Provider Type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies) Procedure Codes Updated

Effective November 6, 2017, Healthcare Common Procedural Coding System (HCPCS) codes billed by provider type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies) have been updated in the Medicaid Management Information System (MMIS) to ensure claims are billed and paid correctly.

The following codes have been removed from MMIS and cannot be billed:

- E0265 (Hospital bed, total electric with mattress)
- E0266 (Hospital bed, total electric without mattress)
- E0296 (Hospital bed, total electric with mattress)
- E0297 (Hospital bed, total electric without mattress)

Modifiers RR (rental and UE (used equipment)) cannot be billed with the following codes:

- A7020 (Interface for cough stimulating device)
- E2228 (Manual wheelchair accessory, Wheelchair brake)

The following codes can be billed as indicated:

- E2228 (Manual wheelchair accessory, Wheelchair brake) can be billed with modifier NU
- E1012 (Wheelchair accessory, center mount power elevating leg rest) can be billed with modifiers NU and RR (Prior authorization is required)
- E2378 (Power wheelchair component, actuator, replacement) can be billed with modifiers NU, RR and KU (DMEPOS item subject to DMEPOS competitive bidding program number)
- K0009 (Other manual wheelchair/base) can be billed with modifiers NU and RR
- L3809 (Wrist hand finger orthosis, without joints, prefabricated, off-the-shelf) can be billed with no modifier

Code A4623 (Tracheostomy, inner cannula) will no longer be denied with edit code 1045

Code E0971 (Manual wheelchair accessory, anti-tipping device) will no longer be denied with edit code 1298

Code B4149 (Enteral formula, manufactured blenderized natural foods) does not require prior authorization

Code L0650 (Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, prefabricated, off-the-shelf) requires prior authorization