

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1644	Date: December 5, 2008
	Change Request 6062

NOTE: Transmittal 1605, dated September 26, 2008 is rescinded and replaced with Transmittal 1644, dated December 5, 2008. The 2008 jurisdiction list has been revised to clarify that Healthcare Common Procedure Coding System (HCPCS) code A4559 (coupling gel) may only be billed to the local carrier. The effective and implementation dates have been changed to indicate the timeframes for the contractors to post the revised jurisdiction file and update any other documentation, as needed. All other material remains the same.

Subject: 2008 Jurisdiction List for Durable Medical Equipment Prosthetics, Orthotics, and Supply Healthcare Common Procedure Coding System (HCPCS) Codes

I. SUMMARY OF CHANGES: A spreadsheet containing an updated list of the HCPCS for Durable Medical Equipment Medicare Administrative Contractors (DME MAC) and Part B local carrier/Medicare Administrative Contractor (B-MAC) jurisdictions is updated annually to reflect codes that have been added or discontinued (deleted) each year. Changes in Chapter 23, Section 20.3 of the Claims Processing Manual are reflected in the recurring update notification.

New / Revised Material

Effective Date: October 27, 2008

December 12, 2008 for HCPCS code A4559

Implementation Date: October 27, 2008

December 12, 2008 for HCPCS code A4559

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	Chapter / Section / Subsection / Title
R	23/20.3/Use and Acceptance of HCPCS Codes and Modifiers

III. FUNDING:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Manual Instruction

Recurring Update Notification

**Unless otherwise specified, the effective date is the date of service.*

Attachment – Recurring Update Notification

Pub. 100-04	Transmittal: 1644	Date: December 5, 2008	Change Request: 6062
-------------	-------------------	------------------------	----------------------

NOTE: Transmittal 1605, dated September 26, 2008 is rescinded and replaced with Transmittal 1644, dated December 5, 2008. The 2008 jurisdiction list has been revised to clarify that Healthcare Common Procedure Coding System (HCPCS) code A4559 (coupling gel) may only be billed to the local carrier. The effective and implementation dates have been changed to indicate the timeframes for the contractors to post the revised jurisdiction file and update any other documentation, as needed. All other material remains the same.

SUBJECT (Change Request Title): 2008 Durable Medical Equipment Prosthetics, Orthotics, and Supply Healthcare Common Procedure Coding System (HCPCS) Code Jurisdiction List

Effective Date: October 27, 2008
December 12, 2008 for HCPCS code A4559

Implementation Date: October 27, 2008
December 12, 2008 for HCPCS code A4559

I. GENERAL INFORMATION

A. Background:

A spreadsheet containing an updated list of the HCPCS codes for Durable Medical Equipment Medicare Administrative Contractors (DME MAC) and Part B local carrier/Part B Medicare Administrative Contractor (B-MAC) jurisdictions is updated annually to reflect codes that have been added or discontinued (deleted) each year.

B. Policy:

A recurring update notification will be published annually to notify the DME MACs and the Part B carriers/B-MACs that the list has been updated and is available on the CMS Web site. The jurisdiction list is an excel file and will be located at <http://www.cms.hhs.gov/center/dme.asp>.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I I E R	C A R I E R	R H I I E R	Shared-System Maintainers				OTH ER
					F I S S	M C S	V M S	C M W F			
6062.1	The DME MACs and the carriers/B-MACs shall	X	X		X						

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I M M A C	C A R I E R	R H I I S S	Shared-System Maintainers				OTH ER
						F I S S	M C S	V M S	C W F		
	download the attached jurisdiction file.										
6062.2	The DME MACs and the carriers/B-MACs shall adjudicate claims in accordance with the designations indicated in the jurisdiction file update.	X	X		X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I M A C	C A R E R	R H I I S S	Shared-System Maintainers				OTH ER
						F I S S	M C S	V M S	C W F		
6062.3	A provider education article related to this instruction will be available at http://www.cms.hhs.gov/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X		X						
6062.3.1	The DME MACs and the carriers/B-MACs shall publish the attached jurisdiction file as part of this provider education initiative.	X	X		X						

IV. SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements, use the box below: N/A

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Susan Webster at susan.webster@cms.hhs.gov.

Post-Implementation Contact(s): Susan Webster at susan.webster@cms.hhs.gov.

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Carriers, and Regional Home Health Carriers (RHHIs)* use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: For *Medicare Administrative Contractors (MACs)*, use the following statement:

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
A0021 - A0999	Ambulance Services	Local Carrier
A4206 - A4209	Medical, Surgical, and Self-Administered Injection Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4210	Needle Free Injection Device	DME MAC
A4211	Medical, Surgical, and Self-Administered Injection Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4212	Non Coring Needle or Stylet with or without Catheter	Local Carrier
A4213 - A4215	Medical , Surgical, and Self-Administered Injection Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4216 - A4218	Saline	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4220	Refill Kit for Implantable Pump	Local Carrier
A4221 - A4250	Medical, Surgical, and Self-Administered Injection Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4252 - A4259	Diabetic Supplies	DME MAC
A4261	Cervical Cap for Contraceptive Use	Local Carrier
A4262 - A4263	Lacrimal Duct Implants	Local Carrier
A4265	Paraffin	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4266 - A4269	Contraceptives	Local Carrier
A4270	Endoscope Sheath	Local Carrier
A4280	Accessory for Breast Prosthesis	DME MAC
A4281 - A4286	Accessory for Breast Pump	DME MAC
A4290	Sacral Nerve Stimulation Test Lead	Local Carrier
A4300 - A4301	Implantable Catheter	Local Carrier
A4305 - A4306	Disposable Drug Delivery System	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4310 - A4358	Incontinence Supplies/ Urinary Supplies	If provided in the physician's office for a temporary condition, the item is incident to the physician's service & billed to the Local Carrier. If provided in the physician's office or other place of service for a permanent condition, the item is a prosthetic device & billed to the DME MAC.
A4359 (deleted 12/31/06)	Incontinence Supplies/ Urinary Supplies	See description above.
A4361 - A4434	Urinary Supplies	If provided in the physician's office for a temporary condition, the item is incident to the physician's service & billed to the Local Carrier. If provided in the physician's office or other place of service for a permanent condition, the item is a prosthetic device & billed to the DME MAC.
A4450 - A4455	Tape;Adhesive Remover	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
A4458	Enema Bag	DME MAC
A4461-A4463	Surgical Dressing Holders	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4465	Non-elastic Binder for Extremity	DME MAC
A4470	Gravlee Jet Washer	Local Carrier
A4480	Vabra Aspirator	Local Carrier
A4481	Tracheostomy Supply	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4483	Moisture Exchanger	DME MAC
A4490 - A4510	Surgical Stockings	DME MAC
A4520	Diapers	DME MAC
A4550	Surgical Trays	Local Carrier
A4554	Disposable Underpads	DME MAC
A4556 - A4558	Electrodes; Lead Wires; Conductive Paste	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4559	Coupling Gel	Local Carrier
A4561 - A4562	Pessary	Local Carrier
A4565	Sling	Local Carrier
A4570	Splint	Local Carrier
A4575	Topical Hyperbaric Oxygen Chamber, Disposable	DME MAC
A4580 - A4590	Casting Supplies & Material	Local Carrier
A4595	TENS Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4600	Sleeve for Intermittent Limb Compression Device	DME MAC
A4601	Lithium Ion Battery for Non-Prosthetic Use	DME MAC
A4604	Tubing for Positive Airway Pressure Device	DME MAC
A4605	Tracheal Suction Catheter	DME MAC
A4606	Oxygen Probe for Oximeter	DME MAC
A4608	Transtracheal Oxygen Catheter	DME MAC
A4611 - A4613	Oxygen Equipment Batteries and Supplies	DME MAC
A4614	Peak Flow Rate Meter	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4615 - A4629	Oxygen & Tracheostomy Supplies	Local Carrier if incident to a physician's service (not separately payable). If other DME MAC.
A4630 - A4640	DME Supplies	DME MAC
A4641 - A4642	Imaging Agent; Contrast Material	Local Carrier
A4648	Tissue Marker, Implanted	Local Carrier
A4649	Miscellaneous Surgical Supplies	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A4650	Implantable Radiation Dosimeter	Local Carrier
A4651 - A4932	Supplies for ESRD	DME MAC

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
A5051 - A5093	Additional Ostomy Supplies	If provided in the physician's office for a temporary condition, the item is incident to the physician's service & billed to the Local Carrier. If provided in the physician's office or other place of service for a permanent condition, the item is a prosthetic device & billed to the DME MAC.
A5102 - A5200	Additional Incontinence and Ostomy Supplies	If provided in the physician's office for a temporary condition, the item is incident to the physician's service & billed to the Local Carrier. If provided in the physician's office or other place of service for a permanent condition, the item is a prosthetic device & billed to the DME MAC.
A5500 - A5513	Therapeutic Shoes	DME MAC
A6000	Non-Contact Wound Warming Cover	DME MAC
A6010-A6024	Surgical Dressing	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6025	Silicone Gel Sheet	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6154 - A6411	Surgical Dressing	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6412	Eye Patch	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6413	Adhesive Bandage	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6441 - A6512	Surgical Dressings	Local Carrier if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other DME MAC.
A6513	Compression Burn Mask	DME MAC
A6530 - A6549	Compression Gradient Stockings	DME MAC
A6550	Supplies for Negative Pressure Wound Therapy Electrical Pump	DME MAC
A7000 - A7002	Accessories for Suction Pumps	DME MAC
A7003 - A7039	Accessories for Nebulizers, Aspirators and Ventilators	DME MAC
A7040 - A7041	Chest Drainage Supplies	Local Carrier
A7042 - A7043	Pleural Catheter	Local Carrier
A7044 - A7046	Respiratory Accessories	DME MAC
A7501-A7527	Tracheostomy Supplies	DME MAC
A8000-A8004	Protective Helmets	DME MAC
A9150	Non-Prescription Drugs	Local Carrier
A9152 - A9153	Vitamins	Local Carrier
A9155	Artificial Saliva	Local Carrier
A9180	Lice Infestation Treatment	Local Carrier
A9270	Noncovered Items or Services	DME MAC

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
A9274 - A9278	Glucose Monitoring	DME MAC
A9279	Monitoring Feature/Device	DME MAC
A9280	Alarm Device	DME MAC
A9281	Reaching/Grabbing Device	DME MAC
A9282	Wig	DME MAC
A9283	Foot Off Loading Device	DME MAC
A9300	Exercise Equipment	DME MAC
A9500 - A9700	Supplies for Radiology Procedures	Local Carrier
A9900	Miscellaneous DME Supply or Accessory	Local Carrier if used with implanted DME. If other, DME MAC.
A9901	Delivery	DME MAC
A9999	Miscellaneous DME Supply or Accessory	Local Carrier if used with implanted DME. If other, DME MAC.
B4034 - B9999	Enteral and Parenteral Therapy	DME MAC
D0120 - D9999	Dental Procedures	Local Carrier
E0100 - E0105	Canes	DME MAC
E0110 - E0118	Crutches	DME MAC
E0130 - E0159	Walkers	DME MAC
E0160 - E0175	Commodes	DME MAC
E0181 - E0199	Decubitus Care Equipment	DME MAC
E0200 - E0239	Heat/Cold Applications	DME MAC
E0240 - E0248	Bath and Toilet Aids	DME MAC
E0249	Pad for Heating Unit	DME MAC
E0250 - E0304	Hospital Beds	DME MAC
E0305 - E0326	Hospital Bed Accessories	DME MAC
E0328 - E0329	Pediatric Hospital Beds	DME MAC
E0350 - E0352	Electronic Bowel Irrigation System	DME MAC
E0370	Heel Pad	DME MAC
E0371 - E0373	Decubitus Care Equipment	DME MAC
E0424 - E0484	Oxygen and Related Respiratory Equipment	DME MAC
E0485 - E0486	Oral Device to Reduce Airway Collapsibility	DME MAC
E0500	IPPB Machine	DME MAC
E0550 - E0585	Compressors/Nebulizers	DME MAC
E0600	Suction Pump	DME MAC
E0601	CPAP Device	DME MAC
E0602 - E0604	Breast Pump	DME MAC
E0605	Vaporizer	DME MAC
E0606	Drainage Board	DME MAC
E0607	Home Blood Glucose Monitor	DME MAC
E0610 - E0615	Pacemaker Monitor	DME MAC
E0616	Implantable Cardiac Event Recorder	Local Carrier
E0617	External Defibrillator	DME MAC
E0618 - E0619	Apnea Monitor	DME MAC
E0620	Skin Piercing Device	DME MAC
E0621 - E0636	Patient Lifts	DME MAC
E0637 - E0642	Standing Devices/Lifts	DME MAC
E0650 - E0676	Pneumatic Compressor and Appliances	DME MAC
E0691 - E0694	Ultraviolet Light Therapy Systems	DME MAC
E0700	Safety Equipment	DME MAC
E0701 (deleted 12/31/06)	Protective Helmet	DME MAC
E0705	Transfer Board	DME MAC

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
E0710	Restraints	DME MAC
E0720 - E0745	Electrical Nerve Stimulators	DME MAC
E0746	EMG Device	Local Carrier
E0747 - E0748	Osteogenic Stimulators	DME MAC
E0749	Implantable Osteogenic Stimulator	Local Carrier
E0755	Reflex Stimulator	DME MAC
E0760	Ultrasonic Osteogenic Stimulator	DME MAC
E0761	Electromagnetic Treatment Device	DME MAC
E0762	Electrical Joint Stimulation Device	DME MAC
E0764	Functional Neuromuscular Stimulator	DME MAC
E0765	Nerve Stimulator	DME MAC
E0769	Electrical Wound Treatment Device	DME MAC
E0776	IV Pole	DME MAC
E0779 - E0780	External Infusion Pumps	DME MAC
E0781	Ambulatory Infusion Pump	Billable to both the local carrier and the DME MAC. This item may be billed to the DME MAC whenever the infusion is initiated in the physician's office but the patient does not return during the same business day.
E0782 - E0783	Infusion Pumps, Implantable	Local Carrier
E0784	Infusion Pumps, Insulin	DME MAC
E0785 - E0786	Implantable Infusion Pump Catheter	Local Carrier
E0791	Parenteral Infusion Pump	DME MAC
E0830	Ambulatory Traction Device	DME MAC
E0840 - E0900	Traction Equipment	DME MAC
E0910 - E0930	Trapeze/Fracture Frame	DME MAC
E0935 - E0936	Passive Motion Exercise Device	DME MAC
E0940	Trapeze Equipment	DME MAC
E0941	Traction Equipment	DME MAC
E0942 - E0945	Orthopedic Devices	DME MAC
E0946 - E0948	Fracture Frame	DME MAC
E0950 - E1298	Wheelchairs	DME MAC
E1300 - E1310	Whirlpool Equipment	DME MAC
E1340	Repair or Non-routine Service	Local Carrier if repair of implanted DME. If other, DME MAC.
E1353 - E1392	Additional Oxygen Related Equipment	DME MAC
E1399	Miscellaneous DME	Local Carrier if implanted DME. If other, DME REGIONAL Carrier.
E1405 - E1406	Additional Oxygen Equipment	DME MAC
E1500 - E1699	Artificial Kidney Machines and Accessories	DME MAC
E1700 - E1702	TMJ Device and Supplies	DME MAC
E1800 - E1841	Dynamic Flexion Devices	DME MAC
E1902	Communication Board	DME MAC
E2000	Gastric Suction Pump	DME MAC
E2100 - E2101	Blood Glucose Monitors with Special Features	DME MAC
E2120	Pulse Generator for Tympanic Treatment of Inner Ear	DME MAC
E2201 - E2399	Wheelchair Accessories	DME MAC
E2402	Negative Pressure Wound Therapy Pump	DME MAC
E2500 - E2599	Speech Generating Device	DME MAC

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
E2601 - E2621	Wheelchair Cushions	DME MAC
E8000 - E8002	Gate Trainers	DME MAC
G0008 - G0332	Misc. Professional Services	Local Carrier
G0333	Dispensing Fee	DME MAC
G0337 - G0368	Misc. Professional Services	Local Carrier
G0372	Misc. Professional Services	Local Carrier
G0375 - G0376	Misc. Professional Services	Local Carrier
G0378 - G9140	Misc. Professional Services	Local Carrier
J0120 - J3570	Injection	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.
J3590	Unclassified Biologics	Local Carrier
J7030 - J7130	Miscellaneous Drugs and Solutions	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.
J7187 - J7195	Antihemophilic Factor	Local Carrier
J7197	Antithrombin III	Local Carrier
J7198	Anti-inhibitor; per I.U.	Local Carrier
J7199	Other Hemophilia Clotting Factors	Local Carrier
J7300 - J7307	Intrauterine Copper Contraceptive	Local Carrier
J7308	Aminolevulinic Acid HCL	Local Carrier
J7310	Ganciclovir, Long-Acting Implant	Local Carrier
J7311	Fluocinolone Acetonide, intravitreal implant	Local Carrier
J7317 (deleted 12/31/06)	Sodium Hyaluronate	Local Carrier
J7319 (deleted 12/31/07)	Hyaluronan	Local Carrier
J7320 (deleted 12/31/06)	Hylan	Local Carrier
J7321 - J7324	Hyaluronan	Local Carrier
J7330	Autologous Cultured Chondrocytes Implant	Local Carrier
J7340 - J7349	Dermal and Epidermal Tissue	Local Carrier
J7350 (deleted 12/31/06)	Dermal and Epidermal Tissue	Local Carrier
J7500 - J7599	Immunosuppressive Drugs	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.
J7602 - J7699	Inhalation Solutions	Local Carrier if incident to a physician's service. If other, DME MAC.
J7799	NOC, Other than Inhalation Drugs through DME	Local carrier if incident to a physician's service. If other, DME MAC.
J8498	Anti-emetic Drug	DME MAC
J8499	Prescription Drug, Oral, Non Chemotherapeutic	Local carrier if incident to a physician's service. If other, DME MAC.
J8501 - J8999	Oral Anti-Cancer Drugs	DME MAC
J9000 - J9999	Chemotherapy Drugs	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.
K0001 - K0108	Wheelchairs	DME MAC
K0195	Elevating Leg Rests	DME MAC

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
K0455	Infusion Pump used for Uninterrupted Administration of Epoprostenal	DME MAC
K0462	Loaner Equipment	DME MAC
K0552	External Infusion Pump Supplies	DME MAC
K0553 - K0555 (deleted 12/31/07)	Accessories for CPAP and Ventilators	DME MAC
K0601 - K0605	External Infusion Pump Batteries	DME MAC
K0606 - K0609	Defibrillator Accessories	DME MAC
K0669	Wheelchair Cushion	DME MAC
K0730	Inhalation Drug Delivery System	DME MAC
K0733	Power Wheelchair Accessory	DME MAC
K0734 - K0737	Power Wheelchair Seat Cushions	DME MAC
K0738	Oxygen Equipment	DME MAC
K0800 - K0899	Power Mobility Devices	DME MAC
L0100 (deleted 12/31/06)	Orthotics	DME MAC
L0110 (deleted 12/31/06)	Orthotics	DME MAC
L0112 - L2090	Orthotics	DME MAC
L2106 - L2116	Orthotics	DME MAC
L2126 - L4398	Orthotics	DME MAC
L5000 - L5999	Lower Limb Prosthetics	DME MAC
L6000 - L7499	Upper Limb Prosthetics	DME MAC
L7500 - L7520	Repair of Prosthetic Device	Local Carrier if repair of implanted prosthetic device. If other, DME MAC.
L7600	Prosthetic Donning Sleeve	DME MAC
L7611 - L7622	Prosthetic Terminal Devices	DME MAC
L7900	Vacuum Erection System	DME MAC
L8000 - L8485	Prosthetics	DME MAC
L8499	Unlisted Procedure for Miscellaneous Prosthetic Services	Local Carrier if implanted prosthetic device. If other, DME MAC.
L8500 - L8501	Artificial Larynx; Tracheostomy Speaking Valve	DME MAC
L8505	Artificial Larynx Accessory	DME MAC
L8507 - L8515	Voice Prosthesis	DME MAC
L8600 - L8699	Prosthetic Implants	Local Carrier
L9900	Miscellaneous Orthotic or Prosthetic Component or Accessory	Local Carrier if used with implanted prosthetic device. If other, DME MAC.
M0064 - M0301	Medical Services	Local Carrier
P2028 - P9615	Laboratory Tests	Local Carrier
Q0035	Influenza Vaccine; Cardiolaryngography	Local Carrier
Q0081	Infusion Therapy	Local Carrier
Q0083 - Q0085	Chemotherapy Administration	Local Carrier
Q0091	Smear Preparation	Local Carrier
Q0092	Portable X-ray Setup	Local Carrier
Q0111 - Q0115	Miscellaneous Lab Services	Local Carrier
Q0144	Azithromycin Dihydrate	Local Carrier if incident to a physician's service. If other, DME MAC.
Q0163 - Q0181	Anti-emetic	DME MAC
Q0480 - Q0505	Ventricular Assist Devices	Local Carrier
Q0510 - Q0514	Drug Dispensing Fees	DME MAC
Q0515	Sermorelin Acetate	Local Carrier
Q1003 - Q1005	New Technology IOL	Local Carrier
Q2004	Irrigation Solution	Local Carrier

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
Q2009	Fosphenytoin	Local Carrier
Q2017	Teniposide	Local Carrier
Q3001	Radio Elements for Brachytherapy	Local Carrier
Q3014	Telehealth Originating Site Facility Fee	Local Carrier
Q3025 - Q3026	Vaccines	Local Carrier
Q3031	Collagen Skin Test	Local Carrier
Q4001 - Q4051	Splints and Casts	Local Carrier
Q4080	Inhalation Drug	Local Carrier if incident to a physician's service. If other, DME MAC.
Q4081	Epoetin	DME MAC for method II home dialysis. If other, Local Carrier.
Q4082	Drug Subject to Competitive Acquisition Program	Local Carrier
Q4083 - Q4086 (deleted 12/31/07)	Hyaluronan	Local Carrier
Q4087 - Q4092 (deleted 12/31/07)	Injection	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other DME MAC.
Q4093 - Q4094 (deleted 12/31/07)	Inhalation Solutions	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other DME MAC.
Q4095 (deleted 12/31/07)	Injection	Local Carrier if incident to a physician's service or used in an implanted infusion pump. If other DME MAC.
Q4096 - Q4098	Injection	Local Carrier if incident to a physician's service or used in an implanted infusion pump.
Q4099	Inhalation Solutions	DME MAC
Q5001 - Q5009	Hospice Services	Local Carrier
Q9945 - Q9950 (deleted 12/31/07)	Imaging Agents	Local Carrier
Q9951 - Q9954	Imaging Agents	Local Carrier
Q9955 - Q9957	Microspheres	Local Carrier
Q9958 - Q9967	Imaging Agents	Local Carrier
R0070 - R0076	Diagnostic Radiology Services	Local Carrier
V2020 - V2025	Frames	DME MAC
V2100 - V2513	Lenses	DME MAC
V2520 - V2523	Hydrophilic Contact Lenses	Local Carrier if incident to a physician's service. If other, DME MAC.
V2530 - V2531	Contact Lenses, Scleral	DME MAC
V2599	Contact Lens, Other Type	Local Carrier if incident to a physician's service. If other, DME MAC.
V2600 - V2615	Low Vision Aids	DME MAC
V2623 - V2629	Prosthetic Eyes	DME MAC
V2630 - V2632	Intraocular Lenses	Local Carrier
V2700 - V2780	Miscellaneous Vision Service	DME MAC
V2781	Progressive Lens	DME MAC
V2782 - V2784	Lenses	DME MAC
V2785	Processing--Corneal Tissue	Local Carrier
V2786	Lenze	DME MAC
V2787 - V2788	Intraocular Lenses	Local Carrier
V2790	Amniotic Membrane	Local Carrier
V2797	Vision Supply	DME MAC
V2799	Miscellaneous Vision Service	DME MAC
V5008 - V5299	Hearing Services	Local Carrier

2008 Jurisdiction List for DMEPOS HCPCS Codes

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

HCPCS	DESCRIPTION	JURISDICTION
V5336	Repair/Modification of Augmentative Communicative System or Device	DME MAC
V5362 - V5364	Speech Screening	Local Carrier

Revised: November 2008

20.3 - Use and Acceptance of HCPCS Codes and Modifiers

(Rev. 1644, Issued: 12-05-09, Effective: 10-27-08/12-12-08 HCPCS code A4559, Implementation: 10-27-08/12-12-08 HCPCS code A4559)

SNF-530.2, HO-442.3

The HCPCS is updated annually to reflect changes in the practice of medicine and provision of health care. The CMS provides a file containing the updated HCPCS codes to contractors and Medicaid State agencies 60 to 90 days in advance of the implementation of the annual update. Distribution consists of an electronic file of the updated HCPCS codes, file characteristics, record layout, and a listing of changed and deleted codes. Contractors are required to update their HCPCS codes file and map all new or deleted codes to appropriate payment information no later than three months after receipt of the update.

A spreadsheet containing an updated list of the HCPCS *codes* for *Durable Medical Equipment Medicare Administrative Contractors (DME MAC)* and Part B local carrier/*Medicare Administrative Contractor (MAC)* jurisdictions is updated annually to reflect codes that have been added or discontinued (deleted) during each year. A recurring update notification will be published annually to notify the *DME MACs* and Part B carriers/*MACs* that the list has been updated and is available on the CMS Web site. Both the *DME MACs* and the local carriers/*MACs* publish this list to educate providers on which contractor they should bill for codes provided on this list.

In addition to the major annual update, CMS also updates HCPCS codes quarterly to reflect additional changes or corrections that are emergency in nature. Quarterly changes are issued by letter or memorandum for local implementation.

Physicians and suppliers must use HCPCS codes on the Form CMS-1500 or its electronic equivalent and providers must use HCPCS codes on the Form CMS-1450 or its electronic equivalent for most outpatient services. The service or procedure can be further described by using 2-position modifiers contained in HCPCS.

Modifiers to HCPCS Level I codes for medicine, anesthesia, surgery, radiology, and pathology are on the HCPCS codes file from CMS. Modifiers for Level II alpha-numeric codes are with the Level II codes published by CMS. Alpha-numeric and CPT-4 modifiers may be used with either alpha-numeric or CPT-4 codes. Carriers/*MACs* and DME *MACs* are required to accept at least 2-position numeric or alpha modifiers and process both modifiers completely through the claims processing system (including any manual portion) as far as payment history. Intermediaries must be able to accept at least five modifiers and process them completely through the system. It is not acceptable merely to be able to accept multiple modifiers and then drop one before complete systems processing. Dropping of a modifier leads to incomplete and inaccurate pricing profiles.

Series “Q,” “K,” and “G” in the Level II coding are reserved for CMS assignment. “Q,” “K,” and “G” codes are **temporary** national codes for items or services requiring uniform national coding between one year’s update and the next. Sometimes “temporary” codes remain for more than one update. If “Q,” “K,” or “G” codes are not converted to permanent codes in the Level I or Level II series in the following update, they will

remain active until converted in following years or until CMS notifies contractors to delete them. All active “Q,” “K,” and “G” codes at the time of update will be included on the update file for contractors. In addition, deleted codes are retained on the file for informational purposes, with a deleted indicator, for four years.

Series “S” and Series “I” Level II codes are reserved for use by the BCBSA and the HIAA, respectively. These codes provide for reporting needs unique to those organizations.

Each State defines its own Medicaid coverage, payment, and utilization levels. The CMS does not impose Medicare requirements on Medicaid programs. The HCPCS simply provides a system for identifying services that can be expanded to meet everyone’s needs.

If Level I and Level II codes/modifiers do not exist for services or items common to Medicare and Medicaid, a local HCPCS code/modifier in the W, X, Y, or Z series may be requested. Local code/modifier requests for services common to both Medicare and Medicaid should be coordinated between the Medicare carrier and the Medicaid State agency and submitted to CMS CO for approval through the RO. See the procedure outlined in [§20.2](#) to request CMS CO approval for such codes.