

Distribution: Medical Suppliers 03-06

Issued: December 1, 2003

Subject: Healthcare Common Procedure Coding System 2004 Update

Effective: January 1, 2004

Programs Affected: Medicaid and Children's Special Health Care Services

This bulletin is to notify you of the HCPCS* (Healthcare Common Procedure Coding System) changes for 2004 that will be implemented by the Michigan Department of Community Health effective for dates of service on and after January 1, 2004.

The following tables contain the applicable HCPCS 2004 procedure code and/or modifier changes for Medical Suppliers, DME Dealers, Orthotists, and Prosthetists. Any new HCPCS procedure code or modifier not listed in Table 1 will not be covered at this time. Table 2 lists the deletions directly affecting program coverage. Refer to the HCPCS 2004 codebook for a comprehensive list of deleted codes, added codes, and code description changes.

Information regarding 2004 fees and coverage parameters will be located in the MDCH Medical Supplier/DME/Prosthetics and Orthotics Database, posted on the MDCH website at www.michigan.gov/mdch. The revised database will be available by January 1, 2004. In addition, the database will include separate charts providing the categories of approved enteral formulae and the wheelchair accessory reimbursement methodology.

Table 1 – HCPCS 2004 Additions

HCPCS*	Short Description	Comments
**KH	DMEPOS ini clm, pur/1 mo rnt	Use modifier with HCPCS code E0604 only for 1 st rental month
U3	Low Profile	Use modifier with HCPCS code B4086 only
A4416	Ost pch clsd w barrier/filtr	Replaces K0581
A4417	Ost pch w bar/bltinconv/fltr	Replaces K0582
A4418	Ost pch clsd w/o bar w filtr	Replaces K0583
A4419	Ost pch for bar w flange/flt	Replaces K0584
A4420	Ost pch clsd for bar w lk fl	Replaces K0585

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HCPCS*	Short Description	Comments
A4423	Ost pch for bar w lk fl/fltr	Replaces K0586
A4424	Ost pch drain w bar & filter	Replaces K0587
A4425	Ost pch drain for barrier fl	Replaces K0588
A4426	Ost pch drain 2 piece system	Replaces K0589
A4427	Ost pch drain/barr lk flng/f	Replaces K0590
A4428	Urine ost pouch w faucet/tap	Replaces K0591
A4429	Urine ost pouch w bltinconv	Replaces K0592
A4430	Ost urine pch w b/bltin conv	Replaces K0593
A4431	Ost pch urine w barrier/tapv	Replaces K0594
A4432	Os pch urine w bar/fange/tap	Replaces K0595
A4433	Urine ost pch bar w lock fln	Replaces K0596
A4434	Ost pch urine w lock flng/ft	Replaces K0597
A6407	Packing strips, non-impreg	
A6441	Pad band w>=3" <5"/yd	Replaces A6421
A6442	Conform band n/s w<3"/yd	Replaces A6422
A6443	Conform band n/s w>=3"<5"/yd	Replaces A6422
A6444	Conform band n/s w>=5"/yd	Replaces A6424
A6445	Conform band s w <3"/yd	Replaces A6426
A6446	Conform band s w>=3" <5"/yd	Replaces A6426
A6447	Conform band s w >=5"/yd	Replaces A6428
A6448	Lt compres band <3"/yd	Replaces A6430
A6449	Lt compres band >=3" <5"/yd	Replaces A6430
A6450	Lt compres band >=5"/yd	Replaces A6432
A6451	Mod compres band w>=3"<5"/yd	Replaces A6434
A6452	High compres band w>=3"<5"/yd	Prior authorization required, Replaces A6436
A6453	Self-adher band w <3"/yd	Prior authorization required, Replaces A6438
A6454	Self-adher band w>=3" <5"/yd	Prior authorization required, Replaces A6438
A6455	Self-adher band >=5"/yd	Prior authorization required, Replaces A6438
A6456	Zinc paste band w >=3"<5"/yd	Replaces A6440
A6550	Neg pres wound ther drsg set	Prior authorization required, Replaces K0539
A6551	Neg press wound ther canistr	Prior authorization required, Replaces K0540
A7046	Repl water chamber, PAP dev	
A7520	Trach/laryn tube non-cuffed	Replaces A4622
A7521	Trach/laryn tube cuffed	Replaces A4622
A7522	Trach/laryn tube stainless	Prior authorization required, Replaces A4622

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HCPCS*	Short Description	Comments
A7523	Tracheostomy shower protect	Replaces S8180
A7524	Tracheos toma stent/stud/bttn	Prior authorization required
A7525	Tracheostomy mask	Replaces A4621
A7526	Tracheostomy tube collar	Replaces A4621
A9999	DME supply or accessory, nos	Prior authorization required
E0140	Walker w trunk support	Prior authorization required, Covered for under 21 only
E0190	Positioning cushion	Prior authorization required
E0240	Bath/shower chair	Prior authorization required, Covered for under 21 only
E0247	Trans bench w/wo comm open	Prior authorization required, Covered for under 21 only
E0248	HDtrans bench w/wo comm open	Prior authorization required, Covered for under 21 only
E0301	HD hosp bed, 350-600 lbs	Prior authorization required
E0302	Ex hd hosp bed > 600 lbs	Prior authorization required
E0303	Hosp bed hvy dty xtra wide	Prior authorization required, Replaces K0549
E0304	Hosp bed xtra hvy dty x wide	Prior authorization required, Replaces K0550
E0470	RAD w/o backup non-inv intfc	Prior authorization required, Replaces K0532
E0471	RAD w/backup non inv intrfc	Prior authorization required, Replaces K0533
E0561	Humidifier nonheated w PAP	Prior authorization required, Replaces K0268
E0562	Humidifier heated used w PAP	Prior authorization required, Replaces K0531
E0637	Sit-stand w seatlift	Prior authorization required, Covered for under 21 only
E0638	Standing frame sys	Prior authorization required, Covered for under 21 only
**E0950	Tray	Prior authorization required, Replaces K0107
**E0952	Toe loop/holder, each	Replaces K0036
E0955	Cushioned headrest	Prior authorization required
E0956	W/c lateral trunk/hip suppor	Prior authorization required
E0957	W/c medial thigh support	Prior authorization required
**E0959	Amputee adapter	Prior authorization required, Replaces K0100
E0960	W/c shoulder harness/straps	Prior authorization required
**E0961	Wheelchair brake extension	Prior authorization required, Replaces K0079
**E0966	Wheelchair head rest extensi	Replaces K0025
**E0967	Wheelchair hand rims	Replaces K0063
**E0972	Transfer board or device	Replaces K0103
**E0973	W/Ch access det adj armrest	Prior authorization required, Replaces K0016
**E0974	W/Ch access anti-rollback	Prior authorization required, Replaces K0080
**E0978	W/C acc,saf belt pelv strap	Replaces K0031
E0981	Seat upholstery, replacement	Replaces K0032, K0033

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HCPCS*	Short Description	Comments
E0982	Back upholstery, replacement	Replaces K0026, K0027
E0983	Add pwr joystick	Prior authorization required, Replaces K0460
E0984	Add pwr tiller	Prior authorization required, Replaces K0461
E0986	Man w/c push-rim pow assist	Prior authorization required
**E0990	Wheelchair elevating leg res	Prior authorization required for new wheelchair purchase only, Replaces K0048
**E0992	Wheelchair solid seat insert	Replaces K0030
**E0995	Wheelchair calf rest	Replaces K0049
E1002	Pwr seat tilt	Prior authorization required
E1003	Pwr seat recline	Prior authorization required
E1006	Pwr seat combo w/o shear	Prior authorization required
E1010	Add pwr leg elevation	Prior authorization required
E1028	W/c manual swingaway	Prior authorization required
E1029	W/c vent tray fixed	Prior authorization required
E1030	W/c vent tray gimbaled	Prior authorization required
**E1226	W/C access fully reclineback	Prior authorization required, Replaces K0028
E1391	Oxygen concentrator, dual	Prior authorization required
E2201	Man w/ch acc seat w>=20"<24"	Prior authorization required
E2202	Seat width 24-27 in	Prior authorization required
E2203	Frame depth less than 22 in	Prior authorization required
E2204	Frame depth 22 to 25 in	Prior authorization required
E2300	Pwr seat elevation sys	Prior authorization required, Covered for under 21 only
E2301	Pwr standing	Prior authorization required, Covered for under 21 only
E2320	Hand chin control	Prior authorization required
E2321	Hand interface joystick	Prior authorization required
E2325	Sip and puff interface	Prior authorization required
E2327	Head control interface mech	Prior authorization required
E2328	Head/extremity control inter	Prior authorization required
E2329	Head control nonproportional	Prior authorization required
E2330	Head control proximity switc	Prior authorization required
E2331	Attendant control	Prior authorization required
E2340	W/c wdth 20-23 in seat frame	Prior authorization required
E2341	W/c wdth 24-27 in seat frame	Prior authorization required
E2342	W/c dpth 20-21 in seat frame	Prior authorization required
E2343	W/c dpth 22-25 in seat frame	Prior authorization required

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Table 1 – HCPCS 2004 Additions

HCPCS*	Short Description	Comments
E2351	Electronic SGD interface	Prior authorization required
E2360	22nf nonsealed leadacid	Replaces K0082
E2361	22nf sealed leadacid battery	Prior authorization is required for new wheelchair purchase only, Replaces K0083
E2362	Gr24 nonsealed leadacid	Replaces K0084
E2363	Gr24 sealed leadacid battery	Prior authorization is required for new wheelchair purchase only, Replaces K0085
E2364	U1 nonsealed leadacid battery	Replaces K0086
E2365	U1 sealed leadacid battery	Prior authorization is required for new wheelchair purchase only, Replaces K0087
E2366	Battery charger, single mode	Replaces K0088
E2367	Battery charger, dual mode	Prior authorization is required for new wheelchair purchase only, Replaces K0089
E2399	Noc interface	Prior authorization required
E2402	Neg press wound therapy pump	Prior authorization required, Replaces K0538
E2500	SGD digitized pre-rec <=8min	Prior authorization required, Replaces K0541
E2502	SGD prerec msg >8min <=20min	Prior authorization required, Replaces K0542
E2504	SGD prerec msg>20min <=40min	Prior authorization required, Replaces K0542
E2506	SGD prerec msg > 40 min	Prior authorization required, Replaces K0542
E2508	SGD spelling phys contact	Prior authorization required, Replaces K0543
E2510	SGD w multi methods msg/accs	Prior authorization required, Replaces K0544
E2511	SGD sftwre prgrm for PC/PDA	Prior authorization required, Replaces K0545
E2512	SGD accessory, mounting sys	Prior authorization required, Replaces K0546
E2599	SGD accessory noc	Prior authorization required, Replaces K0547
K0603	Repl batt alkaline 1.5 v	Replaces A4632
K0618	TLSO 2 piece rigid shell	
K0619	TLSO 3 piece rigid shell	
K0620	Tubular elastic dressing	
L0112	Cranial cervical orthosis	Prior authorization required
L1831	Knee orth pos locking joint	
L1907	AFO supramalleolar custom	Prior authorization required except for specified diagnoses, 359.0, 359.1, 343.0, 343.8, 343.9
L1971	AFO w/ankle joint, prefab	
L3917	Prefab metacarpal fx orthosis	
L5673	Socket insert w lock mech	Replaces K0557
L5679	Socket insert w/o lock mech	Replaces K0556
L5681	Intl custm cong/latyp insert	Replaces K0559
L5683	Initial custom socket insert	Replaces K0558

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Table 1 – HCPCS 2004 Additions

HCPCS*	Short Description	Comments
T5001	Special position seat/vehicl	Prior authorization required
T5999	Supply, nos	Use for low profile gastrostomy kit only

Table 2 – HCPCS 2004 Deletions

HCPCS*	Short Description	Comments
A4214	Sterile saline/water 30CC vial	
A4621	Tracheostomy mask or collar	Report A7525 or A7526
A4622	Trach mask or laryng tube	Report A7520, A7521, or A7522
A4632	Infus pump rplcemnt battery	Report K0603
A6421	Pad Bandage >=3<5 w/roll	Report A6441
A6422	Conf bandage ns >=3<5" w/roll	Report A6442 or A6443
A6424	Conf bandage ns>=5" w/roll	Report A6444
A6426	Conf bandage s>=3<5" w/roll	Report A6445 or A6446
A6428	Conf bandage s>=5" w/roll	Report A6447
A6430	Lt compres bdg>=3<5" w/roll	Report A6448 or A6449
A6432	Lt compres bdg>=5" w/roll	Report A6450
A6434	Mo compres bdg>3<5" w/roll	Report A6451
A6436	Hi compres bdg>3<5" w/roll	Report A6452
A6438	Self-adher bdg	Report A4653, A6454 or A6455
A6440	Zinc paste bdg >=3<5" w /roll	Report A6456
E0142	Walker rigid wheeled with se	
E0145	Walker whled seat/crutch att	
E0146	Folding walker wheels w seat	
E0165	Commode chair stationry det	
E0943	Cervical pillow	
K0016	Detach adjust armrst cplete	Report E0973
K0022	Reinforced back upholstery	
K0025	Hook-on headrest extension	Report E0966
K0026	Back upholst lgtwt whlchr	Report E0982
K0027	Back upholst other whlchr	Report E0982
K0028	Manual fully reclining back	Report E1226
K0029	Reinforced seat upholstery	Report K0108
K0030	Solid plnr seat sngl dnsfoam	Report E0992
K0031	Safety belt/pelvic strap	Report E0978
K0032	Seat upholst lgtwt whlchr	Report K0108

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Table 2 – HCPCS 2004 Deletions

HCPCS*	Short Description	Comments
K0033	Seat upholstery other whlchr	Report E0981
K0035	Heel loop each	Report E0951
K0036	Toe loop each	Report E0952
K0048	Elevate legrest complete	Report E0990
K0049	Calf pad each	Report E0995
K0054	Seat wdth 10-12/15/17/20 wc	
K0055	Seat dpth 15/17/18 ltwt wc	
K0057	Seat wdth 19/20 hvy dty wc	
K0058	Seat dpth 17/18 power wc	
K0062	Handrim 8-10 vert/obliq proj	Report E0967
K0063	Hndrm 12-16 vert/obliq proj	Report E0967
K0079	Wheel lock extension pair	Report E0961
K0080	Anti-rollback device pair	Report E0974
K0082	22 nf nonsealed leadacid	Report E2360
K0083	22nf sealed leadacid battery	Report E2361
K0084	Gr24 nonsealed leadacid	Report E2362
K0085	Gr24 sealed leadacid battery	Report E2363
K0086	U1nons ealed leadacid battery	Report E2364
K0087	U1 sealed leadacid battery	Report E2365
K0088	Battery charger, single mode	Report E2366
K0089	Battery charger, dual mode	Report E2367
K0100	Amputee adapter pair	Report E0959
K0103	Transfer board < 25"	Report E0972
K0107	Wheelchair tray	Report E0950
K0268	Humidifier nonheated w PAP	Report E0561
K0460	WC power add-on joystick	Report E0983
K0461	WC power add-on tiller cntrl	Report E0984
K0531	Heated humidifier used w pap	Report E0562
K0532	Noninvasive assist wo backup	Report E0470
K0533	Noninvasive assist w backup	Report E0471
K0538	Neg pressure wnd thrpy pump	Report E2402
K0539	Neg pres wnd thrpy dsq set	Report A6550
K0540	Neg pres wnd thrp canister	Report A6551
K0541	SGD prerecorded msg <= 8 min	Report E2500

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Table 2 – HCPCS 2004 Deletions

HCPCS*	Short Description	Comments
K0542	SGD prerecorded msg > 8 min	Report E2502, E2504, or E2506
K0543	SGD msg formed by spelling	Report E2508
K0544	SGD w multi methods msg/accs	Report E2510
K0545	SGD sftwre prgrm for PC/PDA	Report E2511
K0546	SGD accessory, mounting systm	Report E2512
K0547	SGD accessory NOC	Report E2599
K0549	Hosp bed hvy dty xtra wide	Report E0303
K0550	Hosp bed xtra hvy dty x wide	Report E0304
K0556	Socket insert w lock mech	Report L5679
K0557	Socket insert w/o lock mech	Report L5673
K0558	Intl custm cong/atyp insert	Report L5683
K0559	Initial custom socket insert	Report L5681
K0581	Ost pch clsd w barrier/fltr	Report A4416
K0582	Ost pch w bar/bltinconv/fltr	Report A4417
K0583	Ost pch clsd w/o bar w fltr	Report A4418
K0584	Ost pch for bar w flange/flt	Report A4419
K0585	Ost pch clsd for bar w lk fl	Report A4420
K0586	Ost pch for bar w lk fl/fltr	Report A4423
K0587	Ost pch drain w bar & filter	Report A4424
K0588	Ost pch drain for barrier fl	Report A4425
K0589	Ost pch drain 2 piece system	Report A4426
K0590	Ost pch drain/barr lk flng/f	Report A4427
K0591	Urine ost pouch w faucet/tap	Report A4428
K0592	Urine ost pouch w bltinconv	Report A4429
K0593	Ost urine pch w b/bltin conv	Report A4430
K0594	Ost pch urine w barrier/tapv	Report A4431
K0595	Os pch urine w bar/fange/tap	Report A4432
K0596	Urine ost pch bar w lock fln	Report A4433
K0597	Ost pch urine w lock flng/ft	Report A4434
S8180	Trach shower protector	Report A7523
S8181	Trach tube holder	Report A7526

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Manual Maintenance

Retain this bulletin for future reference.

Questions

Any questions regarding this bulletin should be directed to Provider Support, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231 or email ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may telephone toll free 1-800-292-2550.

Approval

A handwritten signature in black ink that reads "Paul Reinhart". The signature is written in a cursive, flowing style.

Paul Reinhart, Director
Medical Services Administration