

WellSense MA Prior Authorization HCPCS Code Look-up Tool

The Plan requires prior authorization for **ALL** inpatient services.

ALL services rendered by out of network providers require prior authorization with limited exceptions. See *Out-of-Network medical policy and member benefit documents*.

For Pharmacy authorization inquiries please see the [Pharmacy section on WellSense.org](#)

Vendor detail and authorization information is found on the **Prior Authorization/Notification Requirements Matrix** for the following vendor managed services:

- * Behavioral Health
- * Durable Medical Equipment (DME)
- * Transportation Services
- * High End Radiology
- * Genetic Testing
- * Musculoskeletal Services

Please refer to the [Provider Manual Section 8: Utilization Management and Prior Authorization](#) for information regarding authorizations.

This is not a comprehensive list of every code available. Industry code updates occur quarterly and may be implemented at different intervals than the updates to this code tool. This code tool is only provided as a guide for authorization status and addition or omission of a code does not guarantee payment:

1. This tool cannot confirm member eligibility.
2. This tool cannot confirm member benefits/coverage. Please refer to the Member's Benefit Documents.
3. This tool cannot confirm payment rules, edits, fee schedules and restrictions that may affect code/claim payment even if authorization is obtained. The Plan applies standard industry billing and coding rules to claims. Please refer to the [Plan Payment Policies](#).
4. This code tool cannot confirm provider contract terms. For questions, please reach out to your provider representative.

Prior authorization or Plan notification is required for services listed in the Prior Authorization/Notification Requirements Matrix, even if a specific code is not listed in the code look-up tool, due to quarterly industry and miscellaneous code updates.

Please contact the WellSense Prior Authorization Team at 888-566-0008 and Press 3 for questions related to authorization requirements for codes that may or may not be listed in this tool.

TO FIND A CODE OR WORD - While holding down the CTRL key, press the F key, type in code, then press ENTER key

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A0021	Ambulance serv,outside state per mile,transport	MH Yes	Clarity No	SCO No	For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0100	Nonemergency transportation;taxi	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0110	Nonemerg trans/bus,intra/interstate carrier	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0120	Nonemergency transportation;mini-bus,intra/interstate carrier	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0130	Nonemergency transportation;wheelchair van	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0140	Nonemergency trans/air travel,intra/interstate	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation
A0160	Nonemergency transportation;per mile-case/social worker	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A0170	Transportation ancillary;parking fees,tolls, other	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Non-Emergency Transportation Services PolicyTech					
A0180	Nonemergency transportation:ancillary:lodging-recipient	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0190	Nonemergency transportation:ancillary:meals,recipient	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0200	Nonemergency transportation:ancillary:lodging,escort	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0210	Nonemergency transportation:ancillary:meals,escort	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0380	BLS mileage(per mile)	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0382	BLS routine disposable supplies	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0384	BLS spec service disposable supplies:defibrillation	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					
A0420	Ambulance waiting time(ALS/BLS),half hr increments	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
Policy: Vendor Managed Transportation					

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A0422 NEW	Ambulance(ALS/BLS) O2/O2 supplies,life sustain situation	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation
A0425 NEW	Extra ambulance/air attendant,ground(ALS/BLS)	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation
A0426 NEW	Ambulance service, ALS,nonemergent,level 1	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0428 NEW	Ambulance service,BLS,nonemergent	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0433 NEW	Advanced life support,level 2	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0434 NEW	Specialty care transport	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Non-Emergency Transportation Services PolicyTech
A0435 NEW	Fixed wing air mileage,per statute mile	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation
A0436 NEW	Rotary wing air mileage,per statute mile	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix. Policy: Vendor Managed Transportation

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A0998	Ambulance response/treatment,no transport	MH Yes	Clarity No	SCO No	Please review the WellSense policy for authorization/criteria details
					Policy: Non-Emergency Transportation Services PolicyTech
A0999	Unlisted ambulance service	MH Yes	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
					Policy: Non-Emergency Transportation Services PolicyTech
A2001	InnovaMatrix,per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2002	Mirragen, per Sq Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2004	Xcellistem,per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2005	Microlyte matrix,per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2006	Novosorb, per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A2007 NEW	Restrata, per SQ cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2008 NEW	Theragenesis, per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2009 NEW	Symphony,per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2010 NEW	Apis, per SQ Cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2011 NEW	Supra sdrm, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2012 NEW	Suprathel, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2013 NEW	Innovamatrix fs, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A2014 NEW	Omeza Collagen Matrix, per 100mg	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2015 NEW	Phoenix Wound Matrix,per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2016 NEW	PermeaDerm B,per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2017 NEW	PermeaDerm Glove,each	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2018 NEW	PermeaDerm C,per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2019 NEW	Kerecis marigen shld sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2020 NEW	Ac5 wound system	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A2021 NEW	Neomatrix per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2022 NEW	Innovaburn/Innovomatrix xl,per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2023 NEW	Innovomatrix pd,1 mg	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2024 NEW	Resolve matrix,per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2025 NEW	Miro3d, per cubic cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2026 NEW	Restrata minimatrix, 5mg	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2027 NEW	Matriderm,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A2028 NEW	Micromatrix flex, per mg	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A2029 NEW	Mirotract wound matrix sheet, per cubic cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A4100 NEW	Skin sub FDA cleared as device, NOS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
A4206 NEW	Syringe w/ needle,sterile,1cc/less,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4207 NEW	Syringe w/ needle,sterile,2cc,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4208 NEW	Syringe w/ needle,sterile,3cc each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4209 NEW	Syringe w/ needle,sterile,5cc/more,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4210 NEW	Needle-free injection device,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4211 NEW	Supplies for self-admin injections	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4212 NEW	Noncoring needle/stylet w/ or w/out catheter	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4213 NEW	Syringe,sterile,20cc/more,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4215 NEW	Needle,sterile,any size,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4216 NEW	Sterile water,saline/dextrose,diluent/flush,10ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4217 NEW	Sterile water/saline, 500ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4218 NEW	Sterile saline/water, metered dose dispenser, 10ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4220 NEW	Refill kit for implantable infusion pump	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4221 NEW	Supplies maint noninsulin drug inf cath, per week	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4222 NEW	Infusion supplies ext drug inf pump, per cassette/bag	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4223 NEW	Infusion supplies not used w/ext inf pump, per cassette/bag	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4224 NEW	Supplies for maint of insulin inf pump, per week	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4225 NEW	Supplies for ext insulin inf pump, syringe type cartridge, sterile, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4226 NEW	Supplies for maint insulin inf pump w/dose rate adj using ther CG sensing,per wk	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4230 NEW	Infusion set for ext insulin pump,non-needle cannula type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4231 NEW	Infusion set for ext insulin inf pump,needle type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4232 NEW	Syringe w/needle for ext insulin pump,sterile,3cc	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4233 NEW	Repl battery,alkaline,for MN home bld glucose mon owned by pt,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4234 NEW	Repl battery,alkaline,J cell,for MN home bld glucose mon owned by pt,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4235 NEW	Repl battery,lithium,for MN home home bld glucose mon owned by pt, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4236 NEW	Repl battery,silve oxide,for MN home bld glucose mon owned by ot,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4238 NEW	Supply allow for adjunct,nonimp CGM,all supplies/acces,1mo	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4239 NEW	Supply allow for non-adjunct,nonimp CGM,all supplies/acces,1mo	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4244 NEW	Alcohol orperoxide,per pint	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4245 NEW	Alcohol wipes,per box	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4246 NEW	Betadine or pHisoHex sol,per pint	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4247 NEW	Betadine or iodine swabs/wipes,per box	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4248 NEW	Chlorohexadine containing antiseptic,1ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4250 NEW	Urine test or reagent strips/tablets(100	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4252 NEW	Blood ketone test or reagent strip.each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4253 NEW	Blood glucose test or reagent strips for home bd glucose mon, per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4255 NEW	Platforms for home bld glucose mon,per 50 box	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4256 NEW	Normal,low,and high calibrator solution/choips	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4257 NEW	Replacement lens sheild cart for use w/laser skin piercing dev	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4258 NEW	Spring-powered device for lancet,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4259 NEW	Lancets,per box of 100	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4265 NEW	Parrafin, per pound	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4271 NEW	Intgrtd lancing/bld samp cartridges,home bl glucose mon,per mo	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4280 NEW	Adhesive skin support atthcmnt use w/ext breast prthesis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4281 NEW	Tubng for breast pump,replacement	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4282 NEW	Adapter for breast pump, replacement	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4283 NEW	Cap for breast pump bottle, replacement	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4284 NEW	Breast sheild/splash protector use w/breast pump, repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4285 NEW	Polycarbonate bottle use w/breast pump, repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4286 NEW	Locking ring for breast pump, repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4287 NEW	Disp coll/storage bag for breast milk, any size, any type, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4290 NEW	Sacral nerve stim test lead, each	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Peripheral Nerve Stimulation Policy Tech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4300 NEW	Implantable access catheter,ext access	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4301 NEW	Implantable access total cath,port/resevoir	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4305 NEW	Disp drug del sys,flow rate 50ml +,per hr	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4306 NEW	Disp drug del sys,flow rate -50ml per hr	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4310 NEW	Insertion tray w/out drain bag,w/out catheter	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4311 NEW	Insertion tray w/out drain bag w/indwell cath,Foley type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4312 NEW	Insertion tray w/out drain bag w/indwell cath,Foley type,2-way	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4313 NEW	Insertion tray w/out drain bag w/indwell cath,Foley type,3-way	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4314 NEW	Insertion tray w/drain bag w/indwell cath,Foley type,2-way latex	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4315 NEW	Insetion tray w/drain bag w/indwell cath,Foley type,2-way, silicone	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4316 NEW	Insertion tray w/drain bag w/indwell cath,Foley type,3-way,cont irrigation	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4320 NEW	Irrigation tray w/bulb or piston,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4321 NEW	Therapeutic agent for urinary cath irrigation	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4322 NEW	Irrigation syringe,bulb or piston,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4326 NEW	Male ext cath w/integral collection chmbr,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4327 NEW	Female ext urine collection dev;meatal cup,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4328 NEW	Female ext urine collection dev;pouch	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4330 NEW	Peranal fecal collection pouch w/adhesive,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4331 NEW	Extension drain tube,any type/lngh, w/conn/adap,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4332 NEW	Lubricant,individual sterile pack,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4333 NEW	Urinary cath anchoring dev,adhsv skin attachment.each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4334	Urinary cath anchoring dev,leg strap,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4335	Incontinence supply;misc	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4336	Incontinence supply,urethral insert,any type, each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4337	Incontinence supply,rectal insert,any type,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4338	Indwelling cath;Foley type,2-way latex w/coating,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4340	Indwelling cath;specialty type,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A4341	INDWELL IU DRAIN DEVC VLV PT INSRT REPLC ONLY EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4342 NEW	ACC PT INS INDWELL IU DRN DEVC VLV REPLC ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4344 NEW	Indwelling cath;Foley type,2-way,all silicone,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4346 NEW	Indwelling cath;Foley type,3-way con't irrigation, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4349 NEW	Male ext cath, w or w/out adhesive,disposable, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4351 NEW	Intermittent urine cath;straight tip,w or w/out coating, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4352 NEW	Intermittent urine cath;Coude tip,w or w/out coating, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4353 NEW	Intermittent urine cath,w/ insetion supplies	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4354 NEW	Insetion tray w/drain bag but w/out catheter	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4355 NEW	Irrigation tube set for con't baldder irr,3-way indwell Foley cath,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4356 NEW	Ext urethral clamp/comp dev,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4357 NEW	Bedside drain bag,day/night,w or w/out antireflux dev/tube, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4358 NEW	Urinary drain bag,leg/abd,vinyl,w or w/out tube,w/straps,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4360 NEW	Disposable ext urethral clamp/comp dev,w/pad/pouch,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4361 NEW	Ostomy faceplate, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4362 NEW	Skin barrier;solid,4x4 or equivalent,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4363 NEW	Ostomy clamp,any type,repl only, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4364 NEW	Adhesive,liquid/equal,any type,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4366 NEW	Ostomy vent,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4367 NEW	Ostomy belt,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4368 NEW	Ostomy filter,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4369 NEW	Ostomy skin barrier,liquid,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4371 NEW	Ostomy skin barrier,powder,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4372 NEW	Ostomy skin barrier,solid 4x4/equiv,standrd wear,w/built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4373 NEW	Ostomy skin barrier,w/flange,w/built-in convexity,any size,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4375 NEW	Ostomy pouch,drainable,w/faceplate attached,plastic each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4376 NEW	Ostomy pouch,drainable,w/faceplate attached, rubber,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4377 NEW	Ostomy pouch,drainable,for use on faceplate,plastic,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4378 NEW	Ostomy pouch,drainable,for use on faceplate,rubber, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4379 NEW	Ostomy pouch,urinary,w/faceplate attached,plastic,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4380 NEW	Ostomy pouch,urinary,w/faceplate attached,rubber,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4381 NEW	Ostomy pouch,urinary,for use on faceplate,plastic,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4382 NEW	Ostomy pouch,urinary,for use on faceplate,heavy plastic,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4383 NEW	Ostomy pouch,urinary,for use on faceplate,rubber,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4384 NEW	Ostomy faceplate equivalent,silicone ring, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4385 NEW	Ostomy skin barrier,solid 4x4/equiv,ext wear,w/out built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4387 NEW	Ostomy pouch,closed,w/barrier atchd,w/built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4388 NEW	Ostomy pouch,drainable,w/ext wear barrier atchd,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4389 NEW	Ostomy pouch,drainable,w/barrier atchd,w/built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4390 NEW	Ostomy pouch,drainable,w/ext wear barrier atchd,w/built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4391 NEW	Ostomy pouch,urinary,w/ext wear barrier atchd,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4392 NEW	Ostomy pouch,urinary,w std wear barrier atchd,w/built-in convexity, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4393 NEW	Ostomy pouch,urinary,w/ext wear barrier atchd,w/built-in convexity,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4394 NEW	Ostomy deoderant,w/or w/out lubricant use in ostomy pouch,per fl oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4395 NEW	Ostomy deoderant for use in ostomy pouch,solid,per tablet	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4396 NEW	Ostomy belt w/peristomal hernia support	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4398 NEW	Ostomy irrigation supply;bag, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4399 NEW	Ostomy irrigation supply;cone/cath,w/or w/out brush	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4400 NEW	Ostomy irrigation set	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4402 NEW	Lubricant,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4404 NEW	Ostomy ring, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4405 NEW	Ostomy skin barrier,nonpectin-based,paste,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4406 NEW	Ostomy skin barrier,pectin based,paste,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4407 NEW	Ostomy skin barrier,w/flange,4x4in or smaller,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4408 NEW	Ostomy skin barrier,w/flange,ext wera,w/built-in convexity,>4x4in,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4409 NEW	Ostomy skin barrier,w/flange,ext wear,w/out convexity,4x4in <, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4410 NEW	Ostomy skin barrier,w/flange,ext wear/w/out convexity,>4x4in,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4411 NEW	Ostomy skin barrier,solid 4x4/equiv,ext wear,w/convexity	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4412 NEW	Ostomy skin drainable,high output,use barrier w/flange,w/out filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4413 NEW	Ostomy pouch,drainable,high output,use w/barrier w/flange,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4414 NEW	Ostomy skin barrier,w/flange,w/out convexity,4x4in <,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4415 NEW	Ostomy skin barrier,w/flange,w/out convexity,>4x4in,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4416 NEW	Ostomy pouch,closed,w/barrier atchd w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4417 NEW	Ostomy pouch,closed,w/barrier atchd,w/convexity/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4418 NEW	Ostomy pouch,closed;w/out barrier atchd,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4419 NEW	Ostomy pouch,closed;use on barrier w/nonlock flange,w/filter, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4420 NEW	Ostomy pouch,closed;use on barrier w/lock flange,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4421 NEW	Ostomy supply;misc	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4422 NEW	Ostomy absorbent matrl,use in ostomy puch,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4423 NEW	Ostomy pouch,closed;use on barrier w/lock flange,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4424 NEW	Ostomy pouch,drainable,w/barrier atchd,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4425 NEW	Ostomy pouch,drainable;use on barrier w/non-lock flange,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4426 NEW	Ostomy pouch,drainable;use on barrier w/ lock flange,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4427 NEW	Ostomy pouch,drainable;use on barrier w/lock flange,w/filter,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4428 NEW	Ostomy pouch,urinary,w/ext wear barrier atchd,w/faucet type w/valve,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4429 NEW	Ostomy pouch,urinary,w/ barrier atchd w/convexity,faucet type/valve,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4430 NEW	Ostomy pouch,urinary,w/ext wear barrier atchd,w/convexity,w/faucet/valve,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4431 NEW	Ostomy pouch,urinary;w/ barrier atchd,w/faucet tap/valve,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4432 NEW	Ostomy pouch,urinary;use w/barrier w/nonlock flange,faucet tap/valv each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4433 NEW	Ostomy pouch,urinary;use on barrier w/lock flange,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4434 NEW	Ostomy pouch,urinary;use on barrier w/lock flange,faucet tap/valve,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4435 NEW	Ostomy pouch,drainable,high ouput,w/ext wear barrier,w or w/out filer, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4436 NEW	Irrigation supply;sleeve,reusable per mo	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4437 NEW	Irrigation supply;sleeve,disposable,per mo	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4450 NEW	Tape, non-waterprrof,per 18sq in	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4452 NEW	Tape, waterproof,per 18sq in	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4453 NEW	Rectal cath for manual pump-oprtd enma syst,repl only	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4455 NEW	Adhesive remover/solvent,per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4456 NEW	Adhesive remover,wipes,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4457 NEW	Enema tube, with or without adapter, any type, replmnt only, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4458 NEW	Enema bag w/ tubing,reusable	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4459 NEW	Manual pump-oprtd enema syst,incl ballon/cath/access,resuable,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4461 NEW	Surgical dressing holder,nonresusable,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4463 NEW	Surgical dressing holder,reuseable,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4465 NEW	Nonelastic binder for extremity	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4467 NEW	Belt/strap/sleeve/garment/covering,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4468 NEW	Exsufflation belt, includes all supplies and accessories	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4470 NEW	Gravlee jet washer	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4481 NEW	Tracheostoma filter,any type/size,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4483 NEW	Moisture exchanger,disposable,use w/inv mech vent	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4490 NEW	Surgical stockings,above knee lgth,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4495 NEW	Surgical stockings,thigh lgth,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4500 NEW	Surgical stockings,below knee lgth,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4510 NEW	Surgical stockings,full lgth,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4520 NEW	Incontinence garment,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4540 NEW	Distal transcut elec nerve stim,periph nerves upper arm	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4541 NEW	Monthly supplies for use of device coded at E0733	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4542 NEW	Supp/access extl upper limb tremor stim periph nerves wrist	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4544	Electrode ext lower ext nerve stim,restless legs syndrome	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4545	Supply/access ext tibial nerve stim,1 mo	MH Yes	Clarity No	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech Policy: Peripheral Nerve Stimulation Policy Tech
A4550 NEW	Surgical trays	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4553 NEW	Non-disposable underpads,all sizes	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4554 NEW	Disposable underpads,all sizes	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4556 NEW	Electrode/transducer for elec stim dev for CA trmnt, repl only	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4557 NEW	Lead wires, per pair	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4558 NEW	Conductive gel/paste, for electric dev, per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4559 NEW	Coupling gel/paste, for electric stim dev, per oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4560 NEW	NEUROMUSCULAR ELECTRICAL STIM DISP REPLC ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4561 NEW	Pessary rubber, any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4562 NEW	Pessary, non-rubber, any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4564 NEW	Pessary,disposable,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4565 NEW	Slings	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4566 NEW	Shoulder sling/vest design,abd restr,w or w/out swathe ctrl,prefab,incl F&A	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4570 NEW	Splint	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4575 NEW	Topical hyperbaric oxygen chamber,disposable	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Hyperbaric Oxygen Therapy (HBOT) or Topical Oxygen Therapy (TOT) PolicyTech
A4593 NEW	Neuromodulation stim sys,controller	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech
A4594 NEW	Neuromodulation stim sys,mouthpiece	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4595 NEW	Electrical stim supplies,2 lead,per month	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4600 NEW	Sllve fir intermittent limb comp dev,repl only,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4601 NEW	Lithium-ion battery,rechgble,non proths use,repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4602 NEW	Replaement abttery for ext infus pump owned by pt,lithium,1.5volt,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4604 NEW	Tubing w/ intgrtd heating element for positve airway prsr dev	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4605 NEW	Tracheal suction cath,closed syst,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4606 NEW	Oxygen probe for use w/oximeter dev,repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4608 NEW	Transtracheal oxygen cath,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4611 NEW	Battery, heavy-duty;repl pt owned vent	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4612 NEW	Battery cables;repl pt owned vent	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4613 NEW	Battery charger;repl pt owned vent	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4614 NEW	Peak expiratory flow rate meter,handheld	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4615 NEW	Cannula,nasal	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4616 NEW	Tubing(oxygen),per foot	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4617 NEW	Mouthpiece	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4618 NEW	Berathing circuits	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4619 NEW	Face tent	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4620 NEW	Variable concentration mask	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4623 NEW	Ytracheostomy,inner cannula	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4624 NEW	Tracheal suction cath,any type othr than closed syst,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4625 NEW	Tracheostomy care kit for new tracheostomy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4626 NEW	Tracheostomy cleaning brush,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4627 NEW	Spacer bag/resevoir,w or w/out mask,for metered dose inhaler	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4628 NEW	Oropharyngeal suction cath,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4629 NEW	Tracheostomy care kit for established tracheostomy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4630 NEW	Replacement batteries,MN,transc elec stim,owned by pt	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4633 NEW	Replacement bulb/lamp for UV light therapy syst,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4634 NEW	Replacement bulb for therapuetic light box,tabletop model	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4635 NEW	Underaem pad,crutch,repr,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4636 NEW	Replacement,handgrip,cane/crutch/walker, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4637 NEW	Replacement, tip/cane/crutch/walker,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4638 NEW	Replacement battery for pt owned ear pulse gen,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4639 NEW	Replacement pad for infrared heating pad syst, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4640 NEW	Replacement pad for MN alternating pressr pad owned by pt	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4641 NEW	Radiopharmaceutical,diagnostic,NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4642 NEW	Indium In-111 satumomab pendetide,diag,per study dose,up to 6mCi	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4649 NEW	Surgical supply;misc	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4651 NEW	Calibrated micocapillary tube, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4652 NEW	Microcapillary tube sealant	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4653 NEW	Peritoneal dial cath anchor dev,belt,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4657 NEW	Syringe,w or w/out needle,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4660 NEW	Sphygmomanometer/blood prssr apparatus w/cuff/steth	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4663 NEW	Bllod pressure cuff only	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4670 NEW	Automated blood pressure monitor	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4671 NEW	Disposable cyclor set for cyclor dial mach,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4672 NEW	Drainage ext line,sterile,for dial, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4673 NEW	Extension line,easy lock conn, dialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4674 NEW	Chem/antiseptic sol to clean/ster dialysis equip,per 8oz	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4680 NEW	Act carbon filter for hemodialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4690 NEW	Dialyzer,all types,all sizes,for hemodialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4706 NEW	Bicarbonate conc,sol,for hemodialysis,per packet	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4707 NEW	Bicarbonate conc,powder,for hemodialysis,per pack	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4708 NEW	Acetate conc sol,hemodialysis, per gallon	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4709 NEW	Acid conc ,sol,hemodialysis,per gallon	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4714 NEW	Treated water,peritoneal dialy, per gallon	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4719 NEW	"Y set" tubing, peritoneal dialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4720 NEW	Dialysate sol,conc dextrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4721 NEW	Dialysate sol,conc dextrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4722 NEW	Dialysate sol,conc dextrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4723 NEW	Dialysate sol,conc dextrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4724 NEW	Dialysate sol,conc dextrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4725 NEW	Dialysate sol,conc dextrose, peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4726 NEW	Dialysate sol,conc desxtrose,peritoneal dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4728 NEW	Dialysate sol, non dextrose,500ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4730 NEW	Fistual cannulation set,hemodialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4736 NEW	Topical anesthetic,for dialysis,per g	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4737 NEW	Inj anesthetic,for dialysis, per 10ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4740 NEW	Shunt acc,for hemodialysis,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4750 NEW	Blood tubing,for hemodialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4755 NEW	Blood tubing,art/ven comb,hemodialysis, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4760 NEW	Dialysate sol test kit,peritoneal dialy,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4765 NEW	Dialysate conc,powder,per packet	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4766 NEW	Dialysate conc,sol, per 10ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4770 NEW	Blood coll tube,vacumn,dialysis,per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4771 NEW	Serum clot time tube,dialysis,per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4772 NEW	Blood gluc test strips,dialysis,per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4773 NEW	Occult blood test strips,dialysis, per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4774 NEW	Ammonia test strips,dialysis,per 50	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4802 NEW	Protamine sulfate,hemodialysis, per 50mg	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4860 NEW	Disp cath tips,peritoneal dialy, per 10	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4870 NEW	Plumb/Elec work,hpome dialysis equip	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4890 NEW	Cont,rep,maint for hemodialysis equip	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4911 NEW	Drain bag/bottle,dialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4913 NEW	Misc dialy supps,not other spec	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A4918 NEW	Venous press clamp,hemodialysis, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4927 NEW	Gloves,non steril,per 100	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4928 NEW	Surgical mask,per 20	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4929 NEW	Tourniquet for dialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4930 NEW	Gloves,sterile,per pair	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4931 NEW	Oral thermometer,reusable,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A4932 NEW	Rectal thermometer,reusable,any type,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5051 NEW	OST POUCH CLOS; W/BARRIER ATTCH EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5052 NEW	OST POUCH CLOS; W/O BARR ATTACH EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5053 NEW	OSTOMY POUCH CLOS; USE FACEPLATE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5054 NEW	OST POUCH CLOS; BARRIER W/FLNGE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5055 NEW	STOMA CAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5056 NEW	OST POUCH DRAIN EXT BARRIER FLTR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5057 NEW	OST POUCH DRAIN BARR CONVX FLTR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5061	OST POUCH DRNABLE; W/BARR ATTCH EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5062	OST POUCH DRNABL; W/O BARR ATTCH EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5063	OST POUCH DRNABLE; BARR W/FLNGE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5071	OST POUCH URIN; W/BARRIER ATTCH EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5072	OST POUCH URIN; W/O BARR ATTCH EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5073	OST POUCH URIN; BARRIER W/FLNGE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5081	STOMA PLUG OR SEAL ANY TYPE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5082	CONTINENT DEVC;CATH CONTINENT STOMA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5083	CONT DEVICE STOMA ABSORPTIVE COVER	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5093	OSTOMY ACCESSORY; CONVEX INSERT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5102	BEDSIDE DRN BOTTLE W/WO TUBING EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5105	URIN SUSPENSRY LEG BAG W/WO TUBE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5112	URINARY DRAIN BAG LEG/ABD LATEX EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5113	LEG STRAP; LATEX REPLCMT ONLY-SET	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5114	LEG STRAP; FOAM/FABRIC REPL-SET	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5120	SKIN BARRIER WIPES OR SWABS EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5121	SKN BARRIER; SOLID 6X6/EQUVALNT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5122	SKN BARRIER; SOLID 8X8/EQUVALNT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5126	ADHES/NON-ADHES; DISK/FOAM PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5131	APPLINC CLNR INCONT&OST APPLN-16 OZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A5200	PERQ CATH/TUBE ANCHR DEVC ADHES SKN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5500 NEW	DM ONLY CSTM PREP SHOE MX DNS INSR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5501 NEW	DM ONLY CSTM PREP SHOE MOLD PTS FT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5503 NEW	DM ONLY MOD SHOE/CSTM ROLLER/ROCKER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5504 NEW	DM ONLY MOD SHOE/CSTM W/WEDGE SHOE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5505 NEW	DM ONLY MOD SHOE/CSTM W/MT BAR SHOE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5506 NEW	DM ONLY MOD SHOE/CSTM OFF SET HEEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5507 NEW	DM ONLY NOS MOD SHOE/CSTM MOLD SHOE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A5508 NEW	DM ONLY DELUX FEATUR SHOE/CSTM MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5510 NEW	DIAB ONLY DIR FORM COMPRS MOLD FT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5512 NEW	FOR DIAB ONLY MX DNSITY INSRT PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5513 NEW	FOR DIAB ONLY MX DNSITY INSRT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A5514 NEW	Diab multi dens insert,CAM tech, CAD model,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6000 NEW	NON-CNTC WND WARMING COVR W/DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6010 NEW	COLLEGEN WOUND FILLR DRY FORM PER G	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6011	COLLEGEN WOUND FIL GEL/PASTE PER G	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6021	COLL DRESS PAD SIZE 16 SQ/LESS EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6022	COLL DRSG STRL>16 BUT</=48 SQ IN EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6023	COLL DRSG STERILE SZ >48 SQ IN EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6024	COLL DRESS WND FIL STERL PER 6 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6025	GEL SHEET DERMAL/EPIDRMAL APPLIC EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6154	WOUND POUCH EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6196 NEW	ALGINAT/OTH FIBR GELL PAD 16 SQ/<EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6197 NEW	ALGINAT/OTH FIBR GELL >16<=48 SQEA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6198 NEW	ALGINAT/OTH FIBR GELL PAD >48 SQ EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6199 NEW	ALGINAT/OTH FIBR GELL DRESS FIL-6IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6203 NEW	COMPOS DRESS 16 SQ/< W/ADHES BORDR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6204 NEW	COMPOS DRESS >16 <=48 SQ W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6205 NEW	COMPOS DRESS >48SQ W/ADHES BORDR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6206	CNTCT LAYR STERL 16 SQ IN/<EA DRESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6207	CNTC LAYER > 16 SQ BUT <= 48 SQ EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6208	CONTACT LAYER > 48 SQ EACH DRESSING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6209	FOAM DRESS STERL 16 SQ/< NO ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6210	FOAM DRESS >16 <=48SQ W/O ADHES EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6211	FOAM DRESS STERL > 48 SQ NO ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6212	FOAM DRESS 16 SQ/< W/ADHES BORDR EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6213 NEW	FOAM DRESS >16 <= 48 SQ W/ADHES EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6214 NEW	FOAM DRESS > 48 SQ W/ADHES BORDR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6215 NEW	FOAM DRESSING WOUND FIL STERL PER G	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6216 NEW	GAUZE NON-IMPREG NONSTERL 16 SQ/<	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6217 NEW	GAUZE NON-IMPREG NONSTRL >16<=48SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6218 NEW	GAUZE NON-IMPREG NONSTERL > 48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6219 NEW	GAUZE NON-IMPREG STERL 16 SQ/<ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6220 NEW	GAUZE NON-IMPREG >16 <=48 SQ ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6221 NEW	GAUZE NON-IMPREG > 48 SQ W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6222 NEW	GAUZ IMPREG NOT H2O/HYDRGEL 16 SQ/<	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6223 NEW	GAUZ IMPREG NOT H2O/HYDRGL >16<=48	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6224 NEW	GAUZ IMPREG NOT H2O/HYDROGEL >48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6228 NEW	GAUZ IMPREG WATR/NL SALINE > 16 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6229 NEW	GAUZ IMPREG WATR/SALINE >16<=48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6230 NEW	GAUZ IMPREG H2O/SALINE STERL >48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6231 NEW	GAUZ IMPREG HYDRGEL DIR WND 16 SQ/<	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6232 NEW	GAUZ IMPREG HYDRGEL DIR >16 <= 48	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6233 NEW	GAUZ IMPREG HYDRGEL DIR WND > 48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6234 NEW	HYDRCOLLOID DRESS 16 SQ/< W/O ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6235 NEW	HYDRCOLLOID DRESS >16<=48 NO ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6236 NEW	HYDROCOLLOID DRESS >48 SQ W/O ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6237 NEW	HYDROCOLLOID DRESS 16 SQ/< W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6238 NEW	HYDROCOLLOID DRESS >16<= 48 W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6239 NEW	HYDROCOLLOID DRESS > 48 SQ W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6240 NEW	HYDROCOLLOID DRESS FIL PASTE-FL OZ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6241 NEW	HYDROCOLLOID DRESS DRY FORM PER G	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6242 NEW	HYDROGEL DRESS 16 SQ/< W/O ADHES EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6243 NEW	HYDROGEL DRESS >16 <=48SQ NO ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6244 NEW	HYDROGEL DRESS > 48 SQ W/O ADHES EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6245 NEW	HYDROGEL DRESS 16 SQ/< W/ADHES EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6246 NEW	HYDROGEL DRESS >16 <=48 SQ W/ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6247 NEW	HYDROGEL DRESS STERL >48 SQ ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6248 NEW	HYDROGEL DRESS WOUND FIL GEL FL OZ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6250 NEW	SKN SEALNT PROTCT MOISTURZR OINTMNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6251 NEW	SPCLTY ABSORB DRESS 16SQ/< NO ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6252	SPCL ABSORB DRESS >16<=48 NO ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6253	SPCLTY ABSORB DRESS >48 SQ NO ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6254	SPCLTY ABSORB DRESS 16 SQ/< W/ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6255	SPCL ABSORB DRESS >16<= 48 W/ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6256	SPCLTY ABSORB DRESS > 48 SQ W/ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6257	TRNSPRT FILM STERL 16 SQ/< EA DRESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A6258	TRNSPRT FILM >16 SQ BUT <=48 SQ EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6259 NEW	TRNSPRT FILM STERL > 48 SQ EA DRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6260 NEW	WOUND CLEANSERS ANY TYPE ANY SIZE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6261 NEW	WOUND FILLR GEL/PASTE PER FL OZ NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6262 NEW	WOUND FILLER DRY FORM PER G NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6266 NEW	GAUZ IMPRG NOT H2O SAL/ZINC LINR YD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6402 NEW	GAUZ NON-IMPREG STERL 16 SQ/< NO AD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6403 NEW	GAUZ NON-IMPREG STERL >16 <= 48 SQ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6404	GAUZ NON-IMPREG STRL >48SQ NO ADHES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6407	PACK STRIPS NON-IMPREGNTD UP 2 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6410	EYE PAD STERILE EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6411	EYE PAD NON-STERILE EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6412	EYE PATCH OCCLUSIVE EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6413	ADHESIVE BANDAGE FIRST-AID TYPE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
A6441	PADD BANDGE NON-ELAST NON-WOVEN/NON	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6442 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6443 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6444 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6445 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6446 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6447 NEW	CONFORMING BANDGE NON-ELAST KNITTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6448 NEW	LT COMPRS BANDGE ELAST WDTN < 3 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6449	LT COMPRS BANDGE WIDTH >= 3 & <5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6450	LT COMPRS BANDGE WIDTH >= 5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6451	MOD COMPRS BANDGE WD >= 3 & <5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6452	HI COMPRS BANDGE WD >= 3 & <5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6453	SELF-ADHERENT BANDGE WIDTH <= 3 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6454	SLF ADHERNT BANDGE WD >= 3 & <5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6455	SELF-ADHERENT BANDGE WIDTH >= 5 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6456 NEW	ZINC PAST BANDGE WD >/= 3 & <5 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6457 NEW	TUBULR DRSG W/WO ELAST WDTN LNR YD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6460 NEW	Synth resorb wound dress,wout adhes, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6501 NEW	COMPRS BURN GARMNT BDYSUIT CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6502 NEW	COMPRS BRN GARMNT CHIN STRAP CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6503 NEW	COMPRS BRN GARMNT FCE HOOD CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6504 NEW	COMPRS BRN GARMNT GLOV WRST CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6505	COMPRS BRN GARMNT GLOV ELB CSTM FAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6506	COMPRS BURN GARMNT GLOV AX CSTM FAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6507	COMPRS BRN GARMNT FT KNEE LEN CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6508	COMPRS BRN GARMNT FT THI LEN CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6509	COMPRS BRN GARMNT TRNK WAIST CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6510	COMPRS BRN GARMNT TRNK ARM LEG OPN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A6511	COMPRS BRN GARMNT LW TRNK LEG OPN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6512	COMPRESSION BURN GARMENT NOC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6513	COMPRS BRN MASK FCE&/NCK PLSTC/EQUL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6520	Gradient compr garment,glove,padded, nighttime use,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6521	Gradient compr garment,glove,padded,nighttime use,custom,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6522	Gradient compr garment,arm,padded,nighttime use,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6523	Gradient compression garment,arm,padded,nighttime use,custom,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6524	Gradient comp garment, lower leg and foot, padded,nighttime use, each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6525 NEW	Gradient comp garment, lower leg/foot, padded,nighttime use, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6526 NEW	Gradient comp garment, lower leg/foot, padded,nighttime use, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6527 NEW	Gradient comp garment, full leg/foot, padded,nighttime use, custom,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6528 NEW	Gradient compression garment, bra, for nighttime use, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6529 NEW	Gradient compression garment, bra, for nighttime use, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6530 NEW	GRADIENT COMPRS STK BK 18-30 MMHG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6531 NEW	GRADIENT COMPRS STK BK 30-40 MMHG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6532	GRADIENT COMPRS STK BK 40-50 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6533	GRADENT COMPRS STK THIGH 18-30 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6534	GRADENT COMPRS STK THIGH 30-40 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6535	GRADENT COMPRS STK THIGH 40-50 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6536	GRADENT COMPRS STK FULL 18-30 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6537	GRADENT COMPRS STK FULL 30-40 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6538	GRADENT COMPRS STK FULL 40-50 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6539	GRADENT COMPRS STK WAIST 18-30 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6540	GRADENT COMPRS STK WAIST 30-40 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6541	GRADENT COMPRS STK WAIST 40-50 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6544	GRADENT COMPRESSION STK GARTER BELT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6545	GRD CMPRS WRP NONELST BK 30-50 MMHG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6549	GRADIENT COMP STOCKING/SLEEVE NOS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

A6550	WND CARE SET NEG PRSS WND TX PUMP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6552 NEW	Gradient compression stocking, below knee, 30-40 mmhg, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6553 NEW	Gradient compression stocking, below knee, 30-40 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6554 NEW	Gradient compression stocking, below knee, 40 mmhg or greater, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6555 NEW	Gradient comp stocking, below knee, 40 mmhg/greater, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6556 NEW	Gradient comp stocking, thigh length, 18-30 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6557 NEW	Gradient compression stocking, thigh length, 30-40 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6558 NEW	Gradient comp stocking, thigh length, 40 mmhg or greater, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6559 NEW	Gradient comp stocking, full length/chap style, 18-30 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6560 NEW	Gradient comp stocking, full length/chap style, 30-40 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6561 NEW	Gradient comp stocking, full length/chap style, 40 mmhg/greater, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6562 NEW	Gradient comp stocking, waist length, 18-30 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6563 NEW	Gradient comp stocking, waist length, 30-40 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6564 NEW	Gradient comp stocking, waist length, 40 mmhg/greater, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6565 NEW	Gradient compression gauntlet, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6566 NEW	Gradient compression garment, neck/head, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6567 NEW	Gradient compression garment, neck/head, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6568 NEW	Gradient compression garment, torso and shoulder, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6569 NEW	Gradient compression garment, torso/shoulder, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6570 NEW	Gradient compression garment, genital region, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6571 NEW	Gradient compression garment, genital region, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6572 NEW	Gradient compression garment, toe caps, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6573 NEW	Gradient compression garment, toe caps, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6574 NEW	Gradient compression arm sleeve and glove combination, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6575 NEW	Gradient compression arm sleeve and glove combination, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6576 NEW	Gradient compression arm sleeve, custom, medium weight, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6577 NEW	Gradient compression arm sleeve, custom, heavy weight, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6578 NEW	Gradient compression arm sleeve, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6579 NEW	Gradient compression glove, custom, medium weight, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6580 NEW	Gradient compression glove, custom, heavy weight, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6581 NEW	Gradient compression glove, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6582 NEW	Gradient compression gauntlet, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6583 NEW	Gradient compression wrap with adjustable straps, below knee, 30-50 mmhg, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6584 NEW	Gradient compression wrap with adjustable straps, not otherwise specified	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6585 NEW	Gradient pressure wrap with adjustable straps, above knee, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6586 NEW	Gradient pressure wrap with adjustable straps, full leg, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6587 NEW	Gradient pressure wrap with adjustable straps, foot, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6588 NEW	Gradient pressure wrap with adjustable straps, arm, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6589 NEW	Gradient pressure wrap with adjustable straps, bra, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6593 NEW	Accessory for gradient comp garment/wrap w/ adj straps, NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6594 NEW	Gradient comp bandaging supply,liner,low ext,any size/lngh,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6595 NEW	Gradient comp bandaging supply,liner,up ext,any size/lngh,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6596 NEW	Gradient comp bandaging supp,conforming gauze,per linear yd,any width,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6597 NEW	Gradient comp bndg roll,elastic long stretch,linear yd,any width,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6598 NEW	Gradient comp bndg roll,elastic med stretch,per linear yd,any wdth, ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6599 NEW	Gradient comp bndg roll,inelastic shrt stretch,per linear yd,any wdth, ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6600 NEW	Gradient comp bndgng supply,high dens foam sht,250 sqcm ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6601 NEW	Gradient comp bndgng supply,high dens foam pad,any sz/shp, ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6602 NEW	Gradient comp bndgng supply, high dens foam roll bndg,per linear yd,any wdth,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6603 NEW	Gradient comp bndgng supp, low dens channel foam sht,250 sqcm,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A6604 NEW	Gradient comp bndgng supp,low den flat foam sht,per 250 sqcm,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6605 NEW	Gradient comp bndgng supp,padded foam,per linear yd,any wdth,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6606 NEW	Gradient comp bndgng sup,padded textile,per linear yd,any wdth,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6607 NEW	Gradient comp bndgng supp,tubular protective abs layer,per linear rd,any wdth,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6608 NEW	Gradient comp bndgng supp,tubular prtctv absor pad lyr,per linear yd,any wdth,ea	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6609 NEW	Gradient compression bandaging supply, NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A6610 NEW	Gradient comp stocking, below knee, 18-30 mmhg, custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7000	CANISTER DISPBL USED W/SUCTN PUMP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7001	CANISTR NONDISPBL USED W/SUCTN PUMP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7002	TUBING USED WITH SUCTION PUMP EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7003	ADMN SET SM VOL NONFILTR NEB DISPBL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7004	SM VOL NONFILTR PNEUMAT NEB DISPBL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7005	ADMN SET SM VOL NONFLTR NEB NONDISP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
A7006	ADMN SET W/SM VOL FILTR NEBULIZR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7007 NEW	LG VOL NEBULIZR DISPBL UNFIL COMPRS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7008 NEW	LG VOL NEBULIZR DISPBL PRFIL COMPRS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7009 NEW	RESRVOR BOTTLE LG VOL US NEBULIZR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7010 NEW	CORUG TUBE DISPBL LG VOL NEB 100 FT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7012 NEW	WATER COLLEC DEV USE W/LG VOL NEB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7013 NEW	FILTER DISP W/AREO COMPRESS/US GEN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7014 NEW	FLTR NON-DISPBL AROSL COMPRS/US GEN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7015 NEW	AREO MASK USED W/ DME NEB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7016 NEW	DOME&MOUTHPECE W/SM VOL US NEBULIZR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7017 NEW	NEB GLASS/AUTOCLAV NOT USE W/O2	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7018 NEW	H2O DIST USE W/LG VOL NEB 1000 ML	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7020 NEW	INTERFACE COUGH STIM DEVC REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7021	Supplies/accessories for lung expansion airway	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7023 NEW	Mech allergen particle barrier/inhalation filter, cream, nasal, topical	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7025 NEW	HI FREQ CHST WALL OSCILAT VEST REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7026 NEW	HI FREQ CHST WALL OSCILAT HOSE REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7027 NEW	COMB ORAL/NASAL MASK W/CPAP EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7028 NEW	ORAL CUSH ORAL/NASAL MASK REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7029 NEW	NASL PILLOW ORL/NASL MASK REPL PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7030 NEW	FULL FCE MASK POS ARWAY PRSS DEV EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7031 NEW	FCE MASK INTERFCE REPL FULL MASK EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7032 NEW	CUSHN NASAL MASK INTF REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7033 NEW	PILLW NASL CANNULA TYPE INTF REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7034 NEW	NASL INTERFCE POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7035 NEW	HEADGEAR USED W/POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7036 NEW	CHINSTRAP USE W/POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7037 NEW	TUBING USED W/POS ARWAY PRESS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7038 NEW	FLTR DISPBL W/POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7039 NEW	FLTR NON DISPBL POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7040 NEW	ONE WAY CHEST DRAIN VALVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7041 NEW	WATER SEAL DRNAGE CONTAINER&TUBING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7044 NEW	ORL INTERFCE W/POS ARWAY PRSS DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7045 NEW	EXHALATION PORT REPLACEMENT ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7046 NEW	WATR CHAMB HUMDIFIR USED W/POS ARWA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7047 NEW	Oral interface for resp func pump, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7048 NEW	Vac Drain coll unit/tubning kit,for imp cath,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7049 NEW	EXPIRATORY PAP INTRANASAL RESISTANCE VALVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7501 NEW	TRACHEOSTOMA VALV INCL DIAPHRAGM EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7502 NEW	REPL DIAPH/FCEPLAT TRACHESTOMA VALV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7503 NEW	FLTR HOLDER/CAP REUSBL TRACHEOSTOMA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7504 NEW	FLTR USE TRACHEOSTOMA EXCHG SYS EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7505 NEW	HOUS REUSABL W/O ADHES EXCHG SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7506 NEW	ADHES DISC EXCHG SYS&/ W/TRACH VALV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7507 NEW	FLTR HLDR&INTGR FLTR TRACHEOSTOMA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7508 NEW	HOUS&INTGR ADHES EXCHG SYS &/ VALV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7509 NEW	FLTR HLDR&INTGR FLTR HOUS&ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7520 NEW	TRACHEOST/LARYNGECT TUBE NON-CUFFED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7521 NEW	TRACHEOST/LARYNGECT TUBE CUFF PVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7522 NEW	TRACHEOST/LARYNGECT TUBE STNLESS ST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A7523 NEW	TRACHEOSTOMY SHOWER PROTECTOR EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7524 NEW	TRACHEOSTOMA STENT/STUD/BUTTON EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7525 NEW	TRACHEOSTOMY MASK EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7526 NEW	TRACHEOSTOMY TUBE COLLAR/HOLDER EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A7527 NEW	TRACHEOST/LRYNGCT TUBE PLUG/STOP EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A8000 NEW	HELMET PROTECTIVE SOFT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A8001 NEW	HELMET PROTECTIVE HARD PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A8002 NEW	HELMET PROTECTIVE SOFT CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A8003 NEW	HELMET PROTECTIVE HARD CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A8004 NEW	SOFT INTERFACE FOR HELMET REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9268 NEW	Programmer for transient,orally ingested capsule	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech
A9269 NEW	Programable,transient,oral ingstd cap,use w/ ext prgrmr,per mo	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech
A9270	NONCOVERED ITEM OR SERVICE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9272 NEW	WND SCTN DISPBL DRSG ACC ANY TYP EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A9273	HOT WATER BOTTLE ICE CAP/COLLAR ANY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A9274	EXT AMB INSULIN DEL SYS DISPOSBL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices
[PolicyTech](#)

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A9275	HOME GLU DISPBL MON W/TEST STRIPS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A9276	SENSOR; INVSV INTRSTL GLU MON SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices
[PolicyTech](#)

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

A9277	TRANSMTR; EXT INTRSTL CONT GLU MON	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices
[PolicyTech](#)

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A9278 NEW	RECEIVER MON; EXT INTRSTL GLU MON	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech
					Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9279 NEW	MON FEATURE/DEVC ALONE/INTEGRAT NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9280 NEW	ALERT OR ALARM DEVICE NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9281 NEW	REACH/GRABBING DEVC ANY TYPE/LEN EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9282 NEW	WIG ANY TYPE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9283 NEW	FOOT PRESSURE OFF LOAD/SUPP DEV EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9284 NEW	SPIROMETER NONELECTRONC INCL ACCESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

A9285 NEW	INVERSION/EVERSION CORRECTION DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9286	HYG I/DVC DISPBL/NON-DISPBL ANY T E	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9292 NEW	RX digital visual sftwr-only,fda clrd,per course of tx	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech Policy: Vision Therapy PolicyTech
A9300	EXERCISE EQUIPMENT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9900 NEW	DME SUP/ACCESS/SRV-COMPON/OTH HCPCS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9901 NEW	DME DEL SET&/DSPNS SRVC ANOTH HCPCS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
A9999 NEW	MISCELLANEOUS DME SUPPLY/ACCESS NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4034 NEW	Ent feed supp kit;syringe fed, per day	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4035 NEW	Ent feed supp kit;pump fed,per day	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4036 NEW	Ent feed supp kit;gravity fed,per day	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4081 NEW	NASOGASTRIC TUBING WITH STYLET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4082 NEW	NASOGASTRIC TUBING WITHOUT STYLET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4083 NEW	STOMACH TUBE - LEVINE TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4087 NEW	GASTROSTOMY/J-TUBE STANDARD EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4088 NEW	GASTROSTOMY/J-TUBE LOW-PROFILE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4100 NEW	FOOD THICKENER ADMINED ORALLY-OUNCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4102 NEW	ENTRAL F ADLT REPL FL&LYTES 500 ML	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan
B4103 NEW	ENTRAL F PED REPL FL&LYTES 500 ML	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan
B4104 NEW	ADDITIVE FOR ENTERAL FORMULA	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4105 NEW	IN-LINE CART CTG DIG ENZYME EF EACH	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
					Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan
B4148 NEW	Ent spply feed kit;elasomeric control fed, per day	MH Yes	Clarity Yes	SCO Yes	ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4149 NEW	ENTRAL F MANF BLNDRIZD NAT FOODS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4150 NEW	ENTRAL F NUTRITIONALLY COMPLETE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4152 NEW	ENTRAL F NUTRITION CMPL CAL DENSE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4153 NEW	ENTRL F NUTRTN CMPL HYDROLYZD PROTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4154 NEW	ENTRAL F CMPL NO INHERITED DZ METAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4155 NEW	ENTRAL F NUTRITN INCMPL/MOD NUTRNTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4157 NEW	ENTRAL F CMPL INHERITED DZ METAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4158 NEW	ENTRAL F PED NUTRITION COMPLETE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4159 NEW	ENTRAL F PED NUTRITN CMPL SOY BASD	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan
B4160 NEW	ENTRAL F PED NUTRITN CMPL CAL DENSE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4161 NEW	ENTRAL F PED HYDROLYZED/AA PROTEINS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4162 NEW	ENTRAL F PED INHERITED DZ METAB	MH Yes	Clarity Yes	SCO Yes	Infusion providers please review the WellSense policy for authorization/criteria details. DME providers please contact Northwood. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Enteral Nutrition(Tube Feeding) Products Supplied and Billed by Home Infusion Providers and Digestive Enzyme Cartridges How provider types are handled by Northwood and the Plan
B4164 NEW	Parenteral nut sol;carbs, home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4168 NEW	Parenteral nut sol;amino acid, home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4172 NEW	Prenteral nut sol;amino acid, home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4176 NEW	Perenteral nutrition solution;amino acid, home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4178 NEW	Parenteral nutr sol;amino acids,home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4180 NEW	Parenteral nutr sol;carbs, home mix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4185 NEW	Parenteral nutr sol;not other spec, 10g lipids	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4189 NEW	Parenteral nutr sol;compounded, premix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4193 NEW	Parenteral nutr sol;compounded, premix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4197 NEW	Parenteral nutr sol;compounded,premix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
B4199 NEW	Parenteral nutr sol;compounded,premix	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B4216	Parenteral nutr;additives,home mix, per day	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B4220	Parenteral nutr supp kit;premix,per day	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B4222	Parenteral nutr supp kit;home mix, per day	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B4224	Parenteral nutr admin kit, per day	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B5000	Parenteral nutr sol;compounded,renal, premix	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B5100	Parenteral nutr sol;compounded, any strength,premix	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B5200	Parenteral nutr sol;compounded, premix	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

B9002	ENTERAL NUTR INFUSION PUMP ANY TYPE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B9004	PARNTRAL NUTRIT INFUS PUMP PRTBLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B9006	PARNTRAL NUTRIT INFUS PUMP STATION	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B9998	NOC FOR ENTERAL SUPPLIES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

B9999	NOC FOR PARENTERAL SUPPLIES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

C1062	Intravertebral fx aug impl	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
		No	No	Yes	

Policy: InterQual®

C1821	INTER PROC DIST DEV IMP	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	Yes	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

C1825	Gen, neuro, carot sinus baro	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C1831	Personalized interbody cage	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C7557	Cath plcmnt for cor angio,w/FFR, for atherosclerosis stenosis intervention	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: eviCore Radiology
[eviCore](#)

C8000	Support dev,extravascular,arteriovenous fistula(implantable)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense medical policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C9016	INJECTION TRIPTORELIN EXTENDED-RELEASE 3.75 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

C9172	Injection, fidanacogene elaparovec-dzkt, per ther dose(Beqvez)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense medical policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Medically Necessary
[PolicyTech](#)

C9399	Unclassified drugs or biologicals	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Review the applicable medical policy for auth/criteria details for gene/cell therapies without treatment specific HCPCS codes.
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Casgevy
[PolicyTech](#)

Policy: Medically Necessary
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

C9761	Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy (ureteral catheterization i	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C9762	Cardiac MR;strain imaging	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: eviCore Radiology
[eviCore](#)

C9763	Cardiac MR;with stress imaging	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: eviCore Radiology
[eviCore](#)

C9769	Cystourethroscopy, with insertion of temporary prostatic implant/stent with fixation/anchor and inci	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C9772	Revasc lithotrip tibi/perone	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C9773	Revasc lithotr-stent tib/per	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

C9774	Revasc lithotr-ather tib/per	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

C9775	Revasc lith-sten-ath tib/per	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9781	Arthro/shoul surg; w/spacer	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9782	Blind myocar trpl bon marrow	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9783	Blind cor sinus reducer impl	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9784	Endo sleeve gastro w/tube	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9785	Endo outlet restrict w/tube	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	
		Policy: Experimental and Investigational Treatment			
		PolicyTech			
C9791	MRI w inhaled xenon-129, chest,incl prep/admin	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
NEW		<input type="button" value="No"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: eviCore Radiology			
		eviCore			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

C9793	3D predictive model gen,preplan cardiac proc,use of CTA data	MH	Clarity	SCO	
		No	No	Yes	

Policy: eviCore Radiology
[eviCore](#)

C9796	Repair enterocutaneous fistula sm intestine/colon w/plug	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	Yes	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

E0100 NEW	CANE ALL MATL ADJUSTBLE/FIXED W/TIP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E0105 NEW	CANE QUAD/3-PRONG ALL MATL W/TIPS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E0110 NEW	CRTCHES FORARM VARIOUS MATL PAIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E0111 NEW	CRTCH FORARM VARIOUS MATL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E0112 NEW	CRTCHS UNDARM WOOD PAIR ADJSTBL/FIX	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0113 NEW	CRTCH UNDARM WOOD EA ADJUSTBL/FIX	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0114 NEW	CRTCHES UNDARM OTH THAN WOOD PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0116 NEW	CRTCH UNDARM OTH THAN WOOD ADJ/FIX	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0117 NEW	CRTCH UNDERARM ARTIC SPRNG ASSTD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0118 NEW	CRUTCH SUBSTITUTE LW LEG PLATFORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0130 NEW	WALKER RIGID ADJUSTBLE/FIXED HEIGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0135 NEW	WALKER FOLDING ADJUSTBLE/FIX HEIGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0140 NEW	WALK W/TRNK SUPP ADJUSTBL/FIX HT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0141 NEW	WALKER RIGID WHEELD ADJUSTBL/FIX HT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0143 NEW	WALKER FOLD WHEELED ADJUSTBL/FIX HT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0144 NEW	WALKER ENCLOS 4 SIDE WHL POST SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0147 NEW	WALKR HEVY DUTY MX BRAKE VARIBL WHL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0148 NEW	WALK HEVY DUTY NO WHLS RIGD/FOLD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0149 NEW	WALKER HEVY DUTY WHEELD ANY TYPE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0152 NEW	Walker,batt pwrd,wheeled,folding,adj or fixed hght	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0153 NEW	PLATFORM ATTCH FOREARM CRUTCH EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0154 NEW	PLATFORM ATTACHMENT WALKER EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0155 NEW	WHL ATTCH PCK-UP WLK- PER PAIR SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0156 NEW	SEAT ATTACHMENT WALKER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0157 NEW	CRUTCH ATTACHMENT WALKER EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0158 NEW	LEG EXTENSIONS WALKER PER SET FOUR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0159	BRAKE ATTCH WHEELED WALK REPLCMT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0160	SITZ BATH/EQP PRTBLE W/WO COMMODOE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0161	SITZ BATH/EQP PRTBLE USED W/FAUCET	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0162	SITZ BATH CHAIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0163	COMMODOE CHAIR WITH FIXED ARMS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0165	COMMODOE CHAIR WITH DETACHABLE ARMS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0167	PAIL/PAN USE W/COMMODOE CHAIR REPL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0168 NEW	COMMODE CHAIR XTRA WIDE&/HEVY DUTY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0170 NEW	COMMODE CHAIR SEAT LIFT MECH ELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0171 NEW	COMMODE CHAIR SEAT LIFT MCH NONELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0172 NEW	SEAT LIFT MECH PLACE OVR/TOP TOILET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0175 NEW	FOOT REST USE W/COMMODE CHAIR EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0181 NEW	PWR PRESS RED MATTRESS PAD W/PUMP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0182 NEW	PUMP ALTERNATING PRESSURE PAD REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0183 NEW	Powered pressure reducing underlay/pad	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0184 NEW	DRY PRESSURE MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0185 NEW	GEL/GEL-LIKE PRSS PAD MATTRSS STD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0186 NEW	AIR PRESSURE MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0187 NEW	WATER PRESSURE MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0188 NEW	SYNTHETIC SHEEPSKIN PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0189 NEW	LAMBSWOOL SHEEPSKIN PAD ANY SIZE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0190 NEW	PSTN CUSH/PILLOW/EDGE ALL COMPONENT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0191 NEW	HEEL OR ELBOW PROTECTOR EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0193 NEW	POWERED AIR FLOTATION BED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0194 NEW	AIR FLUIDIZED BED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0196 NEW	GEL PRESSURE MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0197 NEW	AIR PRSS PAD MATTRSS STD LEN&WDTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0198 NEW	WATR PRSS PAD MATTRSS STD LEN&WDTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0199 NEW	DRY PRSS PAD MATTRSS STD LEN&WDTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0200 NEW	HEAT LAMP W/O STAND W/INFRARD ELEM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0202 NEW	PHOTOTHERAPY LIGHT WITH PHOTOMETER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0203 NEW	TX LTBOX MINI 10000 LUX TABLE TOP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0205 NEW	HEAT LAMP W/STAND W/INFRARD ELEM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0210 NEW	ELECTRIC HEAT PAD STANDARD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0215 NEW	ELECTRIC HEAT PAD MOIST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0217 NEW	WATER CIRCULATING HEAT PAD W/PUMP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0218 NEW	WATER CIRCULATING COLD PAD W/PUMP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0221 NEW	INFRARED HEATING PAD SYSTEM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0225 NEW	HYDROCOLLATOR UNIT INCLUDES PADS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0231 NEW	NON-CNTC WND WARM DEVC W/CARD&COVR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0232 NEW	WOUND WARMING WOUND COVER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0235 NEW	PARAFFIN BATH UNIT PORTABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0236	PUMP FOR WATER CIRCULATING PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0239	HYDROCOLLATOR UNIT PORTABLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0240	BATH/SHOWER CHAIR W/WO WHLS ANY SZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0241	BATHTUB WALL RAIL EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0242	BATHTUB RAIL FLOOR BASE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0243	TOILET RAIL EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0244	RAISED TOILET SEAT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0245 NEW	TUB STOOL OR BENCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0246 NEW	TRANSFER TUB RAIL ATTACHMENT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0247 NEW	TRNSF BENCH TUB/TOILET W/WO COMMODE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0248 NEW	TRNSF BENCH HEVY DUTY TUB/TOILET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0249 NEW	PAD H2O CIRC HEAT UNIT REPLCMT ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0250 NEW	HOS BED FIX HT W/RAIL W/MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0251 NEW	HOS BED FIX HT W/RAIL W/O MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0255 NEW	HOS BED VARIBL HT W/RAIL W/MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0256 NEW	HOS BED VARIBL HT W/RAIL NO MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0260 NEW	HOS BED SEMI-ELEC W/RAIL W/MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0261 NEW	HOS BED SEMI-ELEC W/RAIL NO MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0265 NEW	HOS BED TOT ELEC W/RAIL W/MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0266 NEW	HOS BED TOT ELEC W/RAIL W/O MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0270 NEW	HOSP BED INST TYPE: W/MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0271	MATTRESS INNER SPRING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0272	MATTRESS FOAM RUBBER	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0273	BED BOARD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0274	OVER-BED TABLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0275	BED PAN STANDARD METAL OR PLASTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0276	BED PAN FRACTURE METAL OR PLASTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0277	POWER PRESSURE-REDUCING AIR MATTRESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0280 NEW	BED CRADLE ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0290 NEW	HOS BED FIX HT W/O RAIL W/MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0291 NEW	HOS BED FIX HT W/O RAIL W/O MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0292 NEW	HOS BED VARIBL HT NO RAIL W/MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0293 NEW	HOS BED VARIBL HT W/O RAIL/MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0294 NEW	HOS BED SEMI-ELEC NO RAIL W/MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0295 NEW	HOS BED SEMI-ELEC W/O RAIL/MATRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0296 NEW	HOS BED TOT ELEC W/O RAIL W/MATRRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0297 NEW	HOS BED TOT ELEC W/O RAIL/MATRRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0300 NEW	PED CRIB HOS GRADE ENC W/WO TOP ENC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0301 NEW	HOS BED HEVY DUTY W/WT CAP >350 PDS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0302 NEW	HOS BED WT CAP>600 W/O MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0303 NEW	HOS BED HEVY DUTY WT CAP >350<=600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0304 NEW	HOS BED XTRA HD WT CAP>600 MTRRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0305 NEW	BEDSIDE RAILS HALF-LENGTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0310 NEW	BEDSIDE RAILS FULL-LENGTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0315 NEW	BED ACCESS: BOARD/TABL/SUPPRT DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0316 NEW	SFTY ENCLOS FRME/CANOPY W/HOSP BED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0325 NEW	URINAL; MALE JUG-TYPE ANY MATERIAL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0326 NEW	URINAL; FE JUG-TYPE ANY MATERIAL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0328 NEW	HOSP BED PED MANUAL INCL MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0329 NEW	HOSP BED PED ELECTRIC INCL MATTRESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0350 NEW	CNTRL U ELEC BOWEL IRRIG/EVAC SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0352 NEW	DISPBL PACK W/ELEC BOWEL IRRIG/EVAC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0370 NEW	AIR PRESSURE ELEVATOR FOR HEEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0371 NEW	NONPWR PRSS RDUC OVRLAY MATTRSS STD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0372 NEW	PWR AIR OVRLAY MATTRSS STD LEN&WDTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0373 NEW	NONPWR ADVD PRESS REDUCING MATTRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0424 NEW	STATION COMPRS GASOUS O2 SYS RENT;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0425 NEW	STATION COMPRS GAS SYS PURCHASE;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0430 NEW	PRTBLE GASEOUS O2 SYS PURCHASE;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0431 NEW	PRTBLE GASEOUS O2 SYS RENTAL;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0433 NEW	PORTBL LIQ O2 SYS RENT; HOME LIQUIF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0434 NEW	PRTBLE LIQUID O2 SYS RENTAL;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0435 NEW	PRTBLE LIQUID O2 SYS PURCHASE;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0439 NEW	STATION LIQUID O2 SYS RENTAL;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0440 NEW	STATION LIQUID O2 SYS PURCHASE;	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0441 NEW	STATIONARY O2 CONT GAS 1 MO SPL=1 U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0442 NEW	STATIONARY O2 CONT LQD 1 MO SPL=1 U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0443 NEW	PORTBL O2 CONTENT GAS 1 MO SPL= 1 U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0444 NEW	PORTBL O2 CONTENT LIQ 1 MO SPL=1 U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0445 NEW	OXIMETER MSR BLD O2 LEVL NON-INVASV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0446 NEW	TOPICAL OXYGEN DELIVERY SYSTEM NOS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Hyperbaric Oxygen Therapy (HBOT) or Topical Oxygen Therapy (TOT) PolicyTech
E0447 NEW	Port O2 cont,liq,1 mo supply	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0455 NEW	O2 TENT EXCLD CROUP/PEDIATRIC TENTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0457 NEW	CHEST SHELL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0459 NEW	CHEST WRAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0462 NEW	ROCKING BED W/WO SIDE RAILS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0465 NEW	Home ventilator,any type, invasive interface	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0466 NEW	Home vent,any type,noninvasive interface	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0467 NEW	Home vent,multi func resp dev	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0468 NEW	Home vent,dual func resp dev,cough stim, incl all accessories	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0469	Lung expansion airway clearance,con't high	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0470 NEW	RESP ASST DEVC BI-LEVEL PRSS CAPABIL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0471 NEW	RESP ASST DEVC BI-LEVEL PRSS CAPABIL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0472 NEW	RESP ASST DEVC BI-LEVEL PRSS CAPABIL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0480 NEW	PERCUSSOR ELEC/PNEUMAT HOME MODEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0481 NEW	INTRAPULM PERCUSS VENT SYS&REL ACSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0482 NEW	COUGH STIM DEVC ALTRNAT POS&NEG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0483 NEW	HI FREQ CHST WALL AIR-PULSE GEN EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0484 NEW	OSCILLAT POS EXPIRTORY PRSS NO-ELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0485 NEW	ORL DEVC/APPL RDUC UA COLLAPS PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0486 NEW	ORL DEVC/APPL RDUC UA COLLAPS CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0487 NEW	SPIROMETER ELECTRONIC INCL ACCESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0492 NEW	Pwr source/cntrl unit for oral dev/appl tongue musc,phone app	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0493 NEW	Oral dev/appl neuromusc elec stim tongue musc,90-day supply	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0500 NEW	IPPB MACH BUILT-IN NEBULZ;VALVS;PWR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0530 NEW	Elec pos obstr slp apnea trmnt,w sensor,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0550 NEW	HUMDIFR EXT SUPLMNTL DUR IPPB TX/O2	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0555 NEW	HUMDIFR GLASS/AUTOCLVBL PLSTC BOTTL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0560 NEW	HUMDIFIR SUPLMNTL DUR IPPB TX/O2	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0561 NEW	HUMDIFIR NON-HEAT USED W/POS AIRWAY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0562 NEW	HUMDIFIR HEAT USED W/POS ARWAY PRSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0565 NEW	COMPRS AIR PWR EQP NOT SLF-CONTAIND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0570 NEW	NEBULIZER WITH COMPRESSOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0572 NEW	AROSL COMPRS ADJSTBL PRSS INTERMIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0574 NEW	US/ELEC AROSL GEN W/SM VOLUME NEB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0575 NEW	NEBULIZER ULTRASONIC LARGE VOLUME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0580 NEW	NEBULIZR GLASS/AUTOCLVBL PLST BOTTL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0585 NEW	NEBULIZER W/COMPRESSOR AND HEATER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0600 NEW	RESP SUCTN PUMP HOME MODEL ELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0601 NEW	CONTINUOUS POS AIRWAY PRESSURE DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0602 NEW	BREAST PUMP MANUAL ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0603 NEW	BREAST PUMP ELECTRIC ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0604 NEW	BREAST PUMP HEVY DUTY HOSP GRADE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0605 NEW	VAPORIZER ROOM TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0606 NEW	POSTURAL DRAINAGE BOARD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0607 NEW	HOME BLOOD GLUCOSE MONITOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0610 NEW	PACEMKR MON CHCK BATTERY AUDBL&VISBL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0615 NEW	PACEMKR MON CHCK BATTERY DIGTL/VISBL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0616 NEW	IMPL CARD EVNT REC MEM ACTVTR&PRGMR	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Ambulatory Cardiac Monitors (Excluding Holter Monitors) PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0617	EXT DEFIB W/INTEGRATED ECG ANALY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0618	APNEA MONITOR W/O RECORDING FEATURE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0619	APNEA MONITOR W/RECORDING FEATURE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0620	SKN PIERC DEVC CLCT CAPLRY BLD LASR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0621	SLING/SEAT PT LIFT CANVAS/NYLON	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0625	PATIENT LIFT BATHROOM OR TOILET NOC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0627	SEAT LIFT MECH COMB LIFT-CHAIR MECH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0629 NEW	SEAT LIFT MECH NON-ELECTRIC ANY TYP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0630 NEW	PATIENT LIFT HYRAULIC/MECH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0635 NEW	PATIENT LIFT ELECTRIC W/SEAT/SLING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0636 NEW	MX PSTN PT SUPP SYS LIFT PT CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0637 NEW	COMB SIT STAND FRAME/TABLE SEATLIFT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0638 NEW	STAND FRAME/TABLE SYS 1 POS ANY SZ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0639 NEW	PT LIFT MOVEABLE DISASSMBL&REASSMBL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0640	PT LIFT FIX SYS ALL CMPNTS/ACCESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0641	STAND FRAME/TABLE SYS MX-POS ANY SZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0642	STAND FRAME/TABLE SYS MOBILE ANY SZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0650	PNEUMAT COMPRS NONSEG HOME MODEL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0651	PNEUMAT COMPRS NO CALBRT GRDNT PRSS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0652	PNEUMAT COMPRS W/CALBRT GRADNT PRSS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0655	NONSEG PNEUMAT APPLINC HALF ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0656	SEG PNEUMAT APPLINC W/COMPRS TRUNK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0657	SEG PNEUMAT APPLINC W/COMPRS CHEST	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0660	NONSEG PNEUMAT APPLINC FULL LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0665	NONSEG PNEUMAT APPLINC FULL ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0666	NONSEG PNEUMAT APPLINC HALF LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0667	SEG PNEUMAT APPLINC COMPRS FULL LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E0668	SEG PNEUMAT APPLINC COMPRS FULL ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0669	SEG PNEUMAT APPLINC COMPRS HALF LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0670	SEG PNEU APPL P C INT 2 F LEG TRNK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0671	SEG GRAD PRSS PNUMAT APPLNC FUL LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0672	SEG GRAD PRSS PNUMAT APPLNC FUL ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0673	SEG GRAD PRSS PNUMAT APPLNC HLF LEG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0675	PNEUMAT COMPRS DEVC HI PRESS RAPID	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0676	INTERMITT LIMB COMPRESSION DEVC NOS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0677 NEW	NONPNEUMATIC SEQUENTIAL COMP GARMENT TRUNK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0678 NEW	Non-pneumatic sequential compression garment, full leg	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0679 NEW	Non-pneumatic sequential compression garment, half leg	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0680 NEW	Non-pneumatic comp controller w seq calibrated gradient prssre	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0681 NEW	Non-pneumatic comp controller w/out calibrate gradient pressure	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0682 NEW	Non-pneumatic sequential compression garment, full arm	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0683 NEW	Non-pneumatic,non seq,peristaltic wave comp	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0691	UV LIGHT TX BULB/LAMP; TX 2 SQ FT/<	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0692	UV LT TX SYS PANL W/LAMP 4 FT PANEL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0693	UV LT TX SYS PANL W/LAMP 6 FT PANEL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0694	UV MX DIR LT TX SYS 6 FT CABINET	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0700	SAFETY EQP DEVICE/ACCESSRY ANY TYPE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0705	TRANSFER DEVICE ANY TYPE EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0710	RESTRAINT ANY TYPE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0711 NEW	UE MED TUBING/LINES ENCL/COV DEVC RSTR ELBOW ROM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0715 NEW	Intravaginal dev to strengthen pelv flr muscles	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0716 NEW	Supplies/accessories intravaginal devfor pelv flr muscles	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0720 NEW	TENS DEVICE 2 LEAD LOCALIZED STIM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0730 NEW	TENS DEVICE 4/> LEADS MX NERVE STIM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0731 NEW	FORM FIT CONDUCT GARM TENS/NMES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0732 NEW	Cranial electrotherapy stimulation (ces) system, any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0733 NEW	Transcutaneous elec nerve stim for elec stim trigeminal nerve	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0734 NEW	Ext upper limb tremor stim peripheral nerves of the wrist	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0735 NEW	Non-invasive vagus nerve stimulator	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0736 NEW	Transcutaneous tibial nerve stimulator	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0737 NEW	Transcutaneous tibial nerve stim,controlled by phone app	MH Yes	Clarity No	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech Policy: Peripheral Nerve Stimulation Policy Tech
E0738 NEW	Up extrem rehab sys,active assist muscl re-education	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0739 NEW	Rehab sys w/interactive interface prov active assist in rehab therapy	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0740 NEW	N-IMPL PELV FLR ELEC STIM CMPL SYS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Pelvic Floor Stimulation for the Treatment of Incontinence and/or Overactive Bladder PolicyTech
E0743 NEW	External low ext nerve stim,restless legs syndrome, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0744 NEW	NEUROMUSCULAR STIMULATOR SCOLIOSIS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0745 NEW	NEUROMUSC STIM ELEC SHOCK UNIT	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan Policy: Peripheral Nerve Stimulation Policy Tech
E0746 NEW	ELECTROMYOGRAPHY BIOFEEDBACK DEVICE	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Biofeedback in an Outpatient Setting to Treat Incontinence or Constipation PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0747 NEW	OSTOGNS STIM NONINVASV NOT SP APPLC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0748 NEW	OSTOGNS STIM NONINVASV SP APPLIC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: eviCore Musculoskeletal eviCore
E0749 NEW	OSTOGNS STIM ELEC SURGICALLY IMPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0755 NEW	ELEC SALIVARY REFLEX STIMULATOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0760 NEW	OSTOGNS STIM LW INTENS US NONINVASV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0762 NEW	TRANSCUT ELEC JOINT STIM DEVC SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0764 NEW	FUNC NEUROMUSC STIM CMPT SC INJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0765 NEW	FDA APPRVD NRV STIM TX NAUSA&VOMIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0766 NEW	ELEC STM DVC CA TX ALL ACC ANY TYPE	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Electric Tumor Treatment Fields (TTF) PolicyTech
E0767 NEW	Intrabuccal,syst del amplitude-modulated radio-electromag field dev,for CA	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech
E0769 NEW	ESTIM/ELECMAGNET WOUND TX DEVC NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0770 NEW	FES TRANSQ STIM NERV&/MUSC CMPL NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0776 NEW	IV POLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0779 NEW	AMB INFUS PUMP MECH INFUS 8 HR/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0780 NEW	AMB INFUS PUMP MECH INFUS < 8 HR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0781 NEW	AMB INFUS PUMP 1/MX CHANNL W/ADMIN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0782 NEW	INFUS PUMP IMPL NON-PROGMMABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0783 NEW	INFUS PUMP SYSTEM IMPL PROGMMABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0784 NEW	EXTERNAL AMB INFUSION PUMP INSULIN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0785 NEW	IMPLANT INTRASPINL CATH PUMP-REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0786 NEW	IMPLNT PROGRAM INFUSION PUMP-REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0787 NEW	Ext amb inf pump,insulin,dos rate adj	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0791 NEW	PAR INFUS PUMP STAT SINGLE/MXCHANNEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0830 NEW	AMB TRACTION DEVICE ALL TYPES EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0840 NEW	TRACTION FRAME HEADBOARD CERV TRACT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0849 NEW	TRAC EQP CERV FREESTND FRME PNEUMAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0850 NEW	TRACT STAND FREESTAND CERV TRACT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0855 NEW	CERV TRACT EQUIP NOT RQR ADD STAND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0856 NEW	CERVICAL TRAC DEVC INFL AIR BLADDER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0860 NEW	TRACTION EQUIPMENT OVERDOOR CERV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0870 NEW	TRACT FRAME FOOTBOARD EXTREM TRACT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0880 NEW	TRACT STAND FREESTAND EXTREM TRACT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0890 NEW	TRAC FRAME ATTCH FOOTBRD PELV TRAC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0900 NEW	TRACT STAND FREESTAND PELV TRACT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0910 NEW	TRAPEZ BAR PT HLPR ATTCH BED W/GRAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0911 NEW	TRAPEZ BAR PT WT >250 LBS BED GRAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0912 NEW	TRAPEZ BAR PT WT >250 LBS FREE STND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0920 NEW	FX FRAME ATTCH BED INCL WEIGHTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0930 NEW	FX FRAME FREESTANDING INCL WEIGHTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0935 NEW	CONT PSV MOT EXER DEVC KNEE ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0936 NEW	CONT PASS MOTION EXER DEVC NOT KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0940 NEW	TRAPEZ BAR FREESTND CMPL W/GRAB BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0941 NEW	GRAVITY ASSTD TRAC DEVICE ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0942	CERVICAL HEAD HARNESS/HALTER	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0944	PELVIC BELT/HARNESS/BOOT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0945	EXTREMITY BELT/HARNESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0946	FX FRAM DUAL CROSS BARS ATTACH BED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0947	FX FRAME ATTCH CMLPX PELV TRAC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0948	FX FRAME ATTCH CMLPX CERV TRAC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0950	WHEELCHAIR ACCESSORY TRAY EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0951 NEW	HEEL LOOP/HOLDER ANY TYPE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0952 NEW	TOE LOOP/HOLDER ANY TYPE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0953 NEW	Wheelchair acc,lat thigh/knee supp, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0954 NEW	Wheelchair acc,foot box,any type,each foot	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0955 NEW	WC ACSS HEADREST CUSHND HARDWARE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0956 NEW	WC ACSS LAT TRNK/HIP HARDWARE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0957 NEW	WC ACSS MED THI SUPP HARDWARE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0958	MNL WC ACCESS 1-ARM DRIVE ATTCH EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0959	MNL WC ACCESS ADAPTER FOR AMPUTEE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0960	WC ACSS SHLDR HRNSS/STRAPS/CHST STR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0961	MNL WC ACCESS WHL LOCK BRAKE EXT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0966	MNL WC ACCESS HEADREST EXTENSION EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0967	MNL WC AC HND RIM PROJ REPL ONL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E0968	COMMODE SEAT WHEELCHAIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0969 NEW	NARROWING DEVICE WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0970 NEW	NO 2 FOOTPLATES EXCEPT ELEV LEGREST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0971 NEW	MNL WC ACSS ANTI-TIPPING DEVC EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0973 NEW	WC ACCSS ADJ HT DTACH ARMST EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0974 NEW	MNL WC ACCESS ANTI-ROLLBACK DEVC EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0978 NEW	WC ACSS PSTN/SFTY BELT/PELV STRP EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0980 NEW	SAFETY VEST WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0981 NEW	WC ACSS SEAT UPHLSTER REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0982 NEW	WC ACSS BACK UPHLSTER REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0983 NEW	MNL WC ACSS PWR ADD-ON CNVRT MNL WC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0984 NEW	MNL WC ACSS PWR ADD-ON CNVRT MNL WC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0985 NEW	WHEELCHAIR ACCESS SEAT LIFT MECH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0986 NEW	MNL WC ACSS PSH-RM ACT PWR ASST SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0988 NEW	MNL WC ACSS LEVR-ACT WHL DRIVE PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E0990 NEW	WC ACCSS ELEV LEG REST CMPL ASSMBL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0992 NEW	MNL WHLCHAIR ACCSS SOLID SEAT INSRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0994 NEW	ARMREST EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E0995 NEW	WC AC CALF REST/PAD REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1002 NEW	WC ACSS PWR SEATING SYS TILT ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1003 NEW	WC ACSS RECLINE ONLY NO SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1004 NEW	WC ACSS RECLINE W/MECH SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1005 NEW	WC ACSS RECLINE W/PWR SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1006 NEW	WC ACSS TILT&RECLINE NO SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1007 NEW	WC ACSS TILT&RECLIN MECH SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1008 NEW	WC ACSS TILT&RECLINE PWR SHEAR RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1009 NEW	WC ACCSS MECH LINKD LEG ELEV EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1010 NEW	WC ACCSS PWR LEG ELEV SYS PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1011 NEW	MOD PED SIZE WC WIDTH ADJ PACKAGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1012	Wheelchair acc,add to power seat sys,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1014	RECLIN BACK ADD PED SIZE WHLCHAIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1015	SHOCK ABSORBER MANUAL WHEELCHAIR EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1016	SHOCK ABSORBER POWER WHEELCHAIR EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1017	HEAVY DUTY SHOCK ABSORBR MNL WC EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1018	HEAVY DUTY SHOCK ABSORBR PWR WC EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1020	RES LIMB SUP SYS WHEELCHAIR ANY TYP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1028	WC ACCSS MANL SWINGAWAY OTH CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1029	WHEELCHAIR ACCESS VENT TRAY FIX	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1030	WHLCHAIR ACCESS VENT TRAY GIMBALED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1031	ROLLABOUT CHAIR W/CASTRS 5 IN/GT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1035	MX-PSTN PT TRNSF SYS PT <=/= 300 LBS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1036	MX-PSTN PT TRNSF SYS PT > 300 LBS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1037	TRANSPORT CHAIR PEDIATRIC SIZE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1038 NEW	TRNSPRT CHAIR PT WT CAP TO&= 300 LB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1039 NEW	TRNSPRT CHAIR ADLT PT WT CAP>300 LB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1050 NEW	FULL RECLINE WC FIX ARM DETACH LEGS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1060 NEW	FULL RECLN WHLCHAR;DTACH ARM LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1070 NEW	FULL RECLN WHLCHR;DTACH ARM FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1083 NEW	HEMI-W/C; FIXED ARM DETACH LEGREST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1084 NEW	HEMI-WHLCHAIR; DTACHBLE ARMS LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1085 NEW	HEMI-WHLCHAIR;FIX ARM DTACH FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1086 NEW	HEMI-WHLCHAIR; DTACHBL ARMS FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1087 NEW	HI-STRGTH WHLCHAIR; FIX ARMS LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1088 NEW	HI-STRGTH WHLCHAIR;DTACH ARM LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1089 NEW	HI-STRGTH WHLCHAIR; FIX ARM FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1090 NEW	HI-STRGTH WHLCHAR;DTACH ARM FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1092 NEW	WIDE HEVY-DUT WHLCHR; DTACH ARM LEG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1093 NEW	WIDE HEVY-DUT WHLCHR;DTACH ARM FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1100 NEW	SEMI-RECLN WHLCHR;FIX ARM DTACH LEG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1110 NEW	SEMI-RECLN WHLCHR; DTACH ARM LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1130 NEW	STD WHLCHAIR; FIX ARM DTACH FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1140 NEW	WHLCHAIR; DTACHBLE ARMS FOOTRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1150 NEW	WHLCHAIR; DTACHBLE ARMS LEGRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1160 NEW	WHLCHAIR; FIX ARMS DTACHBL LEGRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1161 NEW	MANUAL ADLT SZ WC INCL TILT SPACE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1170 NEW	AMP WHLCHAIR; FIX ARM DTACH LEGREST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1171 NEW	AMP WHLCHAIR;FIX ARM NO FOOT/LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1172 NEW	AMP WHLCHR;DTACH ARM NO FOOT/LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1180 NEW	AMP WHLCHAIR; DTACHBL ARMS FOOTRSTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1190 NEW	AMP WHLCHAIR; DTACHBL ARMS LEGRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1195 NEW	HVY DUT WHLCHR;FIX ARM DTACH LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1200 NEW	AMP WHLCHAIR; FIX ARM DTACH FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1220 NEW	WHEELCHAIR; SPCL SIZED/CONSTRUCTED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1221 NEW	WHEELCHAIR WITH FIXED ARM FOOTRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1222 NEW	WHEELCHAIR W/FIX ARM ELEV LEGRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1223 NEW	WHLCHAIR W/DETACHBLE ARMS FOOTRESTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1224 NEW	WHLCHAIR W/DTACHBL ARMS ELEV LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1225 NEW	WC ACCESS MNL SEMIRECLINING BACK EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1226 NEW	WC ACCESS MNL FULL RECLIN BACK EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1227 NEW	SPECIAL HEIGHT ARMS FOR WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1228 NEW	SPECIAL BACK HEIGHT FOR WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1229 NEW	WHEELCHAIR PEDIATRIC SIZE NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1230 NEW	PWR OP VEH SPEC BRAND&MODEL NUMBER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1231 NEW	WC PED SZ TILT-IN-SPACE RIGD W/SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1232 NEW	WC PED SZ TILT-IN-SPACE FOLD W/SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1233 NEW	WC PED SZ TILT-IN-SPCE RIGD NO SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1234 NEW	WC PED SZ TILT-IN-SPCE FOLD NO SEAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1235 NEW	WC PED SZ RIGD ADJUSTBL W/SEAT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1236 NEW	WC PED SZ FOLD ADJUSTBL W/SEAT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1237 NEW	WC PED SZ RIGD ADJUSTBL NO SEAT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1238 NEW	WC PED SZ FOLD ADJUSTBL NO SEAT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1239 NEW	POWER WHEELCHAIR PEDIATRIC SIZE NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1240 NEW	LGHTWT WHLCHAIR; DTACH ARMS LEGRSTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1250 NEW	LGHTWT WHLCHR;FIX ARM DTACH FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1260 NEW	LGHTWT WHLCHAIR; DTACH ARMS FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1270 NEW	LGHTWT WHLCHR; FIX ARM DTACH LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1280 NEW	HEVY-DUTY WHLCHR; DTACH ARMS LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1285 NEW	HEVY-DUTY WHLCHR;FIX ARM DTACH FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1290 NEW	HEVY-DUTY WHLCHR; DTACH ARM FOOTRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1295 NEW	HEVY-DUTY WHLCHAIR; FIX ARMS LEGRST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1296 NEW	SPECIAL WHEELCHAIR SEAT HT FROM FLR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1297 NEW	SPECIAL WHLCHAIR SEAT DEPTH UPHLSTR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1298 NEW	SPCL WHLCHAIR SEAT DPTH&/WDTH CNSTR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1300 NEW	WHIRLPOOL PORTABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1301 NEW	Whirlpool tub, walk-in, portable	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1310 NEW	WHIRLPOOL NONPORTABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1352 NEW	O2 acc,flow reg,pos inspiratory press	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1353 NEW	REGULATOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1354 NEW	O2 ACCESS CART PRTBLE CYL/CONC REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1355 NEW	STAND/RACK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1356 NEW	O2 ACCESS BTRY PACK/CRTRDGE REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1357 NEW	O2 ACCESS BATTERY CHARGER REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1358 NEW	O2 ACCESS DC POWER ADAPTER REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1372 NEW	IMMERSION EXTERNAL HEATER NEBULIZER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1390 NEW	O2 CONC 85%/>O2 CONC PRSC FLW RATE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1391 NEW	O2 CONC 2 DEL 85%/>O2 CONC FLW RATE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1392 NEW	PORTABLE OXYGEN CONCENTRATOR RENTAL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1399 NEW	DME MISCELLANEOUS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1405 NEW	O2&WATR VAPR ENRICH SYS W/HEAT DEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1406 NEW	O2&WATR VAPR ENRCH SYS NO HEAT DEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1500 NEW	Centrifuge, for dialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1510 NEW	Kidney,dialysate del sys kidn mach,pump	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1520 NEW	Herparin inf pump for hemodialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1530 NEW	Air bubble det for hemodialysis,each, repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1540 NEW	Press alarm,hemodialysis,each ,repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1550 NEW	Bath cond meter for hemodialysis,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1560 NEW	Blood leak det,hemodialysis, each repl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1570 NEW	Adj chair,for ESRD patients	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1575 NEW	Trans protect/fluid barr, for HD, any size, per 10	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1580 NEW	Unipuncture control sys,hemodialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1590 NEW	Hemodialysis machine	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1592 NEW	Auto intermittent per dialy sys	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1594 NEW	Cycler dial mach for per dialy	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1600	Del and/or install charge hemodialysis equip	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1610 NEW	Rev osmosis water pur sys,hemodialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1615 NEW	Deionizer water pur sys,hemodialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1620 NEW	Blood pump,hemodialysis, replc	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1625 NEW	Water soft sys,hemodialysis	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1630 NEW	Reciprocating per dialy sys	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1632 NEW	Werable art kidney,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1634 NEW	Per Dialysis clamps,each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1635 NEW	Comp travel hemodialyzer sys	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1636 NEW	Sorben cart,hemodialysis, per 10	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1637 NEW	Hemostats, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1639 NEW	SCALE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1699 NEW	Dialysis equip, not otherwise spec	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1700 NEW	JAW MOTION REHABILITATION SYSTEM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1701 NEW	REPL CUSHNS JAW MOT REHAB SYS PKG 6	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1702	REPL MSR SCLS JAW MOT REHAB SYS 200	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1800	DYN ADJUSTABLE ELB EXT/FLX DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1801	STATIC PROGRESSV STRETCH ELBOW DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1802	DYN ADJUSTBL FORARM PRON/SUPIN DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1805	DYN ADJUSTABLE WRIST EXT/FLX DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1806	STATIC PROGRESSV STRETCH WRIST DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E1810	DYN ADJUSTABLE KNEE EXT/FLX DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1811	STATIC PROGRESSV STRETCH KNEE DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1812	DYN KNEE EXT/FLEX DEVC RESIST CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1815	DYN ADJ ANK EXT/FLX DVC W/INTF MATL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1816	STATIC PROGRESSV STRETCH ANKLE DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1818	STATIC PROGRSV STRETCH FOREARM DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1820	REPL SFT INTERFCE MATL DYN EXT/FLX	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E1821	REPL SFT INTERFCE MATL/CUFF BI-DIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E1825 NEW	DYN ADJUSTABLE FINGER EXT/FLX DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1830 NEW	DYN ADJUSTABLE TOE EXT/FLX DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1831 NEW	STATIC PROGRESSIVE STRETCH TOE DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1840 NEW	DYN ADJUST SHLDR FLX/ABDUCT/ROT DVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1841 NEW	STATIC PROGRS STRETCH SHOULDER DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E1902 NEW	CMNCT BD NON-ELEC AUG/ALTERNTV DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2000 NEW	GASTR SUCTN PUMP HOME MODEL ELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2001 NEW	Suct pump,home model,port/stationary,elec,any type,for use w ext urine mgmnt syst	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2100 NEW	BLD GLU MON INTEGRT VOICE SYNTHESZR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2101 NEW	BLD GLU MON INTGRT LANCING/BLD SAMP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2102 NEW	Adju cgm receiver/monitor	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2103 NEW	Non-adju non-imp cgm or receiver	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2104 NEW	Home bl glucose monitor intgrtd lancing/bl samp test cartridge	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2120 NEW	PULSE GEN SYS TYMPANIC TX INNR EAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2201 NEW	MNL WC ACSS SEAT WIDTH >/=20 IN &<24	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2202 NEW	MNL WC ACSS SEAT WIDTH 24-27 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2203 NEW	MNL WC ACSS SEAT DEPTH 20 < 11 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2204 NEW	MNL WC ACSS SEAT DEPTH 22-25 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2205 NEW	MNL WC HANDRIM W/O PROJ REPL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2206 NEW	MANL WC AC WL ASM CMPL REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2207 NEW	WHLCHAIR ACCESS CRUTCH&CANE HLDR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2208 NEW	WHEELCHAIR ACCESS CYL TANK CARR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2209 NEW	ARM TROUGH W/WO HAND SUPPORT EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2210 NEW	WC ACCESS BEARINGS ANY TYPE REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2211 NEW	MNL WC ACESSE PNEUMAT PROPULSN TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2212 NEW	MNL WC TUBE PNEUMAT PROPULSION TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2213 NEW	MNL WC INSRT PNEUMAT PROPULSN TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2214 NEW	MNL WC ACCESS PNEUMAT CASTER TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2215 NEW	MNL WC ACSS TUBE PNEUMAT CASTR TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2216 NEW	MNL WC ACSS FOAM FILL PROPULSN TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2217 NEW	MNL WC ACCSS FOAM FILL CASTER TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2218 NEW	MNL WC ACCSS FOAM PROPULSION TIRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2219 NEW	MNL WC ACSS FOAM CASTER TIRE ANY SZ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2220 NEW	MNL WC AC SLD PROP T SZ RPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2221	MNL WC AC SLD C TIR SZ REPL ONLY EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2222	MNL WC AC SLD C TIRE I WHL SZ RPL E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2224	MNL WC AC P WHL EXCL T SZ RPL ONL E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2225	MNL WC CASTR WHL EXCLD TIRE REPL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2226	MNL WC ACSS CASTR FORK REPL ONLY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2227	MNL WC GEAR RED DRIVE WHEEL EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2228	MNL WC WHL BRAKE SYS&LOCK COMPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2230 NEW	MNL WHEELCHAIR ACCESS MNL STAND SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2231 NEW	MNL WC ACCESS SOLID SEAT SUPP BASE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2291 NEW	BACK PLANR PED WC FIX ATTCH HARDWRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2292 NEW	SEAT PLANR PED WC FIX ATTCH HARDWRE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2293 NEW	BACK CONTRD PED WC ATTCH HARDWARE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2294 NEW	SEAT CONTRD PED WC ATTCH HARDWARE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2295 NEW	MNL WC ACCESS PED SIZE WC SEAT FRME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2298 NEW	Complex rehab pwr w/c assesory,pwr seat elev sys,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2301 NEW	WHEELCHAIR ACC PWR STND SYS ANY TYP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2310 NEW	PWR WC ACSS ELEC CNCT BETWN WC CNTR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2311 NEW	PWR WC ACSS ELEC CNCT BETWN WC CNTR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2312 NEW	POWER WC HAND/CHIN CONTRL INTERFACE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2313 NEW	POWER AC HARNESS UPGRD EXP CONTRLLR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2321 NEW	PWR WC ACSS HND CNTRL NO PRPRTNL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2322	PWR WC ACSS MX MECH SWITCH NOPRPTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2323	PWR WC ACSS SPCLTY JOYSTCK HND PRFB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2324	PWR WC ACSS CHIN CUP CHIN CNTRL INT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2325	PWR WC ACSS SIP&PUFF NONPRPTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2326	PWR WC ACSS BREATH TUBE KIT SIP&PUF	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2327	PWR WC ACSS HEAD CNTRL MECH PRPTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2328	PWR WC ACSS HEAD/EXT ELEC PRPTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2329	PWR WC ACSS CNTC SWITCH NOPRPTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2330	PWR WC ACCSS PROX SWITCH NOPROPRTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2331	PWR WC ACSS ATDANT CNTRL PROPRTNL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2340	POWER WC NONSTAND SEAT WD 20-23 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2341	PWR WC ACSS NONSTD SEAT W 24-27 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2342	PWR WC NONSTD SEAT DEPTH 20/21 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

E2343	PWR WC NONSTD SEAT DEPTH 22-25 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2351	PWR WC ACSS ELEC OP SPCH GEN DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2358	PWR WC GRP 34 NONSEALED LA BATT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2359	PWR WC GRP 34 SEALED LA BATT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2360	PWR WC ACSS 22 NF NON-SEALED BATTERY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2361	PWR WC ACSS 22NF SEALED LEAD BATTERY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2362	PWR WC ACSS GRP 24 NON-SEALED BATT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
E2363	PWR WC ACSS GRP 24 SEALED BATTERY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2364 NEW	PWR WC ACSS U-1 NON-SEALED BATTERY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2365 NEW	PWR WC ACSS U-1 SEALED BATTERY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2366 NEW	PWR WC ACSS BATTERY CHARGER 1 MODE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2367 NEW	PWR WC ACSS BATTERY CHARGER DUL MODE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2368 NEW	PWR WC CMPNT DR WHEEL MTR REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2369 NEW	PWR WC CMPNNT DR WHL GR BX RPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2370 NEW	P WC CMP INT DR WHL MTR&GB CMB RPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2371 NEW	PWR WC GRP 27 SEALED LEAD ACID BATT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2372 NEW	PWR WC GRP 27 NONSEAL LED ACID BATT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2373 NEW	PWR WC MINI COMPACT REMOTE JOYSTICK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2374 NEW	PWR WC STANDRD REMOTE JOYSTICK REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2375 NEW	PWR WC NONEXPANDBLE CONTROLLER REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2376 NEW	PWR WC EXPANDABLE CONTROLLER REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2377 NEW	PWR WC EXPANDBL CONTROLLER UPGRADE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2378	POWER WC CMPNT ACTUATOR REPL ONLY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2381	PWR WC PNEUMATIC WHEEL TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2382	PWR WC TUBE WHEEL TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2383	PWR WC INSERT WHEEL TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2384	PWR WC PNEUMATIC CASTR TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2385	PWR WC TUBE CASTER TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2386	PWR WC FOAM FILL WHEEL TIRE REPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2387 NEW	PWR WC FOAM FILL CASTR TIRE REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2388 NEW	PWR WC FOAM WHEEL TIRE REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2389 NEW	PWR WC FORM CASTER TIRE REPL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2390 NEW	PWR WC SOLID WHEEL TIRE REPL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2391 NEW	PWR WC SOLID CASTER TIRE REPL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2392 NEW	PWR WC S CASTR TIRE INTEGRT REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2394 NEW	PWR WC DRIVE WHEEL EXCL TIRE REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2395	PWR WC CASTER WHEEL EXCL TIRE REPL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2396	PWR WC CASTER FORK REPL ONLY EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2397	POWER WC LITHIUM BASED BATTERY EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2398	Wheelchair acc,dyn pos hrdw for back	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2402	NEG PRSS WND TX PUMP STATN/PRTBL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2500	SPEECH GEN DEV DIGTIZD<8 MINS REC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2502	SPCH GEN DEVC DGTZD>8<= 20 MINS REC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2504	SPCH GEN DEVC DGTZD>20</=40 MIN REC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2506	SPCH GEN DEVC DIGTIZD>40 MINS REC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2508	SPCH GEN DEVC SYNTHSIZD REQ MESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2510	SPCH GEN DVC SYNTHSIZD MX METH MESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2511	SPEECH GENERATING SOFTWARE PROGRAM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2512	ACSS SPCH GEN DEVICE MOUNTING SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2513	Accessory speech gen dev,electromyographic	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2599 NEW	ACCESS SPEECH GENERATING DEVICE NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2601 NEW	GEN WC SEAT CUSHN WIDTH < 22 DEPTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2602 NEW	GEN WC SEAT CSHN WDN 22 IN/GT DPTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2603 NEW	SKN PROTCT WC SEAT WDN<22IN DPTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2604 NEW	SKN PROTECT WC SEAT WDN 22 IN/GT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2605 NEW	PSTN WC SEAT CUSHN WIDTH < 22 DEPTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2606 NEW	PSTN WC SEAT CSHN WDN 22IN/GT DPTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2607	SKN PROTCT&PSTN WC SEAT WDTN <22IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2608	SKN PROTCT&PSTN WC SEAT WDTN 22IN/>	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2609	CUSTOM FAB WHLCHAIR SEAT CUSHN SIZE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2610	WHEELCHAIR SEAT CUSHION POWERED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2611	GEN WC BACK CUSHN WIDTH < 22 IN HT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2612	GEN WC BACK CUSHN WIDTH 22 IN/GT HT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2613	PSTN WC BACK CUSHN POST WDTN <22 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2614 NEW	PSTN WC BACK CUSHN POST WD 22 IN/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2615 NEW	PSTN WC BACK CUSHN POSTLAT WD<22 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2616 NEW	PSTN WC BACK CUSH POSTLAT WD 22IN/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2617 NEW	CSTM FAB WC BACK CUSHION ANY SIZE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2619 NEW	REPL COVER WC SEAT/BACK CUSHN EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2620 NEW	PSTN WC BACK CUSHN PLANAR WD <22 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
E2621 NEW	PSTN WC BACK CUSHN PLANAR WD 22IN/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2622	SKIN PROTECT WC CUSH WIDTH <22 IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2623	SKIN PROTECT WC CUSH WIDTH 22 IN/>	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2624	SKIN PROTCT&POSITION WC CUSH WD <22	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2625	SKIN PROTCT&POSITION WC CUSH W 22/>	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2626	WC SHLDR ELB MOBL ARM SUPP ADJUSTBL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2627	WC SHLDR ELB M SUPP ADJUSTBL RANCHO	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
E2628	WC SHLDR ELB MOBIL SUPP RECLINING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E2629	WC SHLDR ELB M SUPP FRICTN ARM SUPP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2630	WC SHLDR ELB M SUP MONOSUSP ARM HND	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2631	WC ADD MOBIL ARM SUPP ELEV PROX ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2632	WC ADD MOBL SUP OFFSET/LAT RCKR ARM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E2633	WC ACSS ADD MOBIL ARM SUPP SUPINATR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E3000	Speech volume mod sys,any type,inc all comp/acc	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E8000	GAIT TRAINER PED SZ POST SUPP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

E8001	GAIT TRAINER PED SZ UPRIGHT SUPP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

E8002	GAIT TRAINER PED SZ ANT SUPP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

G0151	SRVC PT HOM HLTH/HOSPICE EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0152	SRVC OT HOM HLTH/HOSPICE EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0153	SRVC SPCH&LANG PATH HH/HOSPIC EA 15	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

G0155	SRVC CLINICAL SW HH/HOSPICE EA 15	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0156	SRVC HH/HOSPICE AIDE EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0157	SRVC PT ASSIST HH/HOSPICE EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	Yes	No	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: InterQual®

G0158	SRVC OT ASSIST HH/HOSPICE EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	Yes	No	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: InterQual®

G0159	SRVC PT HH EST/DEL PT MP EA 15 MINS	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	Yes	No	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: InterQual®

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

G0160	SRVC OT HH EST/DEL OT MP EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	Yes	No	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: InterQual®

G0161	SRVC SLP HH EST/DEL SLP TX MP 15 MN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	Yes	No	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: InterQual®

G0260	INJ SI JNT; ANES &/TX AGT &ARTHROG	MH	Clarity	SCO	
NEW		Yes	Yes	Yes	

Policy: eviCore Musculoskeletal
[eviCore](#)

G0277	HPO UND PRSS FULL B CHMBR PER 30 MN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Hyperbaric Oxygen Therapy (HBOT) or Topical Oxygen Therapy (TOT)
[PolicyTech](#)

Policy: InterQual®

G0283	E-STIM 1/>NOT WND CARE PART TX PLAN	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Pelvic Floor Stimulation for the Treatment of Incontinence and/or Overactive Bladder
[PolicyTech](#)

G0297	LOW DOSE CT SCAN FOR LUNG CANCR SCR	MH	Clarity	SCO	For information about PA requirements, please contact eviCore via FAX 888-693-3210
NEW		Yes	Yes	Yes	

Policy: eviCore Radiology
[eviCore](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

G0299	DIR SNS RN HH/HOSPICE SET EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0300	Services of an LPN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

G0327	COLORECTAL CA SCR BLD BASED BIOMRKR	MH	Clarity	SCO	
NEW		Yes	Yes	Yes	

Policy: eviCore Genetic Testing
[eviCore](#)

G0329	EM TX ULCERS NOT HEALING 30 DA CARE	MH	Clarity	SCO	
		No	Yes	No	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

G0341	PERQ ISLET CELL TPLNT PV CATH&INFUS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Medically Necessary
[PolicyTech](#)

G0342	LAP ISLET CELL TPLNT PV CATH&INFUS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Medically Necessary
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

G0343	LAPROT ISLET CELL TPLNT PV CATH&INF	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Medically Necessary
[PolicyTech](#)

G0480	DR TST DEFIN DR ID M P D 1-7 DR CL	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	No	

Policy: Drug Screening/Testing for Drugs of Abuse and/or Controlled Substances
[PolicyTech](#)

G0481	DR TST DEFIN DR ID M P D 8-14 DR CL	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	No	

Policy: Drug Screening/Testing for Drugs of Abuse and/or Controlled Substances
[PolicyTech](#)

G0482	DR TST DEFN DR ID M P D 15-21 DR CL	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	No	

Policy: Drug Screening/Testing for Drugs of Abuse and/or Controlled Substances
[PolicyTech](#)

G0483	DR TST DEFIN DR ID M P D 22/M DR CL	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	No	

Policy: Drug Screening/Testing for Drugs of Abuse and/or Controlled Substances
[PolicyTech](#)

G0659	DRUG TST DEFIN DR ID M ANY # DR CLS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		No	No	No	

Policy: Drug Screening/Testing for Drugs of Abuse and/or Controlled Substances
[PolicyTech](#)

G2168	SERVICES PRFRM BY PT ASST HH SETTING EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	No	Yes	

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

G2169	SERVICES PRFRM BY OT ASST HH SETTING EA 15 MIN	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
NEW		No	No	Yes	

Policy: Home Health Care MH and SCO
[PolicyTech](#)

G6015	INTENS MOD TX DEL 1/MX FLDS TX SESS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Intensity Modulated Radiation Therapy, Outpatient
[PolicyTech](#)

G6016	CMP-B BM MD TX DEL I PLND TX P TX S	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Intensity Modulated Radiation Therapy, Outpatient
[PolicyTech](#)

G9143	Warfarin resp test/ gen tech, any meth, any numb spec(s)	MH	Clarity	SCO	
NEW		Yes	Yes	Yes	

Policy: eviCore Genetic Testing
[eviCore](#)

J0129	iNJ ABATACEPT 10 MG MEDICARE ADM SUPV PHYS	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: Pharmacy managed

J0135	INJECTION ADALIMUMAB 20 MG	MH	Clarity	SCO	
		Yes	Yes	No	

Policy: Pharmacy managed

J0225	Injection, vutrisiran, 1 mg	MH	Clarity	SCO	
NEW		Yes	No	No	

Policy: Pharmacy managed

J0517	INJECTION BENRALIZUMAB 1 MG	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J0585	BOTULINUM TOXIN TYPE A PER UNIT	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0586	INJECTION ABOBOTULINUMTOXINA 5 UNITS	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0587	INJECTION RIMABOTULINUMTOXINB 100 UNITS	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0588	INJECTION INCOBOTULINUMTOXIN A 1 UNIT	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0717	INJECTION CERTOLIZUMAB PEGOL 1 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0791	INJECTION CRIZANLIZUMAB-TMCA 5 MG	MH	Clarity	SCO
NEW		Yes	No	No

Policy: Pharmacy managed

J0881	INJECTION DARBEPOETIN ALFA 1 MCG NON-ESRD USE	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J0882	INJ DARBEPOETIN ALFA 1 MCG FOR ESRD DIALYSIS	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

J0885	INJECTION EPOETIN ALFA FOR NON-ESRD 1000 UNITS	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J1300 NEW	INJECTION ECULIZUMAB 10 MG	MH Yes	Clarity Yes	SCO No	
Policy: Pharmacy managed					
J1303 NEW	INJECTION RAVULIZUMAB-CWVZ 10 MG	MH Yes	Clarity Yes	SCO No	
Policy: Pharmacy managed					
J1411 NEW	Inj, etranacogene dezaparvovec-drlb, per therapeutic dose(Hemgenix)	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies for MH. All other plans utilize InterQual criteria.
Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech					
Policy: InterQual®					
J1412 NEW	Inj,voloctocogene roxaparvovec-rvox,per ml,cntns nomnl 2x10 vctr genes(Roctavian)	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies
Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech					
Policy: Medically Necessary PolicyTech					
J1413 NEW	Inj, delandistrogene moxeparvovec-rokl, per therapeutic dose(Elevidys)	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies
Policy: Elevidys PolicyTech					
Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech					
J1438	INJECTION ETANERCEPT 25 MG	MH Yes	Clarity Yes	SCO No	
Policy: Pharmacy managed					
J1442 NEW	INJECTION FILGRASTIM EXCLUDES BIOSIMILARS 1 MIC	MH Yes	Clarity Yes	SCO No	
Policy: Pharmacy managed					

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J1447	INJECTION TBO-FILGRASTIM 1 MICROGRAM	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1459	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1555	INJECTION IMMUNE GLOBULIN 100 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1556	INJECTION IMMUNE GLOBULIN BIVIGAM 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1557	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1559	INJECTION IMMUNE GLOBULIN HIZENTRA 100 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1561	INJECTION IMMUNE GLOBULIN NONLYOPHILIZED 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1566	INJ IG IV LYPHILIZED NOT OTHERWISE SPEC 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J1568	INJ IG OCTOGAM IV NONLYOPHILIZED 500 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J1569	INJ IG GAMMAGARD LIQ IV NONLYOPHILIZED 500 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1572	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1575	INJ IMMUNE GLOBULIN/HYALURONIDASE 100 MG IG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1576	Inj, panzyga, 500 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1599	INJ IG IV NONLYOPHILIZED E.G. LIQUID NOS 500 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1602	INJECTION GOLIMUMAB 1 MG FOR INTRAVENOUS USE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1745	INJECTION INFlixIMAB EXCLUDES BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1748	Injection,infliximab-dyyb(zymfentra),10 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J1951	Injection, leuprolide acetate for depot suspension (fensolvi), 0.25 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J2021	Inj, linezolid (hospira)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J2182	INJECTION MEPOLIZUMAB 1 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J2326	INJECTION NUSINERSEN 0.1 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J2327	Inj risankizumab-rzaa 1 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J2357	INJECTION OMALIZUMAB 5 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J2786	Injection, reslizumab, 1 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J3244	Inj. tigecycline (accord)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J3262	INJECTION TOCILIZUMAB 1 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

J3316	INJECTION TRIPTORELIN EXTENDED-RELEASE 3.75 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
NEW		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J3358 NEW	USTEKINUMAB FOR INTRAVENOUS INJECTION 1 MG	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed
J3393 NEW	Injection,betibeglogene autotemcel,per trmnt(Zynteglo)	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech Policy: Zynteglo PolicyTech
J3394 NEW	Injection,lovotibeglogene autotemcel,per trmnt(Lyfgenia)	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech Policy: Lyfgenia PolicyTech
J3398 NEW	Inj, voretigene neparovec-rzyl, 1 billion vector genomes(Luxterna)	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech Policy: Luxterna PolicyTech
J3399 NEW	Inj,onasemnogene abeparovec-xioi, per trmnt, up to 5x1015 vctr gnms(Zolgensma)	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech Policy: Zolgensma Policy Tech
J3465	INJECTION VORICONAZOLE 10 MG	MH No	Clarity Yes	SCO No	Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J3490 NEW	UNCLASSIFIED DRUGS	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed
J3590 NEW	Unclassified biologics	MH Yes	Clarity Yes	SCO Yes	Review the applicable medical policy for auth/criteria details for gene/cell therapies without treatment specific HCPCS codes. For other drugs used with this code, see Pharmacy policies. Policy: Casgevy PolicyTech Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech Policy: Laviv(azifical-T) Policy Tech Policy: Medically Necessary PolicyTech Policy: Pharmacy managed Policy: Skysona PolicyTech
J7318 NEW	HYALURONAN/DERIVATIVE DUROLANE FOR IA INJ 1 MG	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed
J7320 NEW	HYALURONAN/DERIVATIVE GENVISC 850 IA INJ 1 MG	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed
J7321 NEW	HYALURONAN/DERIV HYALGAN/SUPARTZ IA INJ PER DOSE	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed
J7322 NEW	HYALURONAN/DERIVATIVE HYMOVIS IA INJ 1 MG	MH Yes	Clarity Yes	SCO No	Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J7323	HYALURONAN/DERIVATIVE EUFLEXXA IA INJ PER DOSE	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J7324	HYALURONAN/DERIV ORTHOVISC IA INJ PER DOSE	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J7325	HYALURONAN/DERIV SYNVISIC/SYNVISIC-ONE IA INJ 1 MG	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J7326	HYALURONAN/DERIV GEL-ONE INTRA-ARTIC INJ PER DOS	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J7327	HYALURONAN/DERIVATIVE MONOVISC IA INJ PER DOSE	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: Pharmacy managed

J9035	INJECTION BEVACIZUMAB 10 MG	MH	Clarity	SCO
NEW		Yes	No	No

Policy: Pharmacy managed

J9202	GOSERELIN ACETATE IMPLANT PER 3.6 MG	MH	Clarity	SCO
NEW		Yes	No	No

Policy: Pharmacy managed

J9225	Histrelin implant (Vantas), 50 mg	MH	Clarity	SCO
		Yes	No	No

Policy: Pharmacy managed

J9226	HISTRELIN IMPLANT SUPPRELIN LA 50 MG	MH	Clarity	SCO
NEW		Yes	No	No

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

J9311	INJECTION RITUXIMAB 10 MG AND HYALURONIDASE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9312	INJECTION RITUXIMAB 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9325	Injection,talimogene laherparepvec,per 1 mill plaque form units(Imlygic)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	

Policy: Imlygic
[Policy Tech](#)

J9355	INJECTION TRASTUZUMAB 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9356	INJECTION TRASTUZUMAB 10 MG & HYALURONIDASE-OYSK	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9393	Inj, fulvestrant (teva)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9394	Inj, fulvestrant (fresenius)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>	

Policy: Pharmacy managed

J9999	Not otherwise classified,antineoplastic drugs	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Review the applicable medical policy for auth/criteria details for gene/cell therapies without treatment specific HCPCS codes. For other drugs used with this code, see Pharmacy policies.
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	

Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List
[Policy Tech](#)

Policy: Medically Necessary
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0001 NEW	STANDARD WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0002 NEW	STANDARD HEMI WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0003 NEW	LIGHTWEIGHT WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0004 NEW	HIGH STRENGTH LIGHTWEIGHT WHLCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0005 NEW	ULTRALIGHTWEIGHT WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0006 NEW	HEAVY-DUTY WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0007 NEW	EXTRA HEAVY-DUTY WHEELCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0008 NEW	Custom manual w/c base	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0009 NEW	OTHER MANUAL WHEELCHAIR/BASE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0010 NEW	STD-WT FRME MOTRIZED/PWR WHLCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0011 NEW	STD FRME MOTRIZD WHLCHAIR W/PROG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0012 NEW	LGHTWT PRTBLE MOTRIZED/PWR WHLCHAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0013 NEW	Cust motorized/power w/c base	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0014 NEW	OTH MOTORIZED/POWER WHEELCHAIR BASE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0015 NEW	DETACHBLE NONADJUSTBL HT ARMREST EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0017 NEW	DTACHBLE ADJUST HT ARMREST REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0018 NEW	DTACH ADJ HT ARMST UP PRTN REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0019 NEW	ARM PAD REPLACEMENT ONLY EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0020 NEW	FIXED ADJUSTBLE HEIGHT ARMREST PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0037 NEW	HIGH MNT FLP-UP FTREST REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0038 NEW	LEG STRAP EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0039 NEW	LEG STRAP H STYLE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0040 NEW	ADJUSTABLE ANGLE FOOTPLATE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0041 NEW	LARGE SIZE FOOTPLATE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0042 NEW	STANDARD SIZE FOOTPLTE REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0043 NEW	FOOTREST LWR EXT TUBE REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0044 NEW	FOOTREST UPR HGR BRKT REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0045 NEW	FOOTREST CMPL ASSEMBLY REPL ONLY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0046 NEW	ELEVAT LEGRST L EXT TUBE RPL ONLY E	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0047 NEW	ELEVAT LEGRST UP HGR BRKT RPL ONLY E	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0050 NEW	RATCHET ASSEMBLY REPLACEMENT ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0051 NEW	CAM RLS ASSM FTRST/LGRST RPL ONLY E	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0052 NEW	SPL EX N-INS RX INF PMP SYR CRT S E	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0053 NEW	ELEVATING FOOTRESTS ARTICULATING EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0056 NEW	SEAT HT<17/=>21 IN LTWT/ULTRLT WC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0065	SPOKE PROTECTORS EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0069	RW ASM CMPL SOLID T SPKE/MLD RPL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0070	RW ASM CMP PN T SPKS/MLD RPL ONLY E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0071	FRT C ASM COMPL PN TIRE REPL ONLY E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0072	FRT C ASM CMPL SEMIPN T RPL ONLY E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0073	CASTER PIN LOCK EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0077	FRT C ASM CMPL SLD TIRE REPL ONLY E	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0098 NEW	DRIVE BELT FOR POWER WC REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0105 NEW	IV HANGER EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0108 NEW	WC COMPONENT/ACCESSORY NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0195 NEW	ELEVATING LEGREST PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0455 NEW	INFUS PUMP UNINTRPT PARNTRAL MED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0462 NEW	TEMP REPL PT EQUIP REPR ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0552 NEW	SPL EXT INFUSION PUMP STERILE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0601 NEW	REPL BATTERY SILVER OXIDE 1.5 V EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0602 NEW	REPL BATTERY SILVER OXIDE 3 V EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0603 NEW	REPL BATTERY PUMP ALKALINE 1.5 V EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0604 NEW	REPL BATTERY PUMP LITHIUM 3.6 V EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0605 NEW	REPL BATTERY PUMP LITHIUM 4.5 V EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0606 NEW	AED W/INTGR ECG ANALY GARMNT TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0607 NEW	REPL BATTERY AUTO EXT DEFIB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0608 NEW	REPL GARMNT W/AUTO EXT DEFIB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0609 NEW	REPL ELECTRODE W/AUTO EXT DEFIB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0669 NEW	WC ACCSS SEAT/BK CUSHN NO DME PDAC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0672 NEW	ADD LOW EXT ORTHOSIS REPL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0733 NEW	PWR WC 12-24 AMP HR LEAD BATT EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0738 NEW	PORT GASEOUS O2 SYS RNTL;HOM COMPRS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0739 NEW	REPR/SRVC DME NOT O2 PER 15 MINS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0740	REPR/SRVC O2 EQP TECH PER 15 MINS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0743	SX PUMP HOME MDL PORT FOR WOUNDS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0744	ABSRB WD DR H MDL PAD 16 SQ IN/LESS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0745	ABS WD DR PAD>16 SQ IN</= 48 SQ IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0746	ABSRB WD DR H MDL PAD SZ >48 SQ IN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0800	PWR OP VEH GRP 1 STD PT TO 300 LBS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0801	PWR OP VEH GRP 1 HVY PT 301-450 LBS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0802 NEW	PWR OP VEH GRP 1 HVY PT 451-600 LBS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0806 NEW	PWR OP VEH GRP 2 STD PT TO 300 LBS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0807 NEW	PWR OP VEH GRP 2 HVY PT 301-450 LBS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0808 NEW	PWR OP VEH GRP 2 PT 451-600 LBS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0812 NEW	POWER OPERATED VEHICLE NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0813 NEW	PWR WC GRP 1 SLING SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0814 NEW	PWR WC GRP 1 CAPT CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0815 NEW	PWR WC GRP 1 SLING PT UP TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0816 NEW	PWR WC GRP 1 CAPT CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0820 NEW	PWR WC GRP 2 SLING SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0821 NEW	PWR WC GRP 2 CAPT CHAIR TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0822 NEW	PWR WC GRP 2 SLING SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0823 NEW	PWR WC GRP 2 CAPT CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0824 NEW	PWR WC GRP 2 SLING SEAT PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0825 NEW	PWR WC GRP 2 CAPT CHAIR PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0826 NEW	PWR WC GRP 2 SLING SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0827 NEW	PWR WC GRP 2 CAPT CHAIR PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0828 NEW	PWR WC GRP 2 SLING SEAT PT 601/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0829 NEW	PWR WC GRP 2X HVY DUTY CHR PT 601/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0830 NEW	PWR WC 2 SEAT ELEV SLING PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0831 NEW	PWR WC 2 SEAT ELEV CAPT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0835 NEW	PWR WC GRP 2 1 PWR SLING PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0836 NEW	PWR WC 2 1 PWR CAPT CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0837 NEW	PWR WC GRP 2 1 PWR SLING PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0838 NEW	PWR WC 2 1 PWR CAPT CHR PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0839 NEW	PWR WC 2 1 PWR SLNG SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0840 NEW	PWR WC GRP 2 1 PWR SLING PT 601/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0841 NEW	PWR WC GRP 2 MX PWR SLING PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0842 NEW	PWR WC 2 MX PWR CAPT CHR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0843 NEW	PWR WC 2 MX PWR SLING PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0848 NEW	PWR WC GRP 3 SLING SEAT PT TO &=300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0849 NEW	PWR WC GRP 3 CAPT CHAIR PT TO &=300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0850 NEW	PWR WC GRP 3 SLING SEAT PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0851 NEW	PWR WC GRP 3 CAPT CHAIR PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0852 NEW	PWR WC GRP 3 SLING SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0853	PWR WC GRP 3 CAPT CHAIR PT 451-600	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0854	PWR WC GRP 3 SLING SEAT PT 601 LB/>	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0855	PWR WC GRP 3 CAPT CHAIR PT 601 LB/>	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0856	PWR WC 3 1 PWR SLING SEAT PT TO 300	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0857	PWR WC 3 1 PWR CAPT CHAIR PT TO 300	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0858	PWR WC 3 1 PWR SLNG SEAT PT 301-450	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
K0859	PWR WC 3 1 CAP CHAIR PT 301-450	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0860 NEW	PWR WC 3 1 PWR SLNG SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0861 NEW	PWR WC 3 MX PWR SLNG SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0862 NEW	PWR WC 3 MX PWR SLING PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0863 NEW	PWR WC 3 MX PWR SLING PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0864 NEW	PWR WC 3 MX PWR SLNG SEAT PT 601/>	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0868 NEW	PWR WC GRP 4 SLING SEAT PT TO &=300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0869 NEW	PWR WC GRP 4 CAPT CHAIR PT TO &=300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0870 NEW	PWR WC GRP 4 SLING SEAT PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0871 NEW	PWR WC GRP 4 SLING SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0877 NEW	PWR WC 4 1 PWR SLING SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0878 NEW	PWR WC 4 1 PWR CAPT CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0879 NEW	PWR WC 4 1 PWR SLNG SEAT PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0880 NEW	PWR WC 4 1 PWR SLNG SEAT PT 451-600	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0884 NEW	PWR WC 4 MX PWR SLNG SEAT PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K0885 NEW	PWR WC 4 MX PWR CAP CHAIR PT TO 300	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0886 NEW	PWR WC 4 MX PWR SLING PT 301-450	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0890 NEW	PWR WC 5 PED 1 PWR SLING PT TO 125	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0891 NEW	PWR WC 5 PED MX PWR SLING PT TO 125	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0898 NEW	POWER WHEELCHAIR NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0899 NEW	PWR MOBILTY DEVC NOT CODED DME PDAC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K0900 NEW	Cust DME ,other than W/C	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

K1007 NEW	BilatI hip,knee,ankle,foot dev,pow,inc pelvic com,sing/doub uprigh	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
K1037 NEW	Docking station oral dev/app to red up airway collapse	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Experimental and Investigational Treatment PolicyTech
L0112 NEW	CRANIL CERV ORTHOT CONGN TORTICOLLI	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0113 NEW	CRANIL CERV ORTHOT TORTICOLLI PRFB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0120 NEW	CERVICAL FLEX NONADJUSTABLE PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0130 NEW	CERV FLXBL THRMOPPLSTC COLLR MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0140 NEW	CERVICAL SEMI-RIGID ADJUSTABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0150 NEW	CERV SEMI-RIGD ADJUST MOLD CHIN CUP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0160 NEW	CERV SEMI-RIGID OCCIP/MAND PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0170 NEW	CERV COLLAR MOLDED PATIENT MODEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0172 NEW	CERV COLLAR SEMI-RIGID FOAM PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0174 NEW	CERV COLLR SEMI-RGD THOR EXT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0180 NEW	CERV MX POST COLLR SUPPS ADJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0190 NEW	CERV MX POST COLLR ADJ CERV BARS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0200 NEW	CERV COLLR ADJ CERV BARS&THOR EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0220 NEW	THORACIC RIB BELT CUSTOM FABRICATED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0450 NEW	TLSO FLEX TRUNK SUPP UP THOR PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0452 NEW	TLSO FLEX TRUNK SUPP UP THOR CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0454 NEW	TLSO FLEX SC JUNC T-9 PRFAB CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0455 NEW	Thor-lumb-sac orthosis,off the shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0456 NEW	TLSO FLEX SC SCAP SPN PRFAB CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0457 NEW	Thor-lumb-sac orthosis, flex w expertise	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0458 NEW	TLSO TRIPLANR 2 SHELL ANT-XIPHOID	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0460 NEW	TLSO TRIPLANR 2 SHELL ANT-STERNL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0462 NEW	TLSO TRIPLANR 3 SHELL ANT-STERNL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0464 NEW	TLSO TRIPLANR 4 SHELL ANT-STERNL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0466 NEW	TLSO SAGITTAL CONTROL PREFAB CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0467 NEW	Thos-lumb-sac orthosis, saggital control,expertise	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0468 NEW	TLSO SAGITTAL-CORONAL PREFAB CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0469 NEW	Thos-lumb-sac orthosis,saggiatl-coronal cntrl, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0470 NEW	TLSO TRIPLANAR FRME&APRON W/STRAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0472 NEW	TLSO TRIPLANAR HYPREXT RIGD FRME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0480 NEW	TLSO TRIPLANR 1 PC NO INTERFCE CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0482 NEW	TLSO TRIPLANAR 1 PC W/INTERFCE CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0484 NEW	TLSO TRIPLANR 2 PC NO INTERFCE CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0486 NEW	TLSO TRIPLANAR 2 PC W/INTERFCE CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0488 NEW	TLSO TRIPLANR 1 PC W/INTERFCE PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0490 NEW	TLSO SAGIT-CORONAL REINFORCE PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0491 NEW	TLSO 2 RIGID PLASTIC SHELLS PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0492 NEW	TLSO 3 RIGID PLASTIC SHELLS PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0621 NEW	SACROILIAC ORTHOSIS FLEXIBLE PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0622 NEW	SACROILIAC ORTHOTIC FLEXIBLE CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0623 NEW	SACROILIAC ORTHOSIS RIGID PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0624 NEW	SACROILIAC ORTHOTIC RIGID CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0625 NEW	LUMBAR ORTHOSIS FLEXIBLE PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0626 NEW	LUMB ORTHOS RIGID POST PREFAB CUSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0627 NEW	LUMB ORTHOS RIGD A&P PNL PRFAB CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0628 NEW	LSO FLEXIBLE PREFAB OFF THE SHELF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0629 NEW	LSO FLEXIBLE CUSTOM FABRICATED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0630 NEW	LSO SAGIT CNTRL RIGID POST PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0631 NEW	LSO SAGIT CNTRL RIGID POST CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0632 NEW	LSO SAGIT CNTRL RIGID A&P CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0633 NEW	LSO SAG-COR CNTRL RIGID POST PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0634 NEW	LSO SAG-COR CNTRL RIGID POST CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0635 NEW	LSO SAG-COR CNTRL LUMB FLEX PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0636 NEW	LSO SAG-COR CNTRL LUMB FLEX CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0637 NEW	LSO SAG-COR CNTRL RIGID A&P PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0638 NEW	LSO SAG-COR CNTRL RIGID A&P CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0639 NEW	LSO SAG-COR CNTRL RIGD SHELL PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0640 NEW	LSO SAG-COR CNTRL RIGD SHELL CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0641 NEW	Lumbar orthosis,sagittal control, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0642 NEW	Lumbar orth, saggital ctrl, rigid ant,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0643 NEW	LSO,saggital ctrl,rig post,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0648 NEW	LSO,saggital ctrl,rig ant/post/off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0649 NEW	LSO,saggital coronal ctrl,rig post/off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0650 NEW	LSO,saggital ctrl,rigid, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0651 NEW	LSO,rigid shell, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0700 NEW	CTL SO ANT-POST-LAT CNTRL MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0710 NEW	CTL SO-MOLD PT-INTERFACE MATERIAL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0810 NEW	HALO PROC CERV HALO IN JACKT VEST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0820 NEW	HALO PROC CERV HALO-PLAST BDY JACKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0830 NEW	HALO PROC CERV HALO-MLWAKEE ORTHOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0859 NEW	RINGS&PINS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0861 NEW	ADD HALO PROC REPLCMT LINER/INTERFC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0970 NEW	TLSO CORSET FRONT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0972 NEW	LSO CORSET FRONT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0974 NEW	TLSO FULL CORSET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L0976 NEW	LSO FULL CORSET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0978 NEW	AXILLARY CRUTCH EXTENSION	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0980 NEW	PERONEAL STRAPS PREFAB PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0982 NEW	STOCKING SUPPORT GRIPS PREFAB SET 4	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0984 NEW	PROTECTIVE BODY SOCK PREFAB EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L0999 NEW	ADDITION TO SPINAL ORTHOTIC NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1000 NEW	CTLISO INCL FURNISH INIT ORTHOS-MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1001 NEW	CTLS IMMOBILIZER INFANT SZ PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1005 NEW	TENSION BASED SCOLIOSIS ORTHOTIC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1006 NEW	Scoliosis orthosis,sag-coronal cntrl by rigid lat frame	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1010 NEW	ADD CTLSO/SCOLIO ORTHOS AX SLING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1020 NEW	ADD CTLSO/SCOLIO ORTHOS KYPHOS PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1025 NEW	ADD CTLSO/SCOLIO ORTHOS KYPHOS PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1030 NEW	ADD CTLSO/SCOLIO ORTHOS LUMB PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1040 NEW	ADD CTLSO/SCOLIO ORTHO LUMB/RIB PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1050 NEW	ADD CTLSO/SCOLIOS ORTHOS STERNL PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1060 NEW	ADD CTLSO/SCOLIOS ORTHOS THOR PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1070 NEW	ADD CTLSO/SCOLIO ORTHO TRPEZUS SLNG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1080 NEW	ADD CTLSO/SCOLIOSIS ORTHOSIS OUTRIG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1085 NEW	ADD CTLSO/SCOLIO OUTRIG BIL-VRT EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1090 NEW	ADD CTLSO/SCOLIOS ORTHOS LUMB SLING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1100 NEW	ADD CTLSO/SCOLIOS RING PLSTC/LEATHR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1110 NEW	ADD CTLSO/SCOLIOS RING MOLD PT MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1120 NEW	ADD CTLSO SCOLIO ORTHO COVR UPRT EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1200 NEW	TLSO INCL FURNISH INIT ORTHOTC ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1210 NEW	ADDITION TLSO LATERAL THORACIC EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1220 NEW	ADDITION TLSO ANT THORACIC EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1230 NEW	ADD TLSO MLWAKEE TYPE SUPERSTRCT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1240 NEW	ADDITION TLSO LUMBAR DEROTATION PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1250 NEW	ADDITION TO TLSO ANTERIOR ASIS PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1260 NEW	ADD TLSO ANT THOR DEROTATION PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1270 NEW	ADDITION TO TLSO ABDOMINAL PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1280 NEW	ADDITION TO TLSO RIB GUSSET EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1290 NEW	ADDITION TLSO LAT TROCHANTERIC PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1300 NEW	OTH SCOLIOS PROC BDY JACKT MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1310 NEW	OTH SCOLIOSIS PROC POSTOP BDY JACKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1320 NEW	Thoracic,petus carinatum orthosis,custom	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1499 NEW	SPINAL ORTHOTIC NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1600 NEW	HIP ORTHOS ABDUCT FLX FREJKA PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1610 NEW	HIP ORTHOS ABDUCT CNTRL FLEX PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1620 NEW	HIP ORTHOS ABDUCT FLEX PAVLIK PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1630 NEW	HIP ORTHOTIC ABDUCT CONTRL/SEMI-FLX	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1640 NEW	HIP ORTHOTIC-PELV BAND/SPRDR BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1650 NEW	HIP ORTHOTIC ABDUCT CNTRL-STATC ADJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1652 NEW	HIP ORTHOT BIL THI CUFF ADLT PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1653 NEW	Hip orthosis,bilat thigh cuffs adj abductor spread bar,adult,pre fab	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1660 NEW	HIP ORTHOT ABDUCT CNTRL-STATC PLSTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1680 NEW	HIP ORTHOT DYN PELV CNTRL THI CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1681 NEW	Hip orthosis,bilat hip joints,thigh cuffs,adjustable	MH Yes	Clarity Yes	SCO Yes	ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1685 NEW	HIP ORTHOS POSTOP HIP ABDCT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1686 NEW	HIP ORTHOT POSTOP HIP ABDCT PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1690 NEW	COMB BIL LUMBO-SAC HIP FEM ORTHOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1700 NEW	LEGG PERTHES ORTHOTIC TORONTO CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1710 NEW	LEGG PERTHES ORTHOT NEWINGTON CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1720 NEW	LEGG PERTHES ORTHO TRILAT TACHDIJAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1730 NEW	LEGG PERTHES ORTHOTIC SCOTTISH RITE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1755 NEW	LEGG PERTHES ORTHOT PATTEN BOTTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1810 NEW	KNEE ORTHOSIS ELASTIC JOINTS PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1812 NEW	Knee orthosis,elast w joints,prefab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1820 NEW	KO ELAST W/CONDYLAR PADS&JNT PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1821 NEW	Knee orthosis,elastic condylar pads/joints,prefab	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1830 NEW	KNEE ORTHOSIS IMMOBLIZER PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1831 NEW	KNEE ORTHO LOCK KNEE JNT PSTN ORTHO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1832 NEW	KNEE ORTHOS IMMOBLZR ADJUST PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1833 NEW	Knee orthosis,adj knee joints,prefab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1834 NEW	KO W/O KNEE JOINT RIGID CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1836 NEW	KNEE ORTHOSIS RIGD W/O JOINT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1840 NEW	KO DEROTATION MED-LAT ACL CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1843 NEW	KNEE ORTHOS 1 UPRT THI&CALF PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1844 NEW	KNEE ORTHOS 1 UPRT THI&CALF CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1845 NEW	KNEE ORTHOS DBL UPRT THI&CALF PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1846 NEW	KNEE ORTHOS DBL UPRT THI&CALF CUSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1847 NEW	KNEE ORTHOS DBL UPRT ADJ JNT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1848 NEW	Knee orthosis,doub up w adj joint,prefab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1850 NEW	KNEE ORTHOS SWEDISH TYPE PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1851 NEW	Knee orthosis,single up,thigh/calf,pre fab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1852 NEW	Knee orthosis, doub up,thigh/calk, prefab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1860 NEW	KO MOD SUPRACNDYLR PROSTH SCKT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1900 NEW	AFO SPRNG WIRE DORSIFLX ASST CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1902 NEW	ANK ORTH ANK GAUNTLT/SIM PREFAB OTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1904 NEW	ANK ORTH ANK GAUNTLT/SIM CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1906 NEW	AFO MX-LIGAMENT ANK SUPT PREFB OTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1907 NEW	ANKLE ORTHOS SUPRAMALLEOLAR CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1910 NEW	AFO POST 1 BAR CLASP ATTCH SHOE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1920 NEW	AFO 1 UPRT W/STAT/ADJ STOP CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1930 NEW	AFO PLASTIC/OTH MATERIAL PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1932 NEW	AFO RIGD ANT TIBL CARB FIBR/= PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1940 NEW	ANK FT ORTHOT PLSTC/OTH MATL CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1945 NEW	AFO MOLD PLSTC RIGD ANT TIBL CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1950 NEW	AFO SPIRAL PLASTIC CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1951 NEW	ANK FT ORTHOT SPIRAL PLSTC/OTH MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L1960 NEW	AFO POST SOLID ANK PLSTC CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1970 NEW	AFO PLASTIC W/ANK JOINT CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1971 NEW	ANK FT ORTHOT PLSTC/OTH MATL PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1980 NEW	AFO 1 UPRT DORSIFLX SLID STIRUP FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L1990 NEW	AFO DBL UPRT DORSIFLX STIRUP CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2000 NEW	KAFO 1 UPRT SOLID STIRUP CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2005 NEW	KAFO ANY MATL AUTO RLS ANK JNT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2006 NEW	Knee ank foot dev custom	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2010 NEW	KAFO 1 UPRT STIRUP NO KNEE JNT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2020 NEW	KAFO DBL UPRT STIRUP THI&CALF CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2030 NEW	KAFO DBL UPRT STIRUP NO KNEE JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2034 NEW	KAFO PLSTC MED LAT ROTAT CNTRL CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2035 NEW	KAFO FULL PLSTC STAT PED SZ PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2036 NEW	KAFO FULL PLSTC DBL UPRT CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2037 NEW	KAFO FULL PLSTC 1 UPRIGHT CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2038 NEW	KAFO FULL PLSTC MX-AXIS ANKLE CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2040 NEW	HKAFO TORSN CNTRL BIL ROTAT STRAPS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2050 NEW	HKAFO BIL TORSION CABLES CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2060 NEW	HKAFO BIL TORSION BALL BEAR CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2070 NEW	HKAFO UNI ROTAT STRAPS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2080 NEW	HKAFO UNI TORSION CABLE CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2090	HKAFO UNI TORSN CABL BALL BEAR CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2106	AFO TIB FX CAST THERMOPLSTC CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2108	AFO TIB FX CAST ORTHT CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2112	AFO TIB FX ORTHOT SFT PRFAB FIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2114	AFO TIBL FX ORTHOS SEMI-RIGD PRFAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2116	AFO TIB FX ORTHOT RIGD PRFAB FIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2126	KAFO FEM FX CAST THERMOPLSTC CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2128 NEW	KAFO FEM FX CAST ORTHOT CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2132 NEW	KAFO FEM FX CAST ORTHOT SFT PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2134 NEW	KAFO FEM FX CAST SEMI-RIGD PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2136 NEW	KAFO FEM FX CAST ORTHOT RIGD PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2180 NEW	ADD LW EXTRM ORTH PLSTC SHOE INSRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2182 NEW	ADD LW EXT ORTH DROP LOCK KNEE JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2184 NEW	ADD LW EXTRM ORTH LTD MOT KNEE JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2186 NEW	ADD LW EXT ORTH ADJ MOT KNEE JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2188 NEW	ADD LW EXT FX ORTHOT QUADRILAT BRIM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2190 NEW	ADD LOW EXTREM FX ORTHOT WAIST BELT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2192 NEW	ADD LW EXT ORTH HIP JNT THI FLNGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2200 NEW	ADD LOW EXTRM LTD ANK MOTION EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2210 NEW	ADD LOW EXTREM DORSIFLX ASST EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2220 NEW	ADD LW EXT DRSFLX&PLNTR ASST EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2230 NEW	ADD LW EXT SPLIT FLAT CALIPR STIRUP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2232 NEW	ADD LOW EXT ORTHOS ROCKR BOTTM CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2240 NEW	ADD LW EXT ROUND CALIPER&PLAT ATTCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2250 NEW	ADD LW EXT FT PLAT MOLD PT STIRUP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2260 NEW	ADD LW EXT REINFORCED SOLID STIRUP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2265 NEW	ADD LOW EXTREM LONG TONGUE STIRUP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2270 NEW	ADD LW EXT VARUS/VALGUS CORR STRAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2275	ADD LW EXT VARUS/VULGUS CORR PLSTC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2280	ADD LOW EXTREM MOLDED INNR BOOT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2300	ADD LW EXTRM ABDUCT BAR JNTED ADJ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2310	ADD LOW EXTREM ABDUCT BAR STRAIGHT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2320	ADD LOW EXT NONMOLD LACER CSTM ONLY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2330	ADD LOW EXT LACER MOLD PT CSTM ONLY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2335	ADDITION LOW EXTREM ANT SWING BAND	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2340	ADD LW EXTRM PRETIBL SHELL MOLD PT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2350	ADD LW EXT PROSTH TYPE SCKT MOLD PT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2360	ADDITION LOW EXTREM EXT STEEL SHANK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2370	ADDITION LOWER EXTREM PATTEN BOTTOM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2375	ADD LW EXT TORSION CNTRL ANK JNT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2380	ADD LW EXT TORSN CNTRL STRAIT KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L2385	ADD LW EXTREM STRAIT KNEE JNT HD EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2387 NEW	ADD LW EXT POLYCNTRC KNEE CSTM KAFO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2390 NEW	ADD LW EXTRM OFFSET KNEE JNT EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2395 NEW	ADD LW EXT OFFSET KNEE JNT HD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2397 NEW	ADD LOW EXTREM ORTHOTIC SUSP SLEEVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2405 NEW	ADDITION KNEE JOINT DROP LOCK EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2415 NEW	ADD KNEE LOCK-INTEGRATD RLSE EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2425 NEW	ADD KNEE JNT DISC/DIAL LOCK EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2430 NEW	ADD KNEE JNT RATCHT LOCK EXT EA JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2492 NEW	ADD KNEE LIFT LOOP DROP LOCK RING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2500 NEW	ADD LW EXTRM THIGH/WT BEAR RING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2510 NEW	ADD LW EXTRM THI/WT BEAR MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2520 NEW	ADD LW EXTRM THI/WT BEAR CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2525 NEW	ADD LW EXT ISCH M-L BRIM MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2526 NEW	ADD LW EXTRM ISCH M-L BRIM CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2530	ADD LW EXT THI/WT BEAR LACR NONMOLD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2540	ADD LW EXT THI/WT BEAR LACR MOLD PT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2550	ADD LW EXT THI/WT BEAR HI ROLL CUFF	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2570	ADD LW EXT PELV HIP JNT CLEVIS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2580	ADD LOW EXTRM PELV CNTRL PELV SLING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2600	ADD LW EXT PELV THRUST BEAR FREE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L2610	ADD LW EXT PELV THRUST BEAR LOCK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2620 NEW	ADD LW EXT PLV HIP JNT HEVY-DUTY EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2622 NEW	ADD LW EXT PELV HIP JNT ADJ FLX EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2624 NEW	ADD LW EXTRM PELV HIP JNT FLX EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2627 NEW	ADD LW EXT PELV PLSTC MOLD PT-CABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2628 NEW	ADD LW EXT PELV METL FRME-CABLES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2630 NEW	ADD LW EXTRM PELV BAND&BELT UNI	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2640 NEW	ADD LW EXTRM PELV BAND&BELT BIL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2650 NEW	ADD LW EXTRM PELV&THOR GLUTL PAD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2660 NEW	ADD LOW EXTREM THOR CNTRL THOR BAND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2670 NEW	ADD LW EXTRM THOR CNTRL PARASP UPRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2680 NEW	ADD LW EXT THOR CNTRL LAT SUPP UPRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2750 NEW	ADD LW EXT ORTHOT PLAT CHROME/NICKL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2755 NEW	ADD LOW EXT ORTHOT PER SEG CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2760 NEW	ADD LOW EXTREM ORTHOTIC EXT-EXT-BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2768 NEW	ORTHOTIC SIDE BAR DISCNCT DEVC-BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2780 NEW	ADD LW EXT ORTH NONCORROSIVE BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2785 NEW	ADD LW EXT ORTHOT DROP LOCK RETN EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2795 NEW	ADD LW EXT ORTH KNEE CNTRL FULL CAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2800 NEW	ADD LOW EXT ORTHOT KNEE CAP CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2810 NEW	ADD LW EXT ORTH KNEE CNDYLR PAD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2820 NEW	ADD LW EXT SFT INTERFCE BELW KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L2830 NEW	ADD LW EXT SFT INTERFCE ABVE KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2840 NEW	ADD LW EXT ORTHOT TIB LEN SOCK FX/=	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2850 NEW	ADD LW EXT ORTHO FEM LEN SOCK FX/=	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2861 NEW	ADD LOW EXT JNT KNEE/ANK CSTM EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L2999 NEW	LOWER EXTREMITY ORTHOSES NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3000 NEW	FT INSRT MOLD UCB TYPE BERKLY SHELL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3001 NEW	FOOT INSRT REMV MOLD PT SPENCO EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3002	FT INSRT REMV MOLD PLASTAZOTE/= EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3003	FOOT INSRT REMV MOLD SILCON GEL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3010	FT INSRT MOLD LNGTUDNL ARCH SUPP EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3020	FT INSRT REMV MOLD LNGTUDNL SUPP EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3030	FOOT INSERT REMV FORMED PT FT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3031	FOOT INSRT/PLAT REMV ADD LW EXT ORT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3040	FOOT ARCH SUPP PREMOLD LNGTUDNL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3050	FOOT ARCH SUPP REMV PREMOLD MT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3060	FT ARCH SUPP PREMOLD LNGTUDNL/MT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3070	FOOT ARCH SUPP NONREMV LNGTUDNL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3080	FT ARCH SUPP NONREMV ATTCH SHOE MT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3090	FT ARCH SUPP NONREMV LNGTUDNL/MT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3100	HALLUS-VALGUS NIGHT DYN SPLNT PRFAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

L3140	FOOT ABDUCT ROTATION BAR INCL SHOES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment

[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3150 NEW	FOOT ABDUCT ROTATION BAR W/O SHOES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3160 NEW	FOOT ADJUSTBL SHOE-STYLD PSTN DEVC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3161 NEW	FOOT ADDUCTUS POSITIONING DEVICE ADJUSTABLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3170 NEW	FOOT PLASTC SIL HEEL STAB PREFAB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3201 NEW	ORTHOPED SHOE OXFRD SUPINATR INFNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3202 NEW	ORTHOPED SHOE OXFRD W/SUPINATR CHLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3203 NEW	ORTHOPED SHOE OXFRD W/SUPINATR JR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3204 NEW	ORTHOPEID SHOE HITOP SUPINATR INFNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3206 NEW	ORTHOPEID SHOE HITOP W/SUPINATR CHLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3207 NEW	ORTHOPEID SHOE HITOP W/SUPINATR JR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3208 NEW	SURGICAL BOOT EACH INFANT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3209 NEW	SURGICAL BOOT EACH CHILD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3211 NEW	SURGICAL BOOT EACH JUNIOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3212 NEW	BENESCH BOOT PAIR INFANT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3213 NEW	BENESCH BOOT PAIR CHILD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3214 NEW	BENESCH BOOT PAIR JUNIOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3215 NEW	ORTHOPEID FTWEAR LADIES OXFORD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3216 NEW	ORTHO FTWEAR LADIES SHOE DPTH INLAY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3217 NEW	ORTHOPEID FTWEAR LADIES HITOP INLAY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3219 NEW	ORTHOPEID FTWEAR MENS SHOE OXFORD EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3221 NEW	ORTHOPEID FTWEAR MENS SHOE DPTH INLAY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3222	ORTHO FTWEAR MENS HITOP DPTH INLAY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3224	ORTHO FTWEAR WOMAN OXFRD PART BRACE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3225	ORTHO FTWEAR MAN OXFRD PART BRACE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3230	ORTHO FTWEAR CSTM SHOE DEPTH INLAY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3250	ORTHOPED FOOTWEAR CSTM MOLD PROSTH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3251	FOOT SHOE MOLD PT SILCON SHOE EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L3252	FOOT SHOE MOLD PT PLASTAZOTE CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3253 NEW	FOOT MOLD SHOE PLASTAZOTE CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3254 NEW	NONSTANDARD SIZE OR WIDTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3255 NEW	NONSTANDARD SIZE OR LENGTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3257 NEW	ORTHOPED FOOTWEAR ADD CHRГ SPLIT SZ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3260 NEW	SURGICAL BOOT/SHOE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3265 NEW	PLASTAZOTE SANDAL EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3300 NEW	LIFT ELEV HEEL TAPERED MTS PER INCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3310 NEW	LIFT ELEV HEEL&SOLE NEOPRENE-INCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3320 NEW	LIFT ELEV HEEL&SOLE CORK PER INCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3330 NEW	LIFT ELEVATION METAL EXTENSION	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3332 NEW	LIFT ELEV IN SHOE TAPERED TO 1/2 IN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3334 NEW	LIFT ELEVATION HEEL PER INCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3340 NEW	HEEL WEDGE SACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3350 NEW	HEEL WEDGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3360 NEW	SOLE WEDGE OUTSIDE SOLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3370 NEW	SOLE WEDGE BETWEEN SOLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3380 NEW	CLUBFOOT WEDGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3390 NEW	OUTFLARE WEDGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3400 NEW	METATARSAL BAR WEDGE ROCKER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3410 NEW	METATARSAL BAR WEDGE BETWEEN SOLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3420 NEW	FULL SOLE&HEEL WEDGE BETWEEN SOLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3430 NEW	HEEL COUNTER PLASTIC REINFORCED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3440 NEW	HEEL COUNTER LEATHER REINFORCED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3450 NEW	HEEL SACH CUSHION TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3455 NEW	HEEL NEW LEATHER STANDARD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3460 NEW	HEEL NEW RUBBER STANDARD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3465 NEW	HEEL THOMAS WITH WEDGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3470 NEW	HEEL THOMAS EXTENDED TO BALL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3480 NEW	HEEL PAD AND DEPRESSION FOR SPUR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3485 NEW	HEEL PAD REMOVABLE FOR SPUR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3500 NEW	ORTHOPEID SHOE ADD INSOLE LEATHR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3510 NEW	ORTHOPEID SHOE ADD INSOLE RUBBER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3520 NEW	ORTHO SHOE ADD INSOLE FELT W/LEATHR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3530 NEW	ORTHOPEDIC SHOE ADDITION SOLE HALF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3540 NEW	ORTHOPEDIC SHOE ADDITION SOLE FULL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3550 NEW	ORTHOPEDED SHOE ADD TOE TAP STANDARD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3560 NEW	ORTHOPEDED SHOE ADD TOE TAP HORSESHOE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3570 NEW	ORTHOPEDED SHOE ADD SPCL EXT INSTEP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3580 NEW	ORTHO SHOES ADD CNVRT INSTP-VELC CLO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3590 NEW	ORTHO SHOES ADD CONVERT FIRM TO SOFT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3595 NEW	ORTHOPEDED SHOE ADDITION MARCH BAR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3600 NEW	TRNSF ORTH-ANOTHER CALIPR PLAT XST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3610	TRNSF ORTH-ANOTHER CALIPR PLAT NEW	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3620	TRNSF ORTH-ANOTH SOLID STIRUP XST	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3630	TRNSF ORTH-ANOTH SOLID STIRUP NEW	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3640	TRNSF ORTH-ANOTH DENNS BRWN SPLNT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3649	ORTHOPED SHOE MOD ADD/TRANSFER NOS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3650	SHOULDER ORTHOS FIG 8 ABDUCT PREFAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L3660	SHOULDER ORTHOS FIG 8 CANVAS PREFAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3670 NEW	SHOULDER ORTHOS ACROMIO/CLAV PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3671 NEW	SO JOINT DESIGN W/O JOINTS CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3674 NEW	SHOULDER ORTHOTIC ABDUCT PSTN CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3675 NEW	SHLDR VEST ABDUCT RESTRAINR PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3677 NEW	SHLDR ORTHOS JNT DSGN PREFAB CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3678 NEW	Shoulder orthosis, pre fab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3702 NEW	EO W/O JOINTS CUSTOM FABRICATED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3710 NEW	ELB ORTHOS ELASTIC METL JNTS PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3720 NEW	EO DBL UPRT W/CUFF FREE MOT CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3730 NEW	EO DBL UPRT-CUFF EXT/FLX ASST CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3740 NEW	EO DBL UPRT W/CUFF ADJ LOCK CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3760 NEW	ELB ORTH W/ADJ LOCK JNT PRFAB W/FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3761 NEW	Elbow orthosis, pre fab,off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3762 NEW	ELBOW ORTHOS RIGID W/O JOINT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3763 NEW	EWHO RIGID W/O JOINTS CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3764 NEW	EWHO 1/> NONTORSION JNTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3765 NEW	EWHFO RIGID W/O JOINTS CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3766 NEW	EWHFO 1/> NONTORSION JNTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3806 NEW	WHFO CUSTOM FAB INCL FIT & ADJUST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3807 NEW	WHF ORTHOS NO JNT PRFAB CUSTOM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3808 NEW	WHF ORTHOTIC RIGID NO JNT; CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3809 NEW	WHF orthosis, rigid,custom fab	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3891 NEW	ADD UP EXT JNT WRIST/ELB CSTM EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3900 NEW	WHFO DYN FLX HNG WRST DRVN CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3901 NEW	WHFO DYN FLX HNG CABLE DRIVEN CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3904 NEW	WHFO EXTERNAL POWER ELEC CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3905 NEW	WHO 1/> NONTORSION JOINTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3906 NEW	WHO W/O JOINTS STRAPS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3908 NEW	WRST HND ORTHOS CNTRL COCK-UP PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3912 NEW	HAND FINGR ORTHOS FINGR CNTRL PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3913 NEW	HFO W/O JOINTS CUSTOM FABRICATED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3915 NEW	WH ORTHOS 1/>NONTRSN PRFAB CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3916 NEW	Wrist/hand orth,pre fab, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3917 NEW	HAND ORTHOSIS MC FX PREFAB CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3918 NEW	Habd orthosis,metacarpal fx,pre fab,off shlef	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3919 NEW	HAND ORTHOTIC W/O JOINTS CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3921 NEW	HFO 1/> NONTORSION JOINTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3923 NEW	HF ORTHOSIS NO JOINT PRFAB CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3924 NEW	HF orthosis,w/out joints,pre fab, off shlef	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3925 NEW	FINGER ORTHOS NONTORSION JNT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3927 NEW	FINGER ORTHOSIS W/O JOINT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3929 NEW	HF ORTHOS 1/>NONTRSN JNT PRFAB CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3930 NEW	Hand-finger orthosis,custom	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3931 NEW	WHFO PREFAB INCL FITTING & ADJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3933 NEW	FINGER ORTHOTIC W/O JOINTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3935 NEW	FO NONTORSION JOINT CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3956 NEW	ADD JNT UP EXTREM ORTHOT MATL; JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3960 NEW	SEWHO ABDUCT PSTN AIRPLANE DESIGN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3961 NEW	SEWHO SHLDR CAP DESN NO JNTS CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3962 NEW	SEWHO ABDUCT PSTN ERBS PALS DESIGN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3967 NEW	SEWHO ABDUCT PSTN W/O JNTS CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3971 NEW	SEWHO SHOULDER CAP DESIGN CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3973 NEW	SEWHO ABDUCTION POSITION CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3975 NEW	SEWHFO SHLDR CAP DESN NO JNTS CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3976 NEW	SEWHFO ABDUCT PSTN W/O JNTS CUS FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3977 NEW	SEWHFO SHOULD CAP DESIGN CUSTOM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L3978 NEW	SEWHFO ABDUCTION POSITION CSTM FAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3980 NEW	UP EXT FX ORTHOT HUM PRFAB-FIT&ADJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3981 NEW	Up ext fx orth, humeral,pre fab	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3982 NEW	UP EXTRM FX ORTH RADUS/ULNAR PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3984 NEW	UP EXTRM FX ORTHOTIC WRST PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3995 NEW	ADD UP EXTREM ORTHOT SOCK FX/= EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L3999 NEW	UPPER LIMB ORTHOSIS NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L4000 NEW	REPLACE GIRDLE FOR SPINAL ORTHOSIS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4002 NEW	REPL STRAP ANY ORTHOTIC ALL CMPNTS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4010 NEW	REPLACE TRILATERAL SOCKET BRIM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4020 NEW	REPL QUADRILAT SOCKT BRIM MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4030 NEW	REPL QUADRILAT SOCKT BRIM CSTM FIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4040 NEW	REPL MOLDED THI LACER CSTM ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4045 NEW	REPL NONMOLD THI LACER CSTM ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L4050 NEW	REPL MOLDED CALF LACER CSTM ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4055 NEW	REPL NONMOLD CALF LACER CSTM ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4060 NEW	REPLACE HIGH ROLL CUFF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4070 NEW	REPLACE PROXIMAL&DIST UPRIGHT KAFO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4080 NEW	REPLACE METAL BANDS KAFO PROX THIGH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4090 NEW	REPL METL BANDS KAFO-AFO CALF/THI	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4100 NEW	REPLACE LEATHR CUFF KAFO PROX THIGH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L4110 NEW	REPL LEATHR CUFF KAFO-AFO CALF/THI	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4130 NEW	REPLACE PRETIBIAL SHELL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4205 NEW	REPR ORTHOT DEVC LABR CMPNT 15 MIN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4210 NEW	REP ORTHOT DEVC REP/REPL MINOR PART	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4350 NEW	ANKLE CONTROL ORTHOS STIRRUP PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4360 NEW	WALK BOOT PNEUMAT&/VAC PREFAB CUSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4361 NEW	Walking boot, pre fab, custom expert	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L4370 NEW	PNEUMATIC FULL LEG SPLINT PREFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4386 NEW	WALK BOOT NON-PNEUMATIC PREFAB CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4387 NEW	Walking boot,pre fab, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4392 NEW	REPLCMT SFT INTERFCE MATL STAT AFO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4394 NEW	REPL SFT INTRFCE MATL FT DROP SPLNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4396 NEW	STAT/DYN ANK FT ORTHOS PREFAB CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L4397 NEW	Ankle foot orth, pre fac, off shelf	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L4398	FOOT DROP SPLINT RECUMBNT POS PRFAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L4631	AFO WALK BOOT TYP ROCKR BOTTOM CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5000	PART FT SHOE INSRT W/LNGTUDNL ARCH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5010	PART FT MOLD SOCKT ANK HT W/TOE FIL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5020	PART FT MOLD SOCKET TIB TUBERCLE HT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5050	ANKLE SYMES MOLDED SOCKET SACH FOOT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5060	ANK SYMS METL FRME MOLD LEATHR SCKT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5100	BELW KNEE MOLD SOCKT SHIN SACH FOOT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5105	BK PLSTC SCKT JNT&THI LACER SACH FT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5150	KNEE DISRTC MOLD SCKT EXT KNEE JNT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5160	KNEE DISARTIC MOLD SOCKT BENT KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5200	AK MOLD SOCKT 1 AXIS CONSTANT FRICT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5210	AK SHRT PROS NO KNEE JNT-ANK JNT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5220	AK SHRT PROSTH W/ARTIC ANK/FOOT DYN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5230 NEW	AK PROX FEM FOCAL DEFIC SACH FT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5250 NEW	HIP DISRTC CANADIAN; MOLD SCKT HIP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5270 NEW	HIP DISRTC TLT TABL; MOLD SCKT LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5280 NEW	HEMIPELVECT CANADIAN; MOLD SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5301 NEW	BK MOLD SCKT SHIN SACH FT ENDO SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5312 NEW	KNEE DISART MOLD SOCKET 1 AXIS KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5321 NEW	AK OPEN END SACH FT ENDO SYS 1 AXIS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5331 NEW	JOINT SINGLE AXIS KNEE SACH FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5341 NEW	SINGLE AXIS KNEE SACH FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5400 NEW	IMMED POSTSURG RIGD DRSG W/1 CHG BK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5410 NEW	IMMED POSTSURG RIGD DRS BK-EA CAST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5420 NEW	IMMED POSTSURG RIGD DRSG 1 CHG AK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5430 NEW	IMMED POSTSURG RIGD DRSG AK EA CAST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5450 NEW	IMMED POSTSURG NONWT BEAR RIGD BK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5460 NEW	IMMED POSTSURG NONWT BEAR RIGD AK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5500 NEW	INIT BK PTB SCKT NON-ALIGN DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5505 NEW	INIT AK-DISRTC ISCH LEVL NON-ALIGN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5510 NEW	PREP BK PTB SCKT NON-ALIGN MOLD MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5520 NEW	PREP BK PTB THERMOPLSTC/=DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5530 NEW	PREP BK PTB THERMOPLSTC/=MOLD MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5535 NEW	PREP BK PTB PRFAB ADJ OPEN END SCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5540 NEW	PREP BK PTB LAMINATED SCKT MOLD MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5560 NEW	PREP AK-DISARTIC PLASTER MOLD MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5570 NEW	PREP AK-DISRTC THRMOPSTC/=DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5580 NEW	PREP AK-DISARTIC THERMOPSTC/=MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5585 NEW	PREP AK-DISARTIC PRFAB ADJ OPN END	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5590 NEW	PREP AK-DISARTIC LAMINATD SCKT MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5595 NEW	PREP HIP DISARTIC THERMOPSTC/=MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5600 NEW	PREP HIP DISARTC LAMINATD SCKT MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5610 NEW	ADD LW EXTRM ENDO AK HYDRACADENCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5611 NEW	ADD LW EXT AK-DISARTC W/FRICT CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5613 NEW	ADD LW EXT AK-DSRTC W/HYDRAUL CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5614 NEW	ADD LW EXT AK-DSRTC W/PNEUMAT CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5615 NEW	ADD ENDOSKEL KNEE-SHIN SYS 4 BAR LINK/MULTIAXIAL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5616 NEW	ADD LW EXT AK UNIVRSL MXPLX FRICT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5617	ADD LW EXTREM QUICK CHANGE AK/BK EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5618	ADD LOW EXTREM TEST SOCKT SYMES	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5620	ADD LOW EXTREM TEST SOCKT BELW KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5622	ADD LW EXTRM TST SOCKT KNEE DISARTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5624	ADD LOW EXTREM TEST SOCKT ABVE KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5626	ADD LW EXTRM TST SOCKT HIP DISARTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5628	ADD LOW EXTRM TST SOCKT HEMIPELVECT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5629 NEW	ADD LW EXTRM BELW KNEE ACRYLC SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5630 NEW	ADD LW EXT SYMS TYPE XPND WALL SCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5631 NEW	ADD LW EXT ABVE KNEE/DISARTC ACRYLC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5632 NEW	ADD LW EXT SYMS PTB BRIM DESN SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5634 NEW	ADD LW EXT SYMS POST OPENING SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5636 NEW	ADD LW EXT SYMS MED OPENING SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5637 NEW	ADD LOW EXTREM BELW KNEE TOTAL CNTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5638 NEW	ADD LW EXTRM BELW KNEE LEATHR SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5639 NEW	ADD LOW EXTREM BELW KNEE WOOD SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5640 NEW	ADD LW EXT KNEE DISARTC LEATHR SCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5642 NEW	ADD LW EXTRM ABVE KNEE LEATHR SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5643 NEW	ADD LW EXT HIP DISRTC FLX EXT FRAME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5644 NEW	ADD LOW EXTREM ABVE KNEE WOOD SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5645 NEW	ADD LW EXTRM BK FLX INN R EXT FRME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5646	ADD LOW EXT BELOW KNEE CUSHN SOCKT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5647	ADD LOW EXTRM BELW KNEE SUCTN SOCKT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5648	ADD LOW EXT ABOVE KNEE CUSHN SOCKT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5649	ADD LW EXT ISCHIAL CONTAINMENT SCKT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5650	ADD LW EXTRM TOT CONTACT AK/DISARTC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5651	ADD LW EXTRM AK FLX INNR EXT FRME	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5652	ADD LW EXTRM SUCTN SUSP AK/DISARTC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5653 NEW	ADD LW EXT KNEE DISRTC XPNDABL WALL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5654 NEW	ADD LOW EXTREM SOCKT INSERT SYMES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5655 NEW	ADD LOW EXTRM SOCKT INSRT BELW KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5656 NEW	ADD LW EXT SOCKT INSRT KNEE DISARTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5658 NEW	ADD LOW EXTRM SOCKT INSRT ABVE KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5661 NEW	ADD LW EXT INSRT MXIDUROMETER SYMES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5665 NEW	ADD LW EXT INSRT MXDROMTR BELW KNEE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5666 NEW	ADD LOW EXTREM BELOW KNEE CUFF SUSP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5668 NEW	ADD LW EXTRM BK MOLD DISTAL CUSHION	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5670 NEW	ADD LW EXTRM BK MOLD SUPRACOND SUSP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5671 NEW	ADD LW EXTRM BK/AK SUSP LOCK MECH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5672 NEW	ADD LW EXTRM BK REMV MED BRIM SUSP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5673 NEW	ADD LW EXT BK/AK CSTM FAB XST MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5676 NEW	ADD LW EXT BK KNEE JNT 1 AXIS PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5677	ADD LW EXT BK KNEE JNT POLYCNTRC PR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5678	ADD LW EXT BELW KNEE JNT COVRS PAIR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5679	ADD LW EXT BK/AK CSTM FAB XST MOLD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5680	ADD LW EXTRM BK THI LACER NONMOLD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5681	ADD LW EXT INSRT CONGN/AMPUTEE INIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5682	ADD LW EXT BK THIGH LACER MOLD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5683	ADD LW EXT INSRT NO CONGN/AMP INIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5684	ADD LOW EXTREM BELW KNEE FORK STRAP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5685	ADD LOW EXT PROS BELW KNEE SLEEVE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5686	ADD LOW EXTREM BELW KNEE BACK CHECK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5688	ADD LW EXTRM BK WAIST BELT WEB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5690	ADD LW EXTRM BK WAIST BELT PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5692	ADD LW EXTRM AK PELVIC CONTROL BELT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5694	ADD LW EXTRM AK PELV CNTRL BELT PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5695 NEW	ADD LW EXT AK PELV CNTRL SLV NEOPRN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5696 NEW	ADD LW EXTRM AK/DISARTIC PELV JNT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5697 NEW	ADD LW EXTRM AK/DISARTIC PELV BAND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5698 NEW	ADD LW EXTRM AK/KD SILESIA BANDAGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5699 NEW	ALL LOW EXTREM PROSTH SHLDR HARNESS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5700 NEW	REPL SOCKET BELOW KNEE MOLD PT MDL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5701 NEW	REPL SCKT AK/DISARTIC W/ATTCH PLAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5702	REPL SCKT HIP DISRTC W/HIP JNT MOLD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5703	ANK SYMES MLD PT MDL SACH FT REPL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5704	CUSTOM SHAP PROTVE COVER BELOW KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5705	CUSTOM SHAP PROTVE COVER ABOVE KNEE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5706	CUSTOM SHAPED COVER KNEE DISARTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5707	CUSTOM SHAPED COVER HIP DISARTIC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5710	ADD EXOSKL KNEE-SHIN 1 AXS MNL LOCK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5711	ADD EXO KNEE-SHIN MNL LOCK ULTRA-LT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5712	ADD EXO KNEE-SHIN FRICT SWING CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5714	ADD EXO KNEE-SHIN VARBL FRICT SWING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5716	ADD EXO KNEE-SHIN MECH STANCE LOCK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5718	ADD EXO KNEE-SHIN FRICT SWING CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5722	ADD EXO KNEE-SHIN PNUMAT SWNG FRICT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5724	ADD KNEE-SHIN 1 AXIS FL SWING PHASE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5726 NEW	ADD EXO KNEE-SHIN EXT JNT FL SWING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5728 NEW	ADD EXO KNEE-SHIN FL SWING&STANCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5780 NEW	ADD EXO KNEE-SHIN PNEUMAT/HYDRA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5781 NEW	ADD LW LIMB PROS LIMB MGMT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5782 NEW	ADD LW LIMB PROS LIMB MGMT HVY DUTY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5783 NEW	Addition to lwr extrem,user adj,mech,residual limb mgmnt sys	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5785 NEW	ADD EXOSKEL BELW KNEE ULTRA-LT MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5790 NEW	ADD EXOSKEL ABVE KNEE ULTRA-LT MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5795 NEW	ADD EXOSKEL HIP DISARTIC ULTRA-LGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5810 NEW	ADD ENDOSKEL KNEE-SHIN MANUAL LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5811 NEW	ADD ENDO KNEE-SHIN MNL LCK ULTRA-LT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5812 NEW	ADD ENDO KNEE-SHIN FRICT SWNG CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5814 NEW	ADD ENDO KNEE-SHN HYDRAUL MECH LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5816 NEW	ADD ENDO KNEE-SHIN MECH STANCE LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5818 NEW	ADD ENDO KNEE-SHIN FRICT SWNG&STANC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5822 NEW	ADD ENDO KNEE-SHIN PNEUMATIC FRICT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5824 NEW	ADD ENDO KNEE-SHIN FL SWING CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5826 NEW	ADD ENDO KNEE-SHIN MIN HI ACTV FRME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5828 NEW	ADD ENDO KNEE-SHIN FL SWING&STANCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5830 NEW	ADD ENDO KNEE-SHIN PNEUMAT/SWING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5840 NEW	ADD ENDO KNEE-SHIN 4-BAR LINK SWING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5841 NEW	Addition,endoskeleton knee-shin sys,polycentric,pneum swing,stance phase ctrl	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5845 NEW	ADD ENDOSKL KNEE-SHIN STANC FLX ADJ	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5848 NEW	ADD ENDOSKEL KNEE-SHIN FLUID EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5850 NEW	ADD ENDO AK/HIP DSRTC KNEE EXT ASST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5855 NEW	ADD ENDO HIP DISARTIC MECH EXT ASST	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5856 NEW	ADD LOW EXT PROS KN-SHN SWING&STNCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
L5857 NEW	ADD LOW EXT PROS KN-SHN SWING ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5858 NEW	ADD LW EXT PROS KNEE SHN SYS STANCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5859 NEW	ADD LW EXT PROS KN-SHN PROG FLX/EXT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5910 NEW	ADD ENDOSKEL BELW KNEE ALIGNBL SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5920 NEW	ADD ENDOSKEL AK/HIP DISRTC ALIGNBL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5925 NEW	ADD ENDO AK/HIP DISARTIC MNL LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5926 NEW	ADD TO LE PROSTH ENDOSKEL KD AK HD ROT U ANY TYP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5930 NEW	ADD ENDO HI ACTV KNEE CNTRL FRAME	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5940 NEW	ADD ENDOSKEL BELW KNEE ULTRA-LGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5950 NEW	ADD ENDOSKEL ABVE KNEE ULTRA-LGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5960 NEW	ADD ENDOSKL HIP DISARTC ULTRA-LGHT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5961 NEW	ADD ENDO SYS POLYCNTRC HIP JOINT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5962 NEW	ADD ENDO BK FLEX PROTVE OUTER COVER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5964 NEW	ADD ENDO AK FLXBL PROTVE OTR COVR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5966 NEW	ADD ENDO HIP DISRTC FLX PROTVE COVR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5968 NEW	ADD LW LIMB PROSTH MX-AXIAL ANKLE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5969 NEW	Add,endo ankle-foot/ankle sys	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5970 NEW	ALL LW EXTRM PROSTH FOOT SACH FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5971 NEW	ALL LW EXT PROS SACH FOOT REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5972 NEW	ALL LOW EXT PROS FOOT FLEXIBLE KEEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5973 NEW	ENDO ANK FOOT MICROPROCSS CNTRL PWR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5974 NEW	ALL LW EXTRM PRSTH FT 1 AXIS ANK/FT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5975	ALL LW EXTRM PROSTH COMB 1 AXIS ANK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5976	ALL LW EXTRM PROSTH ENERGY STOR FT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5978	ALL LW EXTRM PRSTH FT MX-AXL ANK/FT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5979	ALL LW XTRM PRSTH MX-AXL ANK 1 PECE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5980	ALL LOW EXTREM PROSTH FLX-FOOT SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5981	ALL LOW EXTRM PROSTH FLX-WALK SYS/=	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L5982	ALL EXOSKEL LW EXT PROS AXIAL ROTAT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L5984 NEW	ALL ENDOSKEL LW EXT PRSTH AXL ROTAT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5985 NEW	ALL ENDOSKL LW XTRM PROSTH DYNAMIC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5986 NEW	ALL LW EXTRM PROSTH MX-AXIAL ROT U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5987 NEW	ALL LW EXTRM PROSTH SHANK FOOT SYS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5988 NEW	ADD LW LMB PRSTH VERTCL SHOCK RDUC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5990 NEW	ADD LW EXTRM PROSTH USE ADJ HEEL HT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L5999 NEW	LOWER EXTREMITY PROSTHESIS NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6000 NEW	PARTIAL HAND THUMB REMAINING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6010 NEW	PART HAND LITTLE &/ RING FINGER REM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6020 NEW	PARTIAL HAND NO FINGER REMAINING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6026 NEW	Trans/meta or prt hand disarticulation	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6050 NEW	WRST DSRTC MOLD SOCKET FLEX ELB HNG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6055 NEW	WRST DSRTC MOLD SCKT W/XPND INTRFCE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6100 NEW	BELW ELB MOLD SOCKT FLXIBLE ELB HNG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6110 NEW	BELOW ELBOW MOLDED SOCKET	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6120 NEW	BELW ELB STEP-UP HINGES HALF CUFF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6130 NEW	BELW ELB STMP ACTV LCK HNG 1/2 CUFF	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6200 NEW	ELB DSRTC MOLD SCKT OTSD LCK FORARM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6205 NEW	ELB DSRTC MOLD SCKT XPND INTRFC ARM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6250 NEW	ABOVE ELB INTERNAL LOCK ELB FOREARM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6300 NEW	SHLDR DISARTC INTRL LOCK ELB FORARM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6310 NEW	SHLDR DISART PASS REST COMPL PROSTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6320 NEW	SHLDR DISART PASS REST SHLDR CAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6350 NEW	INTRSCAP THOR INTRL LOCK ELB FORARM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6360 NEW	INTERSCAPULAR THOR COMPLT PROSTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6370 NEW	INTERSCAPULAR THOR SHLDR CAP ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6380 NEW	IMMED POSTSURG RIGD DRSG WRST DSRTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6382 NEW	IMMED POSTSURG RIGD DRSG ELB DISRTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6384 NEW	IMMED POSTSRG RIGD DRSG SHLDR DSRTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6386 NEW	IMMED POSTSURG EA ADD CAST CHANGE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6388 NEW	IMMED POSTSURG RIGID DRSG ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6400 NEW	BE MOLD SCKT ENDOSKEL-SFT PROS TISS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6450 NEW	ELB DISARTIC MOLD SOCKET ENDOSKEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6500 NEW	ABOVE ELBOW MOLD SOCKET ENDOSKEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6550 NEW	SHLDR DISARTC MOLD SOCKET ENDOSKEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6570 NEW	INTRSCAP THOR MOLD SOCKET ENDOSKEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6580 NEW	PREP WRST DISARTIC PLSTC SOCKT MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6582 NEW	PREP WRST DISARTIC ELB SCKT DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6584 NEW	PREP ELB DISARTIC PLASTIC SOCKT MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6586 NEW	PREP ELB DISARTIC SOCKET DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6588 NEW	PREP SHLDR DISRTC THOR PLSTC SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6590 NEW	PREP SHLDR DSRTC THOR SCKT DIR FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6600 NEW	UP EXTREM ADD POLYCNTRC HINGE PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6605 NEW	UPPER EXTREM ADD 1 PIVOT HINGE PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6610 NEW	UP EXT ADD FLEX METAL HINGE PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6611 NEW	ADD UP EXT PROS EXT PWR ADD SWITCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6615 NEW	UP EXTREM ADD DISCNCT LOCK WRST U	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6616 NEW	UP EXT ADD-DSCNCT INSRT LCK WRST EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6620 NEW	UP EXT ADD FLEX/EXT WRIST UNIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6621	UP EXTREM PROS ADD FLEX/EXTEN WRIST	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6623	UP EXT ADD ROTATL WRST W/LATCH RLSE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6624	UP EXT ADD FLX/EXT ROT WRIST UNIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6625	UP EXT ADD ROTAT WRST W/CABLE LOCK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6628	UP EXTRM ADD QUICK DISCNCT HOOK	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6629	UP EXT ADD QUIK DSCNCT LAMNAT COLLR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6630	UP EXTREM ADD STAINLESS STEEL WRIST	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6632 NEW	UP EXTREM ADD LATX SUSP SLEEVE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6635 NEW	UPPER EXTREM ADD LIFT ASSIST ELB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6637 NEW	UP EXTREM ADD NUDGE CNTRL ELB LOCK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6638 NEW	UP EXT ADD PROS LOCK W/MNL PWR ELB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6640 NEW	UP EXTREM ADD SHLDR ABDUCT JNT PAIR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6641 NEW	UP EXTRM ADD EXCURSN AMPL PULLEY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6642 NEW	UP EXTRM ADD EXCURSN AMPL LEVER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6645	UP EXT ADD SHLDR FLX-ABDUCT JNT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6646	UP EXT ADD SHLDR JNT MX PSTN SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6647	UP EXT ADD SHLDR LOCK MECH BDY PWR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6648	UP EXT ADD SHLDR LOCK MECH EXT PWR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6650	UP EXTRM ADD SHLDR UNIVERSAL JNT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6655	UP EXTREM ADD STD CNTRL CABLE XTRA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6660	UP EXTREM ADD HEVY DUTY CNTRL CABLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6665	UP EXTREM ADD TEFLON/= CABLE LINING	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6670	UP EXTREM ADD HOOK HND CABLE ADAPTR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6672	UP EXT ADD HRNSS CHST/SHLDR SADDLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6675	UP EXT ADD HARNESS 1 CABLE DESIGN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6676	UP EXT ADD HARNESS 2 CABLE DESIGN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6677	UP EXT ADD HRNSS 3 CNTRL OP DVC&ELB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6680	UP EXTRM ADD TST SCKT WRIST DISARTC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6682 NEW	UP EXTRM ADD TST SOCKT ELB DISARTIC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6684 NEW	UP EXTRM ADD TST SCKT SHLDR DISARTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6686 NEW	UPPER EXTREM ADDITION SUCTION SOCKT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6687 NEW	UP EXT ADD FRME TYPE SCKT BELW ELB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6688 NEW	UP EXT ADD FRME TYPE SOCKT ABVE ELB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6689 NEW	UP EXT ADD FRAME SCKT SHLDR DISARTC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6690 NEW	UP EXT ADD FRAME SCKT INTRSCAP-THOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6691	UPPER EXTREM ADD REMV INSERT EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6692	UP EXTREM ADD SILCON GEL INSRT/=EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6693	UP EXT ADD LOCK ELB FORARM CNTRBAL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6694	ADD UP EXT PROS CSTM W/LOCK MECH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6695	ADD UP EXT PROS CSTM W/O LOCK MECH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6696	ADD UP EXT PROS CNGN/TRAUMAT AMP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6697	ADD UP EXT PROS NOT CNGN/TRAUM AMP	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6698 NEW	ADD UP EXT PROS LOCK MECH EXC INSRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6703 NEW	TERMINAL DEVICE PASSIVE HAND/MITT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6704 NEW	TERMINAL DEVC SPORT/REC/WORK ATTACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6706 NEW	TERMINAL DEVC HOOK MECH VOL OPENING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6707 NEW	TERMINAL DEVC HOOK MECH VOL CLOSING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6708 NEW	TERMINAL DEVC HAND MECH VOL OPENING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6709 NEW	TERMINAL DEVC HAND MECH VOL CLOSING	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6711 NEW	TERM DVC HOOK MECH VOL OPN PED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6712 NEW	TERM DVC HOOK MECH VOL CLOS PED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6713 NEW	TERM DVC HAND MECH VOL OPN PED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6714 NEW	TERM DEVC HAND MECH VOL CLOS PED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6715 NEW	TERM DEVC MX ARTC DIG INIT ISS/REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6721 NEW	TERM DEVC HOOK/HAND HD MECH VOL OPN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6722 NEW	TERM DEVC HOOK/HND HD MECH VOL CLOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6805	ADD TERM DEVICE MODIFIER WRIST UNIT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6810	ADD TERM DEVC PRECISION PINCH DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6880	ELEC HND SW/MYOLELEC CNTRL ARTC DIG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6881	AUTO GRASP ADD UPPER LIMB PROS DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6882	MICRPROCSS CNTRL ADD UP LIMB PROSTH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6883	REPL SOCKET BE/WD MOLDED TO PT MDL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6884	REPL SOCKT ABOVE ELB DISART MOLD PT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6885 NEW	REPL SOCKT SD/INTRSCAP THOR MOLD PT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6890 NEW	ADD UP EXT PROSTH GLOV TERM PRFAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6895 NEW	ADD UP EXT PROSTH GLOV TERM CSTM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6900 NEW	HND REST PART W/GLOV THUMB/1 FNGR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6905 NEW	HND REST PART HND W/GLOV MX FNGR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6910 NEW	HND REST PART HND W/GLOV NO FNGR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L6915 NEW	HAND REST REPL GLOVE FOR ABOVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6920	WRST DISARTC OTTO BOCK/=SWTCH CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6925	WRST DSRTC OTTO BOCK/=MYOELC CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6930	BELW ELB OTTO BOCK/=SWITCH CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6935	BELW ELB OTTO BOCK/=MYOELEC CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6940	ELB DISRTC OTTO BOCK/=SWITCH CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6945	ELB DISRTC OTTO BOCK/=MYOELC CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L6950	ABVE ELB OTTO BOCK/=SWITCH CONTROL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L6955	ABVE ELB OTTO BOCK/=MYOELEC CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6960	SHLDR DSRTC OTTO BOCK/=SWTCH CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6965	SHLDR DSRTC OTTO BOCK/=MYOELC CNTRL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6970	INTERSCAP-THOR OTTO BOCK/=SWITCH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L6975	INTERSCAP-THOR OTTO BOCK/=MYOELEC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7007	ELEC HND SWITCH/MYOELEC CNTRL ADULT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7008	ELEC HAND SWITCH/MYOELEC CNTRL PED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L7009 NEW	ELEC HOOK SWITCH/MYOELC CNTRL ADULT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7040 NEW	PREHENSILE ACTUATOR SWITCH CONTROL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7045 NEW	ELEC HOOK SWITCH MYOELEC CNTRL PED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7170 NEW	ELEC ELB HOSMER/EQUAL SWITCH CNTRL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7180 NEW	ELEC ELB SEQENTL CNTRL ELB&TRM DEV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7181 NEW	ELEC ELB SIMULTAN CNTRL ELB&TRM DEV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7185 NEW	ELEC ELB ADOLES VRITY VILL/=SWITCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L7186 NEW	ELEC ELB CHLD VRITY VILL/=SWITCH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7190 NEW	ELEC ELB ADOLES VRITY VILL/=MYOELC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7191 NEW	ELEC ELB CHLD VRITY VILL/=MYOELEC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7259 NEW	Electric wrist rotator,any type	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7360 NEW	SIX VOLT BATTERY EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7362 NEW	BATTERY CHARGER 6 VOLT EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7364 NEW	TWELVE VOLT BATTERY EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L7366 NEW	BATTERY CHARGER TWELVE VOLT EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7367 NEW	LITHIUM ION BATT RECHARGEABLE REPL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7368 NEW	LITHIUM ION BATT CHARGER REPL ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7400 NEW	ADD UP EXT PROS BE/WD ULTRALT MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7401 NEW	ADD UP EXT PROS ABV ED ULTRALT MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7402 NEW	ADD UP EXT PROS SD/INTRSCAP THOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7403 NEW	ADD UP EXT PROS BE/WD ACRYLIC MATL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L7404	ADD UP EXT PROS ABVE ED ACRYLC MATL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7405	ADD UP EXT PROS SD/INTERSCAP THOR	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7499	UPPER EXTREMITY PROSTHESIS NOS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7510	REP PROS DEVC REP/REPL MINOR PART	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7520	REPR PROSTH DEVC LABR CMPNT-15 MIN	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7600	PROSETIC DONNING SLEEVE MATERIAL EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L7700	Gasket/seal for prosth socket ins,any type	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L7900 NEW	MALE VACUUM ERECTION SYSTEM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L7902 NEW	TENSION RING VAC ERECT DEVC REPL EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8000 NEW	BREAST PROS MAST BRA NO INTEG FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8001 NEW	BREAST PROS MAST BRA INTEG FORM UNI	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8002 NEW	BREAST PROS MAST BRA INTEG FORM BIL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8010 NEW	BREAST PROSTHESIS MASTECTOMY SLEEVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8015 NEW	EXT BREAST PROS GARMNT POST-MASTECT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8020 NEW	BREAST PROSTHESIS MASTECTOMY FORM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8030 NEW	BREAST PROS SILCON/=NO INTGRL ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8031 NEW	BREAST PROS SILCON/= W/NTGRL ADHES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8032 NEW	NIPPLE PROSTH REUSABLE ANY TYPE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8033 NEW	Nipple prosthesis,custom, each	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8035 NEW	CSTM BRST PROSTH POST MASTECT MOLD	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8039 NEW	BREAST PROSTHESIS NOS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8040 NEW	NASL PROSTH PROVIDED NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8041 NEW	MIDFCE PROSTH PROV NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8042 NEW	ORB PROSTH PROVIDED NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8043 NEW	UPPER FCE PROSTH PROV NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8044 NEW	HEMI-FCE PROSTH PROV NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8045 NEW	AURICULAR PROSTH PROV NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8046 NEW	PART FCE PROSTH PROV NON-PHYSICIAN	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8047	NASL SEPTAL PROSTH PROV NON-PHYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8048	UNS MAXLOFCE PROSTH BR PROV NON-MD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8049	REP MAXLOFCE PROS EA 15 MIN NON-MD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8300	TRUSS SINGLE WITH STANDARD PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8310	TRUSS DOUBLE WITH STANDARD PADS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8320	TRUSS ADDITION STANDARD PAD H2O PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
L8330	TRUSS ADD STANDARD PAD SCROTAL PAD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8400 NEW	PROSTHETIC SHEATH BELOW KNEE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8410 NEW	PROSTHETIC SHEATH ABOVE KNEE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8415 NEW	PROSTHETIC SHEATH UPPER LIMB EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8417 NEW	PROS SHEATH/SOCK-GEL CUSHN BK/AK EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8420 NEW	PROSTHETIC SOCK MX PLY BELW KNEE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8430 NEW	PROSTHETIC SOCK MX PLY ABVE KNEE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8435 NEW	PROSTH SOCK MX PLY UPPER LIMB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8440 NEW	PROSTHETIC SHRINKER BELOW KNEE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8460 NEW	PROSTHETIC SHRINKER ABOVE KNEE EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8465 NEW	PROSTHETIC SHRINKER UPPER LIMB EACH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8470 NEW	PROSTH SOCK 1 PLY FIT BELW KNEE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8480 NEW	PROSTH SOCK 1 PLY FIT ABVE KNEE EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8485 NEW	PROSTH SOCK 1 PLY FIT UPPER LIMB EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8499 NEW	UNLISTED PROC MISC PROSTH SERVICES	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8500 NEW	ARTIFICIAL LARYNX ANY TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8501 NEW	TRACHEOSTOMY SPEAKING VALVE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8505 NEW	ARTIFICAL LARYNX REPLCMT BATTERY/ACSS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8507 NEW	TRACHEO-ESOPH VOICE PROSTH PT INSRT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8509 NEW	TRACHEO-ESOPH VOICE PROS INSRT PROV	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8510 NEW	VOICE AMPLIFIER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8511 NEW	INSRT INDWLL TRACHEOESOPH PROS W/WO	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8512 NEW	GELATIN CAPS/EQUVALNT W/TRACHEOSOP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8513 NEW	CLEANING DEVC USED W/TRACHEOSOPH V	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8514 NEW	TRACHEOSOPH PUNCT DILAT REPLCMT ON	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8515 NEW	GELATN CAP APPLC DEV TE VOICE PRSTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8600 NEW	IMPL BREAST PROSTH SILICONE/EQUAL	MH Yes	Clarity Yes	SCO Yes	For ICD F64.0-F64.9, Z87.890 see Gender AS policy, all other DX use other policy Policy: Breast Reconstruction PolicyTech Policy: Gender Affirmation Surgeries PolicyTech
L8603 NEW	Inj bulk agent,coll imp,uri track 2.5ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8604 NEW	Inj bulk agent,dextranomer/HL acid imp,uri track,1ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8605 NEW	Inj bul agent, dextranomer/HL acid imp, anal canal,1ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8606 NEW	Inj bulk agent,synth imp,uri track,1ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8607 NEW	Inj bulk agent,voyal vord med,0.1ml	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8614 NEW	COCHLEAR DEVC INCL INT&EXT COMPNT	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8615 NEW	HEADSET/HEADPIECE COCHLR IMPL REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8616 NEW	MICROPHONE COCHLEAR IMPL DEVC REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8617 NEW	TRNSMTTING COIL COCHLEAR IMPL REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8618 NEW	TRANSMITER CABLE COCHLEAR IMPL REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8619 NEW	COCHLR IMPL SPCH PRCSSR/CNTRLR REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8627 NEW	COCHLEAR IMPL EXT PROCSSR CMPNT RPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8628 NEW	COCHLR IMPL EXT CONTRLLR CMPNT REPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8629 NEW	TRANSMIT COIL CABLE COCHLR DEV RPL	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used. Policy: InterQual®
L8680 NEW	IMPL NEUROSTIMULATOR ELECTRODE EA	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8681 NEW	PT PRG IMP NEURO PLSE GEN	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech
L8682 NEW	IMPL NEUROSTIMULATOR RADIOFREQ REC V	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8683 NEW	RF TRNSMT W/IMPL NEUROSTIM RF REC V	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8684 NEW	RAD TRSM IMP SAC ROOT STIM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech
L8685 NEW	IMPL NEUROSTIM 1 ARRAY RECHARGEABLE	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8686 NEW	IMPL NEUROSTIM 1 ARRAY NON-RECHARGE	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8687 NEW	IMPL NEUROSTIM 2 ARRAY RECHARGEABLE	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8688 NEW	IMPL NEUROSTIM 2 ARRAY NON-RECHARGE	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details or InterQual® criteria used Policy: Peripheral Nerve Stimulation Policy Tech
L8689 NEW	EXT CHRGR BATT IMP STIM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech
L8690 NEW	AUDITORY OSSEOINTEGRATED INT/EXT COMP	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Implantable Bone-Conduction (Bone-Anchored) Hearing Aids PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8691 NEW	AUDITORY OSSEOINTEGRTD EXT SND REPL	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Implantable Bone-Conduction (Bone-Anchored) Hearing Aids PolicyTech
L8693 NEW	AUD OSSEOINTEGRATED DEVC ABUT REPL	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Implantable Bone-Conduction (Bone-Anchored) Hearing Aids PolicyTech
L8694 NEW	AUD OI DVC TRNSDUCR/ACTUATR REPL EA	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Implantable Bone-Conduction (Bone-Anchored) Hearing Aids PolicyTech
L8695 NEW	EXT RECHARG SYS IMPL NEUROSTIM REPL	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Peripheral Nerve Stimulation Policy Tech
L8701 NEW	Pow up ext ROM assist dev,custom	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8702 NEW	Pow up ext ROM assist dev,custom	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
L8720 NEW	Ext low ext sensory prosthesis,cutaneous stim,per leg	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

L8721	Receptor sole for use with I8720 replcmnt,each	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

L9900	ORTHO/PROSTH SUPP ACCES &/ SERV	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

M0076	PROLOTHERAPY	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		Yes	Yes	No	

Policy: Prolotherapy
[PolicyTech](#)

Q2028	INJECTION SCULPTRA 0.5 MG	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Cosmetic Reconstructive, and Restorative Services
[PolicyTech](#)

Q2041	AXICABTAGENE CILOLEUCEL	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Car T-Cell Therapy to Treat Hematological Malignancies
[PolicyTech](#)

Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List
[Policy Tech](#)

Q2042	CTIL019 TO 600 M CAR++ VI T CE P TD	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Car T-Cell Therapy to Treat Hematological Malignancies
[PolicyTech](#)

Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List
[Policy Tech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q2053	Brexucabtagene car pos t	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
					Policy: Car T-Cell Therapy to Treat Hematological Malignancies PolicyTech
					Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech
Q2054	Lisocabtagene mara car pos t	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
					Policy: Car T-Cell Therapy to Treat Hematological Malignancies PolicyTech
					Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech
Q2055	Idecabtagene vicleucal, bcma(Abecma)	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
					Policy: Car T-Cell Therapy to Treat Hematological Malignancies PolicyTech
					Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech
Q2056	CILTA CEL TO 100 M AUTO BCMA DIR CAR-POS TC DOSE	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
					Policy: Car T-Cell Therapy to Treat Hematological Malignancies PolicyTech
					Policy: Gene Therapy and Cell Therapy Included on MH Acute Hospital Carve-Out Drugs List Policy Tech
Q4081	INJ EPOETIN ALFA 100 UNITS FOR ESRD ON DIALYSIS	MH	Clarity	SCO	
		Yes	Yes	No	
					Policy: Pharmacy managed
Q4100	SKIN SUBSTITUTE NOT OTHERWISE SPECI	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
					Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4101	APLIGRAF PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4102	OASIS WOUND MATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4103	OASIS BURN MATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4104	INTEGRA BMWD PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4105	INTGRA DRT/OMNIGR DERM RGN MTX P SC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4106	DERMAGRAFT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4107	GRAFTJACKET PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4108 NEW	INTEGRA MATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4110 NEW	PRIMATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4111 NEW	GAMMAGRAFT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4112 NEW	CYMETRA INJECTABLE 1 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4113 NEW	GRAFTJACKET XPRESS INJECTABLE 1CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4114 NEW	INTEGRA FLOWABL WND MATRIX INJ 1 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4115 NEW	ALLOSKIN PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4116 ALLODERM PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4117 HYALOMATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4118 MATRISTEM MICROMATRIX 1 MG	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4121 THERASKIN PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4122 DERMACELL PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4123 ALLOSKIN RT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4124 OASIS ULTRA TRI-LAY WND MATRX SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4125	ARTHROFLEX PER SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4126	MEMODERM TRANZGRAFT/INTEGUPLY SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4127	TALYMED PER SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4128	FLEX HD OR ALLOPATCH HD PER SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4130	STRATTICE PER SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4132	GRAFIX CORE PER SQUARE CENTIMETER	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4133	GRAFIX PRIME PER SQUARE CENTIMETER	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
			Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4134 NEW	HMATRIX PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4135 NEW	MEDISKIN PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4136 NEW	E-Z DERM PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4137 NEW	AMNIOEXCEL OR BIODEXCEL PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4138 NEW	BIODFENCE DRYFLEX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4139 NEW	AMNIOMATRIX OR BIODMATRIX INJ 1 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4140 NEW	BIODFENCE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4141 NEW	ALLOSKIN AC PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4142 NEW	XCM BIOLOGIC TISSUE MATRIX PER SQ C	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4143 NEW	REPRIZA PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4145 NEW	EPIFIX INJECTABLE 1 MG	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4146 NEW	TENSIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4147 NEW	ARCHITECT EXTRACELLULAR MATRIX PER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4148 NEW	NEOX 1K PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4149	EXCELLAGEN 0.1 CC	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4150	ALLOWRAP DS/DRY PER SQ CENTIMETER	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4151	AMNIOBAND/GUARDIAN PER SQ CENTIMETR	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4152	DERMAPURE PER SQUARE CENTIMETER	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4153	DERMAVEST AND PLURIVEST PER SQ CM	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4154	BIOVANCE PER SQUARE CENTIMETER	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4155	NEOXFLO OR CLARIXFLO 1 MG	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4156	NEOX 100 PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4157	REVITALON PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4158	MARIGEN PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4159	AFFINITY PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4160	NUSHIELD PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4161	BIO-CONNEKT WOUND MATRIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4162	AMNIOPRO FLOW AMNIOGEN-C 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4163	AMNIOPRO AMNIOGEN-200 PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4164	HELICOLL PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4165	KERAMATRIX PER SQUARE CENTIMETER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4166	CYTAL PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4167	TRUSKIN PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4168	AMNIOBAND 1 MG	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4169	ARTACENT WOUND PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4170 NEW	CYGNUS PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4171 NEW	INTERFYL 1 MG	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4173 NEW	PALINGEN/PALINGEN XPLUS PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4174 NEW	PALINGEN/PROMATRX 0.36 MG P 0.25 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4175 NEW	MIRODERM PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4176 NEW	NEOPATCH PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4177 NEW	FLOW AMNIOPATCH 0.1CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4178 NEW	FLOWERAMNIOPATCH PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4179 NEW	FLOWERDERM PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4180 NEW	REVITA PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4181 NEW	AMNIO WOUND PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4182 NEW	TRANSCYTE PER SQUARE CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4183 NEW	SURGIGRAFT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4184 NEW	CELLESTA PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4185	CELLESTA FLOWABLE AMNION;PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4186	EPIFIX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4187	EPICORD PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4188	AMNIOARMOR PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4189	ARTACENT AC 1 MG	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4190	ARTACENT AC PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4191	RESTORIGIN PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4192 NEW	RESTORIGIN 1 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4193 NEW	COLL-E-DERM PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4194 NEW	NOVACHOR PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4195 NEW	PURAPLY PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4196 NEW	PURAPLY AM PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4197 NEW	PURAPLY XT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4198 NEW	GENESIS AMNIOTIC MEMBRANE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4199	Cygnus matrix, per SQ cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4200	SKINTE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4201	MATRION PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4202	KEROXX (2.5G/CC) 1CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4203	DERMA-GIDE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4204	XWRAP PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4205	Membrane graft or membrane wrap, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4206	Fluid flow or fluid GF, 1 cc	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4208	Novafix, per square centimeter	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4209	Surgraft, per square centimeter	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4211	Amnion bio or Axobiomembrane, per square centimeter	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4212	Allogen, per cc	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4213	Ascent, 0.5 mg	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Q4214	Cellesta cord, per square centimeter	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4215 Axolotl ambient or axolotl cryo, 0.1 mg	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4216 Artacent cord, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4217 Woundfix, BioWound, Woundfix Plus, BioWound Plus, Woundfix Xplus or BioWound Xplus, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4218 Surgicord, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4219 Surgigraft-dual, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4220 BellaCell HD or Surederm, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4221 Amniowrap2, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4222 NEW	Progenamatrix, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4224 NEW	Hhf10-p per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4225 NEW	Amniobind, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4226 NEW	MyOwn Skin, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4227 NEW	AMNIOCORE™ PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4229 NEW	COGENEX AMNIOTIC MEMBRANE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4230 NEW	COGENEX FLOWABLE AMNION PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4231	CORPLEX P PER CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4232	CORPLEX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4233	SURFACTOR OR NUDYN PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4234	XCELLERATE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4235	AMNIOREPAIR OR ALTIPLY PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4236	Carepatch, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4237	CRYO-CORD PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4238 DERM-MAXX PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4239 AMNIO-MAXX OR AMNIO-MAXX LITE PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4240 CORECYTE FOR TOPICAL USE ONLY PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4241 POLYCYTE FOR TOPICAL USE ONLY PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4242 AMNIOCYTE PLUS PER 0.5 CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4245 AMNIOTEXT PER CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4246 CORETEXT OR PROTEXT PER CC	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4247 AMNIOTEXT PATCH PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4248 DERMACYTE AMNIOTIC MEMBRANE ALLOGRAFT PER SQ CM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4249 Amniplly, for topical use only, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4250 Amnioamp-mp, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4251 Vim, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4252 Vendaje, per square centimet	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4253 Zenith amniotic membrane psc	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4254	Novafix dl, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4255	Reguard, for topical use only, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4256	Mlg complet, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4257	Relese, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4258	Enverse, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4259	Celera per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech
NEW	Q4260	Siganature apatch, per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
			Policy: Skin Substitutes in the Outpatient Setting			PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4261	Tag, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4262	Dual layer impax mem per sq cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4263	Surgraft tl, per sq cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4264	Cocoon mem per sq cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4265	Neostim tl, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4266	Neostim membrane, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4267	Neostim dl, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4268	Surgraft ft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4269	Surgraft xt, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4270	Complete sl, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4271	Complete ft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4272	Esano a, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	--------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4273	Esano aaa, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	----------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4274	Esano ac, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	-------	---------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4275	Esano aca, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4276	Orion, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4278	Epieffect, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4279	Vendaje ac, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4280	Xcell amnio matrix, per square cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4281	Barrera sl or barrera dl, per square cent	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4282	Cygnus dual, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4283 Biovance tri-layer or biovance 3l, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	--	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4284 Dermabind sl, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	---	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4285 Nudyn dl ornudyn mesh,per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	---------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4286 Nudyn sl or Nudyn slw,per sq cm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	---------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4287 Dermabind dl, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4288 Dermabind ch, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4289 Revoshield + amniotic barrier, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
------------	---	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4290 NEW	Membrane wrap-hydro, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4291 NEW	Lamellas xt, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4292 NEW	Lamellas, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4293 NEW	Acesso dl, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4294 NEW	Amnio quad-core, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4295 NEW	Amnio tri-core amniotic, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4296 NEW	Rebound matrix, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4297 NEW	Emerge matrix, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4298 NEW	Amnicore pro, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4299 NEW	Amnicore pro+, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4300 NEW	Acesso tl, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4301 NEW	Activate matrix, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4302 NEW	Complete aca, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4303 NEW	Complete aa, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4304	Grafix plus, per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4305	American amnion ac tri-layer,per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4306	American amnion ac,per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4307	American amnion,per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4308	Sanopellis,per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4309	Via matrix,per sqcm	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			
Q4310	Procenta,per 100mg	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	
		Policy: Skin Substitutes in the Outpatient Setting			
		PolicyTech			

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4311 NEW	Acesso, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4312 NEW	Acesso ac,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4313 NEW	Dermabind fm,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4314 NEW	Reeva ft,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4315 NEW	Regenelink amniotic membrane allograft,per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4316 NEW	Amchoplast,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4317 NEW	Vitograft,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4318	E-graft,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4319	Sanograft,per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4320	Pellograft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4321	Renograft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4322	Caregraft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4323	Alloply, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4324	Amniotx, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4325	Acapatch, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4326	Woundplus, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4327	Duoamnon, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4328	Most, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4329	Singlay, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4330	Total, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
NEW	Q4331	Axolotl graft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q4332 NEW	Axolotl dualgraft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4333 NEW	Ardeograft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4334 NEW	Amnioplast 1, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4335 NEW	Amnioplast 2, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4336 NEW	Artacent c, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4337 NEW	Artacent trident, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech
Q4338 NEW	Artacent velos, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details Policy: Skin Substitutes in the Outpatient Setting PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q4339	Artacent vericlen, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	--	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4340	Simpligraft, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	------------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4341	Simplimax, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	----------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4342	Theramend, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	----------------------------------	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4343	Dermacyte ac matrix amniotic membrane allograft, per sqcm	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	---	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4344	Tri-membrane wrap, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	--	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

NEW	Q4345	Matrix hd allograft dermis, per square centimeter	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense medical policy for authorization/criteria details
------------	-------	---	-----------	----------------	------------	---

Policy: Skin Substitutes in the Outpatient Setting
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q5101 INJECTION FILGRASTIM BIOSIMILAR 1 MICROGRAM	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5103 INJECTION INFLIXIMAB-DYYB BIOSIMILAR 10 MG	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5104 INJECTION INFLIXIMAB-ABDA BIOSIMILAR 10 MG	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5106 INJECTION EPOETIN ALFA-EPBX BIOSIMILAR 1000 U	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5108 INJECTION PEGFILGRASTIM-JMDB BIOSIMILAR 0.5 MG	MH	Clarity	SCO
		No	Yes	No

Policy: Pharmacy managed

NEW	Q5110 Filgrastim-aafi injection, for subcutaneous or intravenous use (Nivestym™)	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5111 INJECTION PEGFILGRASTIM-CBQV BIOSIMILAR 0.5 MG	MH	Clarity	SCO
		No	Yes	No

Policy: Pharmacy managed

NEW	Q5112 Trastuzumab-dttb for Injection	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

NEW	Q5113 INJECTION TRASTUZUMAB-PKRB BIOSIMILAR 10 MG	MH	Clarity	SCO
		Yes	Yes	No

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

NEW	Q5114 INJECTION TRASTUZUMAB-DKST BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5115 INJECTION RITUXIMAB-ABBS BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5116 INJECTION TRASTUZUMAB-QYYP BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5117 INJECTION TRASTUZUMAB-ANNS BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

	Q5118 INJECTION BEVACIZUMAB-BVCR BIOSIMILAR 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5119 INJ RITUXIMAB-PVVR BIOSIMILAR RUXIENCE 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5120 INJ PEGFILGRASTIM-BMEZ BIOSIMILR ZIEXTENZO 0.5 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5121 INJ INFLIXIMAB-AXXQ BIOSIMILAR AVSOLA 10 MG	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

NEW	Q5123 Injection, rituximab-arrx, biosimilar, (riabni)	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>

Policy: Pharmacy managed

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

Q5135	Injection, tocilizumab-aazg (tyenne), biosimilar, 1 mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="No"/>	
		Policy: Pharmacy managed			
Q5138	Injection, ustekinumab-aaub (wezlana), biosimilar, intrav, 1mg	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	
		Policy: Pharmacy managed			
S0207	PARAMED INTERCEPT NON-HOS-BASED ALS	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Vendor Managed Transportation			
S0208	PARAMED INTRCPT ALS NON-TRNSPRT	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Vendor Managed Transportation			
S0209	WHEELCHAIR VAN MILEAGE PER MILE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	
		Policy: Vendor Managed Transportation			
S0215	NON-EMERG TRANSPORTATION; PER MILE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Yes"/>	
		Policy: Non-Emergency Transportation Services PolicyTech			
S1030	Con't non invasive glucose monitor, purchase	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S1031	Con't non invasive glucose monitor,rental	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
S1034	ARTIF PANC DEVC SYS CMNCT ALL DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
S1035	SNSR;INVASV DSPBL ART PANC DEVC SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
S1036	TRANSMTTR;EXT USE ART PANC DEVC SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			
S1037	RECVR; EXT USE ARTIF PANC DEVC SYS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Continuous Glucose Monitoring Systems, Artificial Pancreas Devices and Insulin Delivery Devices PolicyTech			
		Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S1040	CRANIAL REMOLD ORTHOT PED CUST FAB	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

S2053	TPLNT SM INTESTINE&LIVER ALLOGFTS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Transplantation of Small Bowel, Small Bowel-Liver, or Multivisceral Organs
[PolicyTech](#)

S2054	TRANSPLANTATION MULTIVISCERAL ORGN	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Transplantation of Small Bowel, Small Bowel-Liver, or Multivisceral Organs
[PolicyTech](#)

S2060	LOBAR LUNG TRANSPLANTATION	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Transplantation of Lung or Lobar Lung
[PolicyTech](#)

S2065	SIMULTANEOUS PANC KIDNEY TPLNT	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Transplantation of Pancreas or Pancreas-Kidney
[Policy Tech](#)

S2102	ISLET CELL TISS TPLNT PANC; ALLOGEN	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Medically Necessary
[PolicyTech](#)

S2230	IMPL MAGNT CMPNT SEMI-IMPL HEAR DVC	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		No	No	No	

Policy: Implantable Bone-Conduction (Bone-Anchored) Hearing Aids
[PolicyTech](#)

Policy: Medically Necessary
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S2348	DECOMP PERQ DISC RF 1/MX LUMB	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		Yes	Yes	No	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

S3800	Genetic testing for amyotrophic lateral sclerosis (ALS)	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

S3840	DNA ANALYSIS RET PROTO-ONCOGENE	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

S3841	GENETIC TESTING FOR RETINOBLASTOMA	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

S3842	GENETIC TST VON HIPPEL-LINDAU DZ	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

S3844	DNA ANALY GJB2 CONGN PFND DEAFNESS	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

S3845	GENETIC TESTING ALPHA-THALASSEMIA	MH	Clarity	SCO	
NEW		Yes	Yes	No	

Policy: eviCore Genetic Testing
[eviCore](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S3846	GENETIC TST HGB E BETA-THALASSEMIA	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3850	GENETIC TESTING SICKLE CELL ANEMIA	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3852	DNA ANALY APOE EPSILON 4 ALLELE ALZ	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3854	GENE EXPRESSION PROFILING PANEL	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3861	GENETIC TEST SCN5A&VARIANTS SPCT BS	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3865	COMP GENE SEQUENCE ANALYSIS HCM	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

S3866	GENETIC ANALYSIS GENE MUTAT HCM	MH	Clarity	SCO
NEW		Yes	Yes	No

Policy: eviCore Genetic Testing
[eviCore](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S3870	CGH MICROARRAY TEST DD ASD &/OR ID	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: eviCore Genetic Testing
[eviCore](#)

S4011	IN VITRO FERTILIZATION;	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4013	COMPLETE CYCLE GIFT CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4014	COMPLETE CYCLE ZIFT CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4015	COMPLETE IVF CYCLE CASE RATE NOS	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4016	FROZEN IVF CYCLE CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4017	INCPL CYCL TX CANCELLED PRIOR TO STIM	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S4018	FRZN EMB TRANS CANCL CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4020	IVF PROC CANCL BEFR ASPIR CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4021	IVF PROC CANCL AFTR ASPIR CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4022	ASSIST OOCYTE FERTILIZ CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4023	DONOR EGG CYCLE INCPL CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4025	DONOR SRVC IN VITRO FERTILIZATION	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4026	PROCUREMENT DONR SPERM SPERM BANK	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S4028	MICSURG EPIDIDYMAL SPERM ASPIR	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4030	SPERM PROCUREMENT&CRYOPRES; 1 VISIT	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4031	SPERM PROCURE&CRYOPRES; SUBSQVT VST	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4035	STIM INTRAUTERINE INSEMIN CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4037	CRYOPRESERVD EMBRYO TRNSF CASE RATE	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
		<input type="button" value="No"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Infertility Services
[PolicyTech](#)

S4988	Penile contracture dev,manual,greater than 3lbs force	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	Please review the WellSense policy for authorization/criteria details
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="No"/>	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

S5160	EMERG RESPONSE SYSTEM; INSTL&TST	<input type="button" value="MH"/>	<input type="button" value="Clarity"/>	<input type="button" value="SCO"/>	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	<input type="button" value="Yes"/>	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S5161 NEW	EMERG RESPONSE SYS; SRVC FEE-MONTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S5162 NEW	EMERG RESPONSE SYS; PURCHASE ONLY	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8096 NEW	PORTABLE PEAK FLOW METER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8100 NEW	HOLD CHAMB W/INHAL/NEBULIZR;NO MASK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8101 NEW	HOLD CHAMB W/INHAL/NEBULIZR; W/MASK	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8120 NEW	O2 CNTN GASEOUS 1 U = 1 CUBIC FOOT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8121 NEW	O2 CONTENTS LQD 1 U EQUALS 1 POUND	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S8130 NEW	INTERFERENTIAL CURR STIM 2 CHANNEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8131 NEW	INTERFERENTIAL CURR STIM 4 CHANNEL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8185 NEW	FLUTTER DEVICE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8186 NEW	SWIVEL ADAPTOR	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8189 NEW	TRACHEOSTOMY SUPPLY NOC	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8210 NEW	MUCUS TRAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8265 NEW	HABERMAN FEEDER CLEFT LIP/PALATE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S8270	ENURESIS ALARM BUZZ&/VIBRATION DEVC	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8420	GRADENT PRESS AID SLEEVE&GLOVE CSTM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8421	GRADENT PRESS AID SLV&GLOV RDY MADE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8422	GRADENT PRESS AID SLEEV CSTM MED WT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8423	GRADENT PRESS AID SLEEV CSTM HVY WT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8424	GRADENT PRESS AID SLEEVE READY MADE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
S8425	GRADENT PRESS AID GLOVE CSTM MED WT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S8426 NEW	GRADENT PRESS AID GLOVE CSTM HVY WT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8427 NEW	GRADENT PRESS AID GLOVE READY MADE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8428 NEW	GRADENT PRESS AID GAUNTLET RDY MADE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8429 NEW	GRADIENT PRESSURE EXTERIOR WRAP	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8430 NEW	PADDING COMPRESSION BANDAGE ROLL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8431 NEW	COMPRESSION BANDAGE ROLL	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S8450 NEW	SPLINT PREFABRICATED DIGIT	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S8451	SPLINT PREFABRICATED WRIST OR ANKLE	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

S8452	SPLINT PREFABRICATED ELBOW	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

S8460	CAMISOLE POST-MASTECTOMY	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

S8930	E-STIM AUR ACP PNT;EA 15 MIN 1-1 PT	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details. See Auth Matrix for BH indication info.
		No	No	No	

Policy: Acupuncture
[PolicyTech](#)

S8999	Resuscitation bag	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

S9002	Intra-vaginal motion sens sys,biofeedback,pef flr rehab dev	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	No	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

S9055	PROCUREN/OTH GROWTH FACTOR PREP	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Experimental and Investigational Treatment
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S9090 NEW	VERT AXIAL DECOMPRS PER SESSION	MH Yes	Clarity Yes	SCO No	Please review the WellSense policy for authorization/criteria details Policy: Mechanized Spinal Distraction Therapy PolicyTech
S9432 NEW	Med foods, noninborn errors metabolism	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S9433 NEW	MED FOOD NUTR ORAL 100% NUTR INTAKE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S9434 NEW	MOD SOLID FOOD SUP INBORN ERR METAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S9435 NEW	MEDICAL FOODS INBORN ERRORS METAB	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
S9470	NUTRITIONAL CNSL DIETITIAN VISIT	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used in conjunction with medical policy Policy: Home Health Care MA Clarity PolicyTech Policy: Home Health Care MH and SCO PolicyTech Policy: InterQual®

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

S9472 NEW	CARD REHAB PROGM NON-PHYS PROV DIEM	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details
					Policy: Experimental and Investigational Treatment PolicyTech
					Policy: Medically Necessary PolicyTech
S9960	AMB SERVC AIR NON-ER 1 WAY FIX WING	MH No	Clarity No	SCO Yes	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
					Policy: Vendor Managed Transportation
S9961	AMB SERVC AIR NON-ER 1 WAY ROT WING	MH No	Clarity No	SCO Yes	For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
					Policy: Vendor Managed Transportation
T1002	RN SERVICES UP TO 15 MINUTES	MH Yes	Clarity No	SCO No	Special Kids Special Care Program-Please review the WellSense MA policy for authorization/criteria details
					Policy: Private Duty Nursing Services PolicyTech
T1003	LPN/LVN SERVICES UP TO 15 MINUTES	MH Yes	Clarity No	SCO No	Special Kids Special Care Program-Please review the WellSense MA policy for authorization/criteria details
					Policy: Private Duty Nursing Services PolicyTech
T1502	ADMN ORL IM&/SUBQ MED HLTH PROF	MH Yes	Clarity Yes	SCO Yes	InterQual® criteria used in conjunction with medical policy
					Policy: Home Health Care MA Clarity PolicyTech
					Policy: Home Health Care MH and SCO PolicyTech
					Policy: InterQual®

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

T1503	ADMN MED NOT ORAL&/INJ AGENCY/PROF	MH	Clarity	SCO	InterQual® criteria used in conjunction with medical policy
		Yes	Yes	Yes	

Policy: Home Health Care MA Clarity
[PolicyTech](#)

Policy: Home Health Care MH and SCO
[PolicyTech](#)

Policy: InterQual®

T2001	N-EMERG TRNSPRT; PT ATTENDNT/ESCORT	MH	Clarity	SCO	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		Yes	No	Yes	

Policy: Non-Emergency Transportation Services
[PolicyTech](#)

T2002	NON-EMERG TRANSPORTATION; PER DIEM	MH	Clarity	SCO	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		No	No	Yes	

Policy: Vendor Managed Transportation

T2004	Non-emergency transport; commercial carrier, multi-pass	MH	Clarity	SCO	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		No	No	Yes	

Policy: Vendor Managed Transportation

T2005	NONEMERGENCY TRNSPRT; STRETCHER VAN	MH	Clarity	SCO	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		No	No	Yes	

Policy: Non-Emergency Transportation Services
[PolicyTech](#)

T2049	NON-EMERG TRNSPRT; VAN MILEAGE;MILE	MH	Clarity	SCO	SCO plan-For information regarding PA requirements, please contact WellSense Health Plan Transportation via information located in plan Auth Matrix.
		No	No	Yes	

Policy: Non-Emergency Transportation Services
[PolicyTech](#)

T4521	ADLT SZ DISPBL INCONT BRP/DIAPER SM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
		NEW	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

T4522	ADLT SZ DISPBL INCONT BR/DIAPER MD	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4523	ADLT SZ DISPBL INCONT BR/DIAPER LG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4524	ADLT DISPBL INCONT BR/DIAPER X-LG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4525	ADLT SZD DISPBL INCONT UNWEAR SM	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4526	ADLT SZD DISPBL INCONT UNWEAR MED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4527	ADLT SZD DISPBL INCONT UNWEAR LG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4528	ADLT SZD DISPBL INCONT UNWEAR X-LG	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

T4529 NEW	PED SZ DISPBL INCONT BR/DIAPER S/M	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4530 NEW	PED SZ DISPBL INCONT BR/DIAPER LG	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4531 NEW	PED SZ DISPBL INCONT UNDWEAR SM/MED	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4532 NEW	PED SZ DISPBL INCONT UNDWEAR LG EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4533 NEW	YOUTH SZD DISPBL INCONT BR/DIAPER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4534 NEW	YOUTH SZD DISPBL INCONT UNDWEAR EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
T4535 NEW	DISPBL LINER/PAD/UNDGRMNT INCONT EA	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

T4536	INCONT PROD UNDWEAR/PULLON REUSE SZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4537	INCONT PROD UNDPAD REUSBL BED SZ EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4538	DIAPER SRVC REUSBL DIAPER EA DIAPER	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4539	INCONT PROD DIAPER/BRF REUSBL SZ EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4540	INCONT PROD UNDPAD REUSBL CHAIR SZ	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4541	INCONT PRODUCT DISPBL UNDPAD LG EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			
T4542	INCONT PROD DISPBL UNDPAD SM SZ EA	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	
		Policy: Durable Medical Equipment			
		How provider types are handled by Northwood and the Plan			

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

T4543	ADULT DISP INCONTINENCE PROD ABV XL	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4544	ADULT SZ DISP INCONT PDCT	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T4545	INC PRDCT,DISP PENILE WRAP, EACH	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T5001	PSTN SEAT PERSON SPECL/ORTHO NEEDS	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

T5999	SUPPLY NOT OTHERWISE SPECIFIED	MH	Clarity	SCO	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan.
NEW		Yes	Yes	Yes	

Policy: Durable Medical Equipment
[How provider types are handled by Northwood and the Plan](#)

V2500	CNTC LENS PMMA SPHERICAL PER LENS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		Yes	Yes	Yes	

Policy: Contact Lens and Scleral Lens
[PolicyTech](#)

V2501	CNTC LENS PMMA/PRISM BALLST LENS	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
		Yes	Yes	Yes	

Policy: Contact Lens and Scleral Lens
[PolicyTech](#)

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

V2502	CONTACT LENS PMMA BIFOCAL PER LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2503	CNTC LENS PMMA COLR VISN DEFIC LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2510	CNTC LENS GAS PRMEABL SPHERICL LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2511	CNTC LENS GAS PRMEABL PRSM BLLST EA	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2512	CNTC LENS GAS PERMEABLE BIFOCL LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2513	CNTC LENS GAS PRMEABL EXT WEAR LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2520	CNTC LENS HYDROPHIL SPHERICAL LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

V2521	CNTC LENS HYDROPHL/PRISM BLLST LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2522	CNTC LENS HYDROPHIL BIFOCAL LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2523	CNTC LENS HYDROPHIL EXT WEAR LENS	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2524	Contact lens, hydrophilic, spherical, photochromic additive, per lens	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2530 NEW	CNTC LENS SCLERAL GAS IMPERMEBL PER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2531 NEW	CNTC LENS SCLERAL GAS PERMEABLE PER	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech
V2599	CONTACT LENS OTHER TYPE	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details Policy: Contact Lens and Scleral Lens PolicyTech

Code	Short Description	PA Required?			Note
		Yes= Auth Required via Medical Policy or InterQual			
		No= Auth not applicable, review Benefits and/or Payment Policies			

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

V2623 NEW	PROSTHETIC EYE PLASTIC CUSTOM	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2624 NEW	POLISHING/RESURFACING OCULR PROSTH	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2625 NEW	ENLARGEMENT OF OCULAR PROSTHESIS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2626 NEW	REDUCTION OF OCULAR PROSTHESIS	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2627 NEW	SCLERAL COVER SHELL	MH Yes	Clarity Yes	SCO Yes	Please review the WellSense policy for authorization/criteria details. DME providers, for auth details, please see plan's Auth Matrix for Northwood information Policy: Contact Lens and Scleral Lens PolicyTech Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2628 NEW	FABRICATION&FIT OCULAR CONFORMER	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan
V2629 NEW	PROSTHETIC EYE OTHER TYPE	MH Yes	Clarity Yes	SCO Yes	*ALL Providers please CLICK link to determine if your request is handled by Northwood or the Plan. Policy: Durable Medical Equipment How provider types are handled by Northwood and the Plan

Code	Short Description	PA Required?			Note
------	-------------------	--------------	--	--	------

Yes= Auth Required via Medical Policy or InterQual
 No= Auth not applicable, review Benefits and/or Payment Policies

PA REQUIRED for any HCPCS code used w/TMJ DX Codes M26.60-69

Please review all disclaimers and information on the first page of this code look-up tool before and/or after your code search

UPDATED 12/5/2024 Please review carefully for changes

V2790	AMNIOTIC MEMBRANE SURG RECNSTR-PROC	MH	Clarity	SCO	Please review the WellSense policy for authorization/criteria details
NEW		Yes	Yes	Yes	

Policy: Cosmetic Reconstructive, and Restorative Services
[PolicyTech](#)

V5273	ASSTIVE LISTEN DEVC W/COCHLEAR IMPL	MH	Clarity	SCO	InterQual® criteria used.
NEW		Yes	Yes	Yes	

Policy: InterQual®