CAM RELEASE ASSEMBLY, FOOTREST OR LEGREST, EACH	Yes			MMP
K0052	Equipment	SWINGAWAY, DETACHABLE FOOTRESTS, EACH	Yes			MMP
K0053	Equipment	ELEVATING FOOTRESTS, ARTICULATING (TELESCOPING), EACH	Yes			MMP
K0056	Equipment	SEAT HEIGHT LESS THAN 17" OR EQUAL TO OR GREATER THAN 21" FOR A HIGH STRENGTH, LIGHTWEIGHT, OR ULTRALIGHTWEIGHT WHEELCHAIR	Yes			MMP
K0065	Equipment	SPOKE PROTECTORS, EACH	Yes			MMP
K0069	Equipment	REAR WHEEL ASSEMBLY, COMPLETE, WITH SOLID TIRE, SPOKES OR MOLDED, EACH	Yes			MMP
K0070	Equipment	REAR WHEEL ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, SPOKES OR MOLDED, EACH	Yes			MMP
K0071	Equipment	FRONT CASTER ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, EACH	Yes			MMP
K0072	Equipment	FRONT CASTER ASSEMBLY, COMPLETE, WITH SEMI-PNEUMATIC TIRE, EACH	Yes			MMP
K0073	Equipment	CASTER PIN LOCK, EACH	Yes			MMP
K0077	Equipment	FRONT CASTER ASSEMBLY, COMPLETE, WITH SOLID TIRE, EACH	Yes			MMP
K0098	Equipment	DRIVE BELT POWER WHEELCHAIR	Yes			MMP
K0105	Equipment	IV HANGER, EACH	Yes			MMP
K0108	Equipment	WHEELCHAIR COMPONENT OR ACCESSORY, NOT OTHERWISE SPECIFIED	Yes			MMP
K0195	Equipment	ELEVATING LEG RESTS, PAIR (FOR USE WITH CAPPED RENTAL WHEELCHAIR BASE)	Yes			MMP
K0455	Equipment	INFUSION PUMP USED FOR UNINTERRUPTED PARENTERAL ADMINISTRATION OF MEDICATION, (E.G., EPOPROSTENOL OR TREPROSTINOL)	Yes			MMP
K0462	Equipment	TEMPORARY REPLACEMENT FOR PATIENT OWNED EQUIPMENT BEING REPAIRED, ANY TYPE	Yes			MMP
K0552	Supply	SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, SYRINGE TYPE CARTRIDGE, STERILE, EACH	Yes			MMP
K0553	Supply	Supply allowance for therapeutic continuous glucose monitor (CGM), includes all supplies and accessories, 1 month supply = 1 Unit Of Service	No			MMP
K0554	Equipment	Receiver (monitor), dedicated, for use with therapeutic glucose continuous monitor system	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0601	Supply	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, SILVER OXIDE, 1.5 VOLT, EACH	Yes			MMP
K0602	Supply	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, SILVER OXIDE, 3 VOLT, EACH	Yes			MMP
K0603	Supply	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, ALKALINE, 1.5 VOLT, EACH	Yes			MMP
K0604	Supply	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 3.6 VOLT,EACH	Yes			MMP
K0605	Supply	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 4.5 VOLT,EACH	Yes			MMP
K0606	Supply	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE	Yes			MMP
K0607	Supply	REPLACEMENT BATTERY FOR AUTOMATED EXTERNAL DEFIBRILLATOR, GARMENT TYPE ONLY, EACH	Yes			MMP
K0608	Supply	REPLACEMENT GARMENT FOR USE WITH AUTOMATED EXTERNAL DEFIBRILLATOR, EACH	Yes			MMP
K0609	Supply	REPLACEMENT ELECTRODES FOR USE WITH AUTOMATED EXTERNAL DEFIBRILLATOR, GARMENT TYPE ONLY, EACH	Yes			MMP
K0669	Equipment	WHEELCHAIR ACCESSORY, WHEELCHAIR SEAT OR BACK CUSHION, DOES NOT MEET SPECIFIC CODE CRITERIA OR NO WRITTEN CODING VERIFICATION FROM SADMERC	Not Covered			MMP
K0672	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, REMOVABLE, SOFT INTERFACE, ALL COMPONENTS, REPLACEMENT ONLY, EACH	Yes			MMP
K0730	Equipment	CONTROLLED DOSE INHALATION DRUG DELIVERY SYSTEM	Yes			MMP
K0733	Equipment	POWER WHEELCHAIR ACCESSORY, 12 TO 24 AMP HOUR SEALED LEAD ACID BATTERY, EACH (E.G. GEL CELL, ABSORBED GLASSMAT)	Yes			MMP
K0738	Equipment	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS, INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	Yes			MMP
K0739		REPAIR OR NONROUTINE SERVICE FOR DURABLE MEDICAL EQUIPMENT OTHER THAN OXYGEN REQUIRING THE SKILL OF A TECHNICIAN, LABOR COMPONENT, PER 15 MINUTES	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0740		REPAIR OR NONROUTINE SERVICE FOR OXYGEN EQUIPMENT REQUIRING THE SKILL OF A TECHNICIAN, LABOR COMPONENT, PER 15 MINUTES	No			MMP
K0743	Equipment	SUCTION PUMP, HOME MODEL, PORTABLE, FOR USE ON WOUNDS	No			MMP
K0800	Equipment	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0801	Equipment	POWER OPERATED VEHICLE, GROUP 1 HEAVY DUTY, PATIENT WEIGHT CAPACITY, 301 TO 450 POUNDS	Yes			MMP
K0802	Equipment	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0806	Equipment	POWER OPERATED VEHICLE, GROUP 2 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0807	Equipment	POWER OPERATED VEHICLE, GROUP 2 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Not Covered			MMP
K0808	Equipment	POWER OPERATED VEHICLE, GROUP 2 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Not Covered			MMP
K0812	Equipment	POWER OPERATED VEHICLE, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
K0813	Equipment	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0814	Equipment	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0815	Equipment	POWER WHEELCHAIR, GROUP 1 STANDARD, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0816	Equipment	POWER WHEELCHAIR, GROUP 1 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACTIY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0820	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0821	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0822	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0823	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0824	Equipment	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0825	Equipment	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0826	Equipment	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0827	Equipment	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0828	Equipment	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0829	Equipment	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0830	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0831	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0835	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0836	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0837	Equipment	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0838	Equipment	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0839	Equipment	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0840	Equipment	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0841	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0842	Equipment	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0843	Equipment	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0848	Equipment	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0849	Equipment	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0850	Equipment	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0851	Equipment	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0852	Equipment	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0853	Equipment	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY, 451 TO 600 POUNDS	Yes			MMP
K0854	Equipment	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0855	Equipment	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0856	Equipment	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0857	Equipment	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0858	Equipment	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0859	Equipment	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0860	Equipment	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0861	Equipment	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Yes			MMP
K0862	Equipment	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Yes			MMP
K0863	Equipment	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Yes			MMP
K0864	Equipment	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	Yes			MMP
K0868	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0869	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0870	Equipment	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Not Covered			MMP
K0871	Equipment	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	Not Covered			MMP
K0877	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0878	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
K0879	Equipment	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Not Covered			MMP
K0880	Equipment	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 451 TO 600 POUNDS	Not Covered			MMP
K0884	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0885	Equipment	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	Not Covered			MMP
K0886	Equipment	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	Not Covered			MMP
K0890	Equipment	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS	No			MMP
K0891	Equipment	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS	No			MMP
K0898	Equipment	POWER WHEELCHAIR, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
K0899	Equipment	POWER MOBILITY DEVICE, NOT CODED BY SADMERC OR DOES NOT MEET CRITERIA	Yes			MMP
K0900	Equipment	Customized Durable Medical Equipment, Other Than Wheelchair	Yes			MMP
K0901	Equipment	Knee orthosis (KO), single upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	No			MMP
K0902	Equipment	Knee orthosis (KO), double upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	No			MMP
L0112	Equipment	CRANIAL CERVICAL ORTHOSIS, CONGENITAL TORTICOLLIS TYPE, WITH OR WITHOUT SOFT INTERFACE MATERIAL, ADJUSTABLE RANGE OF MOTION JOINT, CUSTOM FABRICATED	Yes			MMP
L0113	Equipment	CRANIAL CERVICAL ORTHOSIS, TORTICOLLIS TYPE, WITH OR WITHOUT JOINT, WITH OR WITHOUT SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0120	Equipment	CERVICAL, FLEXIBLE, NON-ADJUSTABLE (FOAM COLLAR)	Yes			MMP
L0130	Equipment	CERVICAL, FLEXIBLE, THERMOPLASTIC COLLAR, MOLDED TO PATIENT	Yes			MMP
L0140	Equipment	CERVICAL, SEMI-RIGID, ADJUSTABLE (PLASTIC COLLAR)	Yes			MMP
L0150	Equipment	CERVICAL, SEMI-RIGID, ADJUSTABLE MOLDED CHIN CUP (PLASTIC COLLAR WITH MANDIBULAR/OCCIPITAL PIECE)	Yes			MMP
L0160	Equipment	CERVICAL, SEMI-RIGID, WIRE FRAME OCCIPITAL/MANDIBULAR SUPPORT	Yes			MMP
L0170	Equipment	CERVICAL, COLLAR, MOLDED TO PATIENT MODEL	Yes			MMP
L0172	Equipment	CERVICAL, COLLAR, SEMI-RIGID THERMOPLASTIC FOAM, TWO PIECE	Yes			MMP
L0174	Equipment	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION	Yes			MMP
L0180	Equipment	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE	Yes			MMP
L0190	Equipment	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE	Yes			MMP
L0200	Equipment	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE CERVICAL BARS, AND THORACIC EXTENSION	Yes			MMP
L0220	Equipment	THORACIC, RIB BELT, CUSTOM FABRICATED	Yes			MMP
L0450	Equipment	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, UPPER SUPPORT, UPPER THORACIC REGION, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTEVERTEBRAL DISKS WITH RIGID STAYS OR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0452	Equipment	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, UPPER SUPPORT, UPPER THORACIC REGION, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTEVERTEBRAL DISKS WITH RIGID STAYS OR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, CUSTOM FABRICATED	No			MMP
L0454	Equipment	TLSO, FLEXIBLE PROVIDES TRUNK SUPPORT, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO ABOVE T-9 VERTEBRA, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVETEBRAL DISKS WITH RIGID STAYS PR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0455	Equipment	Tlso, flexible, provides trunk support, extends from sacrococcygeal junction to above t-9 vertebra, restricts gross trunk motion in the sagittal plane, produces intracavitary pressure to reduce load on the intervertebral disks with rigid stays or panel(s), includes shoulder straps and closures, prefabricated, off-the-shelf	Yes			MMP
L0456	Equipment	TLSO FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVETEBRAL DISKS, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0457	Equipment	Tlso, flexible, provides trunk support, thoracic region, rigid posterior panel and soft anterior apron, extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, restricts gross trunk motion in the sagittal plane, produces intracavitary pressure to reduce load on the intervertebral disks, includes straps and closures, prefabricated, off-the-shelf	Yes			MMP
L0458	Equipment	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTHS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0460	Equipment	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTHS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0462	Equipment	TLSO, TRIPLANAR CONTROL MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0464	Equipment	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, FOUR PLASTIC SHELLS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION INSAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH S PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0466	Equipment	TLISO, SAGITTAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVETEBRAL DISKS, INCLUDES FITTING AND SHAPING OF FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0467	Equipment	Tliso, sagittal control, rigid posterior frame and flexible soft anterior apron with straps, closures and padding, restricts gross trunk motion in sagittal plane, produces intracavitary pressure to reduce load on intervertebral disks, prefabricated, off-the-shelf	Yes			MMP
L0468	Equipment	TLISO, SAGITTAL-CORONAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES, AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION OVER SCAPULAE, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL AND CORONAL PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0469	Equipment	Tliso, sagittal-coronal control, rigid posterior frame and flexible soft anterior apron with straps, closures and padding, extends from sacrococcygeal junction over scapulae, lateral strength provided by pelvic, thoracic, and lateral frame pieces, restricts gross trunk motion in sagittal and coronal planes, produces intracavitary pressure to reduce load on intervertebral disks, prefabricated, off-the-shelf	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0470	Equipment	TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES, AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, ROTATIONAL STRENGTH PROVIDED BY SUBCLAVICULAR EXTENSIONS, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVETEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0472	Equipment	TLSO, TRIPLANNAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0480	Equipment	TLSO, TRIPLANNAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0482	Equipment	TLSO, TRIPLANNAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	Yes			MMP
L0484	Equipment	TLSO, TRIPLANNAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	Yes			MMP
L0486	Equipment	TLSO, TRIPLANNAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	Yes			MMP
L0488	Equipment	TLSO, TRIPLANNAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0490	Equipment	TLSO, SAGITTAL-CORONAL CONTROL, ONE PIECE RIGID PLASTIC SHELL, WITH OVERLAPPING REINFORCED ANTERIOR, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES AT OR BEFORE THE T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XIPHOID, ANTERIOR OPENING RESTRICTS GROSS TRUNK MOTION IN SAGITTAL AND CORONAL PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0491	Equipment	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0492	Equipment	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0621	Equipment	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0622	Equipment	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT ABDOMEN DESIGN, CUSTOM FABRICATED	Yes			MMP
L0623	Equipment	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	No			MMP
L0624	Equipment	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS PLACED OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	No			MMP
L0625	Equipment	LUMBAR ORTHOSIS, FLEXIBLE, PROVIDES LUMBAR SUPPORT, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, SHOULDER STRAPS, STAYS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0626	Equipment	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM L-1 TP L-5 VETEBRA, PRODCUES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0627	Equipment	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0628	Equipment	LUMBAR-SACRAL ORTHOSIS, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES MAY INCLUDE STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0629	Equipment	LUMBAR-SACRAL ORTHOSIS, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	No			MMP
L0630	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0631	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0632	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	No			MMP
L0633	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0634	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0635	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANEL(S), LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0636	Equipment	LUMBAR SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANELS, LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	Yes			MMP
L0637	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0638	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	Yes			MMP
L0639	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L0640	Equipment	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	Yes			MMP
L0641	Equipment	Lumbar orthosis, sagittal control, with rigid posterior panel(s), posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0642	Equipment	Lumbar orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from l-1 to below l-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP
L0643	Equipment	Lumbar-sacral orthosis, sagittal control, with rigid posterior panel(s), posterior extends from sacrococcygeal junction to t-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP
L0648	Equipment	Lumbar-sacral orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to t-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP
L0649	Equipment	Lumbar-sacral orthosis, sagittal-coronal control, with rigid posterior frame/panel(s), posterior extends from sacrococcygeal junction to t-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP
L0650	Equipment	Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panel(s), posterior extends from sacrococcygeal junction to t-9 vertebra, lateral strength provided by rigid lateral frame/panel(s), produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP
L0651	Equipment	Lumbar-sacral orthosis, sagittal-coronal control, rigid shell(s)/panel(s), posterior extends from sacrococcygeal junction to t-9 vertebra, anterior extends from symphysis pubis to xyphoid, produces intracavitary pressure to reduce load on the intervertebral discs, overall strength is provided by overlapping rigid material and stabilizing closures, includes straps, closures, may include soft interface, pendulous abdomen design, prefabricated, off-the-shelf	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L0700	Equipment	CERVICAL-THORACIC-LUMBAR-SACRAL-ORTHOSES (CTLSO), ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT MODEL, (MINERVA TYPE)	Yes			MMP
L0710	Equipment	CTLSO, ANTERIOR-POSTERIOR-LATERAL-CONTROL, MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL, (MINERVA TYPE)	Yes			MMP
L0810	Equipment	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO JACKET VEST	Yes			MMP
L0820	Equipment	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO PLASTER BODY JACKET	Yes			MMP
L0830	Equipment	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE ORTHOSIS	Yes			MMP
L0859	Equipment	ADDITION TO HALO PROCEDURE, MAGNETIC RESONANCE IMAGE COMPATIBLE SYSTEMS, RINGS AND PINS, ANY MATERIAL	Yes			MMP
L0861	Equipment	ADDITION TO HALO PROCEDURE, REPLACEMENT LINER/INTERFACE MATERIAL	Yes			MMP
L0970	Equipment	TLSO, CORSET FRONT	Yes			MMP
L0972	Equipment	LSO, CORSET FRONT	Yes			MMP
L0974	Equipment	TLSO, FULL CORSET	Yes			MMP
L0976	Equipment	LSO, FULL CORSET	Yes			MMP
L0978	Supply	AXILLARY CRUTCH EXTENSION	Yes			MMP
L0980	Supply	PERONEAL STRAPS, PAIR	Yes			MMP
L0982	Supply	STOCKING SUPPORTER GRIPS, SET OF FOUR (4)	Yes			MMP
L0984	Equipment	PROTECTIVE BODY SOCK, EACH	Yes			MMP
L0999	Equipment	ADDITION TO SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L1000	Equipment	CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) (MILWAUKEE), INCLUSIVE OF	Yes			MMP
L1001	Equipment	CERVICAL THORACIC LUMBAR SACRAL ORTHOSIS, IMMOBILIZER, INFANT SIZE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	No			MMP
L1005	Equipment	TENSION BASED SCOLIOSIS ORTHOSIS AND ACCESSORY PADS, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1010	Equipment	ADDITION TO CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) OR SCOLIOSIS ORTHOSIS, AXILLA SLING	Yes			MMP
L1020	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD	Yes			MMP
L1025	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD, FLOATING	Yes			MMP
L1030	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR BOLSTER PAD	Yes			MMP
L1040	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR OR LUMBAR RIB PAD	Yes			MMP
L1050	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, STERNAL PAD	Yes			MMP
L1060	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, THORACIC PAD	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L1070	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, TRAPEZIUS SLING	Yes			MMP
L1080	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, OUTRIGGER	Yes			MMP
L1085	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, OUTRIGGER, BILATERAL WITH VERTICAL EXTENSIONS	Yes			MMP
L1090	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR SLING	Yes			MMP
L1100	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER	Yes			MMP
L1110	Equipment	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER, MOLDED TO PATIENT MODEL	Yes			MMP
L1120	Equipment	ADDITION TO CTLSO, SCOLIOSIS ORTHOSIS, COVER FOR UPRIGHT, EACH	Yes			MMP
L1200	Equipment	THORACIC-LUMBAR-SACRAL- ORTHOSIS (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS ONLY	Yes			MMP
L1210	Equipment	ADDITION TO TLSO, (LOW PROFILE), LATERAL THORACIC EXTENSION	Yes			MMP
L1220	Equipment	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC EXTENSION	Yes			MMP
L1230	Equipment	ADDITION TO TLSO, (LOW PROFILE), MILWAUKEE TYPE SUPERSTRUCTURE	Yes			MMP
L1240	Equipment	ADDITION TO TLSO, (LOW PROFILE), LUMBAR DEROTATION PAD	Yes			MMP
L1250	Equipment	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR ASIS PAD	Yes			MMP
L1260	Equipment	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC DEROTATION PAD	Yes			MMP
L1270	Equipment	ADDITION TO TLSO, (LOW PROFILE), ABDOMINAL PAD	Yes			MMP
L1280	Equipment	ADDITION TO TLSO, (LOW PROFILE), RIB GUSSET (ELASTIC), EACH	Yes			MMP
L1290	Equipment	ADDITION TO TLSO, (LOW PROFILE), LATERAL TROCHANTERIC PAD	Yes			MMP
L1300	Equipment	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL	Yes			MMP
L1310	Equipment	OTHER SCOLIOSIS PROCEDURE, POST-OPERATIVE BODY JACKET	Yes			MMP
L1499	Equipment	SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L1600	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, FREJKA TYPE WITH COVER, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1610	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, (FREJKA COVER ONLY), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1620	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, (PAVLIK HARNESS), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L1630	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, SEMI-FLEXIBLE (VON ROSEN TYPE), CUSTOM-FABRICATED	Yes			MMP
L1640	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PELVIC BAND OR SPREADER BAR, THIGH CUFFS, CUSTOM-FABRICATED	Yes			MMP
L1650	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, ADJUSTABLE, (ILFLED TYPE), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1652	Equipment	HIP ORTHOSIS, BILATERAL THIGH CUFFS WITH ADJUSTABLE ABDUCTOR SPREADER BAR, ADULT SIZE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT, ANY TYPE	Yes			MMP
L1660	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PLASTIC, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1680	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, DYNAMIC, PELVIC CONTROL, ADJUSTABLE HIP MOTION CONTROL, THIGH CUFFS (RANCHO HIP ACTION TYPE), CUSTOM FABRAICTED	Yes			MMP
L1685	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, CUSTOM FABRICATED	Yes			MMP
L1686	Equipment	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1690	Equipment	COMBINATION, BILATERAL, LUMBO-SACRAL, HIP, FEMUR ORTHOSIS PROVIDING ADDUCTION AND INTERNAL ROTATION CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1700	Equipment	LEGG PERTHES ORTHOSIS, (TORONTO TYPE), CUSTOM-FABRICATED	Yes			MMP
L1710	Equipment	LEGG PERTHES ORTHOSIS, (NEWINGTON TYPE), CUSTOM FABRICATED	Yes			MMP
L1720	Equipment	LEGG PERTHES ORTHOSIS, TRILATERAL, (TACHDIJAN TYPE), CUSTOM-FABRICATED	Yes			MMP
L1730	Equipment	LEGG PERTHES ORTHOSIS, (SCOTTISH RITE TYPE), CUSTOM-FABRICATED INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1755	Equipment	LEGG PERTHES ORTHOSIS, (PATTEN BOTTOM TYPE), CUSTOM-FABRICATED	Yes			MMP
L1810	Equipment	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L1812	Equipment	Knee orthosis, elastic with joints, prefabricated, off-the-shelf	Yes			MMP
L1820	Equipment	KNEE ORTHOSIS, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1830	Equipment	KNEE ORTHOSIS, IMMOBILIZER, CANVAS LONGITUDINAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1831	Equipment	KNEE ORTHOSIS, LOCKING KNEE JOINT(S), POSITIONAL ORTHOSIS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1832	Equipment	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1833	Equipment	Knee orthosis, adjustable knee joints (unicentric or polycentric), positional orthosis, rigid support, prefabricated, off-the shelf	Yes			MMP
L1834	Equipment	KNEE ORTHOSIS, WITHOUT KNEE JOINT, RIGID, CUSTOM-FABRICATED	Yes			MMP
L1836	Equipment	KNEE ORTHOSIS, RIGID, WITHOUT JOINT(S), INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1840	Equipment	KNEE ORTHOSIS, DEROTATION, MEDIAL-LATERAL, ANTERIOR CRUCIATE LIGAMENT, CUSTOM FABRICATED	Yes			MMP
L1843	Equipment	KO, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT, MEDIAL-LATERAL AND ROTATION CONTROL, INCLUDES VARUS/VALGUS ADJUSTMENT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1844	Equipment	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	Yes			MMP
L1845	Equipment	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L1846	Equipment	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	Yes			MMP
L1847	Equipment	KNEE ORTHOSIS, DOUBLE UPRIGHT WITH ADJUSTABLE JOINT, WITH INFLATABLE AIR SUPPORT CHAMBER(S), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1848	Equipment	Knee orthosis, double upright with adjustable joint, with inflatable air support chamber(s), prefabricated, off-the-shelf	Yes			MMP
L1850	Equipment	KNEE ORTHOSIS, SWEDISH TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1851	Equipment	Knee orthosis (ko), single upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	Yes			MMP
L1852	Equipment	Knee orthosis (ko), double upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	Yes			MMP
L1860	Equipment	KNEE ORTHOSIS, MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM-FABRICATED (SK)	Yes			MMP
L1900	Equipment	ANKLE FOOT ORTHOSIS, SPRING WIRE, DORSIFLEXION ASSIST CALF BAND, CUSTOM-FABRICATED	Yes			MMP
L1902	Equipment	ANKLE FOOT ORTHOSIS, ANKLE GAUNTLET, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1904	Equipment	ANKLE FOOT ORTHOSIS, MOLDED ANKLE GAUNTLET, CUSTOM-FABRICATED	Yes			MMP
L1906	Equipment	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1907	Equipment	AFO, SUPRAMALLEOLAR WITH STRAPS, WITH OR WITHOUT INTERFACE/PADS, CUSTOM FABRICATED	Yes			MMP
L1910	Equipment	ANKLE FOOT ORTHOSIS, POSTERIOR, SINGLE BAR, CLASP ATTACHMENT TO SHOE COUNTER, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1920	Equipment	ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT WITH STATIC OR ADJUSTABLE STOP (PHELPS OR PERLSTEIN TYPE), CUSTOM-FABRICATED	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L1930	Equipment	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1932	Equipment	AFO, RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1940	Equipment	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, CUSTOM-FABRICATED	Yes			MMP
L1945	Equipment	ANKLE FOOT ORTHOSIS, PLASTIC, RIGID ANTERIOR TIBIAL SECTION (FLOOR REACTION), CUSTOM-FABRICATED	Yes			MMP
L1950	Equipment	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM-FABRICATED	Yes			MMP
L1951	Equipment	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1960	Equipment	ANKLE FOOT ORTHOSIS, POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM-FABRICATED	Yes			MMP
L1970	Equipment	ANKLE FOOT ORTHOSIS, PLASTIC WITH ANKLE JOINT, CUSTOM-FABRICATED	Yes			MMP
L1971	Equipment	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L1980	Equipment	ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (SINGLE BAR 'BK' ORTHOSIS), CUSTOM-FABRICATED	Yes			MMP
L1990	Equipment	ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (DOUBLE BAR 'BK' ORTHOSIS), CUSTOM-FABRICATED	Yes			MMP
L2000	Equipment	KNEE ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT, FREE KNEE, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR 'AK' ORTHOSIS), CUSTOM-FABRICATED	Yes			MMP
L2005	Equipment	KNEE ANKLE FOOT ORTHOSIS, ANY MATERIAL, SINGLE OR DOUBLE UPRIGHT, STANCE CONTROL, AUTOMATIC LOCK AND SWING PHASE RELEASE, MECHANICAL ACTIVATION, INCLUDES ANKLE JOINT, ANY TYPE, CUSTOM FABRICATED	Yes			MMP
L2010	Equipment	KNEE ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR 'AK' ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM-FABRIACTED	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L2020	Equipment	KNEE ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (DOUBLE BAR 'AK' ORTHOSIS), CUSTOM-FABRICATED	Yes			MMP
L2030	Equipment	KNEE ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS, (DOUBLE BAR 'AK' ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM FABRICATED	Yes			MMP
L2034	Equipment	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, MEDIAL LATERAL ROTATION CONTROL, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	Yes			MMP
L2035	Equipment	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, STATIC (PEDIATRIC SIZE), WITHOUT FREE MOTION ANKLE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2036	Equipment	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, DOUBLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	Yes			MMP
L2037	Equipment	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	Yes			MMP
L2038	Equipment	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, WITH OR WITHOUT FREE MOTION KNEE, MULTI-AXIS ANKLE, CUSTOM FABRICATED	Yes			MMP
L2040	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL ROTATION STRAPS, PELVIC BAND/BELT, CUSTOM FABRICATED	Yes			MMP
L2050	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL TORSION CABLES, HIP JOINT, PELVIC BAND/BELT, CUSTOM-FABRICATED	Yes			MMP
L2060	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL TORSION CABLES, BALL BEARING HIP JOINT, PELVIC BAND/ BELT, CUSTOM-FABRICATED	Yes			MMP
L2070	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL ROTATION STRAPS, PELVIC BAND/BELT, CUSTOM FABRICATED	Yes			MMP
L2080	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL TORSION CABLE, HIP JOINT, PELVIC BAND/BELT, CUSTOM-FABRICATED	Yes			MMP
L2090	Equipment	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL TORSION CABLE, BALL BEARING HIP JOINT, PELVIC BAND/ BELT, CUSTOM-FABRICATED	Yes			MMP

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L2106	Equipment	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, CUSTOM-FABRICATED	Yes			MMP
L2108	Equipment	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, CUSTOM-FABRICATED	Yes			MMP
L2112	Equipment	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SOFT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2114	Equipment	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SEMI-RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2116	Equipment	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2126	Equipment	KNEE ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, CUSTOM-FABRICATED	Yes			MMP
L2128	Equipment	KNEE ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, CUSTOM-FABRICATED	Yes			MMP
L2132	Equipment	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SOFT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2134	Equipment	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SEMI-RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2136	Equipment	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L2180	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, PLASTIC SHOE INSERT WITH ANKLE JOINTS	Yes			MMP
L2182	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, DROP LOCK KNEE JOINT	Yes			MMP
L2184	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, LIMITED MOTION KNEE JOINT	Yes			MMP
L2186	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, ADJUSTABLE MOTION KNEE JOINT, LERMAN TYPE	Yes			MMP
L2188	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, QUADRILATERAL BRIM	Yes			MMP
L2190	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, WAIST BELT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L2192	Equipment	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, HIP JOINT, PELVIC BAND, THIGH FLANGE, AND PELVIC BELT	Yes			MMP
L2200	Equipment	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT	Yes			MMP
L2210	Equipment	ADDITION TO LOWER EXTREMITY, DORSIFLEXION ASSIST (PLANTAR FLEXION RESIST), EACH JOINT	Yes			MMP
L2220	Equipment	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT	Yes			MMP
L2230	Equipment	ADDITION TO LOWER EXTREMITY, SPLIT FLAT CALIPER STIRRUPS AND PLATE ATTACHMENT	Yes			MMP
L2232	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, ROCKER BOTTOM FOR TOTAL CONTACT ANKLE FOOT ORTHOSIS, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L2240	Equipment	ADDITION TO LOWER EXTREMITY, ROUND CALIPER AND PLATE ATTACHMENT	Yes			MMP
L2250	Equipment	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT	Yes			MMP
L2260	Equipment	ADDITION TO LOWER EXTREMITY, REINFORCED SOLID STIRRUP (SCOTT-CRAIG TYPE)	Yes			MMP
L2265	Equipment	ADDITION TO LOWER EXTREMITY, LONG TONGUE STIRRUP	Yes			MMP
L2270	Equipment	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION ('T') STRAP, PADDED/LINED OR MALLEOLUS PAD	Yes			MMP
L2275	Equipment	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION, PLASTIC MODIFICATION, PADDED/LINED	Yes			MMP
L2280	Equipment	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT	Yes			MMP
L2300	Equipment	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINT, ADJUSTABLE	Yes			MMP
L2310	Equipment	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR-STRAIGHT	Yes			MMP
L2320	Equipment	ADDITION TO LOWER EXTREMITY, NON-MOLDED LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L2330	Equipment	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRIACTED ORTHOSIS ONLY	Yes			MMP
L2335	Equipment	ADDITION TO LOWER EXTREMITY, ANTERIOR SWING BAND	Yes			MMP
L2340	Equipment	ADDITION TO LOWER EXTREMITY, PRE-TIBIAL SHELL, MOLDED TO PATIENT MODEL	Yes			MMP
L2350	Equipment	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR 'PTB' 'AFO' ORTHOSES)	Yes			MMP
L2360	Equipment	ADDITION TO LOWER EXTREMITY, EXTENDED STEEL SHANK	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L2370	Equipment	ADDITION TO LOWER EXTREMITY, PATTEN BOTTOM	Yes			MMP
L2375	Equipment	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, ANKLE JOINT AND HALF SOLID STIRRUP	Yes			MMP
L2380	Equipment	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, STRAIGHT KNEE JOINT, EACH JOINT	Yes			MMP
L2385	Equipment	ADDITION TO LOWER EXTREMITY, STRAIGHT KNEE JOINT, HEAVY DUTY, EACH JOINT	Yes			MMP
L2387	Equipment	ADDITION TO LOWER EXTREMITY, POLYCENTRIC KNEE JOINT, FOR CUSTOM FABRICATED KNEE ANKLE FOOT ORTHOSIS, EACH JOINT	Yes			MMP
L2390	Equipment	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, EACH JOINT	Yes			MMP
L2395	Equipment	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, HEAVY DUTY, EACH JOINT	Yes			MMP
L2397	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, SUSPENSION SLEEVE	Yes			MMP
L2405	Equipment	ADDITION TO KNEE JOINT, DROP LOCK, EACH	Yes			MMP
L2415	Equipment	ADDITION TO KNEE LOCK WITH INTEGRATED RELEASE MECHANISM ( BAIL, CABLE, OR EQUAL), ANY MATERIAL, EACH JOINT	Yes			MMP
L2425	Equipment	ADDITION TO KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT	Yes			MMP
L2430	Equipment	ADDITION TO KNEE JOINT, RATCHET LOCK FOR ACTIVE AND PROGRESSIVE KNEE EXTENSION, EACH JOINT	Yes			MMP
L2492	Equipment	ADDITION TO KNEE JOINT, LIFT LOOP FOR DROP LOCK RING	Yes			MMP
L2500	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, GLUTEAL/ ISCHIAL WEIGHT BEARING RING	Yes			MMP
L2510	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI-LATERAL BRIM, MOLDED TO PATIENT MODEL	Yes			MMP
L2520	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI-LATERAL BRIM, CUSTOM FITTED	Yes			MMP
L2525	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM MOLDED TO PATIENT MODEL	Yes			MMP
L2526	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM, CUSTOM FITTED	Yes			MMP
L2530	Equipment	ADDITION TO LOWER EXTREMITY, THIGH-WEIGHT BEARING, LACER, NON-MOLDED	Yes			MMP
L2540	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, LACER, MOLDED TO PATIENT MODEL	Yes			MMP
L2550	Equipment	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, HIGH ROLL CUFF	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L2570	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS TYPE TWO POSITION JOINT, EACH	Yes			MMP
L2580	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PELVIC SLING	Yes			MMP
L2600	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS TYPE, OR THRUST BEARING, FRE, EACH	Yes			MMP
L2610	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS OR THRUST BEARING, LOCK,EACH	Yes			MMP
L2620	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, HEAVY DUTY, EACH	Yes			MMP
L2622	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EACH	Yes			MMP
L2624	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EXTENSION, ABDUCTION CONTROL, EACH	Yes			MMP
L2627	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PLASTIC, MOLDED TO PATIENT MODEL, RECIPROCATING HIP JOINT AND CABLES	Yes			MMP
L2628	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, METAL FRAME, RECIPROCATING HIP JOINT AND CABLES	Yes			MMP
L2630	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, UNILATERAL	Yes			MMP
L2640	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, BILATERAL	Yes			MMP
L2650	Equipment	ADDITION TO LOWER EXTREMITY, PELVIC AND THORACIC CONTROL, GLUTEAL PAD, EACH	Yes			MMP
L2660	Equipment	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, THORACIC BAND	Yes			MMP
L2670	Equipment	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, PARASPINAL UPRIGHTS	Yes			MMP
L2680	Equipment	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, LATERAL SUPPORT UPRIGHTS	Yes			MMP
L2750	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, PLATING CHROME OR NICKEL, PER BAR	Yes			MMP
L2755	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE, PER SEGMENT, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L2760	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, EXTENSION, PER EXTENSION, PER BAR (FOR LINEAL ADJUSTMENT FOR GROWTH)	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L2768	Equipment	ORTHOTIC SIDE BAR DISCONNECT DEVICE, PER BAR	Yes			MMP
L2780	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, NON-CORROSIVE FINISH, PER BAR	Yes			MMP
L2785	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, DROP LOCK RETAINER, EACH	Yes			MMP
L2795	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, FULL KNEECAP	Yes			MMP
L2800	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, KNEE CAP, MEDIAL OR LATERAL PULL, FOR USE WITH CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L2810	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, CONDYLAR PAD	Yes			MMP
L2820	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION	Yes			MMP
L2830	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION	Yes			MMP
L2840	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH	Yes			MMP
L2850	Equipment	ADDITION TO LOWER EXTREMITY ORTHOSIS, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL, EACH	Yes			MMP
L2861	Equipment	ADDITION TO LOWER EXTREMITY JOINT, KNEE OR ANKLE, CONCENTRIC ADJUSTABLE TORSION STYLE MECHANISM FOR CUSTOM FABRICATED ORTHOTICS ONLY, EACH	No			MMP
L2999	Equipment	LOWER EXTREMITY ORTHOSES, NOT OTHERWISE SPECIFIED	Yes			MMP
L3040	Equipment	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL, EACH	Yes			MMP
L3050	Equipment	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, METATARSAL, EACH	Yes			MMP
L3060	Equipment	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL/METATARSAL, EACH	Yes			MMP
L3070	Equipment	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, LONGITUDINAL, EACH	Yes			MMP
L3080	Equipment	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, METATARSAL, EACH	Yes			MMP
L3090	Equipment	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, LONGITUDINAL/METATARSAL, EACH	Yes			MMP
L3100	Equipment	HALLUS-VALGUS NIGHT DYNAMIC SPLINT	Yes			MMP
L3140	Equipment	FOOT, ABDUCTION ROTATION BAR, INCLUDING SHOES	Yes			MMP
L3150	Equipment	FOOT, ABDUCTION ROTATION BAR, WITHOUT SHOES	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3160	Equipment	FOOT, ADJUSTABLE SHOE-STYLED POSITIONING DEVICE	No			MMP
L3170	Equipment	FOOT, PLASTIC, SILICONE OR EQUAL, HEEL STABILIZER, EACH	Yes			MMP
L3201	Equipment	ORTHOPEdic SHOE, OXFORD WITH SUPINATOR OR PRONATOR, INFANT	No			MMP
L3202	Equipment	ORTHOPEdic SHOE, OXFORD WITH SUPINATOR OR PRONATOR, CHILD	No			MMP
L3203	Equipment	ORTHOPEdic SHOE, OXFORD WITH SUPINATOR OR PRONATOR, JUNIOR	No			MMP
L3204	Equipment	ORTHOPEdic SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, INFANT	No			MMP
L3206	Equipment	ORTHOPEdic SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, CHILD	No			MMP
L3207	Equipment	ORTHOPEdic SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, JUNIOR	No			MMP
L3208	Equipment	SURGICAL BOOT, EACH, INFANT	No			MMP
L3209	Equipment	SURGICAL BOOT, EACH, CHILD	No			MMP
L3211	Equipment	SURGICAL BOOT, EACH, JUNIOR	No			MMP
L3212	Equipment	BENESCH BOOT, PAIR, INFANT	No			MMP
L3213	Equipment	BENESCH BOOT, PAIR, CHILD	No			MMP
L3214	Equipment	BENESCH BOOT, PAIR, JUNIOR	No			MMP
L3215	Equipment	ORTHOPEdic FOOTWEAR, LADIES SHOE, OXFORD, EACH	No			MMP
L3216	Equipment	ORTHOPEdic FOOTWEAR, LADIES SHOE, DEPTH INLAY, EACH	No			MMP
L3217	Equipment	ORTHOPEdic FOOTWEAR, LADIES SHOE, HIGHTOP, DEPTH INLAY, EACH	No			MMP
L3219	Equipment	ORTHOPEdic FOOTWEAR, MENS SHOE, OXFORD, EACH	No			MMP
L3221	Equipment	ORTHOPEdic FOOTWEAR, MENS SHOE, DEPTH INLAY, EACH	No			MMP
L3222	Equipment	ORTHOPEdic FOOTWEAR, MENS SHOE, HIGHTOP, DEPTH INLAY, EACH	No			MMP
L3224	Equipment	ORTHOPEdic FOOTWEAR, WOMAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	Yes			MMP
L3225	Equipment	ORTHOPEdic FOOTWEAR, MAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	Yes			MMP
L3230	Equipment	ORTHOPEdic FOOTWEAR, CUSTOM SHOE, DEPTH INLAY, EACH	No			MMP
L3250	Equipment	ORTHOPEdic FOOTWEAR, CUSTOM MOLDED SHOE, REMOVABLE INNER MOLD, PROSTHETIC SHOE, EACH	No			MMP
L3251	Equipment	FOOT, SHOE MOLDED TO PATIENT MODEL, SILICONE SHOE, EACH	No			MMP
L3252	Equipment	FOOT, SHOE MOLDED TO PATIENT MODEL, PLASTAZOTE (OR SIMILAR), CUSTOM FABRICATED, EACH	No			MMP
L3253	Equipment	FOOT, MOLDED SHOE PLASTAZOTE (OR SIMILAR) CUSTOM FITTED, EACH	No			MMP
L3254	Equipment	NON-STANDARD SIZE OR WIDTH	No			MMP
L3255	Equipment	NON-STANDARD SIZE OR LENGTH	No			MMP
L3257	Equipment	ORTHOPEdic FOOTWEAR, ADDITIONAL CHARGE FOR SPLIT SIZE	No			MMP
L3260	Equipment	SURGICAL BOOT/SHOE, EACH	No			MMP
L3265	Equipment	PLASTAZOTE SANDAL, EACH	No			MMP
L3300	Equipment	LIFT, ELEVATION, HEEL, TAPERED TO METATARSALS, PER INCH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3310	Equipment	LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER INCH	Yes			MMP
L3320	Equipment	LIFT, ELEVATION, HEEL AND SOLE, CORK, PER INCH	No			MMP
L3330	Equipment	LIFT, ELEVATION, METAL EXTENSION (SKATE)	Yes			MMP
L3332	Equipment	LIFT, ELEVATION, INSIDE SHOE, TAPERED, UP TO ONE-HALF INCH	Yes			MMP
L3334	Equipment	LIFT, ELEVATION, HEEL, PER INCH	Yes			MMP
L3340	Equipment	HEEL WEDGE, SACH	Yes			MMP
L3350	Equipment	HEEL WEDGE	Yes			MMP
L3360	Equipment	SOLE WEDGE, OUTSIDE SOLE	Yes			MMP
L3370	Equipment	SOLE WEDGE, BETWEEN SOLE	Yes			MMP
L3380	Equipment	CLUBFOOT WEDGE	Yes			MMP
L3390	Equipment	OUTFLARE WEDGE	Yes			MMP
L3400	Equipment	METATARSAL BAR WEDGE, ROCKER	Yes			MMP
L3410	Equipment	METATARSAL BAR WEDGE, BETWEEN SOLE	Yes			MMP
L3420	Equipment	FULL SOLE AND HEEL WEDGE, BETWEEN SOLE	Yes			MMP
L3430	Equipment	HEEL, COUNTER, PLASTIC REINFORCED	Yes			MMP
L3440	Equipment	HEEL, COUNTER, LEATHER REINFORCED	Yes			MMP
L3450	Equipment	HEEL, SACH CUSHION TYPE	Yes			MMP
L3455	Equipment	HEEL, NEW LEATHER, STANDARD	Yes			MMP
L3460	Equipment	HEEL, NEW RUBBER, STANDARD	Yes			MMP
L3465	Equipment	HEEL, THOMAS WITH WEDGE	Yes			MMP
L3470	Equipment	HEEL, THOMAS EXTENDED TO BALL	Yes			MMP
L3480	Equipment	HEEL, PAD AND DEPRESSION FOR SPUR	Yes			MMP
L3485	Equipment	HEEL, PAD, REMOVABLE FOR SPUR	No			MMP
L3500	Equipment	ORTHOPEDIC SHOE ADDITION, INSOLE, LEATHER	Yes			MMP
L3510	Equipment	ORTHOPEDIC SHOE ADDITION, INSOLE, RUBBER	Yes			MMP
L3520	Equipment	ORTHOPEDIC SHOE ADDITION, INSOLE, FELT COVERED WITH LEATHER	Yes			MMP
L3530	Equipment	ORTHOPEDIC SHOE ADDITION, SOLE, HALF	Yes			MMP
L3540	Equipment	ORTHOPEDIC SHOE ADDITION, SOLE, FULL	Yes			MMP
L3550	Equipment	ORTHOPEDIC SHOE ADDITION, TOE TAP STANDARD	Yes			MMP
L3560	Equipment	ORTHOPEDIC SHOE ADDITION, TOE TAP, HORSESHOE	Yes			MMP
L3570	Equipment	ORTHOPEDIC SHOE ADDITION, SPECIAL EXTENSION TO INSTEP (LEATHER WITH EYELETS)	Yes			MMP
L3580	Equipment	ORTHOPEDIC SHOE ADDITION, CONVERT INSTEP TO VELCRO CLOSURE	Yes			MMP
L3590	Equipment	ORTHOPEDIC SHOE ADDITION, CONVERT FIRM SHOE COUNTER TO SOFT COUNTER	Yes			MMP
L3595	Equipment	ORTHOPEDIC SHOE ADDITION, MARCH BAR	Yes			MMP
L3600	Equipment	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, EXISTING	Yes			MMP
L3610	Equipment	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, NEW	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3620	Equipment	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, EXISTING	Yes			MMP
L3630	Equipment	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, NEW	Yes			MMP
L3640	Equipment	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, DENNIS BROWNE SPLINT (RIVETON), BOTH SHOES	Yes			MMP
L3649	Equipment	ORTHOPEdic SHOE, MODIFICATION, ADDITION OR TRANSFER, NOT OTHERWISE SPECIFIED	Yes			MMP
L3650	Equipment	SHOULDER ORTHOSIS, FIGURE OF EIGHT DESIGN ABDUCTION RESTRAINER, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3660	Equipment	SHOULDER ORTHOSIS, FIGURE OF EIGHT DESIGN ABDUCTION RESTRAINER, CANVAS AND WEBBING, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3670	Equipment	SHOULDER ORTHOSIS, ACROMIO/CLAVICULAR (CANVAS AND WEBBING TYPE), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3671	Equipment	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3674	Equipment	SHOULDER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITH OR WITHOUT NONTORSI	Yes			MMP
L3675	Equipment	SHOULDER ORTHOSIS, VEST TYPE ABDUCTION RESTRAINER, CANVAS WEBBING TYPE OR EQUAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3677	Equipment	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	No			MMP
L3678	Equipment	Shoulder orthosis, shoulder joint design, without joints, may include soft interface, straps, prefabricated, off-the-shelf	No			MMP
L3702	Equipment	ELBOW ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3710	Equipment	ELBOW ORTHOSIS, ELASTIC WITH METAL JOINTS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3720	Equipment	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, FREE MOTION, CUSTOM-FABRICATED	Yes			MMP
L3730	Equipment	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, EXTENSION/ FLEXION ASSIST, CUSTOM-FABRICATED	Yes			MMP
L3740	Equipment	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, ADJUSTABLE POSITION LOCK WITH ACTIVE CONTROL, CUSTOM-FABRICATED	Yes			MMP
L3760	Equipment	ELBOW ORTHOSIS, WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENTS, ANY TYPE	Yes			MMP
L3761	Equipment	Elbow orthosis (eo), with adjustable position locking joint(s), prefabricated, off-the-shelf	No			MMP
L3762	Equipment	ELBOW ORTHOSIS, RIGID, WITHOUT JOINTS, INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3763	Equipment	ELBOW WRIST HAND ORTHOSIS, RIGID, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3764	Equipment	ELBOW WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3765	Equipment	ELBOW WRIST HAND FINGER ORTHOSIS, RIGID, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3766	Equipment	ELBOW WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3806	Equipment	WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3807	Equipment	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENTS, ANY TYPE	Yes			MMP
L3808	Equipment	WRIST HAND FINGER ORTHOSIS, RIGID WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE MATERIAL; STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3809	Equipment	Wrist hand finger orthosis, without joint(s), prefabricated, off-the-shelf, any type	Yes			MMP
L3891	Equipment	ADDITION TO UPPER EXTREMITY JOINT, WRIST OR ELBOW, CONCENTRIC ADJUSTABLE TORSION STYLE MECHANISM FOR CUSTOM FABRICATED ORTHOTICS ONLY, EACH	No			MMP
L3900	Equipment	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION, WRIST OR FINGER DRIVEN, CUSTOM-FABRICATED	Yes			MMP
L3901	Equipment	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION, CABLE DRIVEN, CUSTOM-FABRICATED	Yes			MMP
L3904	Equipment	WRIST HAND FINGER ORTHOSIS, EXTERNAL POWERED, ELECTRIC, CUSTOM-FABRICATED	Yes			MMP
L3905	Equipment	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3906	Equipment	WRIST HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3908	Equipment	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3912	Equipment	HAND FINGER ORTHOSIS, FLEXION GLOVE WITH ELASTIC FINGER CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3913	Equipment	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3915	Equipment	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3916	Equipment	Wrist hand orthosis, includes one or more nontorsion joint(s), elastic bands, turnbuckles, may include soft interface, straps, prefabricated, off-the-shelf	Yes			MMP
L3917	Equipment	HAND ORTHOSIS, METACARPAL FRACTURE ORTHOSIS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3918	Equipment	Hand orthosis, metacarpal fracture orthosis, prefabricated, off-the-shelf	Yes			MMP
L3919	Equipment	HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3921	Equipment	HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3923	Equipment	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3924	Equipment	Hand finger orthosis, without joints, may include soft interface, straps, prefabricated, off-the-shelf	Yes			MMP
L3925	Equipment	FINGER ORTHOSIS, PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), NON TORSION JOINT/SPRING, EXTENSION/FLEXION, MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3927	Equipment	FINGER ORTHOSIS, PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), WITHOUT JOINT/SPRING, EXTENSION/FLEXION (E.G. STATIC OR RING TYPE), MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3929	Equipment	HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3930	Equipment	Hand finger orthosis, includes one or more nontorsion joint(s), turnbuckles, elastic bands/springs, may include soft interface material, straps, prefabricated, off-the-shelf	Yes			MMP
L3931	Equipment	WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3933	Equipment	FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3935	Equipment	FINGER ORTHOSIS, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3956	Equipment	ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT	No			MMP
L3960	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3961	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3962	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERBS PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3967	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3971	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3973	Equipment	SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3975	Equipment	SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3976	Equipment	SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3977	Equipment	SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3978	Equipment	SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3980	Equipment	UPPER EXTREMITY FRACTURE ORTHOSIS, HUMERAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3981	Equipment	Upper extremity fracture orthosis, humeral, prefabricated, includes shoulder cap design, with or without joints, forearm section, may include soft interface, straps, includes fitting and adjustments	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L3982	Equipment	UPPER EXTREMITY FRACTURE ORTHOSIS, RADIUS/ULNAR, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3984	Equipment	UPPER EXTREMITY FRACTURE ORTHOSIS, WRIST, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L3995	Equipment	ADDITION TO UPPER EXTREMITY ORTHOSIS, SOCK, FRACTURE OR EQUAL, EACH	Yes			MMP
L3999	Equipment	UPPER LIMB ORTHOSIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L4000	Supply	REPLACE GIRDLE FOR SPINAL ORTHOSIS (CTLSO OR SO)	Yes			MMP
L4002	Supply	REPLACEMENT STRAP, ANY ORTHOSIS, INCLUDES ALL COMPONENTS, ANY LENGTH, ANY TYPE	No			MMP
L4010	Supply	REPLACE TRILATERAL SOCKET BRIM	Yes			MMP
L4020	Supply	REPLACE QUADRILATERAL SOCKET BRIM, MOLDED TO PATIENT MODEL	Yes			MMP
L4030	Supply	REPLACE QUADRILATERAL SOCKET BRIM, CUSTOM FITTED	Yes			MMP
L4040	Supply	REPLACE MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L4045	Supply	REPLACE NON-MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L4050	Supply	REPLACE MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L4055	Supply	REPLACE NON-MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	Yes			MMP
L4060	Supply	REPLACE HIGH ROLL CUFF	Yes			MMP
L4070	Supply	REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO	Yes			MMP
L4080	Supply	REPLACE METAL BANDS KAFO, PROXIMAL THIGH	Yes			MMP
L4090	Supply	REPLACE METAL BANDS KAFO-AFO, CALF OR DISTAL THIGH	Yes			MMP
L4100	Supply	REPLACE LEATHER CUFF KAFO, PROXIMAL THIGH	Yes			MMP
L4110	Supply	REPLACE LEATHER CUFF KAFO-AFO, CALF OR DISTAL THIGH	Yes			MMP
L4130	Supply	REPLACE PRETIBIAL SHELL	Yes			MMP
L4205	Supply	REPAIR OF ORTHOTIC DEVICE, LABOR COMPONENT, PER 15 MINUTES	No			MMP
L4210	Supply	REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS	No			MMP
L4350	Equipment	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L4360	Equipment	WALKING BOOT, PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L4361	Equipment	Walking boot, pneumatic and/or vacuum, with or without joints, with or without interface material, prefabricated, off-the-shelf	Yes			MMP
L4370	Equipment	PNEUMATIC FULL LEG SPLINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L4386	Equipment	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L4387	Equipment	Walking boot, non-pneumatic, with or without joints, with or without interface material, prefabricated, off-the-shelf	Yes			MMP
L4392	Supply	REPLACEMENT, SOFT INTERFACE MATERIAL, STATIC AFO	Yes			MMP
L4394	Supply	REPLACE SOFT INTERFACE MATERIAL, FOOT DROP SPLINT	Yes			MMP
L4396	Equipment	STATIC ANKLE FOOT ORTHOSIS, INCLUDING SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, PRESSURE REDUCTION, MAY BE USED FOR MINIMAL AMBULATION, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L4397	Equipment	Static or dynamic ankle foot orthosis, including soft interface material, adjustable for fit, for positioning, may be used for minimal ambulation, prefabricated, off-the-shelf	Yes			MMP
L4398	Equipment	FOOT DROP SPLINT, RECUMBENT POSITIONING DEVICE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L4631	Equipment	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC OR OTHER MATERIAL, INCLUDES STRAPS AND CLOSURES, CUSTOM FABRICATED	Yes			MMP
L5000	Equipment	PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER	Yes			MMP
L5010	Equipment	PARTIAL FOOT, MOLDED SOCKET, ANKLE HEIGHT, WITH TOE FILLER	Yes			MMP
L5020	Equipment	PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER	Yes			MMP
L5050	Equipment	ANKLE, SYMES, MOLDED SOCKET, SACH FOOT	Yes			MMP
L5060	Equipment	ANKLE, SYMES, METAL FRAME, MOLDED LEATHER SOCKET, ARTICULATED ANKLE/FOOT	Yes			MMP
L5100	Equipment	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT	Yes			MMP
L5105	Equipment	BELOW KNEE, PLASTIC SOCKET, JOINTS AND THIGH LACER, SACH FOOT	Yes			MMP
L5150	Equipment	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5160	Equipment	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, BENT KNEE CONFIGURATION, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT	Yes			MMP
L5200	Equipment	ABOVE KNEE, MOLDED SOCKET, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	Yes			MMP
L5210	Equipment	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH FOOT BLOCKS, NO ANKLE JOINTS, EACH	Yes			MMP
L5220	Equipment	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH ARTICULATED ANKLE/FOOT, DYNAMICALLY ALIGNED, EACH	Yes			MMP
L5230	Equipment	ABOVE KNEE, FOR PROXIMAL FEMORAL FOCAL DEFICIENCY, CONSTANT FRICTION KNEE, SHIN, SACH FOOT	Yes			MMP
L5250	Equipment	HIP DISARTICULATION, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	Yes			MMP
L5270	Equipment	HIP DISARTICULATION, TILT TABLE TYPE; MOLDED SOCKET, LOCKING HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	Yes			MMP
L5280	Equipment	HEMIPELVECTOMY, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	Yes			MMP
L5301	Equipment	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT, ENDOSKELETAL SYSTEM	Yes			MMP
L5312	Equipment	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, SINGLE AXIS KNEE, PYLON, SACH FOOT, ENDOSKELETAL SYSTEM	No			MMP
L5321	Equipment	ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE	Yes			MMP
L5331	Equipment	HIP DISARTICULATION, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT	Yes			MMP
L5341	Equipment	HEMIPELVECTOMY, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT	Yes			MMP
L5400	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT, SUSPENSION, AND ONE CAST CHANGE, BELOW KNEE	Yes			MMP
L5410	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION, BELOW KNEE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5420	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION AND ONE CAST CHANGE, "AK" OR KNEE DISARTICULATION	Yes			MMP
L5430	Equipment	IMMEDIATE POST SURGICAL OR	Yes			MMP
L5450	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, BELOW KNEE	Yes			MMP
L5460	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, ABOVE KNEE	Yes			MMP
L5500	Equipment	INITIAL, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED	Yes			MMP
L5505	Equipment	INITIAL, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET	Yes			MMP
L5510	Equipment	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	Yes			MMP
L5520	Equipment	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	Yes			MMP
L5530	Equipment	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	Yes			MMP
L5535	Equipment	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, NO COVER, SACH FOOT, PREFABRICATED, ADJUSTABLE OPEN END SOCKET	Yes			MMP
L5540	Equipment	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL	Yes			MMP
L5560	Equipment	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	Yes			MMP
L5570	Equipment	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5580	Equipment	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	Yes			MMP
L5585	Equipment	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PREFABRICATED ADJUSTABLE OPEN-END SOCKET	Yes			MMP
L5590	Equipment	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO PATIENT MODEL	Yes			MMP
L5595	Equipment	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO PATIENT MODEL	Yes			MMP
L5600	Equipment	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO PATIENT MODEL	Yes			MMP
L5610	Equipment	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, HYDRACADENCE SYSTEM	Yes			MMP
L5611	Equipment	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE - KNEE DISARTICULATION, 4 BAR LINKAGE, WITH FRICTION SWING PHASE CONT	Yes			MMP
L5613	Equipment	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH HYDRAULIC SWING PHASE CONTROL	Yes			MMP
L5614	Equipment	ADDITION TO LOWER EXTREMITY, EXOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH PNEUMATIC SWING PHASE CONTROL	Yes			MMP
L5616	Equipment	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, UNIVERSAL MULTIPLEX SYSTEM, FRICTION SWING PHASE CONTROL	Yes			MMP
L5617	Equipment	ADDITION TO LOWER EXTREMITY, QUICK CHANGE SELF-ALIGNING UNIT, ABOVE KNEE OR BELOW KNEE, EACH	Yes			MMP
L5618	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES	Yes			MMP
L5620	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE	Yes			MMP
L5622	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, KNEE DISARTICULATION	Yes			MMP
L5624	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5626	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HIP DISARTICULATION	Yes			MMP
L5628	Equipment	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HEMIPELVECTOMY	Yes			MMP
L5629	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET	Yes			MMP
L5630	Equipment	ADDITION TO LOWER EXTREMITY, SYMES TYPE, EXPANDABLE WALL SOCKET	Yes			MMP
L5631	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, ACRYLIC SOCKET	Yes			MMP
L5632	Equipment	ADDITION TO LOWER EXTREMITY, SYMES TYPE, 'PTB' BRIM DESIGN SOCKET	Yes			MMP
L5634	Equipment	ADDITION TO LOWER EXTREMITY, SYMES TYPE, POSTERIOR OPENING (CANADIAN) SOCKET	Yes			MMP
L5636	Equipment	ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET	Yes			MMP
L5637	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT	Yes			MMP
L5638	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LEATHER SOCKET	Yes			MMP
L5639	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET	Yes			MMP
L5640	Equipment	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, LEATHER SOCKET	Yes			MMP
L5642	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, LEATHER SOCKET	Yes			MMP
L5643	Equipment	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	Yes			MMP
L5644	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, WOOD SOCKET	Yes			MMP
L5645	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	Yes			MMP
L5646	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET	Yes			MMP
L5647	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE SUCTION SOCKET	Yes			MMP
L5648	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET	Yes			MMP
L5649	Equipment	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET	Yes			MMP
L5650	Equipment	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	Yes			MMP
L5651	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	Yes			MMP
L5652	Equipment	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	Yes			MMP
L5653	Equipment	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5654	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, SYMES, (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	Yes			MMP
L5655	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	Yes			MMP
L5656	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, KNEE DISARTICULATION (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	Yes			MMP
L5658	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, ABOVE KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	Yes			MMP
L5661	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER SYMES OR EQUAL	Yes			MMP
L5665	Equipment	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER, BELOW KNEE	Yes			MMP
L5666	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION	Yes			MMP
L5668	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION	Yes			MMP
L5670	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED SUPRACONDYLAR SUSPENSION ("PTS" PR SIMILAR)	Yes			MMP
L5671	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE / ABOVE KNEE SUSPENSION LOCKING MECHANISM (SHUTTLE, LANYARD OR EQUAL), EXCLUDES SOCKET INSERT	Yes			MMP
L5672	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION	Yes			MMP
L5673	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH LOCKING MECHANISM	Yes			MMP
L5676	Equipment	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR	Yes			MMP
L5677	Equipment	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, POLYCENTRIC, PAIR	Yes			MMP
L5678	Equipment	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR	Yes			MMP
L5679	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, NOT FOR USE WITH LOCKING MECHANISM	Yes			MMP
L5680	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NONMOLDED	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5681	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L5673 OR L5679)	Yes			MMP
L5682	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, GLUTEAL/ISCHIAL, MOLDED	Yes			MMP
L5683	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L5673 OR L5679)	Yes			MMP
L5684	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP	Yes			MMP
L5685	Equipment	ADDITION TO LOWER EXTREMITY PROSTHESIS, BELOW KNEE, SUSPENSION/SEALING SLEEVE, WITH OR WITHOUT VALVE, ANY MATERIAL, EACH	Yes			MMP
L5686	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)	Yes			MMP
L5688	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, WEBBING	Yes			MMP
L5690	Equipment	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED AND LINED	Yes			MMP
L5692	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, LIGHT	Yes			MMP
L5694	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, PADDED AND LINED	Yes			MMP
L5695	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL, SLEEVE SUSPENSION, NEOPRENE OR EQUAL, EACH	Yes			MMP
L5696	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC JOINT	Yes			MMP
L5697	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC BAND	Yes			MMP
L5698	Equipment	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, SILESIA BANDAGE	Yes			MMP
L5699	Equipment	ALL LOWER EXTREMITY PROSTHESES, SHOULDER HARNESS	Yes			MMP
L5700	Supply	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5701	Supply	REPLACEMENT, SOCKET, ABOVE KNEE/KNEE DISARTICULATION, INCLUDING ATTACHMENT PLATE, MOLDED TO PATIENT MODEL	Yes			MMP
L5702	Supply	REPLACEMENT, SOCKET, HIP DISARTICULATION, INCLUDING HIP JOINT, MOLDED TO PATIENT MODEL	Yes			MMP
L5703	Supply	ANKLE, SYMES, MOLDED TO PATIENT MODEL, SOCKET WITHOUT SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY	Yes			MMP
L5704	Equipment	CUSTOM SHAPED PROTECTIVE COVER, BELOW KNEE	Yes			MMP
L5705	Equipment	CUSTOM SHAPED PROTECTIVE COVER, ABOVE KNEE	Yes			MMP
L5706	Equipment	CUSTOM SHAPED PROTECTIVE COVER, KNEE DISARTICULATION	Yes			MMP
L5707	Equipment	CUSTOM SHAPED PROTECTIVE COVER, HIP DISARTICULATION	Yes			MMP
L5710	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK	Yes			MMP
L5711	Equipment	ADDITIONS EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL	Yes			MMP
L5712	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)	Yes			MMP
L5714	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, VARIABLE FRICTION SWING PHASE CONTROL	Yes			MMP
L5716	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK	Yes			MMP
L5718	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING AND STANCE PHASE CONTROL	Yes			MMP
L5722	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL	Yes			MMP
L5724	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL	Yes			MMP
L5726	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, EXTERNAL JOINTS FLUID SWING PHASE CONTROL	Yes			MMP
L5728	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL	Yes			MMP
L5780	Equipment	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/HYDRA PNEUMATIC SWING PHASE CONTROL	Yes			MMP
L5781	Equipment	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5782	Equipment	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM, HEAVY DUTY	Yes			MMP
L5785	Equipment	ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5790	Equipment	ADDITION, EXOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5795	Equipment	ADDITION, EXOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5810	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK	Yes			MMP
L5811	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL	Yes			MMP
L5812	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)	Yes			MMP
L5814	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, HYDRAULIC SWING PHASE CONTROL, MECHANICAL STANCE PHASE LOCK	Yes			MMP
L5816	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK	Yes			MMP
L5818	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING, AND STANCE PHASE CONTROL	Yes			MMP
L5822	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL	Yes			MMP
L5824	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL	Yes			MMP
L5826	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, HYDRAULIC SWING PHASE CONTROL, WITH MINIATURE HIGH ACTIVITY FRAME	Yes			MMP
L5828	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL	Yes			MMP
L5830	Equipment	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/ SWING PHASE CONTROL	Yes			MMP
L5840	Equipment	ADDITION, ENDOSKELETAL KNEE/SHIN SYSTEM, 4-BAR LINKAGE OR MULTIAXIAL, PNEUMATIC SWING PHASE CONTROL	Yes			MMP
L5845	Equipment	ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5848	Equipment	ADDITION TO ENDOSKELETAL, KNEE-SHIN SYSTEM, HYDRAULIC STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY	Yes			MMP
L5850	Equipment	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST	Yes			MMP
L5855	Equipment	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, MECHANICAL HIP EXTENSION ASSIST	Yes			MMP
L5856	Equipment	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	Yes			MMP
L5857	Equipment	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING PHASE ONLY, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	Yes			MMP
L5858	Equipment	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, STANCE PHASE ONLY, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	Yes			MMP
L5859	Equipment	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)	Yes			MMP
L5910	Equipment	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM	Yes			MMP
L5920	Equipment	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE SYSTEM	Yes			MMP
L5925	Equipment	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK	Yes			MMP
L5940	Equipment	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5950	Equipment	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5960	Equipment	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L5961	Equipment	ADDITION, ENDOSKELETAL SYSTEM, POLYCENTRIC HIP JOINT, PNEUMATIC OR HYDRAULIC CONTROL, ROTATION CONTROL, WITH OR WITHOUT FLEXION AND/OR EXTENSION CONTROL	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5962	Equipment	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	Yes			MMP
L5964	Equipment	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	Yes			MMP
L5966	Equipment	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	Yes			MMP
L5968	Equipment	ADDITION TO LOWER LIMB PROSTHESIS, MULTIAXIAL ANKLE WITH SWING PHASE ACTIVE DORSIFLEXION FEATURE	Yes			MMP
L5969	Equipment	Addition, endoskeletal ankle-foot or ankle system, power assist, includes any type motor(s)	Yes			MMP
L5970	Equipment	ALL LOWER EXTREMITY PROSTHESES, FOOT, EXTERNAL KEEL, SACH FOOT	Yes			MMP
L5971	Equipment	ALL LOWER EXTREMITY PROSTHESIS, SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY	Yes			MMP
L5972	Equipment	ALL LOWER EXTREMITY PROSTHESES, FLEXIBLE KEEL FOOT (SAFE, STEN, BOCK DYNAMIC OR EQUAL)	Yes			MMP
L5974	Equipment	ALL LOWER EXTREMITY PROSTHESES, FOOT, SINGLE AXIS ANKLE/FOOT	Yes			MMP
L5975	Equipment	ALL LOWER EXTREMITY PROSTHESIS, COMBINATION SINGLE AXIS ANKLE AND FLEXIBLE KEEL FOOT	Yes			MMP
L5976	Equipment	ALL LOWER EXTREMITY PROSTHESES, ENERGY STORING FOOT (SEATTLE CARBON COPY II OR EQUAL)	Yes			MMP
L5978	Equipment	ALL LOWER EXTREMITY PROSTHESES, FOOT, MULTIAXIAL ANKLE/FOOT	Yes			MMP
L5979	Equipment	ALL LOWER EXTREMITY PROSTHESIS, MULTI-AXIAL ANKLE, DYNAMIC RESPONSE FOOT, ONE PIECE SYSTEM	Yes			MMP
L5980	Equipment	ALL LOWER EXTREMITY PROSTHESES, FLEX FOOT SYSTEM	Yes			MMP
L5981	Equipment	ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL	Yes			MMP
L5982	Equipment	ALL EXOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT	Yes			MMP
L5984	Equipment	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY	Yes			MMP
L5985	Equipment	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESES, DYNAMIC PROSTHETIC PYLON	Yes			MMP
L5986	Equipment	ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT ('MCP' OR EQUAL)	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L5987	Equipment	ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON	Yes			MMP
L5988	Equipment	ADDITION TO LOWER LIMB PROSTHESIS, VERTICAL SHOCK REDUCING PYLON FEATURE INTEGRATED ELECTRONIC FORCE SENSORS	Yes			MMP
L5990	Equipment	ADDITION TO LOWER EXTREMITY PROSTHESIS, USER ADJUSTABLE HEEL HEIGHT	Yes			MMP
L5999	Equipment	LOWER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L6000	Equipment	PARTIAL HAND, ROBIN-AIDS, THUMB REMAINING (OR EQUAL)	Yes			MMP
L6010	Equipment	PARTIAL HAND, ROBIN-AIDS, LITTLE AND/OR RING FINGER REMAINING (OR EQUAL)	Yes			MMP
L6020	Equipment	PARTIAL HAND, ROBIN-AIDS, NO FINGER REMAINING (OR EQUAL)	Yes			MMP
L6026	Equipment	Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm section, electrodes and cables, two batteries, charger, myoelectric control of terminal device, excludes terminal device(s)	Yes			MMP
L6050	Equipment	WRIST DISARTICULATION, MOLDED SOCKET, FLEXIBLE ELBOW HINGES, TRICEPS PAD	Yes			MMP
L6055	Equipment	WRIST DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, FLEXIBLE ELBOW HINGES, TRICEPS PAD	Yes			MMP
L6100	Equipment	BELOW ELBOW, MOLDED SOCKET, FLEXIBLE ELBOW HINGE, TRICEPS PAD	Yes			MMP
L6110	Equipment	BELOW ELBOW, MOLDED SOCKET, (MUENSTER OR NORTHWESTERN SUSPENSION TYPES)	Yes			MMP
L6120	Equipment	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STEP-UP HINGES, HALF CUFF	Yes			MMP
L6130	Equipment	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STUMP ACTIVATED LOCKING HINGE, HALF CUFF	Yes			MMP
L6200	Equipment	ELBOW DISARTICULATION, MOLDED SOCKET, OUTSIDE LOCKING HINGE, FOREARM	Yes			MMP
L6205	Equipment	ELBOW DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, OUTSIDE LOCKING HINGES, FOREARM	Yes			MMP
L6250	Equipment	ABOVE ELBOW, MOLDED DOUBLE WALL SOCKET, INTERNAL LOCKING ELBOW, FOREARM	Yes			MMP
L6300	Equipment	SHOULDER DISARTICULATION, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM	Yes			MMP
L6310	Equipment	SHOULDER DISARTICULATION, PASSIVE RESTORATION (COMPLETE PROSTHESIS)	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6320	Equipment	SHOULDER DISARTICULATION, PASSIVE RESTORATION (SHOULDER CAP ONLY)	Yes			MMP
L6350	Equipment	INTERSCAPULAR THORACIC, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM	Yes			MMP
L6360	Equipment	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (COMPLETE PROSTHESIS)	Yes			MMP
L6370	Equipment	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (SHOULDER CAP ONLY)	Yes			MMP
L6380	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, WRIST DISARTICULATION OR BELOW ELBOW	Yes			MMP
L6382	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, ELBOW DISARTICULATION OR ABOVE ELBOW	Yes			MMP
L6384	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC	Yes			MMP
L6386	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT	Yes			MMP
L6388	Equipment	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF RIGID DRESSING ONLY	Yes			MMP
L6400	Equipment	BELOW ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	Yes			MMP
L6450	Equipment	ELBOW DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	Yes			MMP
L6500	Equipment	ABOVE ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	Yes			MMP
L6550	Equipment	SHOULDER DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	Yes			MMP
L6570	Equipment	INTERSCAPULAR THORACIC, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6580	Equipment	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	Yes			MMP
L6582	Equipment	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	Yes			MMP
L6584	Equipment	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	Yes			MMP
L6586	Equipment	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	Yes			MMP
L6588	Equipment	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL PLASTIC SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	Yes			MMP
L6590	Equipment	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	Yes			MMP
L6600	Equipment	UPPER EXTREMITY ADDITIONS, POLYCENTRIC HINGE, PAIR	Yes			MMP
L6605	Equipment	UPPER EXTREMITY ADDITIONS, SINGLE PIVOT HINGE, PAIR	Yes			MMP
L6610	Equipment	UPPER EXTREMITY ADDITIONS, FLEXIBLE METAL HINGE, PAIR	Yes			MMP
L6611	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, EXTERNAL POWERED, ADDITIONAL SWITCH, ANY TYPE	Yes			MMP
L6615	Equipment	UPPER EXTREMITY ADDITION, DISCONNECT LOCKING WRIST UNIT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6616	Equipment	UPPER EXTREMITY ADDITION, ADDITIONAL DISCONNECT INSERT FOR LOCKING WRIST UNIT, EACH	Yes			MMP
L6620	Equipment	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION WRIST UNIT, WITH OR WITHOUT FRICTION	Yes			MMP
L6621	Equipment	UPPER EXTREMITY PROSTHESIS ADDITION, FLEXION/EXTENSION WRIST WITH OR WITHOUT FRICTION, FOR USE WITH EXTERNAL POWERED TERMINAL DEVICE	Yes			MMP
L6623	Equipment	UPPER EXTREMITY ADDITION, SPRING ASSISTED ROTATIONAL WRIST UNIT WITH LATCH RELEASE	Yes			MMP
L6624	Equipment	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION AND ROTATION WRIST UNIT	Yes			MMP
L6625	Equipment	UPPER EXTREMITY ADDITION, ROTATION WRIST UNIT WITH CABLE LOCK	Yes			MMP
L6628	Equipment	UPPER EXTREMITY ADDITION, QUICK DISCONNECT HOOK ADAPTER, OTTO BOCK OR EQUAL	Yes			MMP
L6629	Equipment	UPPER EXTREMITY ADDITION, QUICK DISCONNECT LAMINATION COLLAR WITH COUPLING PIECE, OTTO BOCK OR EQUAL	Yes			MMP
L6630	Equipment	UPPER EXTREMITY ADDITION, STAINLESS STEEL, ANY WRIST	Yes			MMP
L6632	Equipment	UPPER EXTREMITY ADDITION, LATEX SUSPENSION SLEEVE, EACH	Yes			MMP
L6635	Equipment	UPPER EXTREMITY ADDITION, LIFT ASSIST FOR ELBOW	Yes			MMP
L6637	Equipment	UPPER EXTREMITY ADDITION, NUDGE CONTROL ELBOW LOCK	Yes			MMP
L6638	Equipment	UPPER EXTREMITY ADDITION TO PROSTHESIS, ELECTRIC LOCKING FEATURE, ONLY FOR USE WITH MANUALLY POWERED ELBOW	Yes			MMP
L6640	Equipment	UPPER EXTREMITY ADDITIONS, SHOULDER ABDUCTION JOINT, PAIR	Yes			MMP
L6641	Equipment	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, PULLEY TYPE	Yes			MMP
L6642	Equipment	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, LEVER TYPE	Yes			MMP
L6645	Equipment	UPPER EXTREMITY ADDITION, SHOULDER FLEXION-ABDUCTION JOINT, EACH	Yes			MMP
L6646	Equipment	UPPER EXTREMITY ADDITION, SHOULDER JOINT, MULTIPOSITIONAL LOCKING, FLEXION, ADJUSTABLE ABDUCTION FRICTION CONTROL, FOR USE WITH BODY POWERED OR EXTERNAL POWERED SYSTEM	Yes			MMP
L6647	Equipment	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, BODY POWERED ACTUATOR	Yes			MMP
L6648	Equipment	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, EXTERNAL POWERED ACTUATOR	No			MMP
L6650	Equipment	UPPER EXTREMITY ADDITION, SHOULDER UNIVERSAL JOINT, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6655	Equipment	UPPER EXTREMITY ADDITION, STANDARD CONTROL CABLE, EXTRA	Yes			MMP
L6660	Equipment	UPPER EXTREMITY ADDITION, HEAVY DUTY CONTROL CABLE	Yes			MMP
L6665	Equipment	UPPER EXTREMITY ADDITION, TEFLON, OR EQUAL, CABLE LINING	Yes			MMP
L6670	Equipment	UPPER EXTREMITY ADDITION, HOOK TO HAND, CABLE ADAPTER	Yes			MMP
L6672	Equipment	UPPER EXTREMITY ADDITION, HARNESS, CHEST OR SHOULDER, SADDLE TYPE	Yes			MMP
L6675	Equipment	UPPER EXTREMITY ADDITION, HARNESS, (E.G. FIGURE OF EIGHT TYPE), SINGLE CABLE DESIGN	Yes			MMP
L6676	Equipment	UPPER EXTREMITY ADDITION, HARNESS, (E.G. FIGURE OF EIGHT TYPE), DUAL CABLE DESIGN	Yes			MMP
L6677	Equipment	UPPER EXTREMITY ADDITION, HARNESS, TRIPLE CONTROL, SIMULTANEOUS OPERATION OF TERMINAL DEVICE AND ELBOW	Yes			MMP
L6680	Equipment	UPPER EXTREMITY ADDITION, TEST SOCKET, WRIST DISARTICULATION OR BELOW ELBOW	Yes			MMP
L6682	Equipment	UPPER EXTREMITY ADDITION, TEST SOCKET, ELBOW DISARTICULATION OR ABOVE ELBOW	Yes			MMP
L6684	Equipment	UPPER EXTREMITY ADDITION, TEST SOCKET, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC	Yes			MMP
L6686	Equipment	UPPER EXTREMITY ADDITION, SUCTION SOCKET	Yes			MMP
L6687	Equipment	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, BELOW ELBOW OR WRIST DISARTICULATION	Yes			MMP
L6688	Equipment	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, ABOVE ELBOW OR ELBOW DISARTICULATION	Yes			MMP
L6689	Equipment	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, SHOULDER DISARTICULATION	Yes			MMP
L6690	Equipment	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, INTERSCAPULAR-THORACIC	Yes			MMP
L6691	Equipment	UPPER EXTREMITY ADDITION, REMOVABLE INSERT, EACH	Yes			MMP
L6692	Equipment	UPPER EXTREMITY ADDITION, SILICONE GEL INSERT OR EQUAL, EACH	Yes			MMP
L6693	Equipment	UPPER EXTREMITY ADDITION, LOCKING ELBOW, FOREARM COUNTERBALANCE	Yes			MMP
L6694	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH LOCKING MECHANISM	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6695	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, NOT FOR USE WITH LOCKING MECHANISM	Yes			MMP
L6696	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L6694 OR L6695)	Yes			MMP
L6697	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L6694 OR L6695)	Yes			MMP
L6698	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, LOCK MECHANISM, EXCLUDES SOCKET INSERT	Yes			MMP
L6703	Equipment	TERMINAL DEVICE, PASSIVE HAND/MITT, ANY MATERIAL, ANY SIZE	Yes			MMP
L6704	Equipment	TERMINAL DEVICE, SPORT/RECREATIONAL/WORK ATTACHMENT, ANY MATERIAL, ANY SIZE	Yes			MMP
L6705	Equipment	TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #5	No			MMP
L6706	Equipment	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	Yes			MMP
L6707	Equipment	TERMINAL DEVICE, HOOK,	Yes			MMP
L6708	Equipment	TERMINAL DEVICE, HAND,	Yes			MMP
L6709	Equipment	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE	Yes			MMP
L6711	Equipment	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC	Yes			MMP
L6712	Equipment	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC	Yes			MMP
L6713	Equipment	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, PEDIATRIC	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6714	Equipment	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, PEDIATRIC	Yes			MMP
L6715	Equipment	TERMINAL DEVICE, MULTIPLE ARTICULATING DIGIT, INCLUDES MOTOR(S), INITIAL ISSUE OR REPLACEMENT	Yes			MMP
L6721	Equipment	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	Yes			MMP
L6722	Equipment	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	Yes			MMP
L6805	Equipment	TERMINAL DEVICE, MODIFIER WRIST FLEXION UNIT	Yes			MMP
L6810	Equipment	TERMINAL DEVICE, PINCHER TOOL, OTTO BOCK OR EQUAL	Yes			MMP
L6880	Equipment	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, INDEPENDENTLY ARTICULATING DIGITS, ANY GRASP PATTERN OR COMBINATION OF GRASP PATTERNS, INCLUDES MOTOR(S)	Yes			MMP
L6881	Equipment	AUTOMATIC GRASP FEATURE, ADDITION TO UPPER LIMB PROSTHETIC TERMINAL DEVICE	Yes			MMP
L6882	Equipment	MICROPROCESSOR CONTROL FEATURE, ADDITION TO UPPER LIMB PROSTHETIC TERMINAL DEVICE	Yes			MMP
L6883	Supply	REPLACEMENT SOCKET, BELOW ELBOW/WRIST DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	Yes			MMP
L6884	Supply	REPLACEMENT SOCKET, ABOVE ELBOW DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	Yes			MMP
L6885	Supply	REPLACEMENT SOCKET, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	Yes			MMP
L6890	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	Yes			MMP
L6895	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, CUSTOM FABRICATED	Yes			MMP
L6900	Equipment	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, THUMB OR ONE FINGER REMAINING	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6905	Equipment	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, MULTIPLE FINGERS REMAINING	Yes			MMP
L6910	Equipment	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, NO FINGERS REMAINING	Yes			MMP
L6915	Equipment	HAND RESTORATION (SHADING, AND MEASUREMENTS INCLUDED), REPLACEMENT GLOVE FOR ABOVE	Yes			MMP
L6920	Equipment	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL, SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6925	Equipment	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 TERMINAL DEVICE	Yes			MMP
L6930	Equipment	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6935	Equipment	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	Yes			MMP
L6940	Equipment	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6945	Equipment	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L6950	Equipment	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6955	Equipment	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	Yes			MMP
L6960	Equipment	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6965	Equipment	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	Yes			MMP
L6970	Equipment	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	Yes			MMP
L6975	Equipment	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	Yes			MMP
L7007	Equipment	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, ADULT	Yes			MMP
L7008	Equipment	ELECTRIC HAND, SWITCH OR MYOELECTRIC, CONTROLLED, PEDIATRIC	Yes			MMP
L7009	Equipment	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, ADULT	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L7040	Equipment	PREHENSILE ACTUATOR, HOSMER OR EQUAL, SWITCH CONTROLLED	Yes			MMP
L7045	Equipment	ELECTRONIC HOOK, CHILD, MICHIGAN OR EQUAL, SWITCH CONTROLLED	Yes			MMP
L7170	Equipment	ELECTRONIC ELBOW, HOSMER OR EQUAL, SWITCH CONTROLLED	Yes			MMP
L7180	Equipment	ELECTRONIC ELBOW, MICROPROCESSOR SEQUENTIAL CONTROL OF ELBOW AND TERMINAL DEVICE	Yes			MMP
L7181	Equipment	ELECTRONIC ELBOW, MICROPROCESSOR SIMULTANEOUS CONTROL OF ELBOW AND TERMINAL DEVICE	Yes			MMP
L7185	Equipment	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	Yes			MMP
L7186	Equipment	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	Yes			MMP
L7190	Equipment	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	Yes			MMP
L7191	Equipment	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	Yes			MMP
L7259	Equipment	Electronic wrist rotator, any type	Yes			MMP
L7360	Equipment	SIX VOLT BATTERY, EACH	Yes			MMP
L7362	Equipment	BATTERY CHARGER, SIX VOLT, EACH	Yes			MMP
L7364	Equipment	TWELVE VOLT BATTERY, EACH	Yes			MMP
L7366	Equipment	BATTERY CHARGER, TWELVE VOLT, EACH	Yes			MMP
L7367	Equipment	LITHIUM ION BATTERY, REPLACEMENT	Yes			MMP
L7368	Equipment	LITHIUM ION BATTERY CHARGER	Yes			MMP
L7400	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L7401	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L7402	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	Yes			MMP
L7403	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ACRYLIC MATERIAL	Yes			MMP
L7404	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ACRYLIC MATERIAL	Yes			MMP
L7405	Equipment	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ACRYLIC MATERIAL	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L7499	Equipment	UPPER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L7510	Supply	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS	No			MMP
L7520	Supply	REPAIR PROSTHETIC DEVICE, LABOR COMPONENT, PER 15 MINUTES	No			MMP
L7600	Equipment	PROSTHETIC DORNING SLEEVE, ANY MATERIAL, EACH	No			MMP
L7700	Equipment	Gasket or seal, for use with prosthetic socket insert, any type, each	No			MMP
L7900	Equipment	MALE VACUUM ERECTION SYSTEM	No			MMP
L7902	Equipment	Tension ring, for vacuum erection device, any type, replacement only, each	No			MMP
L8000	Supply	BREAST PROSTHESIS, MASTECTOMY BRA	Yes			MMP
L8001	Supply	BREAST PROSTHESIS, MASTECTOMY BRA, WITH INTEGRATED BREAST PROSTHESIS FORM, UNILATERAL	Yes			MMP
L8002	Supply	BREAST PROSTHESIS, MASTECTOMY BRA, WITH INTEGRATED BREAST PROSTHESIS FORM, BILATERAL	Yes			MMP
L8010	Supply	BREAST PROSTHESIS, MASTECTOMY SLEEVE	No			MMP
L8015	Supply	EXTERNAL BREAST PROSTHESIS GARMENT, WITH MASTECTOMY FORM, POST MASTECTOMY	Yes			MMP
L8020	Supply	BREAST PROSTHESIS, MASTECTOMY FORM	Yes			MMP
L8030	Supply	BREAST PROSTHESIS, SILICONE OR EQUAL	Yes			MMP
L8031	Supply	BREAST PROSTHESIS, SILICONE OR EQUAL, WITH INTEGRAL ADHESIVE	Yes			MMP
L8032	Supply	NIPPLE PROSTHESIS, REUSABLE, ANY TYPE, EACH	Yes			MMP
L8035	Supply	CUSTOM BREAST PROSTHESIS, POST MASTECTOMY, MOLDED TO PATIENT MODEL	Yes			MMP
L8039	Supply	BREAST PROSTHESIS, NOT OTHERWISE SPECIFIED	Yes			MMP
L8040	Supply	NASAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8041	Supply	MIDFACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8042	Supply	ORBITAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8043	Supply	UPPER FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8044	Supply	HEMI-FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8045	Supply	AURICULAR PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8046	Supply	PARTIAL FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8047	Supply	NASAL SEPTAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8048	Supply	UNSPECIFIED MAXILLOFACIAL PROSTHESIS, BY REPORT, PROVIDED BY A NON-PHYSICIAN	Yes			MMP
L8049	Supply	REPAIR OR MODIFICATION OF MAXILLOFACIAL PROSTHESIS, LABOR COMPONENT, 15 MINUTE INCREMENTS, PROVIDED BY A NON-PHYSICIAN	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L8300	Equipment	TRUSS, SINGLE WITH STANDARD PAD	Yes			MMP
L8310	Equipment	TRUSS, DOUBLE WITH STANDARD PADS	Yes			MMP
L8320	Equipment	TRUSS, ADDITION TO STANDARD PAD, WATER PAD	Yes			MMP
L8330	Equipment	TRUSS, ADDITION TO STANDARD PAD, SCROTAL PAD	Yes			MMP
L8400	Equipment	PROSTHETIC SHEATH, BELOW KNEE, EACH	Yes			MMP
L8410	Equipment	PROSTHETIC SHEATH, ABOVE KNEE, EACH	Yes			MMP
L8415	Equipment	PROSTHETIC SHEATH, UPPER LIMB, EACH	Yes			MMP
L8417	Equipment	PROSTHETIC SHEATH/SOCK, INCLUDING A GEL CUSHION LAYER, BELOW KNEE OR ABOVE KNEE, EACH	Yes			MMP
L8420	Equipment	PROSTHETIC SOCK, MULTIPLE PLY, BELOW KNEE, EACH	Yes			MMP
L8430	Equipment	PROSTHETIC SOCK, MULTIPLE PLY, ABOVE KNEE, EACH	Yes			MMP
L8435	Equipment	PROSTHETIC SOCK, MULTIPLE PLY, UPPER LIMB, EACH	Yes			MMP
L8440	Equipment	PROSTHETIC SHRINKER, BELOW KNEE, EACH	Yes			MMP
L8460	Equipment	PROSTHETIC SHRINKER, ABOVE KNEE, EACH	Yes			MMP
L8465	Equipment	PROSTHETIC SHRINKER, UPPER LIMB, EACH	Yes			MMP
L8470	Equipment	PROSTHETIC SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH	Yes			MMP
L8480	Equipment	PROSTHETIC SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH	Yes			MMP
L8485	Equipment	PROSTHETIC SOCK, SINGLE PLY, FITTING, UPPER LIMB, EACH	Yes			MMP
L8499	Equipment	UNLISTED PROCEDURE FOR MISCELLANEOUS PROSTHETIC SERVICES	No			MMP
L8500	Supply	ARTIFICIAL LARYNX, ANY TYPE	Yes			MMP
L8501	Supply	TRACHEOSTOMY SPEAKING VALVE	Yes			MMP
L8507	Supply	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, PATIENT INSERTED, ANY TYPE, EACH	Yes			MMP
L8509	Supply	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, INSERTED BY A LICENSED HEALTH CARE PROVIDER, ANY TYPE	Yes			MMP
L8510	Supply	VOICE AMPLIFIER	Yes			MMP
L8511	Supply	INSERT FOR INDWELLING TRACHEOESOPHAGEAL PROSTHESIS, WITH OR WITHOUT VALVE, REPLACEMENT ONLY, EACH	Yes			MMP
L8512	Supply	GELATIN CAPSULES OR EQUIVALENT, FOR USE WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, REPLACEMENT ONLY, PER 10	Yes			MMP
L8513	Supply	CLEANING DEVICE USED WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, PIPET, BRUSH, OR EQUAL, REPLACEMENT ONLY, EACH	Yes			MMP
L8514	Supply	TRACHEOESOPHAGEAL PUNCTURE DILATOR, REPLACEMENT ONLY, EACH	Yes			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
L8515	Supply	GELATIN CAPSULE, APPLICATION DEVICE FOR USE WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, EACH	Yes			MMP
L8625	Equipment	External recharging system for battery for use with cochlear implant or auditory osseointegrated device, replacement only, each	No			MMP
L8679	Equipment	Implantable neurostimulator, pulse generator, any type	Yes			MMP
L8694	Equipment	Auditory osseointegrated device, transducer/actuator, replacement only, each	No			MMP
L8696	Equipment	Antenna (external) for use with implantable diaphragmatic/phrenic nerve stimulation device, replacement, each	Yes			MMP
Q0477	Equipment	Power module patient cable for use with electric or electric/pneumatic ventricular assist device, replacement only	No			MMP
S1001	Equipment	DELUXE ITEM, PATIENT AWARE (LIST IN ADDITION TO CODE FOR BASIC ITEM)	Not Covered			MMP
S1002	Equipment	CUSTOMIZED ITEM (LIST IN ADDITION TO CODE FOR BASIC ITEM)	Not Covered			MMP
S1040	Supply	CRANIAL REMOLDING ORTHOSIS, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)	No			MMP
S5570	Supply	INSULIN DELIVERY DEVICE; DISPOSABLE PEN (INCLUDING INSULIN); 1.5 ML SIZE	No			MMP
S5571	Supply	INSULIN DELIVERY DEVICE, DISPOSABLE PEN (INCLUDING INSULIN); 3 ML SIZE	No			MMP
S8096	Supply	PORTABLE PEAK FLOW METER	No			MMP
S8097	Equipment	ASTHMA KIT (including but not limited to portable peak expiratory flow meter, instructional video, brochure, and/or spacer)	No			MMP
S8100	Supply	HOLDING CHAMBER OR SPACER FOR USE WITH AN INHALER OR NEBULIZER; WITHOUT MASK	No			MMP
S8101	Supply	HOLDING CHAMBER OR SPACER FOR USE WITH AN INHALER OR NEBULIZER; WITH MASK	No			MMP
S8110	Supply	PEAK EXPIRATORY FLOW RATE (PHYSICIAN SERVICES)	No			MMP
S8120	Supply	OXYGEN CONTENTS, GASEOUS, 1 UNIT EQUALS 1 CUBIC FOOT	Not Covered			MMP
S8121	Supply	OXYGEN CONTENTS, LIQUID, 1 UNIT EQUALS 1 POUND	Not Covered			MMP
S8130	Equipment	INTERFERENTIAL CURRENT STIMULATOR, 2 CHANNEL	Not Covered			MMP
S8131	Equipment	INTERFERENTIAL CURRENT STIMULATOR, 4 CHANNEL	Not Covered			MMP
S8185	Supply	FLUTTER DEVICE	No			MMP
S8186	Supply	SWIVEL ADAPTOR	No			MMP
S8189	Supply	TRACHEOSTOMY SUPPLY, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
S8210	Supply	MUCUS TRAP	No			MMP
S8262	Supply	MANDIBULAR ORTHOPEDIC REPOSITIONING DEVICE, EACH	No			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
S8265	Equipment	HABERMAN FEEDER FOR CLEFT LIP/PALATE	No			MMP
S8270	Equipment	ENURESIS ALARM, USING AUDITORY BUZZER AND/OR VIBRATION DEVICE	No			MMP
S8420	Equipment	GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINATION), CUSTOM MADE	No			MMP
S8421	Equipment	GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINATION), READY MADE	No			MMP
S8422	Equipment	GRADIENT PRESSURE AID (SLEEVE), CUSTOM MADE, MEDIUM WEIGHT	No			MMP
S8423	Equipment	GRADIENT PRESSURE AID (SLEEVE), CUSTOM MADE, HEAVY WEIGHT	No			MMP
S8424	Equipment	GRADIENT PRESSURE AID (SLEEVE), READY MADE	No			MMP
S8425	Equipment	GRADIENT PRESSURE AID (GLOVE), CUSTOM MADE, MEDIUM WEIGHT	No			MMP
S8426	Equipment	GRADIENT PRESSURE AID (GLOVE), CUSTOM MADE, HEAVY WEIGHT	No			MMP
S8427	Equipment	GRADIENT PRESSURE AID (GLOVE), READY MADE	No			MMP
S8428	Equipment	GRADIENT PRESSURE AID (GAUNTLET), READY MADE	No			MMP
S8429	Equipment	GRADIENT PRESSURE EXTERIOR WRAP	No			MMP
S8430	Supply	PADDING FOR COMPRESSION BANDAGE, ROLL	No			MMP
S8431	Supply	COMPRESSION BANDAGE, ROLL	No			MMP
S8450	Equipment	SPLINT, PREFABRICATED, DIGIT (SPECIFY DIGIT BY USE OF MODIFIER)	No			MMP
S8451	Equipment	SPLINT, PREFABRICATED, WRIST OR ANKLE	No			MMP
S8452	Equipment	SPLINT, PREFABRICATED, ELBOW	No			MMP
S8460	Supply	CAMISOLE, POST-MASTECTOMY	No			MMP
S8490	Supply	INSULIN SYRINGES (100 SYRINGES, ANY SIZE)	No			MMP
S8999	Supply	RESUSCITATION BAG (FOR USE BY PATIENT ON ARTIFICIAL RESPIRATION DURING POWER FAILURE OR OTHER CATASTROPHIC EVENT)	No			MMP
S9001	Supply	HOME UTERINE MONITOR WITH OR WITHOUT ASSOCIATED NURSING SERVICES	Not Covered			MMP
S9434	Supply	MODIFIED SOLID FOOD SUPPLEMENTS FOR INBORN ERRORS OF METABOLISM	Not Covered			MMP
T1505	Equipment	ELECTRONIC MEDICATION COMPLIANCE MANAGEMENT DEVICE, INCLUDES ALL COMPONENTS AND ACCESSORIES, NOT OTHERWISE CLASSIFIED	Not Covered			MMP
T4521	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH	Not Covered			MMP
T4522	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH	Not Covered			MMP
T4523	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH	Not Covered			MMP
T4524	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
T4525	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH	Not Covered			MMP
T4526	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH	Not Covered			MMP
T4527	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH	Not Covered			MMP
T4528	Supply	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH	Not Covered			MMP
T4529	Supply	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL/MEDIUM SIZE EACH	Not Covered			MMP
T4530	Supply	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH	Not Covered			MMP
T4531	Supply	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM SIZE, EACH	Not Covered			MMP
T4532	Supply	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH	Not Covered			MMP
T4533	Supply	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH	Not Covered			MMP
T4534	Supply	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH	Not Covered			MMP
T4535	Supply	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH	Not Covered			MMP
T4536	Supply	INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, REUSABLE, ANY SIZE, EACH	Not Covered			MMP
T4537	Supply	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, BED SIZE, EACH	Not Covered			MMP
T4538	Supply	DIAPER SERVICE, REUSABLE DIAPER, EACH DIAPER	Not Covered			MMP
T4539	Supply	INCONTINENCE PRODUCT, DIAPER/BRIEF, REUSABLE, ANY SIZE, EACH	Not Covered			MMP
T4540	Supply	INCONTINENCE PRODUCT, PROTECTIVE UNDERPAD, REUSABLE, CHAIR SIZE, EACH	Not Covered			MMP
T4541	Supply	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH	Not Covered			MMP
T4542	Supply	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH	Not Covered			MMP
T4543	Supply	DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, BARIATRIC, EACH	Not Covered			MMP

Code	Equip/Supply	Description	Authorization Required	Key	Rider Requirement	Product Lines
T5001	Supply	POSITIONING SEAT FOR PERSONS WITH SPECIAL ORTHOPEDIC NEEDS, FOR USE IN VEHICLES	Not Covered			MMP
T5999	Supply	SUPPLY, NOT OTHERWISE SPECIFIED	Yes			MMP