



MONTEFIORE CARE MANAGEMENT

200 Corporate Blvd. South
Yonkers, NY 10701

DME PRECERTIFICATION GUIDELINES **(for HIP members ONLY)**

In an effort to improve the current process for obtaining authorizations for Durable Medical Equipment (DME) *for our HIP members only*, CMO has implemented new guidelines effective October 1, 2009. There are three categories of guidelines for HIP DME: (1) **Basic DME**, (2) **DME requiring benefit/rider**, (3) **all other DME services requiring an authorization and the benefit**.

1. Basic DME (No authorization, no benefit/rider required):

All HIP members are eligible for Basic DME which includes canes, walkers and crutches. For these basic DME items, it is not necessary to call, fax or enter a Post-n-Track request for authorization. In order for this claim to pay, no authorization is required. The HIP members simply need a prescription from their provider to have the claim paid. As a provider or vendor, if you submit a Post-n-Track request for the below DME services, the Post-n-Track system will automatically **APPROVE** this request. If you place your request by fax or phone, you will NOT receive an authorization approval letter as authorization is not needed. We encourage providers and vendors to avoid sending authorization requests for these services (see **page 2**).

2. DME requiring benefit/rider (No authorization required):

As you may know, **not all HIP Commercial** members have a DME benefit/rider, whereas all Medicare and Medicaid members do have a DME benefit. Due to this, it is up to the member, requesting physician and vendor to verify the member's eligibility and benefit information before providing DME equipment to the member.

If a member has the DME benefit/rider, providers and vendors do not need to call, fax or enter a Post-n-Track request for authorization, nor submit clinical information to CMO.

For a complete list of DME services that do not require authorization if the member has the benefit, please see **pages 3-6**. Please note: your claim will **NOT** be paid unless the patient has the necessary benefit (DME rider). If you are unsure as to whether or not a member has the DME rider, you may call CMO Customer Service at 1-914-377-4400 for benefit information or find this information on Post-N-Track (see **page 7** for Post-N-Track screenshot, which notes where to find this information).

3. All other DME services (Authorization and Benefit required):

All other DME services not listed in the **Basic DME** or **DME requiring benefit** categories above require both the member to have the benefit and an authorization must also be obtained (including submission of clinical information to determine medical necessity).

If you have any questions regarding these guidelines, please call CMO Provider Relations at 1-914-377-4477.

1. Basic DME (No authorization, no benefit/rider required):

Code	Description
E0100	CANE ADJUST/FIXED WITH TIP
E0105	CANE ADJUST/FIXED QUAD/3 PRO
E0110	CRUTCH FOREARM PAIR
E0111	CRUTCH FOREARM EACH
E0112	CRUTCH UNDERARM PAIR WOOD
E0113	CRUTCH UNDERARM EACH WOOD
E0114	CRUTCH UNDERARM NOT WOOD PER PAIR
E0116	CRUTCH UNDERARM NOT WOOD EACH
E0117	UNDERARM SPRINGASSIST CRUTCH
E0118	CRUTCH SUBSTITUTE
E0130	WALKER RIGID ADJUST/FIXED HT
E0135	WALKER FOLDING ADJUST/FIXED HEIGHT
E0140	WALKER W TRUNK SUPPORT
E0141	WALKER RIGID WHEELED ADJUST/FIX HGT
E0142	WALKER RIGID WHEELED WITH SEAT
E0143	WALKER FOLDING WHEELED W/O SEAT
E0144	ENCLOSED WALKER W REAR SEAT
E0145	WALKER WHLED SEAT/CRUTCH ATTCH
E0146	WALKER WHEELED WITH SEAT
E0147	WALKER VARIABLE WHEEL RESIST
E0148	HEAVYDUTY WALKER NO WHEELS
E0149	HEAVY DUTY WHEELED WALKER
E0153	FOREARM CRUTCH PLATFORM ATTACHMENT
E0154	WALKER PLATFORM ATTACHMENT
E0155	RIGID WALKER WHEEL ATTACHMT, PAIR
E0156	WALKER SEAT ATTACHMENT
E0157	WALKER CRUTCH ATTACHMENT
E0158	WALKER LEG EXTENSIONS, SET OF 4
E0159	BRAKE FOR WHEELED WALKER

2. DME requiring benefit/rider (No authorization required): *

Code	Description		
E0163	COMMODE CHAIR WITH FIXED ARM	E1031	ROLLABOUT CHAIR WITH CASTERS
E0164	COMMODE CHAIR MOBILE W/FIXED ARMS	E1035	PATIENT TRANSFER SYSTEM
E0165	COMMODE CHAIR WITH DETACHARM	E1036	PATIENT TRANSFER SYSTEM >300
E0166	COMMODE CHAIR MOBILE W/DETACH ARMS	E1037	TRANSPORT CHAIR, PED SIZE
E0167	COMMODE CHAIR PAIL OR PAN	E1038	TRANSPORT CHAIR, ADULT WT<250LBS
E0168	HEAVYDUTY/WIDE COMMODE CHAIR	E1039	TRANSPORT CHAIR PATIENT WT>=250LB
E0169	SEATLIFT INCORP COMMODECHAIR	E1354	WHEELED CART, PORT CYL/CONC
E0170	COMMODE CHAIR ELECTRIC	E2601	GEN WC SEAT CUSHION WIDTH < 22 IN
E0171	COMMODE CHAIR NON-ELECTRIC	E2602	GEN WC SEAT CUSHION WIDTH >=22 IN
E0172	SEAT LIFT MECHANISM TOILET	E2603	SKIN PROTECT WC CUSHION WIDTH <22IN
E0175	COMMODE CHAIR FOOT REST	E2604	SKIN PROTECT WC CUSHION WIDTH>=22IN
E0188	SYNTHETIC SHEEPSKIN PAD	E2605	POSITION WC CUSHION WIDTH <22 IN
E0199	DRY PRESSURE PAD FOR MATTRESS, STD	E2606	POSITION WC CUSHION WIDTH >=22 IN
E0200	HEAT LAMP WITHOUT STAND	E2607	SKIN PROTECT & POS WC CUS WD <22IN
E0202	PHOTOTHERAPY LIGHT WITH PHOTOMETER	E2608	SKIN PROTECT & POS WC CUS WD>=22IN
E0215	ELECTRIC HEAT PAD MOIST	K0669	W/C SEAT/BACK NO CVR SADMERC
E0238	HEAT PAD NON-ELECTRIC MOIST	K0734	ADJ SKIN PRO W/C CUS WD<22IN
E0249	PAD WATER CIRCULATING HEAT UNIT	K0735	ADJ SKIN PRO WC CUS WD>=22IN
E0482	COUGH STIMULATING DEVICE	K0736	ADJ SKIN PRO/POS WC CUS<22IN
E0500	IPPB MACHINE, ALL TYPES	K0737	ADJ SKIN PRO/POS WC CUS>=22IN
E0560	HUMIDIFIER SUPPLEMENTAL W/IBBP/O2	L0112	CRANIAL CERVICAL ORTHOSIS
E0565	COMPRESSOR AIR POWER SOURCE	L0120	CERV FLEXIBLE NON-ADJUSTABLE
E0600	SUCTION PUMP PORTABLE HOME MODEL	L0130	FLEX THERMOPLASTIC COLLAR MOLDED
E0602	MANUAL BREAST PUMP, ANY TYPE	L0140	CERVICAL SEMI-RIGID ADJUSTABLE
E0603	ELECTRIC BREAST PUMP	L0150	CERV SEMI-RIG ADJ MOLDED CHIN CUP
E0604	HOSP GRADE ELEC BREAST PUMP	L0160	CERV SEMI-RIG WIRE OCC/MAND SUPPORT
E0618	APNEA MONITOR	L0170	CERVICAL COLLAR MOLDED TO PATIENT
E0619	APNEA MONITOR W RECORDER	L0172	CERVICAL COL THERMPLAS FOAM 2 PIECE
E0621	PATIENT LIFT SLING OR SEAT	L0174	CERV COL FOAM 2 PIECE W THORAC EXT
E0630	PATIENT LIFT HYDRAULIC	L0180	CER POST COL OCC/MAN SUPPORT ADJ
E0705	TRANSFER BOARD OR DEVICE	L0190	CERV COLLAR SUPPORT ADJST CERV BARS
E0720	TENS TWO LEAD	L0200	CERV COLLAR SUPP ADJ BAR & THOR EXT
E0730	TENS FOUR LEAD	L0210	THORACIC RIB BELT
E0731	CONDUCTIVE GARMENT FOR TENS/NMES	L0220	THORACIC RIB BELT CUSTOM FABRICATED
E0740	INCONTINENCE TREATMENT SYSTEM	L0430	Dewall posture protector
E0830	AMBULATORY TRACTION DEVICE	L0450	TLSO FLEX PREFAB THORACIC
E0840	TRACTION FRAME ATTACH TO HEADBOARD	L0454	TLSO FLEX PREFAB SACROCOC-T9
E0849	CERVICAL PNEUMATIC TRACTION EQUIP	L0456	TLSO FLEX PREFAB
E0850	TRACTION STAND FREE STANDING	L0458	TLSO 2MOD SYMPHIS-XIPHO PRE
E0855	CERVICAL TRACTION EQUIPMENT	L0460	TLSO2MOD SYMPHYSIS-STERN PRE
E0860	TRACTION EQUIPMENT CERVICAL TRACT	L0462	TLSO 3MOD SACRO-SCAP PRE
E0870	TRACTION FRAME ATTACH TO FOOTBOARD	L0464	TLSO 4MOD SACRO-SCAP PRE
E0880	TRACION STAND FREE STAND EXTREMITY	L0466	TLSO RIGID FRAME PRE SOFT AP
E0890	TRACTION FRAME ATTACHED PELVIC TRAC	L0468	TLSO RIGID FRAME PREFAB PELV
E0900	TRACTION STAND FREESTANDING PELVIC	L0470	TLSO RIGID FRAME PRE SUBCLAV
E0910	TRAPEZE BAR ATTACHED TO BED	L0472	TLSO RIGID FRAME HYPEREX PRE
E0911	HD TRAPEZE BAR ATTACH TO BED	L0486	TLSO RIGIDLINED CUST FAB TWO
E0912	HD TRAPEZE BAR FREE STANDING	L0488	TLSO RIGID LINED PRE ONE PIE
E0958	WHEELCHAIR ATTACH CONV 1 ARM DRIVE	L0490	TLSO RIGID PLASTIC PRE ONE
E0966	WHEELCHAIR HEAD REST EXTENSION,EACH	L0491	TLSO 2 PIECE RIGID SHELL
E0968	WHEELCHAIR COMMODE SEAT	L0492	TLSO 3 PIECE RIGID SHELL
E0971	WHEELCHAIR ANTI-TIPPING DEVICE	L0621	SIO FLEX PELVISACRAL PREFAB
E1020	RESIDUAL LIMB SUPPORT SYSTEM	L0623	SIO PANEL PREFAB
		L0625	LO FLEXIBL L1-BELOW L5 PRE

L0626	LO SAG STAYS/PANELS PRE-FAB
L0627	LO SAGITT RIGID PANEL PREFAB
L0628	LO FLEX W/O RIGID STAYS PRE
L0630	LSO POST RIGID PANEL PRE
L0631	LSO SAG-CORO RIGID FRAME PRE
L0633	LSO FLEXION CONTROL PREFAB
L0635	LSO SAGIT RIGID PANEL PREFAB
L0637	LSO SAG-CORONAL PANEL PREFAB
L0639	LSO S/C SHELL/PANEL PREFAB
L0700	CTLISO A-P-L CONTROL MOLDED
L0710	CTLISO A-P-L CONTROL WITH INTERFACE
L0810	HALO CERVICAL INTO JACKET VEST
L0820	HALO CERVICAL INTO BODY JACKET
L0830	HALO CERVICAL INTO MILWAUKEE TYPE
L0859	MRI COMPATIBLE SYSTEM
L0861	HALO REPL LINER/INTERFACE
L0970	TLISO CORSET FRONT
L0972	LSO CORSET FRONT
L0974	TLISO FULL CORSET
L0976	LSO FULL CORSET
L0984	PROTECTIVE BODY SOCK EACH
L1000	CTLISO MILWAUKEE INITIAL MODEL
L1001	CTLISO infant immobilizer
L1005	TENSION BASED SCOLIOSIS ORTH
L1010	CTLISO AXILLA SLING
L1020	KYPHOSIS PAD
L1025	KYPHOSIS PAD FLOATING
L1030	LUMBAR BOLSTER PAD
L1040	LUMBAR OR LUMBAR RIB PAD
L1050	STERNAL PAD
L1060	THORACIC PAD
L1070	TRAPEZIUS SLING
L1080	OUTRIGGER
L1085	OUTRIGGER BILAT W/VERTICL EXTENSION
L1090	LUMBAR SLING
L1100	RING FLANGE PLASTIC/LEATHER
L1110	RING FLANGE PLASTIC/LEATHER MOLDED
L1120	COVERS FOR UPRIGHT EACH
L1200	FURNISHING INITIAL ORTHOSIS ONLY
L1210	LATERAL THORACIC EXTENSION
L1220	ANTERIOR THORACIC EXTENSION
L1230	MILWAUKEE TYPE SUPERSTRUCTURE
L1240	LUMBAR DEROTATION PAD
L1250	ANTERIOR ASIS PAD
L1270	ABDOMINAL PAD
L1280	RIB GUSSET (ELASTIC) EACH
L1290	LATERAL TROCHANTERIC PAD
L1300	BODY JACKET MOLD TO PATIENT
L1310	POST-OPERATIVE BODY JACKET
L1500	THKAO MOBILITY FRAME
L1510	THKAO STANDING FRAME
L1520	THKAO SWIVEL WALKER
L1600	ABDUCTION HIP FLEX FREJKA W/COVER
L1610	ABDUCTN HIP FLEX FREJKA COVER ONLY
L1620	ABDUCTION HIP FLEX PAVLIK HARNESS
L1630	ABDUCTION CONTROL HIP SEMI-FLEXIBLE
L1640	PELVIC BAND/SPREADR BAR THIGH CUFFS

L1650	ABDUCTION HO ADJUSTABLE CUSTOM FIT
L1652	HO BI THIGHCUFFS W SPRDR BAR
L1660	ABDUCTION HO PLASTIC CUSTOM FIT
L1680	PELVIC & HIP CONTROL THIGH CUFFS
L1685	POST-OP HO ABDUCT CUSTOM FABRICATE
L1686	POST-OP HO ABDUCTION CUSTOM FIT
L1690	COMBINATION BILATERAL HO
L1700	LEGG PERTHES ORTHOSIS TORONTO TYPE
L1710	LEGG PERTHES ORTHOSIS NEWINGTON
L1720	LEGG PERTHES ORTHOSIS TRILATERAL
L1730	LEGG PERTHES ORTHOSIS SCOTTISH RITE
L1755	LEGG PERTHES PATTEN BOTTOM TYPE
L1800	KNEE ORTHOSES ELASTIC WITH STAYS
L1810	KO ELASTIC WITH JOINTS
L1815	ELASTIC WITH CONDYLAR PADS
L1820	KO ELASTIC W/CONDYLE PADS & JOINTS
L1825	KO ELASTIC KNEE CAP
L1830	KO IMMOBILIZER CANVAS LONGITUDINAL
L1831	KNEE ORTH POS LOCKING JOINT
L1832	KO ADJ JNT POS RIGID SUPPORT CUSTOM
L1836	RIGID KO WO JOINTS
L1843	KO SINGLE UPRIGHT CUSTOM FIT
L1845	KO W/ADJST FLEX/EXT ROTATION CUSTOM
L1847	KO ADJUSTABLE W/AIR CHAMBERS
L1850	KO SWEDISH TYPE
L1900	AFO SPRING WIRE DORSIFLEX CALF BAND
L1901	PREFAB ANKLE ORTHOSIS
L1902	AFO ANKLE GAUNTLET
L1904	AFO MOLDED ANKLE GAUNTLET
L1906	AFO MULTILIGAMENTUS ANKLE SUPPORT
L1907	AFO SUPRAMALLEOLAR CUSTOM
L1910	AFO SINGLE BAR CLASP ATTACHMNT SHOE
L1920	AFP SINGLE UPRIGHT W/ADJUST STOP
L1930	AFO CUSTOM PREFABRICATED PLASTIC
L1932	AFO RIG ANT TIB PREFAB TCF/EQUAL MA
L1940	AFO CUSTOM FABRICATED PLASTIC/OTHER
L1945	AFO CUSTOM RIGID ANT TIBIAL PLASTIC
L1950	AFO SPIRAL CUSTOM FABRICATED PLASTC
L1951	AFO SPIRAL PREFABRICATED
L1960	AFO POST SOLID ANKLE PLASTIC CUSTOM
L1970	AFO PLASTIC MOLDED W/ANKLE JOINT
L1971	AFO W/ANKLE JOINT, PREFAB
L1980	AFO SINGLE SOLID STIRRUP CALF BAND
L1990	AFO DOUBLE SOLID STIRRUP CALF BAND
L2035	KAFO PLASTIC PEDIATRIC SIZE
L2040	HKAFO TORSION BILAT ROTATION STRAPS
L2050	HKAFO TORSION CABLE HIP PELVIC BAND
L2060	HKAFO TORSION BALL BEARING JOINT
L2070	HKAFO TORSION UNILAT ROTATION STRAP
L2080	HKAFO UNILAT TORSION CABLE
L2090	HKAFO UNILAT TORSION BALL BEARING
L2114	AFO TIBIAL FX SEMI-RIGID PREFABRICA
L2116	AFO TIBIAL FX RIGID PREFABRICATED
L2132	KAFO FEM FX CAST SOFT PREFABRICATED
L2134	KAFO FEM FX CAST SEMI-RIGID CUSTOM
L2136	KAFO FEM FX CAST RIGID PREFABRICATE
L2180	PLASTIC SHOE INSERT W/ANKLE JOINTS

L2182	DROP LOCK KNEE
L2184	LIMITED MOTION KNEE JOINT
L2186	ADJUST MOTION KNEE JNT LERMAN TYPE
L2188	QUADRILATERAL BRIM
L2190	WAIST BELT
L2192	PELVIC BAND & BELT THIGH FLANGE
L2200	LIMITED ANKLE MOTION EACH JOINT
L2210	DORSIFLEXION ASSIST EACH JOINT
L2220	DORSI & PLANTAR FLEX ASSIST/RESIST
L2230	SPLIT FLAT CALIPER STIRRUPS & PLATE
L2232	ROCKER BOTTOM, CONTACT AFO
L2240	ROUND CALIPER AND PLATE ATTACHMENT
L2250	FOOT PLATE MOLDED STIRRUP ATTACHMNT
L2260	REINFORCED SOLID STIRRUP
L2265	LONG TONGUE STIRRUP
L2270	VARUS/VALGUS STRAP PADDED/LINED
L2275	PLASTIC MOD LOW EXT PADDED/LINED
L2280	MOLDED INNER BOOT
L2300	ABDUCTION BAR JOINTED ADJUST
L2310	ABDUCTION BAR-STRAIGHT
L2415	KNEE JOINT CAM LOCK EACH JOINT
L2620	PELVIC CONTROL HIP HEAVY DUTY
L2622	HIP JOINT ADJUSTABLE FLEXION
L2627	PLASTIC MOLD RECIPROC HIP & CABLES
L2810	KNEE CONTROL CONDYLAR PAD
L2820	SOFT INTERFACE BELOW KNEE SECTION
L3140	ABDUCTION ROTATION BAR SHOE
L3150	ABDUCTION ROTATION BAR W/O SHOE
L3160	SHOE STYLED POSITIONING DEVICE
L3170	FOOT PLASTIC HEEL STABILIZER
L3208	SURGICAL BOOT EACH INFANT
L3209	SURGICAL BOOT EACH CHILD
L3211	SURGICAL BOOT EACH JUNIOR
L3212	BENESCH BOOT PAIR INFANT
L3213	BENESCH BOOT PAIR CHILD
L3214	BENESCH BOOT PAIR JUNIOR
L3260	AMBULATORY SURGICAL BOOT EACH
L3265	PLASTAZOTE SANDAL EACH
L3300	SHOE LIFT TAPERED TO METATARSAL /IN
L3310	SHOE LIFT ELEV HEEL/SOLE NEOPRENE
L3320	SHOE LIFT ELEV HEEL/SOLE CORK /INCH
L3332	SHOE LIFTS TAPERD, TO ONE-HALF INCH
L3334	SHOE LIFTS ELEVATION HEEL PER INCH
L3340	SHOE WEDGE SACH
L3350	SHOE HEEL WEDGE
L3360	SHOE SOLE WEDGE OUTSIDE SOLE
L3370	SHOE SOLE WEDGE BETWEEN SOLE
L3380	SHOE CLUBFOOT WEDGE
L3390	SHOE OUTFLARE WEDGE
L3485	SHOE HEEL PAD REMOVABLE FOR SPUR
L3650	SHOULDER FIGURE 8 ABDUCT RESTRAINER
L3651	PREFAB SHOULDER ORTHOSIS
L3652	PREFAB DBL SHOULDER ORTHOSIS
L3660	ABDUCT RESTRAINER CANVAS & WEBBING
L3670	ACROMIO/CLAVICULAR CANVAS & WEBBING
L3671	SO CAP DESIGN W/O JNTS CF
L3672	SO AIRPLANE W/O JNTS CF

L3673	SO AIRPLANE W/JOINT CF
L3675	CANVAS VEST SO
L3677	SO HARD PLASTIC STABILIZER
L3700	ELBOW ORTHOSES ELASTIC W/STAYS
L3701	PREFAB ELBOW ORTHOSIS
L3710	ELBOW ELASTIC WITH METAL JOINTS
L3760	EO WITHJOINT, PREFABRICATED
L3762	RIGID EO WO JOINTS
L3765	EWHFO RIGID W/O JNTS CF
L3766	EWHFO W/JOINT(S) CF
L3806	WHFO w/joint(s) custom fab
L3807	WHFO WITHOUT JOINT PREFABRICATED
L3808	WHFO, rigid w/o joints
L3905	WHO W/NONTORSION JNT(S) CF
L3906	WHO WRIST GAUNTLET MOLDED TO PT
L3908	WRIST COCK-UP NON-MOLDED
L3909	PREFAB WRIST ORTHOSIS
L3911	PREFAB HAND FINGER ORTHOSIS
L3913	HFO W/O JOINTS CF
L3915	WHO w nontor jnt(s) prefab
L3917	PREFAB METACARPL FX ORTHOSIS
L3919	HO W/O JOINTS CF
L3921	HFO W/JOINT(S) CF
L3923	HFO, NO JOINT, PREFABRICATED
L3925	FO PIP/DIP WITH JOINT/SPRING
L3927	FO PIP/DIP W/O JOINT/SPRING
L3929	HFO NONTORSION JOINT, PREFAB
L3931	WHFO NONTORSION JOINT PREFAB
L3932	SAFETY PIN SPRING WIRE
L3933	FO W/O JOINTS CF
L3934	SAFETY PIN MODIFIED
L3935	FO NONTORSION JOINT CF
L3956	ADD JOINT UPPER EXTREMITY ORTHOSIS
L3960	SEWHO AIRPLANE DESIGN ABDUCTION POS
L3961	SEWHO CAP DESIGN W/O JNTS CF
L3962	SEWHO ERBS PALSEY DESIGN ABDUCTION
L3964	SEO MOBILE ARM SUPPORT FITTED TO PT
L3965	SEO ARM SUPPORT ADJ RANCHO TYPE
L3966	SEO MOBILE ARM SUPPORT RECLINING
L3967	SEWHO AIRPLANE W/O JNTS CF
L3968	SEO FRICTION DAMPENING ARM SUPPORT
L3969	SEO MONOSUSPENSION ARM/HAND SUPPORT
L3971	SEWHO CAP DESIGN W/JNT(S) CF
L3973	SEWHO AIRPLANE W/JNT(S) CF
L3975	SEWHFO CAP DESIGN W/O JNT CF
L3976	SEWHFO AIRPLANE W/O JNTS CF
L3977	SEWHFO CAP DESGN W/JNT(S) CF
L3978	SEWHFO AIRPLANE W/JNT(S) CF
L3980	UPPER EXTREMITY FX ORTHOSIS HUMERAL
L3982	UPPER EXTREM FX ORTHOSIS RAD/ULNAR
L3984	UPPER EXTREMITY FX ORTHOSIS WRIST
L3995	SOCK FRACTURE OR EQUAL EACH
L4000	REPLACE GIRDLE MILWAUKEE ORTHOSIS
L4040	REPLACE MOLDED THIGH LACER
L4045	REPLACE NON-MOLDED THIGH LACER
L4050	REPLACE MOLDED CALF LACER
L4055	REPLACE NON-MOLDED CALF LACER

L4060	REPLACE HIGH ROLL CUFF
L4070	REPLACE PROX/DIST UPRIGHT FOR KAFO
L4080	REPL METAL BAND KAFO-AFO PROX/THIGH
L4090	REPL METAL BAND KAFO-AFO CALF/DIST
L4100	REPL LEATHER CUFF KAFO PROX THIGH
L4110	REPL LEATH CUFF KAFO-AFO CALF/THIGH
L4130	REPLACE PRETIBIAL SHELL
L4205	ORTHOTIC DEVICE REPAIR, PER 15 MIN
L4210	ORTHO DEV REPAIR/REPL MINOR PARTS
L4350	ANKLE CONTROL ORTHOSIS PREFABRICATD
L4360	PNEUMATIC WALKING BOOT PREFABRICATD
L4370	PNEUMATIC FULL LEG SPLINT
L4380	PNEUMATIC KNEE SPLINT
L4386	NON-PNEUMATIC WALKING BOOT PREFABR
L4392	REPLACE STATIC AFO SOFT INTERFACE
L4394	REPLACE FOOT DROP SPINT
L4396	STATIC AFO ADJUSTABLE PREFABRICATED
L4398	FOOT DROP SPLINT, RECUMBENT PREFAB
L5000	SHOE INSERT W/ARCH, TOE FILLER
L5010	MOLDED SOCKET ANKLE HGT, W/TOE FILL
L5020	TIBIAL TUBERCLE HGT, W/TOE FILLER
L5510	PREP BK PTB PLASTER MOLDED
L5520	PREP BK PTB THERMOPLASTIC DIRECT
L5530	PREP BK PTB THERMOPLASTIC MOLDED
L5535	PREP BK PTB OPEN END SOCKET
L5540	PREP BK PTB LAMINATED SOCKET
L5560	PREP AK ISCHIAL PLASTIC MOLDED
L5570	PREP AK ISCHIAL DIRECT FORM
L5580	PREP AK ISCHIAL THERMO MOLD
L5585	PREP AK ISCHIAL OPEN END
L5590	PREP AK ISCHIAL LAMINATED
L5595	HIP DISARTICULAT SACH THERMOPLASTIC
L5600	HIP DISARTICUL SACH LAMINATED MOLD
L8000	MASTECTOMY BRA
L8010	MASTECTOMY SLEEVE
L8030	BREAST PROSTHESIS SILICONE OR EQUAL
L8031	BREAST PROSTHESIS W ADHESIVE
L8300	TRUSS SINGLE WITH STANDARD PAD
L8310	TRUSS DOUBLE WITH STANDARD PAD
L8420	PROSTHETIC SOCK MULTIP PLY BK, EACH
L8440	SHRINKER BELOW KNEE
L8460	SHRINKER ABOVE KNEE
L8509	TRACH-ESOPH VOICE PROS MD IN
L8618	COCH IMPLANT TRAN CABLE REPLACEMENT
L8619	REPLACE COCHLEAR PROCESSOR
L8621	REPLACEMENT ZINC AIR BATTERY
L8624	LITH ION BATT CID, EAR LEVEL
L8627	CID EXT SPEECH PROCESS REPL
L8628	CID EXT CONTROLLER REPL
L8629	CID TRANSMIT COIL AND CABLE
V2624	POLISHING ARTIFICAL EYE

* If code or description is not listed above, then both Benefit Rider and Medical Necessity review by Medical Management is required.

Post-n-Track DME Rider (page display):

Member Eligibility - Microsoft Internet Explorer

Address <https://pilot.post-n-track.com/CMO/MemberEligibility/tabid/56/Default.aspx>

Member Coverage

All out-of-network coverage requires authorization.

Ambulance non-emergency Authorization required	\$0.00	\$0.00	0	Y
Ambulatory surgery center facility No authorization required	\$0.00	\$0.00	0	N
Annual routine physical exam over age 19 1 Visit Per Year No referral required	\$0.00	\$0.00	1	N
Annual routine physical exam under 19 yrs No referral required	\$0.00	\$0.00	0	N
Contact Lenses Covered \$0 copay No referral required Only in Network	\$0.00	\$0.00	0	N
Diagnostic Radiology No authorization required	\$0.00	\$0.00	0	N
Dialysis Services No Authorization required	\$0.00	\$0.00	0	N
Durable Medical Equipment Covered 100% No Authorization Required	\$0.00	\$0.00	0	N
Durable Medical Equipment when medically necessary Authorization Required	\$0.00	\$0.00	0	Y
Emergency Room Facility covered at 100% No Authorization required	\$0.00	\$0.00	0	N
Emergency transportation services No authorization required	\$0.00	\$0.00	0	N
Hearing Aid Authorization required	\$0.00	\$0.00	0	Y
Home Health Care covered Unlimited Visits per Cal Year Authorization required	\$0.00	\$0.00	0	Y
Home Health Care covered Unlimited Visits per Cal Year Authorization required	\$0.00	\$0.00	0	Y
Home Health Care Physician Services Unlimited Visits Per Cal Year No	\$0.00	\$0.00	0	N