

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A4206	Syringe w/needle, sterile 1 cc or less, each	Purchase Only
A4207	Syringe w/needle, sterile 2 cc, each	Purchase Only
A4208	Syringe w/needle, sterile 3 cc, each	Purchase Only
A4209	Syringe w/needle, sterile 5 cc or greater, each	Purchase Only
A4210	Needle-free injection device, each	Purchase Only
A4211	Supplies for self-administered injections	Purchase Only
A4212	Noncoring needle or stylet w or w/o catheter	Purchase Only
A4213	Syringe, sterile, 20 cc or greater, each	Purchase Only
A4215	Needle, sterile, any size, each	Purchase Only
A4216	Sterile water/saline, 10 ml	Not Covered or Bundled Item
A4217	Sterile water/saline, 500 ml	Not Covered or Bundled Item
A4217	Sterile water/saline, 500 ml	Not Covered or Bundled Item
A4218	Sterile saline or water, metered dose dispenser, 10 ml	Purchase Only
A4220	Refill kit for implantable infusion pump	Purchase Only
A4221	Maint drug infus cath per wk	Purchase Only
A4222	Infusion supplies with pump	Purchase Only
A4223	Infusion supplies not used with external infusion pump, per cassette or bag (list drugs separately)	Purchase Only
A4224	SPL Maint Insulin Infus Cath Per Wk	Purchase Only
A4225	SPL Ext Ins Inf PMP Syr T Cart St E	Purchase Only
A4230	Infusion set for external insulin pump, nonneedle cannula type	Purchase Only
A4231	Infusion set for external insulin pump, needle type	Purchase Only
A4232	Syringe w/needle for external insulin pump, sterile, 3 cc	Purchase Only
A4233	Alkaline batt for glucose mon	Purchase Only
A4234	J-cell batt for glucose mon	Purchase Only
A4235	Lithium batt for glucose mon	Purchase Only
A4236	Silver oxide batt glucose mon	Purchase Only
A4244	Alcohol or peroxide, per pint	Purchase Only
A4245	Alcohol wipes, per box	Purchase Only
A4246	Betadine or pHisoHex, per pint	Purchase Only
A4247	Betadine or iodine swabs/wipes, per box	Purchase Only
A4248	Chlorhexidine containing antiseptic, 1 ml	Purchase Only
A4250	Urine test or reagent strips or tablets (100 tablets or strips)	Purchase Only
A4252	Blood ketone test or reagent strip, each	Purchase Only
A4253	Blood glucose/reagent strips	Not Covered or Bundled Item
A4255	Glucose monitor platforms	Purchase Only
A4256	Calibrator solution/chips	Purchase Only
A4257	Replace Lensshield Cartridge	Purchase Only
A4258	Lancet device each	Not Covered or Bundled Item
A4259	Lancets per box	Not Covered or Bundled Item
A4261	Cervical Cap for contraceptive use	Purchase Only
A4262	Temporary, absorbable lacrimal duct implant, each	Purchase Only
A4263	Permanent, long-term, nondissolvable lacrimal duct implant, each	Purchase Only
A4264	Permanent implantable contraceptive intratubal occlusion device(s) and delivery system	Purchase Only
A4265	Paraffin	Purchase Only
A4266	Diaphragm for contraceptive use	Purchase Only
A4267	Contraceptive supply, condom, male, each	Purchase Only
A4268	Contraceptive supply, condom, female, each	Purchase Only
A4269	Contraceptive supply, spermicide (e.g. foam, gel) each	Purchase Only
A4270	Disposable endoscope sheath, each	Purchase Only
A4280	Brst prsths adhsv attchmnt	Purchase Only
A4281	Tubing for breast pump, replacement	Purchase Only
A4282	Adapter for breast pump, replacement	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A4283	Cap for breast pump bottle, replacement	Purchase Only
A4284	Breast shield and splash protector for use with breast pump, replacement	Purchase Only
A4285	Polycarbonate bottle for use with breast pump, replacement	Purchase Only
A4286	Locking ring for breast pump, replacement	Purchase Only
A4290	Sacral nerve stimulation test lead, each	Purchase Only
A4300	external access	Purchase Only
A4301	peritoneal, etc.)	Purchase Only
A4305	Disposable drug delivery system, flow rate of 50 ml or greater per hour	Purchase Only
A4306	Disposable drug delivery system, flow rate of less than 50 ml per hour	Purchase Only
A4310	Insert tray w/o bag/cath	Purchase Only
A4311	Catheter w/o bag 2-way latex	Purchase Only
A4312	Cath w/o bag 2-way silicone	Purchase Only
A4313	Catheter w/bag 3-way	Purchase Only
A4314	Cath w/drainage 2-way latex	Purchase Only
A4315	Cath w/drainage 2-way silcne	Purchase Only
A4316	Cath w/drainage 3-way	Purchase Only
A4320	Irrigation tray	Purchase Only
A4321	Cath therapeutic irrig agent	Not Covered or Bundled Item
A4322	Irrigation syringe	Purchase Only
A4326	Male external catheter	Purchase Only
A4327	Fem urinary collect dev cup	Purchase Only
A4328	Fem urinary collect pouch	Purchase Only
A4330	Stool collection pouch	Purchase Only
A4331	Extension drainage tubing	Purchase Only
A4332	Lube sterile packet	Purchase Only
A4333	Urinary cath anchor device	Purchase Only
A4334	Urinary cath leg strap	Purchase Only
A4335	Incontinence supply, miscellaneous	Purchase Only
A4336	Urethral insert	Purchase Only
A4337	Incontinence supply, rectal insert, any type, each	Purchase Only
A4338	Indwelling catheter latex	Purchase Only
A4340	Indwelling catheter special	Purchase Only
A4344	Cath indw foley 2 way silicn	Purchase Only
A4346	Cath indw foley 3 way	Purchase Only
A4349	Disposable male external cat	Purchase Only
A4351	Straight tip urine catheter	Purchase Only
A4352	Coude tip urinary catheter	Purchase Only
A4353	Intermittent urinary cath	Purchase Only
A4354	Cath insertion tray w/bag	Purchase Only
A4355	Bladder irrigation tubing	Purchase Only
A4356	Ext ureth clmp or compr dvc	Purchase Only
A4357	Bedside drainage bag	Purchase Only
A4358	Urinary leg or abdomen bag	Purchase Only
A4360	Disposable ext urethral dev	Purchase Only
A4361	Ostomy face plate	Purchase Only
A4362	Solid skin barrier	Purchase Only
A4363	Ostomy clamp, replacement	Purchase Only
A4364	Adhesive, liquid or equal	Purchase Only
A4366	Ostomy vent	Purchase Only
A4367	Ostomy belt	Purchase Only
A4368	Ostomy filter	Purchase Only
A4369	Skin barrier liquid per oz	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A4371	Skin barrier powder per oz	Purchase Only
A4372	Skin barrier solid 4x4 equiv	Purchase Only
A4373	Skin barrier with flange	Purchase Only
A4375	Drainable plastic pch w fcpl	Purchase Only
A4376	Drainable rubber pch w fcpl	Purchase Only
A4377	Drainable plstic pch w/o fp	Purchase Only
A4378	Drainable rubber pch w/o fp	Purchase Only
A4379	Urinary plastic pouch w fcpl	Purchase Only
A4380	Urinary rubber pouch w fcpl	Purchase Only
A4381	Urinary plastic pouch w/o fp	Purchase Only
A4382	Urinary hvy plstc pch w/o fp	Purchase Only
A4383	Urinary rubber pouch w/o fp	Purchase Only
A4384	Ostomy faceplt/silicone ring	Purchase Only
A4385	Ost skn barrier sld ext wear	Purchase Only
A4387	Ost clsd pouch w att st barr	Purchase Only
A4388	Drainable pch w ex wear barr	Purchase Only
A4389	Drainable pch w st wear barr	Purchase Only
A4390	Drainable pch ex wear convex	Purchase Only
A4391	Urinary pouch w ex wear barr	Purchase Only
A4392	Urinary pouch w st wear barr	Purchase Only
A4393	Urine pch w ex wear bar conv	Purchase Only
A4394	Ostomy pouch liq deodorant	Purchase Only
A4395	Ostomy pouch solid deodorant	Purchase Only
A4396	Peristomal hernia supprt blt	Purchase Only
A4397	Irrigation supply sleeve	Purchase Only
A4398	Ostomy irrigation bag	Purchase Only
A4399	Ostomy irrig cone/cath w brs	Purchase Only
A4400	Ostomy irrigation set	Purchase Only
A4402	Lubricant per ounce	Purchase Only
A4404	Ostomy ring each	Purchase Only
A4405	Nonpectin based ostomy paste	Purchase Only
A4406	Pectin based ostomy paste	Purchase Only
A4407	Ext wear ost skn barr <=4sq"	Purchase Only
A4408	Ext wear ost skn barr >4sq"	Purchase Only
A4409	Ost skn barr convex <=4 sq i	Purchase Only
A4410	Ost skn barr extnd >4 sq	Purchase Only
A4411	Ost skn barr extnd =4sq	Purchase Only
A4412	Ost pouch drain high output	Purchase Only
A4413	2 pc drainable ost pouch	Purchase Only
A4414	Ost sknbar w/o conv<=4 sq in	Purchase Only
A4415	Ost skn barr w/o conv >4 sqi	Purchase Only
A4416	Ost pch clsd w barrier/filtr	Purchase Only
A4417	Ost pch w bar/bltinconv/filtr	Purchase Only
A4418	Ost pch clsd w/o bar w filtr	Purchase Only
A4419	Ost pch for bar w flange/flt	Purchase Only
A4420	Ost pch clsd for bar w lk fl	Purchase Only
A4422	Ost pouch absorbent material	Purchase Only
A4423	Ost pch for bar w lk fl/filtr	Purchase Only
A4424	Ost pch drain w bar & filter	Purchase Only
A4425	Ost pch drain for barrier fl	Purchase Only
A4426	Ost pch drain 2 piece system	Purchase Only
A4427	Ost pch drain/barr lk flng/f	Purchase Only

**Avera Health Plans
2018 Durable Medical Equipment-Payment Classification**

Code	Description	Reimbursement Designation
A4428	Urine ost pouch w faucet/tap	Purchase Only
A4429	Urine ost pouch w bltinconv	Purchase Only
A4430	Ost urine pch w b/bltin conv	Purchase Only
A4431	Ost pch urine w barrier/tapv	Purchase Only
A4432	Os pch urine w bar/fange/tap	Purchase Only
A4433	Urine ost pch bar w lock fln	Purchase Only
A4434	Ost pch urine w lock flng/ft	Purchase Only
A4435	1pc ost pch drain hgh output	Purchase Only
A4450	Non-waterproof tape	Not Covered or Bundled Item
A4452	Waterproof tape	Not Covered or Bundled Item
A4455	Adhesive remover per ounce	Not Covered or Bundled Item
A4456	Adhesive remover, wipes	Not Covered or Bundled Item
A4458	Enema bag with tubing, reusable	Purchase Only
A4461	Surgicl dress hold non-reuse	Not Covered or Bundled Item
A4463	Surgical dress holder reuse	Not Covered or Bundled Item
A4466	Garment, belt, sleeve or other covering, elastic or similar stretchable material, any type, each	Purchase Only
A4467	Belt Strap SLV Garment/Cov Any Type	Not Covered or Bundled Item
A4470	Gravlee jet washer	Not Covered or Bundled Item
A4480	VABRA aspirator	Purchase Only
A4481	Tracheostoma filter	Purchase Only
A4483	Moisture exchanger	Purchase Only
A4490	Surgical stockings above knee length, each	Purchase Only
A4495	Surgical stockings thigh length, each	Purchase Only
A4500	Surgical stockings below knee length, each	Purchase Only
A4510	Surgical stockings full-length, each	Purchase Only
A4520	Incontinence garment, any type, (e.g., brief, diaper) each	Purchase Only
A4550	Surgical trays	Purchase Only
A4553	Non-Disposable Underpads All Sizes	Not Covered or Bundled Item
A4554	Disposable underpads, all sizes	Purchase Only
A4555	replacement only	Purchase Only
A4556	Electrodes, pair	Purchase Only
A4557	Lead wires, pair	Purchase Only
A4558	Conductive gel or paste	Purchase Only
A4559	Coupling gel or paste	Purchase Only
A4561	Pessary rubber, any type	Purchase Only
A4562	Pessary, non rubber,any type	Purchase Only
A4565	Slings	Purchase Only
A4566	Shoulder sling or vest design, abduction restrainer, w or w/o swathe control	Purchase Only
A4570	Splint	Purchase Only
A4580	Cast supplies	Purchase Only
A4590	Special casting material	Purchase Only
A4595	TENS suppl 2 lead per month	Purchase Only
A4600	Sleeve for intermittent limb compression device, replacement only, each	Purchase Only
A4601	Lithium ion battery for nonprosthetic use, replacement	Purchase Only
A4604	Tubing with heating element	Purchase Only
A4605	Trach suction cath close sys	Purchase Only
A4606	Oxygen probe for use with oximeter device, replacement	Purchase Only
A4608	Transtracheal oxygen cath	Not Eligible for Sep Reimbursement
A4611	Heavy duty battery	Purchase Only
A4612	Battery cables	Purchase Only
A4613	Battery charger	Purchase Only
A4614	Hand-held PEFR meter	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A4615	Cannula nasal	Purchase Only
A4616	Tubing (oxygen) per foot	Not Eligible for Sep Reimbursement
A4617	Mouth piece	Purchase Only
A4618	Breathing circuits	Purchase Only
A4619	Face tent	Purchase Only
A4620	Variable concentration mask	Purchase Only
A4623	Tracheostomy inner cannula	Purchase Only
A4624	Tracheal suction tube	Purchase Only
A4625	Trach care kit for new trach	Purchase Only
A4626	Tracheostomy cleaning brush	Purchase Only
A4627	Spacer, bag or reservoir, w or w/o mask, for use with metered dose inhaler	Purchase Only
A4628	Oropharyngeal suction cath	Purchase Only
A4629	Tracheostomy care kit	Purchase Only
A4630	Repl bat t.e.n.s. own by pt	Purchase Only
A4633	Uvl replacement bulb	Purchase Only
A4634	Replacement bulb for therapeutic light box, tabletop model	Purchase Only
A4635	Underarm crutch pad	Not Covered or Bundled Item
A4636	Handgrip for cane etc	Not Covered or Bundled Item
A4637	Repl tip cane/crutch/walker	Not Covered or Bundled Item
A4638	Repl batt pulse gen sys	Purchase Only
A4639	Infrared ht sys replcmnt pad	Purchase Only
A4640	Alternating pressure pad	Purchase Only
A4641	Radiopharmaceutical, diagnostic, not otherwise classified	Purchase Only
A4642	Indium In-111 satumomab pendetide, diagnostic, per study dose, up to 6 millicuries	Purchase Only
A4648	TISSUE MARKER IMPLANTBL ANY TYPE EA	Purchase Only
A4649	SURGICAL SUPPLY; MISCELLANEOUS	Purchase Only
A4650	IMPLANTABLE RADIATION DOSIMETER EA	Purchase Only
A4651	CALIBRATED MICROCAPILLARY TUBE EACH	Purchase Only
A4652	MICROCAPILLARY TUBE SEALANT	Purchase Only
A4653	PERITON DIALYSIS CATH ANCHR BELT EA	Purchase Only
A4657	SYRINGE WITH OR WITHOUT NEEDLE EACH	Purchase Only
A4660	SPHYGMOMANOMETER/BP W/CUFF&STETH	Purchase Only
A4663	BLOOD PRESSURE CUFF ONLY	Purchase Only
A4670	AUTOMATIC BLOOD PRESSURE MONITOR	Purchase Only
A4671	DISPBL CYCLR SET USED W/CYCLR DIALY	Purchase Only
A4672	DRAIN EXT LINE STERILE DIALYSIS EA	Purchase Only
A4673	EXT LINE W/EASY LOCK CNCTR DIALYSIS	Purchase Only
A4674	CHEMS/ANTISPTC SOL CLEAN/STERL 8OZ	Purchase Only
A4680	ACTIVATED CARBON FILTER HEMODIAL EA	Purchase Only
A4690	DIALYZER ALL TYPES SZS HEMODIAL EA	Purchase Only
A4706	BICARBONATE CONC SOL HEMODIAL-GAL	Purchase Only
A4707	BICARBONAT CONC PWDR HEMODIAL-PCKET	Purchase Only
A4708	ACTAT CONC SOL HEMODIAL-GALLON	Purchase Only
A4709	ACID CONC SOL HEMODIAL-GALLON	Purchase Only
A4714	TREATED H2O PERITON DIALYSIS-GALLON	Purchase Only
A4719	Y SET TUBING PERITONEAL DIALYSIS	Purchase Only
A4720	DIALYSATE FL>249<=999 CC DIALYSIS	Purchase Only
A4721	DIALYSATE FL>999<=1999CC DIALYSIS	Purchase Only
A4722	DIALYSATE FL>1999<=2999CC DIALYSIS	Purchase Only
A4723	DIALYSATE FL>2999<=3999CC DIALYSIS	Purchase Only
A4724	DIALYSATE FL>3999<=4999CC DIALYSIS	Purchase Only
A4725	DIALYSATE FL>4999<=5999CC DIALYSIS	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A4726	DIALYSATE DEXTROSE FL>5999 CC PD	Purchase Only
A4728	DIALYSAT SOL NO-DXTRS CNTAIN 500 ML	Purchase Only
A4730	FIST CANNULAT SET HEMODIALYSIS EA	Purchase Only
A4736	TOPICAL ANESTHETIC DIALYSIS PER G	Purchase Only
A4737	INJ ANESTHETIC DIALYSIS PER 10 ML	Purchase Only
A4740	SHUNT ACCESSRY HEMODIAL ANY TYPE EA	Purchase Only
A4750	BLD TUBING ART/VENOUS HEMODIAL EA	Purchase Only
A4755	BLD TUBING ART&VENOUS HEMODIAL EA	Purchase Only
A4760	DIALYSATE SOL TST KIT PERITON EA	Purchase Only
A4765	DIALYSATE POWDER PERITON DIALYSIS	Purchase Only
A4766	DIALYSATE SOL PERITON DIALYSIS-10ML	Purchase Only
A4770	BLD COLLECTION TUBE VAC DIALYSIS-50	Purchase Only
A4771	SERUM CLOT TIME TUBE DIALYSIS-50	Purchase Only
A4772	BLD GLU TEST STRIPS DIALYSIS PER 50	Purchase Only
A4773	OCCULT BLD TEST STRIPS DIALYSIS-50	Purchase Only
A4774	AMMONIA TEST STRIPS DIALYSIS PER 50	Purchase Only
A4802	PROTAMINE SULFATE HEMODIAL-50 MG	Purchase Only
A4860	DISPBL CATH TIP PERITON DIALYSIS-10	Purchase Only
A4870	PLUMB &/ ELEC WRK HOM HEMODIAL EQP	Purchase Only
A4890	CONTRACTS REPR&MAINT HEMODIAL EQP	Purchase Only
A4911	DRAIN BAG/BOTTLE FOR DIALYSIS EACH	Purchase Only
A4913	MISCELLANEOUS DIALYSIS SUPPLIES NOS	Purchase Only
A4918	VENOUS PRESSURE CLAMP HEMODIAL EA	Purchase Only
A4927	GLOVES NON-STERILE PER 100	Purchase Only
A4928	SURGICAL MASK PER 20	Purchase Only
A4929	TOURNIQUET FOR DIALYSIS EACH	Purchase Only
A4930	GLOVES STERILE PER PAIR	Purchase Only
A4931	ORL THERMOMETER REUSBL ANY TYPE EA	Purchase Only
A4932	RECTAL THERMOMETER REUSBL TYPE EA	Purchase Only
A5051	Pouch clsd w barr attached	Purchase Only
A5052	Clsd ostomy pouch w/o barr	Purchase Only
A5053	Clsd ostomy pouch faceplate	Purchase Only
A5054	Clsd ostomy pouch w/flange	Purchase Only
A5055	Stoma cap	Purchase Only
A5056	1 pc ost pouch w filter	Purchase Only
A5057	1 pc ost pou w built-in conv	Purchase Only
A5061	Pouch drainable w barrier at	Purchase Only
A5062	Drnble ostomy pouch w/o barr	Purchase Only
A5063	Drain ostomy pouch w/flange	Purchase Only
A5071	Urinary pouch w/barrier	Purchase Only
A5072	Urinary pouch w/o barrier	Purchase Only
A5073	Urinary pouch on barr w/flng	Purchase Only
A5081	Continent stoma plug	Purchase Only
A5082	Continent stoma catheter	Purchase Only
A5083	Stoma absorptive cover	Purchase Only
A5093	Ostomy accessory convex inse	Purchase Only
A5102	Bedside drain btl w/wo tube	Purchase Only
A5105	Urinary suspensory	Purchase Only
A5112	Urinary leg bag	Purchase Only
A5113	Latex leg strap	Purchase Only
A5114	Foam/fabric leg strap	Purchase Only
A5120	Skin barrier, wipe or swab	Purchase Only

**Avera Health Plans
2018 Durable Medical Equipment-Payment Classification**

Code	Description	Reimbursement Designation
A5120	Skin barrier, wipe or swab	Purchase Only
A5121	Solid skin barrier 6x6	Purchase Only
A5122	Solid skin barrier 8x8	Purchase Only
A5126	Disk/foam pad +or- adhesive	Purchase Only
A5131	Appliance cleaner	Purchase Only
A5200	Percutaneous catheter anchor	Purchase Only
A5500	Diab shoe for density insert	Purchase Only
A5501	Diabetic custom molded shoe	Purchase Only
A5503	Diabetic shoe w/roller/rockr	Purchase Only
A5504	Diabetic shoe with wedge	Purchase Only
A5505	Diab shoe w/metatarsal bar	Purchase Only
A5506	Diabetic shoe w/off set heel	Purchase Only
A5507	Modification diabetic shoe	Purchase Only
A5508	For diabetics only, deluxe feature of off-the-shelf depth-inlay shoe or custom molded shoe, per shoe	Purchase Only
A5510	multiple-density insert(s) pregabricated, per shoe	Purchase Only
A5512	Multi den insert direct form	Purchase Only
A5513	Multi den insert custom mold	Purchase Only
A6000	warming card	Purchase Only
A6010	Collagen based wound filler	Not Covered or Bundled Item
A6011	Collagen gel/paste wound fil	Not Covered or Bundled Item
A6021	Collagen drsging <=16 sq in	Not Covered or Bundled Item
A6022	Collagen drsg>16<=48 sq in	Not Covered or Bundled Item
A6023	Collagen dressing >48 sq in	Not Covered or Bundled Item
A6024	Collagen dsg wound filler	Not Covered or Bundled Item
A6025	Gel sheet for dermal or epidermal application, (e.g. silicone, hydrogel, other), each	Purchase Only
A6154	Wound pouch each	Purchase Only
A6196	Alginate dressing <=16 sq in	Purchase Only
A6197	Alginate drsg >16 <=48 sq in	Purchase Only
A6198	Alginate drsg >48 sq in	Purchase Only
A6199	Alginate drsg wound filler	Purchase Only
A6203	Composite drsg <= 16 sq in	Purchase Only
A6204	Composite drsg >16<=48 sq in	Purchase Only
A6205	Composite drsg <=16 sq in	Purchase Only
A6206	Contact layer <=16 sq in	Purchase Only
A6207	Contact layer >16<= 48 sq in	Purchase Only
A6208	Contact layer >48 sq in	Purchase Only
A6209	Foam drsg <=16 sq in w/o bdr	Purchase Only
A6210	Foam drg >16<=48 sq in w/o b	Purchase Only
A6211	Foam drg > 48 sq in w/o brdr	Purchase Only
A6212	Foam drg <=16 sq in w/border	Purchase Only
A6213	Foam drsg >16, <=48 sq in	Purchase Only
A6214	Foam drg > 48 sq in w/border	Purchase Only
A6215	Foam drsg, wound filler, per g	Purchase Only
A6216	Non-sterile gauze<=16 sq in	Not Covered or Bundled Item
A6217	Non-sterile gauze>16<=48 sq	Not Covered or Bundled Item
A6218	Non-sterile gauze >48 sq in	Purchase Only
A6219	Gauze <= 16 sq in w/border	Purchase Only
A6220	Gauze >16 <=48 sq in w/bordr	Purchase Only
A6222	Gauze <=16 in no w/sal w/o b	Purchase Only
A6223	Gauze >16<=48 no w/sal w/o b	Purchase Only
A6224	Gauze > 48 in no w/sal w/o b	Purchase Only
A6228	Gauze <=16 water/saline,sterile	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A6229	Gauze >16<=48 sq in watr/sal	Purchase Only
A6230	Gauze >48 water/saline,sterile	Purchase Only
A6231	Hydrogel dsg<=16 sq in	Purchase Only
A6232	Hydrogel dsg>16<=48 sq in	Purchase Only
A6233	Hydrogel dressing >48 sq in	Purchase Only
A6234	Hydrocolld drg <=16 w/o bdr	Purchase Only
A6235	Hydrocolld drg >16<=48 w/o b	Purchase Only
A6236	Hydrocolld drg > 48 in w/o b	Purchase Only
A6237	Hydrocolld drg <=16 in w/bdr	Purchase Only
A6238	Hydrocolld drg >16<=48 w/bdr	Purchase Only
A6239	Hydrocolld drg >48	Purchase Only
A6240	Hydrocolld drg filler paste	Purchase Only
A6241	Hydrocolloid drg filler dry	Purchase Only
A6242	Hydrogel drg <=16 in w/o bdr	Purchase Only
A6243	Hydrogel drg >16<=48 w/o bdr	Purchase Only
A6244	Hydrogel drg >48 in w/o bdr	Purchase Only
A6245	Hydrogel drg <= 16 in w/bdr	Purchase Only
A6246	Hydrogel drg >16<=48 in w/b	Purchase Only
A6247	Hydrogel drg > 48 sq in w/b	Purchase Only
A6248	Hydrogel drsg gel filler	Purchase Only
A6250	Skin sealants, protectants, moisturizers, etc	Purchase Only
A6251	Absorpt drg <=16 sq in w/o b	Purchase Only
A6252	Absorpt drg >16 <=48 w/o bdr	Purchase Only
A6253	Absorpt drg > 48 sq in w/o b	Purchase Only
A6254	Absorpt drg <=16 sq in w/bdr	Purchase Only
A6255	Absorpt drg >16<=48 in w/bdr	Purchase Only
A6257	Transparent film <= 16 sq in	Purchase Only
A6258	Transparent film >16<=48 in	Purchase Only
A6259	Transparent film > 48 sq in	Purchase Only
A6260	Wound cleansers	Purchase Only
A6261	Wound filler, gel/paste	Purchase Only
A6262	Gauze, impregnated, per yd	Purchase Only
A6262	Wound filler, dry form	Purchase Only
A6266	Impreg gauze no h20/sal/yard	Purchase Only
A6402	Sterile gauze <= 16 sq in	Not Covered or Bundled Item
A6403	Sterile gauze>16 <= 48 sq in	Not Covered or Bundled Item
A6404	Gauze, sterile, >48	Purchase Only
A6407	Packing strips, non-impreg	Purchase Only
A6410	Sterile eye pad	Not Covered or Bundled Item
A6411	Non-sterile eye pad	Not Covered or Bundled Item
A6412	Eye patch, occlusive	Purchase Only
A6413	Adhesive bandage, first aid	Purchase Only
A6441	Pad band w>=3" <5"/yd	Not Covered or Bundled Item
A6442	Conform band n/s w<3"/yd	Not Covered or Bundled Item
A6443	Conform band n/s w>=3"<5"/yd	Not Covered or Bundled Item
A6444	Conform band n/s w>=5"/yd	Not Covered or Bundled Item
A6445	Conform band s w <3"/yd	Not Covered or Bundled Item
A6446	Conform band s w>=3" <5"/yd	Not Covered or Bundled Item
A6447	Conform band s w >=5"/yd	Not Covered or Bundled Item
A6448	Lt compres band <3"/yd	Not Covered or Bundled Item
A6449	Lt compres band >=3" <5"/yd	Not Covered or Bundled Item
A6450	Lt compres band >=5"/yd	Not Covered or Bundled Item

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A6451	Mod compres band w>=3" <5"/yd	Not Covered or Bundled Item
A6452	High compres band w>=3" <5"/yd	Not Covered or Bundled Item
A6453	Self-adher band w <3"/yd	Not Covered or Bundled Item
A6454	Self-adher band w>=3" <5"/yd	Not Covered or Bundled Item
A6455	Self-adher band >=5"/yd	Not Covered or Bundled Item
A6456	Zinc paste band w >=3" <5"/yd	Not Covered or Bundled Item
A6457	Tubular dressing	Not Covered or Bundled Item
A6501	Compres burngarment bodysuit	Purchase Only
A6502	Compres burngarment chinstrp	Purchase Only
A6503	Compres burngarment facehood	Purchase Only
A6504	Cmprsburngarment glove-wrist	Purchase Only
A6505	Cmprsburngarment glove-elbow	Purchase Only
A6506	Cmprsburngrmnt glove-axilla	Purchase Only
A6507	Cmprs burngarment foot-knee	Purchase Only
A6508	Cmprs burngarment foot-thigh	Purchase Only
A6509	Compres burn garment jacket	Purchase Only
A6510	Compres burn garment leotard	Purchase Only
A6511	Compres burn garment panty	Purchase Only
A6512	Compression burn garment, NOC	Purchase Only
A6513	Compress burn mask face/neck	Purchase Only
A6530	Gradient compression stocking, BK, 18-30 mm Hg, each	Purchase Only
A6531	Compression stocking BK30-40	Purchase Only
A6532	Compression stocking BK40-50	Purchase Only
A6535	GRADENT COMPRS STK THIGH 40-50 MMHG	Purchase Only
A6536	GRADENT COMPRS STK FULL 18-30 MMHG	Purchase Only
A6537	GRADENT COMPRS STK FULL 30-40 MMHG	Purchase Only
A6538	GRADENT COMPRS STK FULL 40-50 MMHG	Purchase Only
A6539	GRADENT COMPRS STK WAIST 18-30 MMHG	Purchase Only
A6540	GRADENT COMPRS STK WAIST 30-40 MMHG	Purchase Only
A6541	GRADENT COMPRS STK WAIST 40-50 MMHG	Purchase Only
A6544	GRADENT COMPRESSION STK GARTER BELT	Purchase Only
A6545	Grad comp non-elastic BK	Purchase Only
A6549	Gradient compression stocking/sleeve, NOS	Purchase Only
A6550	Neg pres wound ther drsg set	Purchase Only
A7000	Disposable canister for pump	Purchase Only
A7001	Nondisposable pump canister	Purchase Only
A7002	Tubing used w suction pump	Purchase Only
A7003	Nebulizer administration set	Purchase Only
A7004	Disposable nebulizer sml vol	Purchase Only
A7005	Nondisposable nebulizer set	Purchase Only
A7006	Filtered nebulizer admin set	Purchase Only
A7007	Lg vol nebulizer disposable	Purchase Only
A7008	Disposable nebulizer prefill	Purchase Only
A7009	Nebulizer reservoir bottle	Purchase Only
A7010	Disposable corrugated tubing	Purchase Only
A7011	Corrugated tubing, nondisposable, used w/lg volum nebulizer, 10 ft	Purchase Only
A7012	Nebulizer water collec devic	Purchase Only
A7013	Disposable compressor filter	Purchase Only
A7014	Compressor nondispos filter	Purchase Only
A7015	Aerosol mask used w nebulize	Purchase Only
A7016	Nebulizer dome & mouthpiece	Purchase Only
A7017	Nebulizer not used w oxygen	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A7018	Water distilled w/nebulizer	Not Covered or Bundled Item
A7020	Interface, cough stim device	Purchase Only
A7025	Replace chest compress vest	Purchase Only
A7026	Replace chst cmprss sys hose	Purchase Only
A7027	Combination oral/nasal mask	Purchase Only
A7028	Repl oral cushion combo mask	Purchase Only
A7029	Repl nasal pillow comb mask	Purchase Only
A7030	CPAP full face mask	Purchase Only
A7031	Replacement facemask interfa	Purchase Only
A7032	Replacement nasal cushion	Purchase Only
A7033	Replacement nasal pillows	Purchase Only
A7034	Nasal application device	Purchase Only
A7035	Pos airway press headgear	Purchase Only
A7036	Pos airway press chinstrap	Purchase Only
A7037	Pos airway pressure tubing	Purchase Only
A7038	Pos airway pressure filter	Purchase Only
A7039	Filter, non disposable w pap	Purchase Only
A7040	One way chest drain valve	Purchase Only
A7041	Water seal drain container	Purchase Only
A7042	Implanted pleural catheter	Purchase Only
A7043	Vacuum drainagebottle/tubing	Purchase Only
A7044	PAP oral interface	Purchase Only
A7045	Repl exhalation port for PAP	Purchase Only
A7046	Repl water chamber, PAP dev	Purchase Only
A7047	Oral interface used w/respiratory suction pump, each	Purchase Only
A7501	Tracheostoma valve w diaphra	Purchase Only
A7502	Replacement diaphragm/fplate	Purchase Only
A7503	HMES filter holder or cap	Purchase Only
A7504	Tracheostoma HMES filter	Purchase Only
A7505	HMES or trach valve housing	Purchase Only
A7506	HMES/trachvalve adhesivedisk	Purchase Only
A7507	Integrated filter & holder	Purchase Only
A7508	Housing & Integrated Adhesiv	Purchase Only
A7509	Heat & moisture exchange sys	Purchase Only
A7520	Trach/laryn tube non-cuffed	Purchase Only
A7521	Trach/laryn tube cuffed	Purchase Only
A7522	Trach/laryn tube stainless	Purchase Only
A7523	Tracheostomy shower protector, each	Purchase Only
A7524	Tracheostoma stent/stud/bttn	Purchase Only
A7525	Tracheostomy mask	Purchase Only
A7526	Tracheostomy tube collar	Purchase Only
A7527	Trach/laryn tube plug/stop	Purchase Only
A8000	Soft protect helmet prefab	Purchase Only
A8001	Hard protect helmet prefab	Purchase Only
A8002	Soft protect helmet custom	Purchase Only
A8003	Hard protect helmet custom	Purchase Only
A8004	Repl soft interface, helmet	Purchase Only
A9150	Non-RX drugs	Purchase Only
A9152	Vitamin/mineral	Purchase Only
A9153	Multiple vitamins/minerals	Purchase Only
A9155	Artificial Saliva	Purchase Only
A9180	Pediculosis (lice) treatment	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
A9270	N/C item	Purchase Only
A9272	Wound suction, disposable	Purchase Only
A9273	Hot water bottle	Purchase Only
A9274	External ambulatory insulin delivery system	Not Covered or Bundled Item
A9275	Home glucose disposable monitor	Purchase Only
A9276	Sensor, invasiv (for use with interstitial continuous glucose monitoring system)	Purchase Only
A9277	Transmitter, external for ICGM	Purchase Only
A9278	Receiver, external for ICGM	Purchase Only
A9279	Monitoring feature/device	Purchase Only
A9280	Alert or alarm, NOC	Purchase Only
A9281	Reaching/grabbing device	Purchase Only
A9282	Wig	Purchase Only
A9283	Foot pressure off loading/supportive device	Purchase Only
A9284	Spirometer, nonelectronic	Purchase Only
A9285	Inversion/Eversion Correction Device	Not Covered or Bundled Item
A9286	HYG I/DVC Disposable/Non-Disposable Any T E	Not Covered or Bundled Item
A9300	Exercise equipment	Purchase Only
A9900	Miscellaneous DME supply, accessory, etc	Purchase Only
A9901	DME delivery, set up	Purchase Only
A9999	Miscellaneous DME supply, accessory, etc	Purchase Only
B4034	Enter feed supkit syr by day	Purchase Only
B4035	Enteral feed supp pump per d	Purchase Only
B4036	Enteral feed sup kit grav by	Purchase Only
B4081	Enteral ng tubing w/ stylet	Purchase Only
B4082	Enteral ng tubing w/o stylet	Purchase Only
B4083	Enteral stomach tube levine	Purchase Only
B4087	Gastro/jejuno tube, std	Purchase Only
B4088	Gastro/jejuno tube, low-pro	Purchase Only
B4149	Ef blenderized foods	Purchase Only
B4150	Ef complet w/intact nutrient	Purchase Only
B4152	Ef calorie dense>=1.5kcal	Purchase Only
B4153	Ef hydrolyzed/amino acids	Purchase Only
B4154	Ef spec metabolic noninherit	Purchase Only
B4155	Ef incomplete/modular	Purchase Only
B4164	Parenteral 50% dextrose solu	Purchase Only
B4168	Parenteral sol amino acid 3.	Purchase Only
B4176	Parenteral sol amino acid 7-	Purchase Only
B4178	Parenteral sol amino acid >	Purchase Only
B4180	Parenteral sol carb > 50%	Purchase Only
B4185	Parenteral sol 10 gm lipids	Purchase Only
B4189	Parenteral sol amino acid &	Purchase Only
B4193	Parenteral sol 52-73 gm prot	Purchase Only
B4197	Parenteral sol 74-100 gm pro	Purchase Only
B4199	Parenteral sol > 100gm prote	Purchase Only
B4216	Parenteral nutrition additiv	Purchase Only
B4220	Parenteral supply kit premix	Purchase Only
B4222	Parenteral supply kit homemi	Purchase Only
B4224	Parenteral administration ki	Purchase Only
B5000	Parenteral sol renal-amirosoy	Purchase Only
B5100	Parenteral sol hepatic-fream	Purchase Only
B9000	Enter infusion pump w/o alrm	Rental To Purchase
B9002	Enteral infusion pump w/ ala	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
B9004	Parenteral infus pump portab	Rental To Purchase
B9006	Parenteral infus pump statio	Rental To Purchase
E0100	Cane adjust/fixe d with tip	Purchase Only
E0105	Cane adjust/fixe d quad/3 pro	Purchase Only
E0110	Crutch forearm pair	Purchase Only
E0111	Crutch forearm each	Purchase Only
E0112	Crutch underarm pair wood	Purchase Only
E0113	Crutch underarm each wood	Purchase Only
E0114	Crutch underarm pair no wood	Purchase Only
E0116	Crutch underarm each no wood	Purchase Only
E0117	Underarm springassist crutch	Purchase Only
E0118	Crutch substitute, lower leg platform, with or w/o wheels	Rental To Purchase
E0130	Walker rigid adjust/fixe d ht	Purchase Only
E0135	Walker folding adjust/fixe d	Purchase Only
E0140	Walker w trunk support	Purchase Only
E0141	Rigid wheeled walker adj/fix	Purchase Only
E0143	Walker folding wheeled w/o s	Purchase Only
E0144	Enclosed walker w rear seat	Purchase Only
E0147	Walker variable wheel resist	Purchase Only
E0148	Heavyduty walker no wheels	Purchase Only
E0149	Heavy duty wheeled walker	Purchase Only
E0153	Forearm crutch platform atta	Purchase Only
E0154	Walker platform attachment	Purchase Only
E0155	Walker wheel attachment,pair	Purchase Only
E0156	Walker seat attachment	Purchase Only
E0157	Walker crutch attachment	Purchase Only
E0158	Walker leg extenders set of4	Purchase Only
E0159	Brake for wheeled walker	Purchase Only
E0160	Sitz type bath or equipment	Purchase Only
E0161	Sitz bath/equipment w/faucet	Purchase Only
E0162	Sitz bath chair	Purchase Only
E0163	Commode chair with fixe d arm	Purchase Only
E0165	Commode chair with detacharm	Rental To Purchase
E0167	Commode chair pail or pan	Purchase Only
E0168	Heavyduty/wide commode chair	Purchase Only
E0170	Commode chair electric	Purchase Only
E0171	Commode chair non-electric	Purchase Only
E0172	Seat lift mechanism place d over or on top of toilet	Purchase Only
E0175	Commode chair foot rest	Purchase Only
E0181	Press pad alternating w/ pum	Rental To Purchase
E0182	Replace pump, alt press pad	Rental To Purchase
E0184	Dry pressure mattress	Purchase Only
E0185	Gel pressure mattress pad	Purchase Only
E0186	Air pressure mattress	Rental To Purchase
E0187	Water pressure mattress	Rental To Purchase
E0188	Synthetic sheepskin pad	Purchase Only
E0189	Lambswool sheepskin pad	Purchase Only
E0190	Positioning cushion/pillow/wedge	Purchase Only
E0191	Protector heel or elbow	Purchase Only
E0193	Powered air flotation bed	Rental To Purchase
E0194	Air fluidized bed	Rental To Purchase
E0196	Gel pressure mattress	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E0197	Air pressure pad for mattres	Purchase Only
E0198	Water pressure pad for mattre	Purchase Only
E0199	Dry pressure pad for mattres	Purchase Only
E0200	Heat lamp without stand	Purchase Only
E0202	Phototherapy light w/ photom	Daily Rental
E0203	Therapeutic lightbos, minimum 10.000 lux, tabletop	Purchase Only
E0205	Heat lamp with stand	Purchase Only
E0210	Electric heat pad standard	Not Covered or Bundled Item
E0215	Electric heat pad moist	Not Covered or Bundled Item
E0217	Water circ heat pad w pump	Purchase Only
E0218	Water circulating cold pad w/pump	Purchase Only
E0221	Infrared heating pad system	Purchase Only
E0225	Hydrocollator unit	Purchase Only
E0231	Noncontact wound-warming device	Purchase Only
E0232	Warming card for use w/above	Purchase Only
E0235	Paraffin bath unit portable	Purchase Only
E0236	Pump for water circulating p	Purchase Only
E0239	Hydrocollator unit portable	Purchase Only
E0240	Bath/shower chair	Purchase Only
E0241	Bathtub wall rail	Purchase Only
E0242	Bathtub rail, floor base	Purchase Only
E0243	Toilet rail	Purchase Only
E0244	Raised toilet seat	Purchase Only
E0245	Tub stool or bench	Purchase Only
E0246	Transfer tub rail attachment	Purchase Only
E0247	Transfer bench for tub or toilet w or w/o commode opening	Purchase Only
E0248	Transfer bench, heavy duty	Purchase Only
E0249	Pad water circulating heat u	Purchase Only
E0250	Hosp bed fixed ht w/ mattres	Rental To Purchase
E0251	Hosp bed fixd ht w/o mattres	Rental To Purchase
E0255	Hospital bed var ht w/ mattre	Rental To Purchase
E0256	Hospital bed var ht w/o matt	Rental To Purchase
E0260	Hosp bed semi-electr w/ matt	Rental To Purchase
E0261	Hosp bed semi-electr w/o mat	Rental To Purchase
E0265	Hosp bed total electr w/ mat	Rental To Purchase
E0266	Hosp bed total elec w/o matt	Rental To Purchase
E0270	Hospital bed, institutional type	Purchase Only
E0271	Mattress innerspring	Not Covered or Bundled Item
E0272	Mattress foam rubber	Purchase Only
E0273	Bed board	Purchase Only
E0274	Over-bed table	Rental To Purchase
E0275	Bed pan standard	Purchase Only
E0276	Bed pan fracture	Purchase Only
E0277	Powered pres-redu air mattres	Rental To Purchase
E0280	Bed cradle	Purchase Only
E0290	Hosp bed fx ht w/o rails w/m	Rental To Purchase
E0291	Hosp bed fx ht w/o rail w/o	Rental To Purchase
E0292	Hosp bed var ht w/o rail w/o	Rental To Purchase
E0293	Hosp bed var ht w/o rail w/	Rental To Purchase
E0294	Hosp bed semi-elect w/ mattre	Rental To Purchase
E0295	Hosp bed semi-elect w/o matt	Rental To Purchase
E0296	Hosp bed total elect w/ matt	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E0297	Hosp bed total elect w/o mat	Rental To Purchase
E0300	Enclosed ped crib hosp grade	Purchase Only
E0301	HD hosp bed, 350-600 lbs	Rental To Purchase
E0302	Ex hd hosp bed > 600 lbs	Rental To Purchase
E0303	Hosp bed hvy dty xtra wide	Rental To Purchase
E0304	Hosp bed xtra hvy dty x wide	Rental To Purchase
E0305	Rails bed side half length	Rental To Purchase
E0310	Rails bed side full length	Purchase Only
E0315	Bed accessory; board, table	Purchase Only
E0316	Bed safety enclosure	Rental To Purchase
E0325	Urinal male jug-type	Purchase Only
E0326	Urinal female jug-type	Purchase Only
E0328	Hospital bed, pediatric, manual	Rental To Purchase
E0329	Hospital bed, pediatric, electric	Rental To Purchase
E0350	Control unit for electronic bowel irrigation/evacuation system	Purchase Only
E0352	Disposable pack for use w/above	Purchase Only
E0370	Air pressure elevator for heel	Purchase Only
E0371	Nonpower mattress overlay	Rental To Purchase
E0372	Powered air mattress overlay	Rental To Purchase
E0373	Nonpowered pressure mattress	Rental To Purchase
E0424	Stationary compressed gas O2	Not Eligible for Sep Reimbursement
E0425	Stationary compressed gass system, purchase	Purchase Only
E0426	Portable gaseous oxygen system, purchase	Purchase Only
E0431	Portable gaseous O2	Rental Only
E0433	Portable liquid oxygen sys	Rental Only
E0434	Portable liquid O2	Rental Only
E0435	Portable liquid O2 system, purchase	Purchase Only
E0439	Stationary liquid O2	Rental Only
E0440	Stationary liquid O2 system, purchase	Purchase Only
E0441	Stationary O2 contents, gas	Not Eligible for Sep Reimbursement
E0442	Stationary O2 contents, liq	Not Eligible for Sep Reimbursement
E0443	Portable O2 contents, gas	Not Eligible for Sep Reimbursement
E0444	Portable O2 contents, liquid	Not Eligible for Sep Reimbursement
E0445	Oximeter device non-invasive	Purchase Only
E0446	Topical O2 delivery system	Purchase Only
E0455	O2 tent	Purchase Only
E0457	Chest shell	Purchase Only
E0459	Chest wrap	Not Covered or Bundled Item
E0462	Rocking bed w/ or w/o side r	Rental To Purchase
E0465	Home ventilator, any type, used with invasive interface	Rental Only
E0466	Home ventilator, any type, used with non-invasive interface	Rental Only
E0470	RAD w/o backup non-inv intrfc	Rental To Purchase
E0471	RAD w/backup non inv intrfc	Rental To Purchase
E0472	RAD w backup invasive intrfc	Rental To Purchase
E0480	Percussor elect/pneum home m	Rental To Purchase
E0481	Intrapulmonary percussive ventilation system/accessories	Purchase Only
E0482	Cough stimulating device	Rental To Purchase
E0483	Chest compression gen system	Rental To Purchase
E0484	Non-elec oscillatory pep dvc	Purchase Only
E0485	Oral device/appliance prefab	Purchase Only
E0486	Oral device/appliance cusfab	Purchase Only
E0487	Spirometer, electronic	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E0500	Ippb all types	Rental Only
E0550	Humidif extens suppl w ippb	Purchase Only
E0560	Humidifier supplemental w/ i	Purchase Only
E0561	Humidifier nonheated w PAP	Rental To Purchase
E0562	Humidifier heated used w PAP	Rental To Purchase
E0565	Compressor air power source	Rental To Purchase
E0570	Nebulizer with compression	Purchase Only
E0572	Aerosol compressor adjust pr	Rental To Purchase
E0574	Ultrasonic generator w svneb	Rental To Purchase
E0575	Nebulizer ultrasonic	Rental To Purchase
E0580	Nebulizer for use w/ regulat	Purchase Only
E0585	Nebulizer w/ compressor & he	Rental To Purchase
E0600	Suction pump portab hom modl	Rental To Purchase
E0601	Cont airway pressure device	Rental To Purchase
E0602	Manual breast pump	Purchase Only
E0603	Breast pump, electric	Purchase Only
E0604	Breast pump, hospital grade	Rental Only
E0605	Vaporizer room type	Not Covered or Bundled Item
E0606	Drainage board postural	Rental To Purchase
E0607	Blood glucose monitor home	Purchase Only
E0610	Pacemaker monitr audible/NC	Purchase Only
E0615	Pacemaker monitr digital/NC	Purchase Only
E0616	Implantable cardiac event recorder with memory, activator, and programmer	Not Covered or Bundled Item
E0617	Automatic ext defibrillator	Not Covered or Bundled Item
E0618	Apnea monitor	Rental To Purchase
E0619	Apnea monitor w recorder	Rental To Purchase
E0620	Cap bld skin piercing laser	Purchase Only
E0621	Patient lift sling or seat	Not Covered or Bundled Item
E0625	Patient lift, bathroom or toilet, NOC	Purchase Only
E0627	Seat lift incorp lift-chair	Not Covered or Bundled Item
E0628	Seat lift for pt furn-electr	Not Covered or Bundled Item
E0629	Seat lift for pt furn-non-el	Not Covered or Bundled Item
E0630	Patient lift hydraulic	Rental To Purchase
E0635	Patient lift electric	Not Covered or Bundled Item
E0636	PT support & positioning sys	Rental To Purchase
E0637	Combination sit-to-stand frame/table system	Purchase Only
E0638	Standing frame/table system	Purchase Only
E0639	Patient lift, moveable from room to room	Purchase Only
E0640	Patient lift, fixed system	Purchase Only
E0641	Standing frame/table system, multi-position	Purchase Only
E0642	Standing frame/table system, mobile	Purchase Only
E0650	Pneuma compresor non-segment	Rental To Purchase
E0651	Pneum compressor segmental	Rental To Purchase
E0652	Pneum compres w/cal pressure	Rental To Purchase
E0655	Pneumatic appliance half arm	Purchase Only
E0656	Segmental pneumatic trunk	Purchase Only
E0657	Segmental pneumatic chest	Purchase Only
E0660	Pneumatic appliance full leg	Purchase Only
E0665	Pneumatic appliance full arm	Purchase Only
E0666	Pneumatic appliance half leg	Purchase Only
E0667	Seg pneumatic appl full leg	Purchase Only
E0668	Seg pneumatic appl full arm	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E0669	Seg pneumatic appli half leg	Purchase Only
E0670	Seg pneum int legs/trunk	Rental To Purchase
E0671	Pressure pneum appl full leg	Purchase Only
E0672	Pressure pneum appl full arm	Purchase Only
E0673	Pressure pneum appl half leg	Purchase Only
E0675	Pneumatic compression device	Rental To Purchase
E0676	Intermittent limb compression device, NOS	Rental To Purchase
E0691	Uvl pnl 2 sq ft or less	Purchase Only
E0692	Uvl sys panel 4 ft	Purchase Only
E0693	Uvl sys panel 6 ft	Purchase Only
E0694	Uvl md cabinet sys 6 ft	Purchase Only
E0700	Safety equipment	Purchase Only
E0705	Transfer device	Purchase Only
E0705	Transfer device	Purchase Only
E0710	Restraints, any type	Purchase Only
E0720	Tens two lead	Purchase Only
E0730	Tens four lead	Purchase Only
E0731	Conductive garment for tens/	Not Covered or Bundled Item
E0740	Incontinence treatment systm	Not Covered or Bundled Item
E0744	Neuromuscular stim for scoli	Rental To Purchase
E0745	NEUROMUSCULAR STIMULATOR, ELECTRONIC SHOCK UNIT	Not Covered or Bundled Item
E0746	EMG biofeedback device	Purchase Only
E0747	Elec osteogen stim not spine	Purchase Only
E0748	Elec osteogen stim spinal	Purchase Only
E0749	Elec osteogen stim implanted	Rental To Purchase
E0755	Electronic salivary reflex stimulator	Purchase Only
E0760	Osteogen ultrasound stimltor	Rental To Purchase
E0761	Functional neuromuscular stimulation, transcutaneous stimulation...	Purchase Only
E0762	Trans elec jt stim dev sys	Rental To Purchase
E0764	Functional neuromuscularstim	Rental To Purchase
E0765	Nerve stimulator for tx n&v	Purchase Only
E0766	Electrical stimulation device used for cancer treatment	Not Covered or Bundled Item
E0769	Electrical stimulation wound tx device, NOC	Purchase Only
E0770	Functional electrical stimulator...	Purchase Only
E0776	Iv pole	Purchase Only
E0779	Amb infusion pump mechanical	Rental To Purchase
E0780	Mech amb infusion pump <8hrs	Purchase Only
E0781	External ambulatory infus pu	Rental To Purchase
E0782	Non-programble infusion pump	Purchase Only
E0783	Programmable infusion pump	Purchase Only
E0784	Ext amb infusn pump insulin	Purchase Only
E0785	Replacement impl pump cathet	Purchase Only
E0786	Implantable pump replacement	Purchase Only
E0791	Parenteral infusion pump sta	Rental To Purchase
E0830	Ambulatory traction device	Purchase Only
E0840	Tract frame attach headboard	Purchase Only
E0849	Cervical pneum trac equip	Purchase Only
E0850	Traction stand free standing	Purchase Only
E0855	Cervical traction equipment	Purchase Only
E0856	Cervic collar w air bladder	Purchase Only
E0860	Tract equip cervical tract	Purchase Only
E0870	Tract frame attach footboard	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E0880	Trac stand free stand extrem	Purchase Only
E0890	Traction frame attach pelvic	Purchase Only
E0900	Trac stand free stand pelvic	Purchase Only
E0910	Trapeze bar attached to bed	Rental To Purchase
E0911	HD trapeze bar attach to bed	Rental To Purchase
E0912	HD trapeze bar free standing	Rental To Purchase
E0920	Fracture frame attached to b	Rental To Purchase
E0930	Fracture frame free standing	Rental To Purchase
E0935	Cont pas motion exercise dev	Daily Rental
E0936	CPPM device other than knee	Daily Rental
E0940	Trapeze bar free standing	Rental To Purchase
E0941	Gravity assisted traction de	Rental To Purchase
E0942	Cervical head harness/halter	Purchase Only
E0944	Pelvic belt/harness/boot	Purchase Only
E0945	Belt/harness extremity	Purchase Only
E0946	Fracture frame dual w cross	Rental To Purchase
E0947	Fracture frame attachmnts pe	Rental Only
E0948	Fracture frame attachmnts ce	Rental Only
E0950	Tray	Purchase Only
E0951	Loop heel	Purchase Only
E0952	Toe loop/holder, each	Purchase Only
E0953	Wheelchair Accessory , Lateral Thigh or Knee Support	Purchase Only
E0954	Wheelchair Accessory, Foot Box	Purchase Only
E0955	Cushioned headrest	Purchase Only
E0956	W/c lateral trunk/hip suppor	Purchase Only
E0957	W/c medial thigh support	Purchase Only
E0958	Whlchr att- conv 1 arm drive	Rental To Purchase
E0959	Amputee adapter	Purchase Only
E0960	W/c shoulder harness/straps	Purchase Only
E0961	Wheelchair brake extension	Purchase Only
E0966	Wheelchair head rest extensi	Purchase Only
E0967	Manual wc hand rim w project	Purchase Only
E0968	Wheelchair commode seat	Rental To Purchase
E0969	Wheelchair narrowing device	Purchase Only
E0970	No 2 footplates, except for elevation legrest	Purchase Only
E0971	Wheelchair anti-tipping devi	Purchase Only
E0973	W/Ch access det adj armrest	Purchase Only
E0974	W/Ch access anti-rollback	Purchase Only
E0978	W/C acc,saf belt pelv strap	Purchase Only
E0980	Wheelchair safety vest	Purchase Only
E0981	Seat upholstery, replacement	Purchase Only
E0982	Back upholstery, replacement	Purchase Only
E0983	Add pwr joystick	Rental To Purchase
E0984	Add pwr tiller	Purchase Only
E0985	W/c seat lift mechanism	Purchase Only
E0986	Man w/c push-rim pow assist	Purchase Only
E0988	Lever-activated wheel drive	Rental To Purchase
E0990	Wheelchair elevating leg res	Purchase Only
E0992	Wheelchair solid seat insert	Purchase Only
E0994	Wheelchair arm rest	Purchase Only
E0995	Wheelchair calf rest	Purchase Only
E1002	Pwr seat tilt	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E1003	Pwr seat recline	Purchase Only
E1004	Pwr seat recline mech	Purchase Only
E1005	Pwr seat recline pwr	Purchase Only
E1006	Pwr seat combo w/o shear	Purchase Only
E1007	Pwr seat combo w/shear	Purchase Only
E1008	Pwr seat combo pwr shear	Purchase Only
E1009	Add mech leg elevation	Purchase Only
E1010	Add pwr leg elevation	Purchase Only
E1011	Ped wc modify width adjustm	Purchase Only
E1012	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest	Purchase Only
E1014	Reclining back add ped w/c	Purchase Only
E1015	Shock absorber for man w/c	Purchase Only
E1016	Shock absorber for power w/c	Purchase Only
E1017	HD shck absrbr for hd man wc	Purchase Only
E1018	HD shck absrber for hd powwc	Purchase Only
E1020	Residual limb support system	Purchase Only
E1028	W/c manual swingaway	Purchase Only
E1029	W/c vent tray fixed	Purchase Only
E1030	W/c vent tray gimbaled	Purchase Only
E1031	Rollabout chair with casters	Rental To Purchase
E1035	Patient transfer system <300	Rental To Purchase
E1036	Patient transfer system >300	Rental To Purchase
E1037	Transport chair, ped size	Rental To Purchase
E1038	Transport chair pt wt<=300lb	Rental To Purchase
E1039	Transport chair pt wt >300lb	Rental To Purchase
E1050	Whelchr fxd full length arms	Rental To Purchase
E1060	Wheelchair detachable arms	Rental To Purchase
E1070	Wheelchair detachable foot r	Rental To Purchase
E1083	Hemi-wheelchair fixed arms	Rental To Purchase
E1084	Hemi-wheelchair detachable a	Rental To Purchase
E1085	Hemi-wheelchair, fixed full-length arms,	Rental To Purchase
E1086	Hemi-wheelchair, detachable arms, desk or full-length	Rental To Purchase
E1087	Wheelchair lightwt fixed arm	Rental To Purchase
E1088	Wheelchair lightweight det a	Rental To Purchase
E1089	High-strength lightweight wheelchair full-length arms	Rental To Purchase
E1090	High-strength lightweight wheelchair detachable arms	Rental To Purchase
E1092	Wheelchair wide w/ leg rests	Rental To Purchase
E1093	Wheelchair wide w/ foot rest	Rental To Purchase
E1100	Whchr s-recl fxd arm leg res	Rental To Purchase
E1110	Wheelchair semi-recl detach	Rental To Purchase
E1130	Standard wheelchair, fixed full-length arms	Rental To Purchase
E1140	Standard wheelchair, detachable arms	Rental To Purchase
E1150	Wheelchair standard w/ leg r	Rental To Purchase
E1160	Wheelchair fixed arms	Rental To Purchase
E1161	Manual adult wc w tiltinspac	Purchase Only
E1170	Whlchr ampu fxd arm leg rest	Rental To Purchase
E1171	Wheelchair amputee w/o leg r	Rental To Purchase
E1172	Wheelchair amputee detach ar	Rental To Purchase
E1180	Wheelchair amputee w/ foot r	Rental To Purchase
E1190	Wheelchair amputee w/ leg re	Rental To Purchase
E1195	Wheelchair amputee heavy dut	Rental To Purchase
E1200	Wheelchair amputee fixed arm	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E1220	Wheelchair, specially sized or constructed	Rental To Purchase
E1221	Wheelchair spec size w foot	Rental To Purchase
E1222	Wheelchair spec size w/ leg	Rental To Purchase
E1223	Wheelchair spec size w foot	Rental To Purchase
E1224	Wheelchair spec size w/ leg	Rental To Purchase
E1225	Manual semi-reclining back	Rental To Purchase
E1226	Manual fully reclining back	Purchase Only
E1227	Wheelchair spec sz spec ht a	Purchase Only
E1228	Wheelchair spec sz spec ht b	Rental To Purchase
E1229	Wheelchair, pediatric, NOS	Rental To Purchase
E1230	Power operated vehicle	Purchase Only
E1231	Rigid ped w/c tilt-in-space	Purchase Only
E1232	Folding ped wc tilt-in-space	Purchase Only
E1233	Rig ped wc tltnspc w/o seat	Purchase Only
E1234	Fld ped wc tltnspc w/o seat	Purchase Only
E1235	Rigid ped wc adjustable	Purchase Only
E1236	Folding ped wc adjustable	Purchase Only
E1237	Rgd ped wc adjstabl w/o seat	Purchase Only
E1238	Fld ped wc adjstabl w/o seat	Purchase Only
E1239	Power wheelchair, pediatric, NOS	Rental To Purchase
E1240	Whchr litwt det arm leg rest	Rental To Purchase
E1250	Lightweight wheelchair, fixed full-length arms	Rental To Purchase
E1260	Lightweight wheelchair, detachable arms	Rental To Purchase
E1270	Wheelchair lightweight leg r	Rental To Purchase
E1280	Whchr h-duty det arm leg res	Rental To Purchase
E1285	Heavy duty wheelchair, fixed full-length arms	Rental To Purchase
E1290	Heavy duty wheelchair, detachable arms	Rental To Purchase
E1295	Wheelchair heavy duty fixed	Rental To Purchase
E1296	Wheelchair special seat heig	Purchase Only
E1297	Wheelchair special seat dept	Purchase Only
E1298	Wheelchair spec seat depth/w	Purchase Only
E1300	Whirlpool, portable, (overtub type)	Purchase Only
E1310	Whirlpool non-portable	Not Covered or Bundled Item
E1352	Oxygen accessory, flow regulator	Not Eligible for Sep Reimbursement
E1353	Oxygen supplies regulator	Not Eligible for Sep Reimbursement
E1354	O2 accessory, wheeled cart	Not Eligible for Sep Reimbursement
E1355	Oxygen supplies stand/rack	Not Eligible for Sep Reimbursement
E1356	O2 accessory, battery back for portable concentrator	Not Eligible for Sep Reimbursement
E1357	O2 accessory, batter charger	Not Eligible for Sep Reimbursement
E1358	O2 accessory, DC power adaptor	Not Eligible for Sep Reimbursement
E1372	Oxy suppl heater for nebuliz	Purchase Only
E1390	Oxygen concentrator	Rental Only
E1391	Oxygen concentrator, dual	Rental Only
E1392	Portable oxygen concentrator	Rental Only
E1399	DME, miscellaneous	Managed Care Review Item
E1405	O2/water vapor enrich w/heat	Rental Only
E1406	O2/water vapor enrich w/o he	Rental Only
E1500	CENTRIFUGE FOR DIALYSIS	Purchase Only
E1510	KIDNEY DIALYSAT DEL SYS KIDNEY MACH	Purchase Only
E1520	HEPARIN INFUSION PUMP HEMODIALYSIS	Purchase Only
E1530	AIR BUBBLE DETECTR HEMODIAL EA REPL	Purchase Only
E1540	PRESSURE ALARM HEMODIAL EA REPL	Purchase Only

**Avera Health Plans
2018 Durable Medical Equipment-Payment Classification**

Code	Description	Reimbursement Designation
E1550	BATH CONDUCTIVITY METER HEMODIAL EA	Purchase Only
E1560	BLD LEAK DETECTOR HEMODIAL EA REPL	Purchase Only
E1570	ADJUSTABLE CHAIR FOR ESRD PATIENTS	Purchase Only
E1575	TRNSDUCR PRTCTR/BARR HEMODIAL SZ-10	Purchase Only
E1580	UNIPUNCTURE CONTROL SYSTEM HEMODIAL	Purchase Only
E1590	HEMODIALYSIS MACHINE	Purchase Only
E1592	AUTO INTERMIT PERITON DIALYSIS SYS	Purchase Only
E1594	CYCLR DIALYSIS MACH PERITON DIALYS	Purchase Only
E1600	DEL &OR INSTL CHARGES HEMODIAL EQP	Purchase Only
E1610	RVRS OSMOSIS H2O PURIF SYS HEMODIAL	Purchase Only
E1615	DEIONIZER H2O PURIF SYS HEMODIAL	Purchase Only
E1620	BLOOD PUMP HEMODIALYSIS REPLACEMENT	Purchase Only
E1625	WATER SOFTENING SYSTEM HEMODIALYSIS	Purchase Only
E1630	RECIPROCAT PERITON DIALYSIS SYSTEM	Purchase Only
E1632	WEARABLE ARTIFICIAL KIDNEY EACH	Purchase Only
E1634	PERITONEAL DIALYSIS CLAMPS EACH	Purchase Only
E1635	COMPACT TRAVEL HEMODIALYZER SYSTEM	Purchase Only
E1636	SORBENT CARTRIDGES HEMODIAL PER 10	Purchase Only
E1637	HEMOSTATS EACH	Purchase Only
E1639	SCALE EACH	Purchase Only
E1699	DIALYSIS EQUIPMENT NOS	Managed Care Review Item
E1700	Jaw motion rehab system	Purchase Only
E1701	Repl cushions for jaw motion	Purchase Only
E1702	Repl measr scales jaw motion	Purchase Only
E1800	Adjust elbow ext/flex device	Rental To Purchase
E1801	SPS elbow device	Rental To Purchase
E1802	Adjst forearm pro/sup device	Rental To Purchase
E1805	Adjust wrist ext/flex device	Rental To Purchase
E1806	SPS wrist device	Rental To Purchase
E1810	Adjust knee ext/flex device	Rental To Purchase
E1811	SPS knee device	Rental To Purchase
E1812	Knee ext/flex w act res ctrl	Rental To Purchase
E1815	Adjust ankle ext/flex device	Rental To Purchase
E1816	SPS ankle device	Rental To Purchase
E1818	SPS forearm device	Rental To Purchase
E1820	Soft interface material	Purchase Only
E1821	Replacement interface SPSD	Purchase Only
E1825	Adjust finger ext/flex devc	Rental To Purchase
E1830	Adjust toe ext/flex device	Rental To Purchase
E1831	Static str toe dev ext/flex	Rental To Purchase
E1840	Adj shoulder ext/flex device	Rental To Purchase
E1841	Static str shldr dev rom adj	Rental To Purchase
E1902	Communication Board	Purchase Only
E2000	Gastric suction pump hme mdl	Rental To Purchase
E2100	Bld glucose monitor w voice	Not Covered or Bundled Item
E2101	Bld glucose monitor w lance	Not Covered or Bundled Item
E2120	Pulse gen sys tx endolymp fl	Rental To Purchase
E2201	Man w/ch acc seat w>=20"<24"	Purchase Only
E2202	Seat width 24-27 in	Purchase Only
E2203	Frame depth less than 22 in	Purchase Only
E2204	Frame depth 22 to 25 in	Purchase Only
E2205	Manual wc accessory, handrim	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E2206	Complete wheel lock assembly	Purchase Only
E2207	Crutch and cane holder	Purchase Only
E2208	Cylinder tank carrier	Purchase Only
E2209	Arm trough each	Purchase Only
E2210	Wheelchair bearings	Purchase Only
E2211	Pneumatic propulsion tire	Purchase Only
E2212	Pneumatic prop tire tube	Purchase Only
E2213	Pneumatic prop tire insert	Purchase Only
E2214	Pneumatic caster tire each	Purchase Only
E2215	Pneumatic caster tire tube	Purchase Only
E2216	Foam filled propulsion tire	Purchase Only
E2217	Foam filled caster tire each	Purchase Only
E2218	Foam propulsion tire each	Purchase Only
E2219	Foam caster tire any size ea	Purchase Only
E2220	Solid propulsion tire each	Purchase Only
E2221	Solid caster tire each	Purchase Only
E2222	Solid caster integrated whl	Purchase Only
E2224	Propulsion whl excludes tire	Purchase Only
E2225	Caster wheel excludes tire	Purchase Only
E2226	Caster fork replacement only	Purchase Only
E2227	Gear reduction drive wheel	Purchase Only
E2228	Mwc acc, wheelchair brake	Purchase Only
E2230	Manual wheelchair accessory, manual standing system	Purchase Only
E2231	Solid seat support base	Purchase Only
E2291	BACK PLANR PED WC FIX ATTCH HARDWRE	Purchase Only
E2292	SEAT PLANR PED WC FIX ATTCH HARDWRE	Purchase Only
E2293	BACK CONTRD PED WC ATTCH HARDWARE	Purchase Only
E2294	SEAT CONTRD PED WC ATTCH HARDWARE	Purchase Only
E2295	MNL WC ACCESS PED SIZE WC SEAT FRME	Rental To Purchase
E2300	WC ACC PWR SEAT ELEV SYS ANY TYPE	Purchase Only
E2310	Electro connect btw control	Purchase Only
E2311	Electro connect btw 2 sys	Purchase Only
E2312	Mini-prop remote joystick	Purchase Only
E2313	PWC harness, expand control	Purchase Only
E2321	Hand interface joystick	Purchase Only
E2322	Mult mech switches	Purchase Only
E2323	Special joystick handle	Purchase Only
E2324	Chin cup interface	Purchase Only
E2325	Sip and puff interface	Purchase Only
E2326	Breath tube kit	Purchase Only
E2327	Head control interface mech	Purchase Only
E2328	Head/extremity control inter	Purchase Only
E2329	Head control nonproportional	Purchase Only
E2330	Head control proximity switc	Purchase Only
E2331	Wheelchair accessories	Purchase Only
E2340	W/c wdth 20-23 in seat frame	Purchase Only
E2341	W/c wdth 24-27 in seat frame	Purchase Only
E2342	W/c dpth 20-21 in seat frame	Purchase Only
E2343	W/c dpth 22-25 in seat frame	Purchase Only
E2351	Electronic SGD interface	Purchase Only
E2358	Wheelchair accessories	Purchase Only
E2359	Gr34 sealed leadacid battery	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E2360	22nf nonsealed leadacid	Purchase Only
E2361	22nf sealed leadacid battery	Purchase Only
E2362	Gr24 nonsealed leadacid	Purchase Only
E2363	Gr24 sealed leadacid battery	Purchase Only
E2364	U1nonsealed leadacid battery	Purchase Only
E2365	U1 sealed leadacid battery	Purchase Only
E2366	Battery charger, single mode	Purchase Only
E2367	Battery charger, dual mode	Purchase Only
E2368	Pwr wc drivewheel motor repl	Purchase Only
E2369	Pwr wc drivewheel gear repl	Purchase Only
E2370	Pwr wc dr wh motor/gear comb	Purchase Only
E2371	Gr27 sealed leadacid battery	Purchase Only
E2372	Gr27 non-sealed leadacid	Purchase Only
E2373	Hand/chin ctrl spec joystick	Purchase Only
E2374	Hand/chin ctrl std joystick	Purchase Only
E2375	Non-expandable controller	Purchase Only
E2376	Expandable controller, repl	Purchase Only
E2377	Expandable controller, initl	Purchase Only
E2378	Pw actuator replacement	Purchase Only
E2381	Pneum drive wheel tire	Purchase Only
E2382	Tube, pneum wheel drive tire	Purchase Only
E2383	Insert, pneum wheel drive	Purchase Only
E2384	Pneumatic caster tire	Purchase Only
E2385	Tube, pneumatic caster tire	Purchase Only
E2386	Foam filled drive wheel tire	Purchase Only
E2387	Foam filled caster tire	Purchase Only
E2388	Foam drive wheel tire	Purchase Only
E2389	Foam caster tire	Purchase Only
E2390	Solid drive wheel tire	Purchase Only
E2391	Solid caster tire	Purchase Only
E2392	Solid caster tire, integrate	Purchase Only
E2394	Drive wheel excludes tire	Purchase Only
E2395	Caster wheel excludes tire	Purchase Only
E2396	Caster fork	Purchase Only
E2397	Pwc acc, lith-based battery	Purchase Only
E2402	Neg press wound therapy pump	Daily Rental
E2500	SGD digitized pre-rec <=8min	Not Covered or Bundled Item
E2502	SGD prerec msg >8min <=20min	Not Covered or Bundled Item
E2504	SGD prerec msg>20min <=40min	Not Covered or Bundled Item
E2506	SGD prerec msg > 40 min	Not Covered or Bundled Item
E2508	SGD spelling phys contact	Not Covered or Bundled Item
E2510	SGD w multi methods msg/accs	Not Covered or Bundled Item
E2511	SGD sftwre prgrm for PC/PDA	Not Covered or Bundled Item
E2512	SGD accessory, mounting sys	Purchase Only
E2601	Gen w/c cushion wdth < 22 in	Purchase Only
E2602	Gen w/c cushion wdth >=22 in	Purchase Only
E2603	Skin protect wc cus wd <22in	Purchase Only
E2604	Skin protect wc cus wd>=22in	Purchase Only
E2605	Position wc cush wdth <22 in	Purchase Only
E2606	Position wc cush wdth>=22 in	Purchase Only
E2607	Skin pro/pos wc cus wd <22in	Purchase Only
E2608	Skin pro/pos wc cus wd>=22in	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
E2609	Wheelchair custom fabricated seat cushion	Purchase Only
E2610	Wheelchair seat cushion	Purchase Only
E2611	Gen use back cush wdh <22in	Purchase Only
E2612	Gen use back cush wdh>=22in	Purchase Only
E2613	Position back cush wd <22in	Purchase Only
E2614	Position back cush wd>=22in	Purchase Only
E2615	Pos back post/lat wdh <22in	Purchase Only
E2616	Pos back post/lat wdh>=22in	Purchase Only
E2617	Custom fabricated wheelchair seat cushion	Purchase Only
E2619	Replace cover w/c seat cush	Purchase Only
E2620	WC planar back cush wd <22in	Purchase Only
E2621	WC planar back cush wd>=22in	Purchase Only
E2622	Adj skin pro w/c cus wd<22in	Purchase Only
E2623	Adj skin pro wc cus wd>=22in	Purchase Only
E2624	Adj skin pro/pos cus<22in	Purchase Only
E2625	Adj skin pro/pos wc cus>=22	Purchase Only
E2626	Seo mobile arm sup att to wc	Purchase Only
E2627	Arm supp att to wc rancho ty	Purchase Only
E2628	Mobile arm supports reclinin	Purchase Only
E2629	Friction dampening arm supp	Purchase Only
E2630	Monosuspension arm/hand supp	Purchase Only
E2631	Elevat proximal arm support	Purchase Only
E2632	Offset/lat rocker arm w/ela	Purchase Only
E2633	Mobile arm support supinator	Purchase Only
E8000	Gait trainer, pediatric, posterior support	Purchase Only
E8001	Gait trainer, pediatric, upright support	Purchase Only
E8002	Gait trainer, pediatric, anterior support	Purchase Only
K0001	Standard wheelchair	Rental To Purchase
K0002	Stnd hemi (low seat) whlchr	Rental To Purchase
K0003	Lightweight wheelchair	Rental To Purchase
K0004	High strength ltwt whlchr	Rental To Purchase
K0005	Ultralightweight wheelchair	Purchase Only
K0006	Heavy duty wheelchair	Rental To Purchase
K0007	Extra heavy duty wheelchair	Rental To Purchase
K0008	Custom manual wheelchair base	Rental To Purchase
K0009	Other manual wheelchair/base	Rental To Purchase
K0010	Stnd wt frame power whlchr	Rental To Purchase
K0011	Stnd wt pwr whlchr w control	Rental To Purchase
K0012	Ltwt portbl power whlchr	Rental To Purchase
K0013	Custom motorized/power wheelchair base	Rental To Purchase
K0014	other motorized/power wheelchair base	Rental To Purchase
K0015	Detach non-adjus hght armrst	Purchase Only
K0017	Detach adjust armrest base	Purchase Only
K0018	Detach adjust armrst upper	Purchase Only
K0019	Arm pad each	Purchase Only
K0020	Fixed adjust armrest pair	Purchase Only
K0037	High mount flip-up footrest	Purchase Only
K0038	Leg strap each	Purchase Only
K0039	Leg strap h style each	Purchase Only
K0040	Adjustable angle footplate	Purchase Only
K0041	Large size footplate each	Purchase Only
K0042	Standard size footplate each	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
K0043	Ftrst lower extension tube	Purchase Only
K0044	Ftrst upper hanger bracket	Purchase Only
K0045	Footrest complete assembly	Purchase Only
K0046	Elevat legrst low extension	Purchase Only
K0047	Elevat legrst up hangr brack	Purchase Only
K0050	Ratchet assembly	Purchase Only
K0051	Cam relese assem ftrst/lgrst	Purchase Only
K0052	Swingaway detach footrest	Purchase Only
K0053	Elevate footrest articulate	Purchase Only
K0056	Seat ht <17 or >=21 ltwt wc	Purchase Only
K0065	Spoke protectors	Purchase Only
K0069	Rear whl complete solid tire	Purchase Only
K0070	Rear whl compl pneum tire	Purchase Only
K0071	Front castr compl pneum tire	Purchase Only
K0072	Frnt cstr cmlp sem-pneum tir	Purchase Only
K0073	Caster pin lock each	Purchase Only
K0077	Front caster assem complete	Purchase Only
K0098	Drive belt power wheelchair	Purchase Only
K0105	Iv hanger	Purchase Only
K0108	Wheelchair component or accesory, not otherwise specified	Purchase Only
K0195	Elevating whlchair leg rests	Rental To Purchase
K0455	Pump uninterrupted infusion	Rental Only
K0462	Temporary replacement for patient-owned equipment being repaired, any type	Purchase Only
K0552	Supply/ext inf pump syr type	Purchase Only
K0601	Repl batt silver oxide 1.5 v	Purchase Only
K0602	Repl batt silver oxide 3 v	Purchase Only
K0603	Repl batt alkaline 1.5 v	Purchase Only
K0604	Repl batt lithium 3.6 v	Purchase Only
K0605	Repl batt lithium 4.5 v	Purchase Only
K0606	AED garment w elec analysis	Rental To Purchase
K0607	Repl batt for AED	Purchase Only
K0608	Repl garment for AED	Purchase Only
K0609	Repl electrode for AED	Purchase Only
K0669	writing coding verification from DME PDAC	Purchase Only
K0672	Removable soft interface LE	Purchase Only
K0730	Ctrl dose inh drug deliv sys	Purchase Only
K0733	12-24hr sealed lead acid	Purchase Only
K0738	Portable gas oxygen system	Rental Only
K0739	skill of a technician, labor component, per 15 minutes	Purchase Only
K0740	component, per 15 minutes	Purchase Only
K0743	Suction pump, home model, portable for use on wounds	Purchase Only
K0744	less	Purchase Only
K0745	sq in but less than or equal to 48 sq in	Purchase Only
K0746	48 sq in	Purchase Only
K0800	POV group 1 std up to 300lbs	Rental To Purchase
K0801	POV group 1 hd 301-450 lbs	Rental To Purchase
K0802	POV group 1 vhd 451-600 lbs	Rental To Purchase
K0806	POV group 2 std up to 300lbs	Rental To Purchase
K0807	POV group 2 hd 301-450 lbs	Rental To Purchase
K0808	POV group 2 vhd 451-600 lbs	Rental To Purchase
K0812	Power operated vehicle, no otherwise classified	Rental To Purchase
K0813	PWC gp 1 std port seat/back	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
K0814	PWC gp 1 std port cap chair	Rental To Purchase
K0815	PWC gp 1 std seat/back	Rental To Purchase
K0816	PWC gp 1 std cap chair	Rental To Purchase
K0820	PWC gp 2 std port seat/back	Rental To Purchase
K0821	PWC gp 2 std port cap chair	Rental To Purchase
K0822	PWC gp 2 std seat/back	Rental To Purchase
K0823	PWC gp 2 std cap chair	Rental To Purchase
K0824	PWC gp 2 hd seat/back	Rental To Purchase
K0825	PWC gp 2 hd cap chair	Rental To Purchase
K0826	PWC gp 2 vhd seat/back	Rental To Purchase
K0827	PWC gp vhd cap chair	Rental To Purchase
K0828	PWC gp 2 xtra hd seat/back	Rental To Purchase
K0829	PWC gp 2 xtra hd cap chair	Rental To Purchase
K0830	to and incuding 300 pounds	Rental To Purchase
K0831	including 300 pounds	Rental To Purchase
K0835	PWC gp2 std sing pow opt s/b	Rental To Purchase
K0836	PWC gp2 std sing pow opt cap	Rental To Purchase
K0837	PWC gp 2 hd sing pow opt s/b	Rental To Purchase
K0838	PWC gp 2 hd sing pow opt cap	Rental To Purchase
K0839	PWC gp2 vhd sing pow opt s/b	Rental To Purchase
K0840	PWC gp2 xhd sing pow opt s/b	Rental To Purchase
K0841	PWC gp2 std mult pow opt s/b	Rental To Purchase
K0842	PWC gp2 std mult pow opt cap	Rental To Purchase
K0843	PWC gp2 hd mult pow opt s/b	Rental To Purchase
K0848	PWC gp 3 std seat/back	Rental To Purchase
K0849	PWC gp 3 std cap chair	Rental To Purchase
K0850	PWC gp 3 hd seat/back	Rental To Purchase
K0851	PWC gp 3 hd cap chair	Rental To Purchase
K0852	PWC gp 3 vhd seat/back	Rental To Purchase
K0853	PWC gp 3 vhd cap chair	Rental To Purchase
K0854	PWC gp 3 xhd seat/back	Rental To Purchase
K0855	PWC gp 3 xhd cap chair	Rental To Purchase
K0856	PWC gp3 std sing pow opt s/b	Rental To Purchase
K0857	PWC gp3 std sing pow opt cap	Rental To Purchase
K0858	PWC gp3 hd sing pow opt s/b	Rental To Purchase
K0859	PWC gp3 hd sing pow opt cap	Rental To Purchase
K0860	PWC gp3 vhd sing pow opt s/b	Rental To Purchase
K0861	PWC gp3 std mult pow opt s/b	Rental To Purchase
K0862	PWC gp3 hd mult pow opt s/b	Rental To Purchase
K0863	PWC gp3 vhd mult pow opt s/b	Rental To Purchase
K0864	PWC gp3 xhd mult pow opt s/b	Rental To Purchase
K0868	including 300 pounds	Rental To Purchase
K0869	pounds	Rental To Purchase
K0870	pounds	Rental To Purchase
K0871	pounds	Rental To Purchase
K0877	capacity up to and including 300 pounds	Rental To Purchase
K0878	to and including 300 pounds	Rental To Purchase
K0879	capacity 301 to 450 pounds	Rental To Purchase
K0880	451 to 600 pounds	Rental To Purchase
K0884	capacity up to and including 300 pounds	Rental To Purchase
K0885	up to and including 300 pounds	Rental To Purchase
K0886	capacity 301 to 450 pounds	Rental To Purchase

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
K0890	capacity up to and including 125 pounds	Rental To Purchase
K0891	capacity up to and including 125 pounds	Rental To Purchase
K0898	Power wheelchair, not otherwise classified	Rental To Purchase
K0899	Power mobility device, not coded by DME PDAC or does not meet criteria	Rental To Purchase
K0900	Customized durable medical equipment, other than wheelchair	Managed Care Review Item
L0112	Cranial cervical orthosis	Purchase Only
L0113	Cranial cervical torticollis	Purchase Only
L0120	Cerv flexible non-adjustable	Purchase Only
L0130	Flex thermoplastic collar mo	Purchase Only
L0140	Cervical semi-rigid adjustab	Purchase Only
L0150	Cerv semi-rig adj molded chn	Purchase Only
L0160	Cerv semi-rig wire occ/mand	Purchase Only
L0170	Cervical collar molded to pt	Purchase Only
L0172	Cerv col thermplas foam 2 pi	Purchase Only
L0174	Cerv col foam 2 piece w thor	Purchase Only
L0180	Cer post col occ/man sup adj	Purchase Only
L0190	Cerv collar supp adj cerv ba	Purchase Only
L0200	Cerv col supp adj bar & thor	Purchase Only
L0220	Thor rib belt custom fabrica	Purchase Only
L0430	Dewall posture protector	Purchase Only
L0450	TLSO flex prefab thoracic	Purchase Only
L0452	tlso flex custom fab thoraci	Purchase Only
L0454	TLSO flex prefab sacrococ-T9	Purchase Only
L0455	restricts gross trunk motion in the sagittal plane, produces intracavitary pressure to reduce load on	Purchase Only
L0456	TLSO flex prefab	Purchase Only
L0457	extends from the sacrococcygeal junction and terminates just inferior to the scapular spine, restricts	Purchase Only
L0458	TLSO 2Mod symphis-xipho pre	Purchase Only
L0460	TLSO2Mod symphysis-stern pre	Purchase Only
L0462	TLSO 3Mod sacro-scap pre	Purchase Only
L0464	TLSO 4Mod sacro-scap pre	Purchase Only
L0466	TLSO rigid frame pre soft ap	Purchase Only
L0467	padding, restricts gross trunk motion in sagittal plane, produces intracavitary pressure to reduce load	Purchase Only
L0468	TLSO rigid frame prefab pelv	Purchase Only
L0469	closures and padding, extends from sacrococcygeal junction over scapulae, lateral strength provided	Purchase Only
L0470	TLSO rigid frame pre subclav	Purchase Only
L0472	TLSO rigid frame hyperex pre	Purchase Only
L0480	TLSO rigid plastic custom fa	Purchase Only
L0482	TLSO rigid lined custom fab	Purchase Only
L0484	TLSO rigid plastic cust fab	Purchase Only
L0486	TLSO rigidlined cust fab two	Purchase Only
L0488	TLSO rigid lined pre one pie	Purchase Only
L0490	TLSO rigid plastic pre one	Purchase Only
L0491	TLSO 2 piece rigid shell	Purchase Only
L0492	TLSO 3 piece rigid shell	Purchase Only
L0621	SIO flex peINCacral prefab	Purchase Only
L0622	SIO flex peINCacral custom	Purchase Only
L0623	SIO panel prefab	Purchase Only
L0624	SIO panel custom	Purchase Only
L0625	LO flexibl L1-below L5 pre	Purchase Only
L0626	LO sag stays/panels pre-fab	Purchase Only
L0627	LO sagitt rigid panel prefab	Purchase Only
L0628	LO flex w/o rigid stays pre	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L0629	LSO flex w/rigid stays cust	Purchase Only
L0630	LSO post rigid panel pre	Purchase Only
L0631	LSO sag-coro rigid frame pre	Purchase Only
L0632	LSO sag rigid frame cust	Purchase Only
L0633	LSO flexion control prefab	Purchase Only
L0634	LSO flexion control custom	Purchase Only
L0635	LSO sagit rigid panel prefab	Purchase Only
L0636	LSO sagittal rigid panel cus	Purchase Only
L0637	LSO sag-coronal panel prefab	Purchase Only
L0638	LSO sag-coronal panel custom	Purchase Only
L0639	LSO s/c shell/panel prefab	Purchase Only
L0640	LSO s/c shell/panel custom	Purchase Only
L0641	5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes	Purchase Only
L0642	to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs,	Purchase Only
L0643	sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the	Purchase Only
L0648	from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the	Purchase Only
L0649	from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels,	Purchase Only
L0650	posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid	Purchase Only
L0651	sacrococcygeal junction to T-9 vertebra, anterior extends from symphysis pubis to xyphoid,	Purchase Only
L0700	Ctlso a-p-l control molded	Purchase Only
L0710	Ctlso a-p-l control w/ inter	Purchase Only
L0810	Halo cervical into jckt vest	Purchase Only
L0820	Halo cervical into body jack	Purchase Only
L0830	Halo cerv into milwaukee typ	Purchase Only
L0859	MRI compatible system	Purchase Only
L0861	Halo repl liner/interface	Purchase Only
L0970	Tlso corset front	Purchase Only
L0972	Lso corset front	Purchase Only
L0974	Tlso full corset	Purchase Only
L0976	Lso full corset	Purchase Only
L0978	Axillary crutch extension	Purchase Only
L0980	Peroneal straps pair	Purchase Only
L0982	Stocking supp grips set of f	Purchase Only
L0984	Protective body sock each	Purchase Only
L0999	Addition to spinal orthotic, not otherwise specified	Purchase Only
L1000	Ctlso milwauke initial model	Purchase Only
L1001	CTLISO infant immobilizer	Purchase Only
L1005	Tension based scoliosis orth	Purchase Only
L1010	Ctlso axilla sling	Purchase Only
L1020	Kyphosis pad	Purchase Only
L1025	Kyphosis pad floating	Purchase Only
L1030	Lumbar bolster pad	Purchase Only
L1040	Lumbar or lumbar rib pad	Purchase Only
L1050	Sternal pad	Purchase Only
L1060	Thoracic pad	Purchase Only
L1070	Trapezius sling	Purchase Only
L1080	Outrigger	Purchase Only
L1085	Outrigger bil w/ vert extens	Purchase Only
L1090	Lumbar sling	Purchase Only
L1100	Ring flange plastic/leather	Purchase Only
L1110	Ring flange plas/leather mol	Purchase Only
L1120	Covers for upright each	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L1200	Furnsh initial orthosis only	Purchase Only
L1210	Lateral thoracic extension	Purchase Only
L1220	Anterior thoracic extension	Purchase Only
L1230	Milwaukee type superstructur	Purchase Only
L1240	Lumbar derotation pad	Purchase Only
L1250	Anterior asis pad	Purchase Only
L1260	Anterior thoracic derotation	Purchase Only
L1270	Abdominal pad	Purchase Only
L1280	Rib gusset (elastic) each	Purchase Only
L1290	Lateral trochanteric pad	Purchase Only
L1300	Body jacket mold to patient	Purchase Only
L1310	Post-operative body jacket	Purchase Only
L1499	Spinal orthotic, not otherwise specified	Purchase Only
L1600	Abduct hip flex frejka w cvr	Purchase Only
L1610	Abduct hip flex frejka covr	Purchase Only
L1620	Abduct hip flex pavlik harn	Purchase Only
L1630	Abduct control hip semi-flex	Purchase Only
L1640	Pelv band/spread bar thigh c	Purchase Only
L1650	HO abduction hip adjustable	Purchase Only
L1652	HO bi thighcuffs w sprdr bar	Purchase Only
L1660	HO abduction static plastic	Purchase Only
L1680	Pelvic & hip control thigh c	Purchase Only
L1685	Post-op hip abduct custom fa	Purchase Only
L1686	HO post-op hip abduction	Purchase Only
L1690	Combination bilateral HO	Purchase Only
L1700	Leg perthes orth toronto typ	Purchase Only
L1710	Legg perthes orth newington	Purchase Only
L1720	Legg perthes orthosis trilat	Purchase Only
L1730	Legg perthes orth scottish r	Purchase Only
L1755	Legg perthes patten bottom t	Purchase Only
L1810	Ko elastic with joints	Purchase Only
L1812	Knee orthosis, elastic with joints, prefabricated, off-the-shelf	Purchase Only
L1820	Ko elas w/ condyle pads & jo	Purchase Only
L1830	Ko immobilizer canvas longit	Purchase Only
L1831	Knee orth pos locking joint	Purchase Only
L1832	KO adj jnt pos rigid support	Purchase Only
L1833	prefabricated, off-the shelf	Purchase Only
L1834	Ko w/0 joint rigid molded to	Purchase Only
L1836	Rigid KO wo joints	Purchase Only
L1840	Ko derot ant cruciate custom	Purchase Only
L1843	KO single upright custom fit	Purchase Only
L1844	Ko w/adj jt rot cntrl molded	Purchase Only
L1845	Ko w/ adj flex/ext rotat cus	Purchase Only
L1846	Ko w adj flex/ext rotat mold	Purchase Only
L1847	KO adjustable w air chambers	Purchase Only
L1848	prefabricated, off-the-shelf	Purchase Only
L1850	Ko swedish type	Purchase Only
L1851	Knee Orthosis Single Upright Thigh & Calf	Purchase Only
L1852	Knee Orthosis Double Upright Thigh & Calf	Purchase Only
L1860	Ko supracondylar socket mold	Purchase Only
L1900	Afo sprng wir drsflx calf bd	Purchase Only
L1902	Afo ankle gauntlet	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L1904	Afo molded ankle gauntlet	Purchase Only
L1906	Afo multiligamentous ankle su	Purchase Only
L1907	AFO supramalleolar custom	Purchase Only
L1910	Afo sing bar clasp attach sh	Purchase Only
L1920	Afo sing upright w/ adjust s	Purchase Only
L1930	Afo plastic	Purchase Only
L1932	Afo rig ant tib prefab TCF/=	Purchase Only
L1940	Afo molded to patient plasti	Purchase Only
L1945	Afo molded plas rig ant tib	Purchase Only
L1950	Afo spiral molded to pt plas	Purchase Only
L1951	AFO spiral prefabricated	Purchase Only
L1960	Afo pos solid ank plastic mo	Purchase Only
L1970	Afo plastic molded w/ankle j	Purchase Only
L1971	AFO w/ankle joint, prefab	Purchase Only
L1980	Afo sing solid stirrup calf	Purchase Only
L1990	Afo doub solid stirrup calf	Purchase Only
L2000	Kafo sing fre stirr thi/calf	Purchase Only
L2005	KAFO sng/dbl mechanical act	Purchase Only
L2010	Kafo sng solid stirrup w/o j	Purchase Only
L2020	Kafo dbl solid stirrup band/	Purchase Only
L2030	Kafo dbl solid stirrup w/o j	Purchase Only
L2034	KAFO pla sin up w/wo k/a cus	Purchase Only
L2035	KAFO plastic pediatric size	Purchase Only
L2036	Kafo plas doub free knee mol	Purchase Only
L2037	Kafo plas sing free knee mol	Purchase Only
L2038	Kafo w/o joint multi-axis an	Purchase Only
L2040	Hkafo torsion bil rot straps	Purchase Only
L2050	Hkafo torsion cable hip pelv	Purchase Only
L2060	Hkafo torsion ball bearing j	Purchase Only
L2070	Hkafo torsion unilat rot str	Purchase Only
L2080	Hkafo unilat torsion cable	Purchase Only
L2090	Hkafo unilat torsion ball br	Purchase Only
L2106	Afo tib fx cast plaster mold	Purchase Only
L2108	Afo tib fx cast molded to pt	Purchase Only
L2112	Afo tibial fracture soft	Purchase Only
L2114	Afo tib fx semi-rigid	Purchase Only
L2116	Afo tibial fracture rigid	Purchase Only
L2126	Kafo fem fx cast thermoplas	Purchase Only
L2128	Kafo fem fx cast molded to p	Purchase Only
L2132	Kafo femoral fx cast soft	Purchase Only
L2134	Kafo fem fx cast semi-rigid	Purchase Only
L2136	Kafo femoral fx cast rigid	Purchase Only
L2180	Plas shoe insert w ank joint	Purchase Only
L2182	Drop lock knee	Purchase Only
L2184	Limited motion knee joint	Purchase Only
L2186	Adj motion knee jnt lerman t	Purchase Only
L2188	Quadrilateral brim	Purchase Only
L2190	Waist belt	Purchase Only
L2192	Pelvic band & belt thigh fla	Purchase Only
L2200	Limited ankle motion ea jnt	Purchase Only
L2210	Dorsiflexion assist each joi	Purchase Only
L2220	Dorsi & plantar flex ass/res	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L2230	Split flat caliper stirr & p	Purchase Only
L2232	Rocker bottom, contact AFO	Purchase Only
L2240	Round caliper and plate atta	Purchase Only
L2250	Foot plate molded stirrup at	Purchase Only
L2260	Reinforced solid stirrup	Purchase Only
L2265	Long tongue stirrup	Purchase Only
L2270	Varus/valgus strap padded/li	Purchase Only
L2275	Plastic mod low ext pad/line	Purchase Only
L2280	Molded inner boot	Purchase Only
L2300	Abduction bar jointed adjust	Purchase Only
L2310	Abduction bar-straight	Purchase Only
L2320	Non-molded lacer	Purchase Only
L2330	Lacer molded to patient mode	Purchase Only
L2335	Anterior swing band	Purchase Only
L2340	Pre-tibial shell molded to p	Purchase Only
L2350	Prosthetic type socket molde	Purchase Only
L2360	Extended steel shank	Purchase Only
L2370	Patten bottom	Purchase Only
L2375	Torsion ank & half solid sti	Purchase Only
L2380	Torsion straight knee joint	Purchase Only
L2385	Straight knee joint heavy du	Purchase Only
L2387	Add LE poly knee custom KAFO	Purchase Only
L2390	Offset knee joint each	Purchase Only
L2395	Offset knee joint heavy duty	Purchase Only
L2397	Suspension sleeve lower ext	Purchase Only
L2405	Knee joint drop lock ea jnt	Purchase Only
L2415	Knee joint cam lock each joi	Purchase Only
L2425	Knee disc/dial lock/adj flex	Purchase Only
L2430	Knee jnt ratchet lock ea jnt	Purchase Only
L2492	Knee lift loop drop lock rin	Purchase Only
L2500	Thi/glut/ischia wgt bearing	Purchase Only
L2510	Th/wght bear quad-lat brim m	Purchase Only
L2520	Th/wght bear quad-lat brim c	Purchase Only
L2525	Th/wght bear nar m-l brim mo	Purchase Only
L2526	Th/wght bear nar m-l brim cu	Purchase Only
L2530	Thigh/wght bear lacer non-mo	Purchase Only
L2540	Thigh/wght bear lacer molded	Purchase Only
L2550	Thigh/wght bear high roll cu	Purchase Only
L2570	Hip cleNC type 2 posit jnt	Purchase Only
L2580	Pelvic control pelvic sling	Purchase Only
L2600	Hip cleNC/thrust bearing fr	Purchase Only
L2610	Hip cleNC/thrust bearing lo	Purchase Only
L2620	Pelvic control hip heavy dut	Purchase Only
L2622	Hip joint adjustable flexion	Purchase Only
L2624	Hip adj flex ext abduct cont	Purchase Only
L2627	Plastic mold recipro hip & c	Purchase Only
L2628	Metal frame recipro hip & ca	Purchase Only
L2630	Pelvic control band & belt u	Purchase Only
L2640	Pelvic control band & belt b	Purchase Only
L2650	Pelv & thor control gluteal	Purchase Only
L2660	Thoracic control thoracic ba	Purchase Only
L2670	Thorac cont paraspinal uprig	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L2680	Thorac cont lat support upri	Purchase Only
L2750	Plating chrome/nickel pr bar	Purchase Only
L2755	Carbon graphite lamination	Purchase Only
L2760	Extension per extension per	Purchase Only
L2768	Ortho sidebar disconnect	Purchase Only
L2780	Non-corrosive finish	Purchase Only
L2785	Drop lock retainer each	Purchase Only
L2795	Knee control full kneecap	Purchase Only
L2800	Knee cap medial or lateral p	Purchase Only
L2810	Knee control condylar pad	Purchase Only
L2820	Soft interface below knee se	Purchase Only
L2830	Soft interface above knee se	Purchase Only
L2840	Tibial length sock fx or equ	Purchase Only
L2850	Femoral lgth sock fx or equa	Purchase Only
L2861	custom fabricated orthotics only, each	Purchase Only
L2999	Lower extremity orthotic, not otherwise specified	Purchase Only
L3000	Ft insert ucb berkeley shell	Not Covered or Bundled Item
L3001	Foot insert remov molded spe	Not Covered or Bundled Item
L3002	Foot insert plastazote or eq	Not Covered or Bundled Item
L3003	Foot insert silicone gel eac	Not Covered or Bundled Item
L3010	Foot longitudinal arch suppo	Not Covered or Bundled Item
L3020	Foot longitud/metatarsal sup	Not Covered or Bundled Item
L3030	Foot arch support remov prem	Not Covered or Bundled Item
L3031	Foot lamin/prepreg composite	Purchase Only
L3040	Ft arch suprt premold longit	Not Covered or Bundled Item
L3050	Foot arch supp premold metat	Not Covered or Bundled Item
L3060	Foot arch supp longitud/meta	Not Covered or Bundled Item
L3070	Arch suprt att to sho longit	Not Covered or Bundled Item
L3080	Arch supp att to shoe metata	Not Covered or Bundled Item
L3090	Arch supp att to shoe long/m	Not Covered or Bundled Item
L3100	Hallus-valgus nght dynamic s	Not Covered or Bundled Item
L3140	Abduction rotation bar shoe	Not Covered or Bundled Item
L3150	Abduct rotation bar w/o shoe	Not Covered or Bundled Item
L3160	Foot, adjustable shoe-styled positioning device	Purchase Only
L3170	Foot plastic heel stabilizer	Not Covered or Bundled Item
L3201	Orthopedic shoe, Oxford with supinator or pronator, infant	Purchase Only
L3202	Orthopedic shoe, Oxford with supinator or pronator, child	Purchase Only
L3203	Orthopedic shoe, Oxford with supinator or pronator, junior	Purchase Only
L3204	Orthopedic shoe, hightop with supinator or pronator, infant	Purchase Only
L3206	Orthopedic shoe, hightop with supinator or pronator, child	Purchase Only
L3207	Orthopedic shoe, hightop with supinator or pronator, junior	Purchase Only
L3208	Surgical boot, each, infant	Purchase Only
L3209	Surgical boot, each, child	Purchase Only
L3211	Surgical boot, each, junior	Purchase Only
L3212	Benesch boot, pair, infant	Purchase Only
L3213	Benesch boot, pair, child	Purchase Only
L3214	Benesch boot, pair, junior	Purchase Only
L3215	Orthopedic footwear, ladies shoe, oxford, each	Purchase Only
L3216	Orthopedic footwear, ladies shoe, depth inlay, each	Purchase Only
L3217	Orthopedic footwear, ladies shoe, hightop, depth inlay, each	Purchase Only
L3219	Orthopedic footwear, mens shoe, oxford, each	Purchase Only
L3221	Orthopedic footwear, mens shoe, depth inlay, each	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L3222	Orthopedic footwear, mens shoe, hightop, depth inlay, each	Purchase Only
L3224	Woman's shoe oxford brace	Not Covered or Bundled Item
L3225	Man's shoe oxford brace	Not Covered or Bundled Item
L3230	Orthopedic footwear, custom shoe, depth inlay, each	Purchase Only
L3250	Orthopedic footwear, custom molded shoe, removable inner mold, prosthetic shoe, each	Purchase Only
L3251	Foot, shoe molded to patient model, silicone shoe, each	Purchase Only
L3252	Foot, shoe molded to patient model, Plastazote (or similar), custom fabricated, each	Purchase Only
L3253	Foot, molded shoe, Plastazote (or similar), custom fitted, each	Purchase Only
L3254	Nonstandard size or width	Purchase Only
L3255	Nonstandard size or length	Purchase Only
L3257	Orthopedic footwear, additional charge for split size	Purchase Only
L3260	Surgical boot/shoe, each	Purchase Only
L3265	Plastazote sandal, each	Purchase Only
L3300	Sho lift taper to metatarsal	Not Covered or Bundled Item
L3310	Shoe lift elev heel/sole neo	Not Covered or Bundled Item
L3320	Lift, elevation, heel and sole, cork, per in	Purchase Only
L3330	Lifts elevation metal extens	Not Covered or Bundled Item
L3332	Shoe lifts tapered to one-ha	Not Covered or Bundled Item
L3334	Shoe lifts elevation heel /i	Not Covered or Bundled Item
L3340	Shoe wedge sach	Not Covered or Bundled Item
L3350	Shoe heel wedge	Not Covered or Bundled Item
L3360	Shoe sole wedge outside sole	Not Covered or Bundled Item
L3370	Shoe sole wedge between sole	Not Covered or Bundled Item
L3380	Shoe clubfoot wedge	Not Covered or Bundled Item
L3390	Shoe outflare wedge	Not Covered or Bundled Item
L3400	Shoe metatarsal bar wedge ro	Not Covered or Bundled Item
L3410	Shoe metatarsal bar between	Not Covered or Bundled Item
L3420	Full sole/heel wedge btween	Not Covered or Bundled Item
L3430	Sho heel count plast reinfor	Not Covered or Bundled Item
L3440	Heel leather reinforced	Not Covered or Bundled Item
L3450	Shoe heel sach cushion type	Not Covered or Bundled Item
L3455	Shoe heel new leather standa	Not Covered or Bundled Item
L3460	Shoe heel new rubber standar	Not Covered or Bundled Item
L3465	Shoe heel thomas with wedge	Not Covered or Bundled Item
L3470	Shoe heel thomas extend to b	Not Covered or Bundled Item
L3480	Shoe heel pad & depress for	Not Covered or Bundled Item
L3485	Heel, pad, removable for spur	Purchase Only
L3500	Ortho shoe add leather insol	Not Covered or Bundled Item
L3510	Orthopedic shoe add rub insl	Not Covered or Bundled Item
L3520	O shoe add felt w leath insl	Not Covered or Bundled Item
L3530	Ortho shoe add half sole	Not Covered or Bundled Item
L3540	Ortho shoe add full sole	Not Covered or Bundled Item
L3550	O shoe add standard toe tap	Not Covered or Bundled Item
L3560	O shoe add horseshoe toe tap	Not Covered or Bundled Item
L3570	O shoe add instep extension	Not Covered or Bundled Item
L3580	O shoe add instep velcro clo	Not Covered or Bundled Item
L3590	O shoe convert to sof counte	Not Covered or Bundled Item
L3595	Ortho shoe add march bar	Not Covered or Bundled Item
L3600	Trans shoe calip plate exist	Not Covered or Bundled Item
L3610	Trans shoe caliper plate new	Not Covered or Bundled Item
L3620	Trans shoe solid stirrup exi	Not Covered or Bundled Item
L3630	Trans shoe solid stirrup new	Not Covered or Bundled Item

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L3640	Shoe dennis browne splint bo	Not Covered or Bundled Item
L3649	Orthopedic shoe, modification, addition or transfer, not otherwise specified	Purchase Only
L3650	Shlder fig 8 abduct restrain	Purchase Only
L3660	Abduct restrainer canvas&web	Purchase Only
L3670	Acromio/clavicular canvas&we	Purchase Only
L3671	SO cap design w/o jnts CF	Purchase Only
L3674	SO airplane w/wo joint CF	Purchase Only
L3675	Canvas vest SO	Purchase Only
L3677	prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a	Purchase Only
L3678	prefabricated, off-the-shelf	Purchase Only
L3702	EO w/o joints CF	Purchase Only
L3710	Elbow elastic with metal joi	Purchase Only
L3720	Forearm/arm cuffs free motio	Purchase Only
L3730	Forearm/arm cuffs ext/flex a	Purchase Only
L3740	Cuffs adj lock w/ active con	Purchase Only
L3760	EO withjoint, Prefabricated	Purchase Only
L3761	Elbow Orthosis, with adjustable position locking joints	Purchase Only
L3762	Rigid EO wo joints	Purchase Only
L3763	EWHO rigid w/o jnts CF	Purchase Only
L3764	EWHO w/joint(s) CF	Purchase Only
L3765	EWHFO rigid w/o jnts CF	Purchase Only
L3766	EWHFO w/joint(s) CF	Purchase Only
L3806	WHFO w/joint(s) custom fab	Purchase Only
L3807	WHFO,no joint, prefabricated	Purchase Only
L3808	WHFO, rigid w/o joints	Purchase Only
L3809	Wrist hand finger orthosis, without joint(s), prefabricated, off-the-shelf, any type	Purchase Only
L3891	custom fabricated orthotics only, each	Purchase Only
L3900	Hinge extension/flex wrist/f	Purchase Only
L3901	Hinge ext/flex wrist finger	Purchase Only
L3904	Whfo electric custom fitted	Purchase Only
L3905	WHO w/nontorsion jnt(s) CF	Purchase Only
L3906	WHO w/o joints CF	Purchase Only
L3908	Wrist cock-up non-molded	Purchase Only
L3912	Flex glove w/elastic finger	Purchase Only
L3913	HFO w/o joints CF	Purchase Only
L3915	WHO w nontor jnt(s) prefab	Purchase Only
L3916	include soft interface, straps, prefabricated, off-the-shelf	Purchase Only
L3917	Prefab metacarpl fx orthosis	Purchase Only
L3918	Hand orthosis, metacarpal fracture orthosis, prefabricated, off-the-shelf	Purchase Only
L3919	HO w/o joints CF	Purchase Only
L3921	HFO w/joint(s) CF	Purchase Only
L3923	HFO w/o joints PF	Purchase Only
L3924	Hand finger orthosis, without joints, may include soft interface, straps, prefabricated, off-the-shelf	Purchase Only
L3925	FO pip/dip with joint/spring	Purchase Only
L3927	FO pip/dip w/o joint/spring	Purchase Only
L3929	HFO nontorsion joint, prefab	Purchase Only
L3930	may include soft interface material, straps, prefabricated, off-the-shelf	Purchase Only
L3931	WHFO nontorsion joint prefab	Purchase Only
L3933	FO w/o joints CF	Purchase Only
L3935	FO nontorsion joint CF	Purchase Only
L3956	Add joint upper ext orthosis	Purchase Only
L3960	Sewho airplan desig abdu pos	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L3961	SEWHO cap design w/o jnts CF	Purchase Only
L3962	Sewho erbs palsey design abd	Purchase Only
L3967	SEWHO airplane w/o jnts CF	Purchase Only
L3971	SEWHO cap design w/jnt(s) CF	Purchase Only
L3973	SEWHO airplane w/jnt(s) CF	Purchase Only
L3975	SEWHFO cap design w/o jnt CF	Purchase Only
L3976	SEWHFO airplane w/o jnts CF	Purchase Only
L3977	SEWHFO cap desgn w/jnt(s) CF	Purchase Only
L3978	SEWHFO airplane w/jnt(s) CF	Purchase Only
L3980	Upp ext fx orthosis humeral	Purchase Only
L3982	Upper ext fx orthosis rad/ul	Purchase Only
L3984	Upper ext fx orthosis wrist	Purchase Only
L3995	Sock fracture or equal each	Purchase Only
L3999	Upper limb orthotic, not otherwise specified	Purchase Only
L4000	Repl girdle milwaukee orth	Purchase Only
L4002	Replace strap, any orthosis	Purchase Only
L4010	Replace trilateral socket br	Purchase Only
L4020	Replace quadlat socket brim	Purchase Only
L4030	Replace socket brim cust fit	Purchase Only
L4040	Replace molded thigh lacer	Purchase Only
L4045	Replace non-molded thigh lac	Purchase Only
L4050	Replace molded calf lacer	Purchase Only
L4055	Replace non-molded calf lace	Purchase Only
L4060	Replace high roll cuff	Purchase Only
L4070	Replace prox & dist upright	Purchase Only
L4080	Repl met band kafo-afo prox	Purchase Only
L4090	Repl met band kafo-afo calf/	Purchase Only
L4100	Repl leath cuff kafo prox th	Purchase Only
L4110	Repl leath cuff kafo-afo cal	Purchase Only
L4130	Replace pretibial shell	Purchase Only
L4205	Repair of orthotic device, labor component, per 15 minutes	Purchase Only
L4210	Repair of orthotic device, repair or replace minor parts	Purchase Only
L4350	Ankle control orthosi prefab	Purchase Only
L4360	Pneumati walking boot prefab	Purchase Only
L4361	prefabricated, off-the-shelf	Purchase Only
L4370	Pneumatic full leg splint	Purchase Only
L4386	Non-pneum walk boot prefab	Purchase Only
L4387	off-the-shelf	Purchase Only
L4392	Replace AFO soft interface	Purchase Only
L4394	Replace foot drop spint	Purchase Only
L4396	Static AFO	Purchase Only
L4397	positioning, may be used for minimal ambulation, prefabricated, off-the-shelf	Purchase Only
L4398	Foot drop splint recumbent	Purchase Only
L4631	Afo, walk boot type, cus fab	Purchase Only
L5000	Sho insert w arch toe filler	Purchase Only
L5010	Mold socket ank hgt w/ toe f	Purchase Only
L5020	Tibial tubercle hgt w/ toe f	Purchase Only
L5050	Ank symes mold sckt sach ft	Purchase Only
L5060	Symes met fr leath socket ar	Purchase Only
L5100	Molded socket shin sach foot	Purchase Only
L5105	Plast socket jts/thgh lacer	Purchase Only
L5150	Mold sckt ext knee shin sach	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L5160	Mold socket bent knee shin s	Purchase Only
L5200	Kne sing axis fric shin sach	Purchase Only
L5210	No knee/ankle joints w/ ft b	Purchase Only
L5220	No knee joint with artic ali	Purchase Only
L5230	Fem focal defic constant fri	Purchase Only
L5250	Hip canad sing axi cons fric	Purchase Only
L5270	Tilt table locking hip sing	Purchase Only
L5280	Hemipelvect canad sing axis	Purchase Only
L5301	BK mold socket SACH ft endo	Purchase Only
L5312	Knee disart, SACH ft, endo	Purchase Only
L5321	AK open end SACH	Purchase Only
L5331	Hip disart canadian SACH ft	Purchase Only
L5341	Hemipelvectomy canadian SACH	Purchase Only
L5400	Postop dress & 1 cast chg bk	Purchase Only
L5410	Postop dsg bk ea add cast ch	Purchase Only
L5420	Postop dsg & 1 cast chg ak/d	Purchase Only
L5430	Postop dsg ak ea add cast ch	Purchase Only
L5450	Postop app non-wgt bear dsg	Purchase Only
L5460	Postop app non-wgt bear dsg	Purchase Only
L5500	Init bk ptb plaster direct	Purchase Only
L5505	Init ak ischal plstr direct	Purchase Only
L5510	Prep BK ptb plaster molded	Purchase Only
L5520	Perp BK ptb thermopls direct	Purchase Only
L5530	Prep BK ptb thermopls molded	Purchase Only
L5535	Prep BK ptb open end socket	Purchase Only
L5540	Prep BK ptb laminated socket	Purchase Only
L5560	Prep AK ischial plast molded	Purchase Only
L5570	Prep AK ischial direct form	Purchase Only
L5580	Prep AK ischial thermo mold	Purchase Only
L5585	Prep AK ischial open end	Purchase Only
L5590	Prep AK ischial laminated	Purchase Only
L5595	Hip disartic sach thermopls	Purchase Only
L5600	Hip disart sach laminat mold	Purchase Only
L5610	Above knee hydracadence	Purchase Only
L5611	Ak 4 bar link w/fric swing	Purchase Only
L5613	Ak 4 bar ling w/hydraul swig	Purchase Only
L5614	4-bar link above knee w/swng	Purchase Only
L5616	Ak univ multiplex sys frict	Purchase Only
L5617	AK/BK self-aligning unit ea	Purchase Only
L5618	Test socket symes	Purchase Only
L5620	Test socket below knee	Purchase Only
L5622	Test socket knee disarticula	Purchase Only
L5624	Test socket above knee	Purchase Only
L5626	Test socket hip disarticulat	Purchase Only
L5628	Test socket hemipelvectomy	Purchase Only
L5629	Below knee acrylic socket	Purchase Only
L5630	Syme typ expandabl wall sckt	Purchase Only
L5631	Ak/knee disartic acrylic soc	Purchase Only
L5632	Symes type ptb brim design s	Purchase Only
L5634	Symes type poster opening so	Purchase Only
L5636	Symes type medial opening so	Purchase Only
L5637	Below knee total contact	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L5638	Below knee leather socket	Purchase Only
L5639	Below knee wood socket	Purchase Only
L5640	Knee disarticulat leather so	Purchase Only
L5642	Above knee leather socket	Purchase Only
L5643	Hip flex inner socket ext fr	Purchase Only
L5644	Above knee wood socket	Purchase Only
L5645	Bk flex inner socket ext fra	Purchase Only
L5646	Below knee cushion socket	Purchase Only
L5647	Below knee suction socket	Purchase Only
L5648	Above knee cushion socket	Purchase Only
L5649	Isch containmt/narrow m-l so	Purchase Only
L5650	Tot contact ak/knee disart s	Purchase Only
L5651	Ak flex inner socket ext fra	Purchase Only
L5652	Suction susp ak/knee disart	Purchase Only
L5653	Knee disart expand wall sock	Purchase Only
L5654	Socket insert symes	Purchase Only
L5655	Socket insert below knee	Purchase Only
L5656	Socket insert knee articulat	Purchase Only
L5658	Socket insert above knee	Purchase Only
L5661	Multi-durometer symes	Purchase Only
L5665	Multi-durometer below knee	Purchase Only
L5666	Below knee cuff suspension	Purchase Only
L5668	Socket insert w/o lock lower	Purchase Only
L5670	Bk molded supracondylar susp	Purchase Only
L5671	BK/AK locking mechanism	Purchase Only
L5672	Bk removable medial brim sus	Purchase Only
L5673	Socket insert w lock mech	Purchase Only
L5676	Bk knee joints single axis p	Purchase Only
L5677	Bk knee joints polycentric p	Purchase Only
L5678	Bk joint covers pair	Purchase Only
L5679	Socket insert w/o lock mech	Purchase Only
L5680	Bk thigh lacer non-molded	Purchase Only
L5681	Intl custm cong/latyp insert	Purchase Only
L5682	Bk thigh lacer glut/ischia m	Purchase Only
L5683	Initial custom socket insert	Purchase Only
L5684	Bk fork strap	Purchase Only
L5685	Below knee sus/seal sleeve	Purchase Only
L5686	Bk back check	Purchase Only
L5688	Bk waist belt webbing	Purchase Only
L5690	Bk waist belt padded and lin	Purchase Only
L5692	Ak pelvic control belt light	Purchase Only
L5694	Ak pelvic control belt pad/l	Purchase Only
L5695	Ak sleeve susp neoprene/equa	Purchase Only
L5696	Ak/knee disartic pelvic join	Purchase Only
L5697	Ak/knee disartic pelvic band	Purchase Only
L5698	Ak/knee disartic silesian ba	Purchase Only
L5699	Shoulder harness	Purchase Only
L5700	Replace socket below knee	Purchase Only
L5701	Replace socket above knee	Purchase Only
L5702	Replace socket hip	Purchase Only
L5703	Symes ankle w/o (SACH) foot	Purchase Only
L5704	Custom shape cover BK	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L5705	Custom shape cover AK	Purchase Only
L5706	Custom shape cvr knee disart	Purchase Only
L5707	Custom shape cvr hip disart	Purchase Only
L5710	Knee-shin exo sng axi mnl loc	Purchase Only
L5711	Knee-shin exo mnl lock ultra	Purchase Only
L5712	Knee-shin exo frict swg & st	Purchase Only
L5714	Knee-shin exo variable frict	Purchase Only
L5716	Knee-shin exo mech stance ph	Purchase Only
L5718	Knee-shin exo frct swg & sta	Purchase Only
L5722	Knee-shin pneum swg frct exo	Purchase Only
L5724	Knee-shin exo fluid swing ph	Purchase Only
L5726	Knee-shin ext jnts fld swg e	Purchase Only
L5728	Knee-shin fluid swg & stance	Purchase Only
L5780	Knee-shin pneum/hydra pneum	Purchase Only
L5781	Lower limb pros vacuum pump	Purchase Only
L5782	HD low limb pros vacuum pump	Purchase Only
L5785	Exoskeletal bk ultralt mater	Purchase Only
L5790	Exoskeletal ak ultra-light m	Purchase Only
L5795	Exoskel hip ultra-light mate	Purchase Only
L5810	Endoskel knee-shin mnl lock	Purchase Only
L5811	Endo knee-shin mnl lck ultra	Purchase Only
L5812	Endo knee-shin frct swg & st	Purchase Only
L5814	Endo knee-shin hydral swg ph	Purchase Only
L5816	Endo knee-shin polyc mch sta	Purchase Only
L5818	Endo knee-shin frct swg & st	Purchase Only
L5822	Endo knee-shin pneum swg frc	Purchase Only
L5824	Endo knee-shin fluid swing p	Purchase Only
L5826	Miniature knee joint	Purchase Only
L5828	Endo knee-shin fluid swg/sta	Purchase Only
L5830	Endo knee-shin pneum/swg pha	Purchase Only
L5840	Multi-axial knee/shin system	Purchase Only
L5845	Knee-shin sys stance flexion	Purchase Only
L5848	Knee-shin sys hydraul stance	Purchase Only
L5850	Endo ak/hip knee extens assi	Purchase Only
L5855	Mech hip extension assist	Purchase Only
L5856	Elec knee-shin swing/stance	Purchase Only
L5857	Elec knee-shin swing only	Purchase Only
L5858	Stance phase only	Purchase Only
L5859	Knee-shin pro flex/ext cont	Purchase Only
L5910	Endo below knee alignable sy	Purchase Only
L5920	Endo ak/hip alignable system	Purchase Only
L5925	Above knee manual lock	Purchase Only
L5930	High activity knee frame	Purchase Only
L5940	Endo bk ultra-light material	Purchase Only
L5950	Endo ak ultra-light material	Purchase Only
L5960	Endo hip ultra-light materia	Purchase Only
L5961	Endo poly hip, pneu/hyd/rot	Purchase Only
L5962	Below knee flex cover system	Purchase Only
L5964	Above knee flex cover system	Purchase Only
L5966	Hip flexible cover system	Purchase Only
L5968	Multiaxial ankle w dorsiflex	Purchase Only
L5969	Addition, endoskeletal ankle-foot or ankle system, power assist, includes any type motor(s)	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L5970	Foot external keel sach foot	Purchase Only
L5971	SACH foot, replacement	Purchase Only
L5972	Flexible keel foot	Purchase Only
L5973	Ank-foot sys dors-plant flex	Purchase Only
L5974	Foot single axis ankle/foot	Purchase Only
L5975	Combo ankle/foot prosthesis	Purchase Only
L5976	Energy storing foot	Purchase Only
L5978	Ft prosth multiaxial ankl/ft	Purchase Only
L5979	Multi-axial ankle/ft prosth	Purchase Only
L5980	Flex foot system	Purchase Only
L5981	Flex-walk sys low ext prosth	Purchase Only
L5982	Exoskeletal axial rotation u	Purchase Only
L5984	Endoskeletal axial rotation	Purchase Only
L5985	Lwr ext dynamic prosth pylon	Purchase Only
L5986	Multi-axial rotation unit	Purchase Only
L5987	Shank ft w vert load pylon	Purchase Only
L5988	Vertical shock reducing pylo	Purchase Only
L5990	User adjustable heel height	Purchase Only
L5999	Lower extremity prosthesis, not otherwise specified	Purchase Only
L6000	Part hand thumb rem	Purchase Only
L6010	Part hand little/ring	Purchase Only
L6020	Part hand no fingers	Purchase Only
L6025	Part hand disart myoelectric	Purchase Only
L6050	Wrst MLd sock flx hng tri pad	Purchase Only
L6055	Wrst mold sock w/exp interfa	Purchase Only
L6100	Elb mold sock flex hinge pad	Purchase Only
L6110	Elbow mold sock suspension t	Purchase Only
L6120	Elbow mold doub splt soc ste	Purchase Only
L6130	Elbow stump activated lock h	Purchase Only
L6200	Elbow mold outsid lock hinge	Purchase Only
L6205	Elbow molded w/ expand inter	Purchase Only
L6250	Elbow inter loc elbow forarm	Purchase Only
L6300	Shlder disart int lock elbow	Purchase Only
L6310	Shoulder passive restor comp	Purchase Only
L6320	Shoulder passive restor cap	Purchase Only
L6350	Thoracic intern lock elbow	Purchase Only
L6360	Thoracic passive restor comp	Purchase Only
L6370	Thoracic passive restor cap	Purchase Only
L6380	Postop dsg cast chg wrst/elb	Purchase Only
L6382	Postop dsg cast chg elb dis/	Purchase Only
L6384	Postop dsg cast chg shlder/t	Purchase Only
L6386	Postop ea cast chg & realign	Purchase Only
L6388	Postop applicat rigid dsg on	Purchase Only
L6400	Below elbow prosth tiss shap	Purchase Only
L6450	Elb disart prosth tiss shap	Purchase Only
L6500	Above elbow prosth tiss shap	Purchase Only
L6550	Shldr disar prosth tiss shap	Purchase Only
L6570	Scap thorac prosth tiss shap	Purchase Only
L6580	Wrist/elbow bowden cable mol	Purchase Only
L6582	Wrist/elbow bowden cbl dir f	Purchase Only
L6584	Elbow fair lead cable molded	Purchase Only
L6586	Elbow fair lead cable dir fo	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L6588	Shdr fair lead cable molded	Purchase Only
L6590	Shdr fair lead cable direct	Purchase Only
L6600	Polycentric hinge pair	Purchase Only
L6605	Single pivot hinge pair	Purchase Only
L6610	Flexible metal hinge pair	Purchase Only
L6611	Additional switch, ext power	Purchase Only
L6615	Disconnect locking wrist uni	Purchase Only
L6616	Disconnect insert locking wr	Purchase Only
L6620	Flexion/extension wrist unit	Purchase Only
L6621	Flex/ext wrist w/wo friction	Purchase Only
L6623	Spring-ass rot wrst w/ latch	Purchase Only
L6624	Flex/ext/rotation wrist unit	Purchase Only
L6625	Rotation wrst w/ cable lock	Purchase Only
L6628	Quick disconn hook adapter o	Purchase Only
L6629	Lamination collar w/ couplin	Purchase Only
L6630	Stainless steel any wrist	Purchase Only
L6632	Latex suspension sleeve each	Purchase Only
L6635	Lift assist for elbow	Purchase Only
L6637	Nudge control elbow lock	Purchase Only
L6638	Elec lock on manual pw elbow	Purchase Only
L6640	Shoulder abduction joint pai	Purchase Only
L6641	Excursion amplifier pulley t	Purchase Only
L6642	Excursion amplifier lever ty	Purchase Only
L6645	Shoulder flexion-abduction j	Purchase Only
L6646	Multipo locking shoulder jnt	Purchase Only
L6647	Shoulder lock actuator	Purchase Only
L6648	Ext pwrld shlder lock/unlock	Purchase Only
L6650	Shoulder universal joint	Purchase Only
L6655	Standard control cable extra	Purchase Only
L6660	Heavy duty control cable	Purchase Only
L6665	Teflon or equal cable lining	Purchase Only
L6670	Hook to hand cable adapter	Purchase Only
L6672	Harness chest/shlder saddle	Purchase Only
L6675	Harness figure of 8 sing con	Purchase Only
L6676	Harness figure of 8 dual con	Purchase Only
L6677	UE triple control harness	Purchase Only
L6680	Test sock wrist disart/bel e	Purchase Only
L6682	Test sock elbw disart/above	Purchase Only
L6684	Test socket shldr disart/tho	Purchase Only
L6686	Suction socket	Purchase Only
L6687	Frame typ socket bel elbow/w	Purchase Only
L6688	Frame typ sock above elb/dis	Purchase Only
L6689	Frame typ socket shoulder di	Purchase Only
L6690	Frame typ sock interscap-tho	Purchase Only
L6691	Removable insert each	Purchase Only
L6692	Silicone gel insert or equal	Purchase Only
L6693	Lockingelbow forearm cntrbal	Purchase Only
L6694	Elbow socket ins use w/lock	Purchase Only
L6695	Elbow socket ins use w/o lck	Purchase Only
L6696	Cus elbo skt in for con/atyp	Purchase Only
L6697	Cus elbo skt in not con/atyp	Purchase Only
L6698	Below/above elbow lock mech	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L6703	Term dev, passive hand mitt	Purchase Only
L6704	Term dev, sport/rec/work att	Purchase Only
L6706	Term dev mech hook vol open	Purchase Only
L6707	Term dev mech hook vol close	Purchase Only
L6708	Term dev mech hand vol open	Purchase Only
L6709	Term dev mech hand vol close	Purchase Only
L6711	Ped term dev, hook, vol open	Purchase Only
L6712	Ped term dev, hook, vol clos	Purchase Only
L6713	Ped term dev, hand, vol open	Purchase Only
L6714	Ped term dev, hand, vol clos	Purchase Only
L6715	Term device, multi art digit	Purchase Only
L6721	Hook/hand, hvy dty, vol open	Purchase Only
L6722	Hook/hand, hvy dty, vol clos	Purchase Only
L6805	Term dev modifier wrist unit	Purchase Only
L6810	Term dev precision pinch dev	Purchase Only
L6880	Elec hand ind art digits	Purchase Only
L6881	Term dev auto grasp feature	Purchase Only
L6882	Microprocessor control uplmb	Purchase Only
L6883	Replc sockt below e/w disa	Purchase Only
L6884	Replc sockt above elbow disa	Purchase Only
L6885	Replc sockt shldr dis/interc	Purchase Only
L6890	Prefab glove for term device	Purchase Only
L6895	Custom glove for term device	Purchase Only
L6900	Hand restorat thumb/1 finger	Purchase Only
L6905	Hand restoration multiple fi	Purchase Only
L6910	Hand restoration no fingers	Purchase Only
L6915	Hand restoration replacmnt g	Purchase Only
L6920	Wrist disarticul switch ctrl	Purchase Only
L6925	Wrist disart myoelectronic c	Purchase Only
L6930	Below elbow switch control	Purchase Only
L6935	Below elbow myoelectronic ct	Purchase Only
L6940	Elbow disarticulation switch	Purchase Only
L6945	Elbow disart myoelectronic c	Purchase Only
L6950	Above elbow switch control	Purchase Only
L6955	Above elbow myoelectronic ct	Purchase Only
L6960	Shldr disartic switch contro	Purchase Only
L6965	Shldr disartic myoelectronic	Purchase Only
L6970	Interscapular-thor switch ct	Purchase Only
L6975	Interscap-thor myoelectronic	Purchase Only
L7007	Adult electric hand	Purchase Only
L7008	Pediatric electric hand	Purchase Only
L7009	Adult electric hook	Purchase Only
L7040	Prehensile actuator	Purchase Only
L7045	Pediatric electric hook	Purchase Only
L7170	Electronic elbow hosmer swit	Purchase Only
L7180	Electronic elbow sequential	Purchase Only
L7181	Electronic elbo simultaneous	Purchase Only
L7185	Electron elbow adolescent sw	Purchase Only
L7186	Electron elbow child switch	Purchase Only
L7190	Elbow adolescent myoelectron	Purchase Only
L7191	Elbow child myoelectronic ct	Purchase Only
L7260	Electron wrist rotator otto	Purchase Only

**Avera Health Plans
2018 Durable Medical Equipment-Payment Classification**

Code	Description	Reimbursement Designation
L7261	Electron wrist rotator utah	Purchase Only
L7360	Six volt bat otto bock/eq ea	Purchase Only
L7362	Battery chrgr six volt otto	Purchase Only
L7364	Twelve volt battery utah/equ	Purchase Only
L7366	Battery chrgr 12 volt utah/e	Purchase Only
L7367	Replacemnt lithium ionbatter	Purchase Only
L7368	Lithium ion battery charger	Purchase Only
L7400	Add UE prost be/wd, ullite	Purchase Only
L7401	Add UE prost a/e ullite mat	Purchase Only
L7402	Add UE prost s/d ullite mat	Purchase Only
L7403	Add UE prost b/e acrylic	Purchase Only
L7404	Add UE prost a/e acrylic	Purchase Only
L7405	Add UE prost s/d acrylic	Purchase Only
L7499	Upper extremity prosthesis, not otherwise specified	Purchase Only
L7510	Repair of prosthetic device, repair or replace minor parts	Purchase Only
L7520	Repair prosthetic device, labor component, per 15 minutes	Purchase Only
L7600	Prosthetic donning sleeve, any material, each	Purchase Only
L7700	Gasket or Seal for use with Prosthetic Socket Insert	Purchase Only
L7900	Male vacuum erection system	Purchase Only
L7902	Tension ring, vac erect dev	Purchase Only
L8000	Mastectomy bra	Purchase Only
L8001	Breast prosthesis bra & form	Purchase Only
L8002	Brst prsth bra & bilat form	Purchase Only
L8010	Breast prosthesis, mastectomy sleeve	Purchase Only
L8015	Ext breastprosthesis garment	Purchase Only
L8020	Mastectomy form	Purchase Only
L8030	Breast prothes w/o adhesive	Purchase Only
L8031	Breast prosthesis w adhesive	Purchase Only
L8032	Reusable nipple prosthesis	Purchase Only
L8035	Custom breast prosthesis	Purchase Only
L8039	Breast prosthesis, not otherwise specified	Purchase Only
L8040	Nasal prosthesis	Purchase Only
L8041	Midfacial prosthesis	Purchase Only
L8042	Orbital prosthesis	Purchase Only
L8043	Upper facial prosthesis	Purchase Only
L8044	Hemi-facial prosthesis	Purchase Only
L8045	Auricular prosthesis	Purchase Only
L8046	Partial facial prosthesis	Purchase Only
L8047	Nasal septal prosthesis	Purchase Only
L8048	Unspecified maxillofacial prosthesis, by report, provided by a nonphysician	Purchase Only
L8049	by a nonphysician	Purchase Only
L8300	Truss single w/ standard pad	Purchase Only
L8310	Truss double w/ standard pad	Purchase Only
L8320	Truss addition to std pad wa	Purchase Only
L8330	Truss add to std pad scrotal	Purchase Only
L8400	Sheath below knee	Purchase Only
L8410	Sheath above knee	Purchase Only
L8415	Sheath upper limb	Purchase Only
L8417	Pros sheath/sock w gel cushn	Purchase Only
L8420	Prosthetic sock multi ply BK	Purchase Only
L8430	Prosthetic sock multi ply AK	Purchase Only
L8435	Pros sock multi ply upper lm	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L8440	Shrinker below knee	Purchase Only
L8460	Shrinker above knee	Purchase Only
L8465	Shrinker upper limb	Purchase Only
L8470	Pros sock single ply BK	Purchase Only
L8480	Pros sock single ply AK	Purchase Only
L8485	Pros sock single ply upper l	Purchase Only
L8499	Unlisted procedure for miscellaneous prosthetic services	Purchase Only
L8500	Artificial larynx	Purchase Only
L8501	Tracheostomy speaking valve	Purchase Only
L8505	Artificial larynx replacement battery/accessory, any type	Purchase Only
L8507	Trach-esoph voice pros pt in	Purchase Only
L8509	Trach-esoph voice pros md in	Purchase Only
L8510	Voice amplifier	Purchase Only
L8511	Indwelling trach insert	Purchase Only
L8512	Gel cap for trach voice pros	Purchase Only
L8513	Trach pros cleaning device	Purchase Only
L8514	Repl trach puncture dilator	Purchase Only
L8515	Gel cap app device for trach	Purchase Only
L8600	Implant breast silicone/eq	Purchase Only
L8603	Collagen imp urinary 2.5 ml	Purchase Only
L8604	includes shipping and necessary supplies	Not Covered or Bundled Item
L8605	Inj bulking agent anal canal	Purchase Only
L8606	Synthetic implnt urinary 1ml	Purchase Only
L8609	Artificial cornea	Purchase Only
L8610	Ocular implant	Purchase Only
L8612	Aqueous shunt prosthesis	Purchase Only
L8613	Ossicular implant	Purchase Only
L8614	Cochlear device	Purchase Only
L8615	Coch implant headset replace	Purchase Only
L8616	Coch implant microphone repl	Purchase Only
L8617	Coch implant trans coil repl	Purchase Only
L8618	Coch implant tran cable repl	Purchase Only
L8619	Coch imp ext proc/contr rplc	Purchase Only
L8621	Repl zinc air battery	Purchase Only
L8622	Repl alkaline battery	Purchase Only
L8623	Lith ion batt CID,non-earlvl	Purchase Only
L8624	Lith ion batt CID, ear level	Purchase Only
L8625	External Recharging System for Battery Use with Cochlear Implant or Auditory Device	Purchase Only
L8627	CID ext speech process repl	Purchase Only
L8628	CID ext controller repl	Purchase Only
L8629	CID transmit coil and cable	Purchase Only
L8630	Metacarpophalangeal implant	Purchase Only
L8631	MCP joint repl 2 pc or more	Purchase Only
L8641	Metatarsal joint implant	Purchase Only
L8642	Hallux implant	Purchase Only
L8658	Interphalangeal joint spacer	Purchase Only
L8659	Interphalangeal joint repl	Purchase Only
L8670	Vascular graft, synthetic	Purchase Only
L8679	Implantable neurostimulator, pulse generator, any type	Purchase Only
L8680	Implantable neurostimulator electrode, each	Purchase Only
L8681	Pt prgrm for implt neurostim	Purchase Only
L8682	Implantable neurostimulator radiofrequency receiver	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
L8683	receiver	Purchase Only
L8684	for bowel and bladder management, replacement	Purchase Only
L8685	Implantable neurostimulator pulse generator, single array, rechargeable, includes extension	Purchase Only
L8686	Implantable neurostimulator pulse generator, single array, nonrechargeable, includes extension	Purchase Only
L8687	Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension	Purchase Only
L8688	Implantable neurostimulator pulse generator, dual array, nonrechargeable, includes extension	Purchase Only
L8689	External recharg sys intern	Purchase Only
L8690	Aud osseo dev, int/ext comp	Purchase Only
L8691	Osseointegrated snd proc rpl	Purchase Only
L8692	worn, includes headband or other means of external attachment	Purchase Only
L8693	Aud osseo dev, abutment	Purchase Only
L8694	Auditory osseointegrated device, Transducer/Actuator, Replacement Only	Purchase Only
L8695	External recharg sys extern	Purchase Only
L8699	Prosthetic implant, not otherwise specified	Purchase Only
L9900	Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS L code	Purchase Only
Q0478	Power adapter, combo vad	Purchase Only
Q0479	Power module combo vad, rep	Purchase Only
Q0480	Driver pneumatic vad, rep	Not Covered or Bundled Item
Q0481	Microprcsr cu elec vad, rep	Not Covered or Bundled Item
Q0482	Microprcsr cu combo vad, rep	Not Covered or Bundled Item
Q0483	Monitor elec vad, rep	Not Covered or Bundled Item
Q0484	Monitor elec or comb vad rep	Not Covered or Bundled Item
Q0485	Monitor cable elec vad, rep	Purchase Only
Q0486	Mon cable elec/pneum vad rep	Purchase Only
Q0487	Leads any type vad, rep only	Purchase Only
Q0489	Pwr pck base combo vad, rep	Not Covered or Bundled Item
Q0490	Emr pwr source elec vad, rep	Purchase Only
Q0491	Emr pwr source combo vad rep	Purchase Only
Q0492	Emr pwr cbl elec vad, rep	Purchase Only
Q0493	Emr pwr cbl combo vad, rep	Purchase Only
Q0494	Emr hd pmp elec/combo, rep	Purchase Only
Q0495	Charger elec/combo vad, rep	Purchase Only
Q0496	Battery elec/combo vad, rep	Purchase Only
Q0497	Bat clips elec/comb vad, rep	Purchase Only
Q0498	Holster elec/combo vad, rep	Purchase Only
Q0499	Belt/vest elec/combo vad rep	Purchase Only
Q0500	Filters elec/combo vad, rep	Purchase Only
Q0501	Shwr cov elec/combo vad, rep	Purchase Only
Q0502	Mobility cart pneum vad, rep	Purchase Only
Q0503	Battery pneum vad replacemnt	Purchase Only
Q0504	Pwr adpt pneum vad, rep veh	Purchase Only
Q0506	Lith-ion batt elec/pneum VAD	Purchase Only
V2020	NCion svcs frames purchases	Purchase Only
V2100	Lens spher single plano 4.00	Purchase Only
V2101	Single NCn sphere 4.12-7.00	Purchase Only
V2102	Singl NCn sphere 7.12-20.00	Purchase Only
V2103	Spherocylindr 4.00d/12-2.00d	Purchase Only
V2104	Spherocylindr 4.00d/2.12-4d	Purchase Only
V2105	Spherocylinder 4.00d/4.25-6d	Purchase Only
V2106	Spherocylinder 4.00d/>6.00d	Purchase Only
V2107	Spherocylinder 4.25d/12-2d	Purchase Only
V2108	Spherocylinder 4.25d/2.12-4d	Purchase Only

Avera Health Plans
2018 Durable Medical Equipment-Payment Classification

Code	Description	Reimbursement Designation
V2109	Spherocylinder 4.25d/4.25-6d	Purchase Only
V2110	Spherocylinder 4.25d/over 6d	Purchase Only
V2111	Spherocylindr 7.25d/.25-2.25	Purchase Only
V2112	Spherocylindr 7.25d/2.25-4d	Purchase Only
V2113	Spherocylindr 7.25d/4.25-6d	Purchase Only
V2114	Spherocylinder over 12.00d	Purchase Only
V2115	Lens lenticular bifocal	Purchase Only
V2118	Lens aniseikonic single	Purchase Only
V2121	Lenticular lens, single	Purchase Only
V2200	Lens spher bifoc plano 4.00d	Purchase Only
V2201	Lens sphere bifocal 4.12-7.0	Purchase Only
V2202	Lens sphere bifocal 7.12-20.	Purchase Only
V2203	Lens sphcyl bifocal 4.00d/.1	Purchase Only
V2204	Lens sphcy bifocal 4.00d/2.1	Purchase Only
V2205	Lens sphcy bifocal 4.00d/4.2	Purchase Only
V2206	Lens sphcy bifocal 4.00d/ove	Purchase Only
V2207	Lens sphcy bifocal 4.25-7d/.	Purchase Only
V2208	Lens sphcy bifocal 4.25-7/2.	Purchase Only
V2209	Lens sphcy bifocal 4.25-7/4.	Purchase Only
V2210	Lens sphcy bifocal 4.25-7/ov	Purchase Only
V2211	Lens sphcy bifo 7.25-12/.25-	Purchase Only
V2212	Lens sphcyl bifo 7.25-12/2.2	Purchase Only
V2213	Lens sphcyl bifo 7.25-12/4.2	Purchase Only
V2214	Lens sphcyl bifocal over 12.	Purchase Only
V2215	Lens lenticular bifocal	Purchase Only
V2218	Lens aniseikonic bifocal	Purchase Only
V2219	Lens bifocal seg width over	Purchase Only
V2220	Lens bifocal add over 3.25d	Purchase Only
V2221	Lenticular lens, bifocal	Purchase Only
V2300	Lens sphere trifocal 4.00d	Purchase Only
V2301	Lens sphere trifocal 4.12-7.	Purchase Only
V2302	Lens sphere trifocal 7.12-20	Purchase Only
V2303	Lens sphcy trifocal 4.0/.12-	Purchase Only
V2304	Lens sphcy trifocal 4.0/2.25	Purchase Only
V2305	Lens sphcy trifocal 4.0/4.25	Purchase Only
V2306	Lens sphcyl trifocal 4.00/>6	Purchase Only
V2307	Lens sphcy trifocal 4.25-7/.	Purchase Only
V2308	Lens sphc trifocal 4.25-7/2.	Purchase Only
V2309	Lens sphc trifocal 4.25-7/4.	Purchase Only
V2310	Lens sphc trifocal 4.25-7/>6	Purchase Only
V2311	Lens sphc trifo 7.25-12/.25-	Purchase Only
V2312	Lens sphc trifo 7.25-12/2.25	Purchase Only
V2313	Lens sphc trifo 7.25-12/4.25	Purchase Only
V2314	Lens sphcyl trifocal over 12	Purchase Only
V2315	Lens lenticular trifocal	Purchase Only
V2318	Lens aniseikonic trifocal	Purchase Only
V2319	Lens trifocal seg width > 28	Purchase Only
V2320	Lens trifocal add over 3.25d	Purchase Only
V2321	Lenticular lens, trifocal	Purchase Only
V2410	Lens variab asphericity sing	Purchase Only
V2430	Lens variable asphericity bi	Purchase Only
V2500	Contact lens pmma spherical	Not Covered or Bundled Item

**Avera Health Plans
2018 Durable Medical Equipment-Payment Classification**

Code	Description	Reimbursement Designation
V2501	Cntct lens pmma-toric/prism	Not Covered or Bundled Item
V2502	Contact lens pmma bifocal	Not Covered or Bundled Item
V2503	Cntct lens pmma color NCion	Not Covered or Bundled Item
V2510	Cntct gas permeable sphericl	Not Covered or Bundled Item
V2511	Cntct toric prism ballast	Not Covered or Bundled Item
V2512	Cntct lens gas permbl bifocl	Not Covered or Bundled Item
V2513	Contact lens extended wear	Not Covered or Bundled Item
V2520	Contact lens hydrophilic	Not Covered or Bundled Item
V2521	Cntct lens hydrophilic toric	Not Covered or Bundled Item
V2522	Cntct lens hydrophil bifocl	Not Covered or Bundled Item
V2523	Cntct lens hydrophil extend	Not Covered or Bundled Item
V2530	Contact lens gas impermeable	Not Covered or Bundled Item
V2531	Contact lens gas permeable	Not Covered or Bundled Item
V2623	Plastic eye prosth custom	Purchase Only
V2624	Polishing artifical eye	Purchase Only
V2625	Enlargemnt of eye prosthesis	Purchase Only
V2626	Reduction of eye prosthesis	Purchase Only
V2627	Scleral cover shell	Purchase Only
V2628	Fabrication & fitting	Purchase Only
V2700	Balance lens	Purchase Only
V2710	Glass/plastic slab off prism	Purchase Only
V2715	Prism lens/es	Purchase Only
V2718	Fresnell prism press-on lens	Purchase Only
V2730	Special base curve	Purchase Only
V2744	Tint photochromatic lens/es	Not Covered or Bundled Item
V2745	Tint, any color/solid/grad	Not Covered or Bundled Item
V2750	Anti-reflective coating	Purchase Only
V2755	UV lens/es	Purchase Only
V2760	Scratch resistant coating	Purchase Only
V2762	Polarization, any lens	Purchase Only
V2770	Occluder lens/es	Purchase Only
V2780	Oversize lens/es	Purchase Only
V2782	Lens, 1.54-1.65 p/1.60-1.79g	Purchase Only
V2783	Lens, >= 1.66 p/>=1.80 g	Purchase Only
V2784	Lens polycarb or equal	Purchase Only
V2786	Occupational multifocal lens	Purchase Only
S8120	Oxygen contents, gaseous, 1 unit equals 1 cu foot	Not Eligible for Sep Reimbursement
S8121	Oxygen contents, liquid, 1 unit equals 1poung	Not Eligible for Sep Reimbursement

NTS-DOC-067 (05/18)