



January 26, 2023

Web Announcement 2989

Attention Provider Type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies):

Max Fee and Limitations Updated for Some Durable Medical Equipment Procedure Codes

Claims submitted by provider type (PT) 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies [DMEPOS]) for the following procedure codes may be denying in error with error code 6000 (Manual pricing required):

- A4602 (Replace Lithium Battery 1.5V)
- A6451 (Moderate compression bandage)
- A6545 (Gradient compression wrap)

The Medicaid Management Information System (MMIS) is being updated, and effective with claims processed after February 1, 2023, claims for procedure codes A4602, A6451 and A6545 will reimburse correctly using the max fee assigned.

The limitations for the gradient compression stocking/wrap procedure codes indicated below are being updated in the MMIS effective on claims with dates of service on or after February 1, 2023. Prior authorization is needed to exceed the limitations. **Please note:** Procedure codes A6530 through A6535 and A6545 must be billed with modifier LT or modifier RT.

Procedure Code	Description	Required Modifier	Limitation
A6530	Gradient compression stocking, below knee, 18-30 MMHG, each	LT or RT	2 units allowed per 6 months per leg, utilizing (LT/RT)
A6531	Gradient compression stocking, below knee, 30-40 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)
A6532	Gradient compression stocking, below knee, 40-50 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)
A6533	Gradient compression stocking, thigh length, 18-30 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)
A6534	Gradient compression stocking, thigh length, 30-40 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)
A6535	Gradient compression stocking, thigh length, 40-50 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)
A6536	Gradient compression stocking, full length/chap style, 18-30 MMHG, each		2 per 6 months
A6537	Gradient compression stocking, full length/chap style, 30-40 MMHG, each		2 per 6 months
A6538	Gradient compression stocking, full length/chap style, 40-50 MMHG, each		2 per 6 months

Procedure Code	Description	Required Modifier	Limitation
A6539	Gradient compression stocking, waist length, 18-30 MMHG, each		2 per 6 months
A6540	Gradient compression stocking, waist length, 30-40 MMHG, each		2 per 6 months
A6541	Gradient compression stocking, waist length, 40-50 MMHG, each		2 per 6 months
A6544	Gradient compression stocking, garter belt		1 per 6 months
A6545	Gradient compression wrap, non-elastic, below knee, 30-50 MMHG, each	LT or RT	2 per 6 months per leg, utilizing (LT/RT)

No claims will be reprocessed automatically as these updates are go-forward changes.