## Supplemental Table 2. REQUIRED PRIOR AUTHORIZATION LIST FOR DURABLE MEDICAL EQUIPMENT

## **REQUIRED PRIOR AUTHORIZATION LIST**

As defined in 42 CFR 414.234(c)(1)

K0856 Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to	and including 300 pounds	IL MO NV and MA/ 02/2017
		Nationwide: 07/17/2017
K0861 Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity u pounds	p to and including 300	IL, MO, NY, and WV: 03/20/17 Nationwide: 07/17/2017
K0813 Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and in	including 300 pounds	Nationwide: 09/01/2018
K0814 Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 30	00 pounds	Nationwide: 09/01/2018
K0815 Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 3	300 pounds	Nationwide: 09/01/2018
K0816 Power wheelchair, group 1 standard, captains chair, patient weight capacity up to and including 300 pounds		Nationwide: 09/01/2018
K0820 Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and include	ding 300 pounds	Nationwide: 09/01/2018
K0821 Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 30	00 pounds	Nationwide: 09/01/2018
K0822 Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 p	pounds	Nationwide: 09/01/2018
K0823 Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds	;	Nationwide: 09/01/2018
K0824 Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds		Nationwide: 09/01/2018
K0825 Power wheelchair, group 2 heavy duty, captains chair, patient weight capacity 301 to 450 pounds		Nationwide: 09/01/2018
K0826 Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds	S	Nationwide: 09/01/2018
K0827 Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds		Nationwide: 09/01/2018
K0828 Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or m	iore	Nationwide: 09/01/2018
K0829 Power wheelchair, group 2 extra heavy duty, captains chair, patient weight 601 pounds or more		Nationwide: 09/01/2018
K0835 Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to a	and including 300 pounds	Nationwide: 09/01/2018
K0836 Power wheelchair, group 2 standard, single power option, captains chair, patient weight capacity up to and	including 300 pounds	Nationwide: 09/01/2018
K0837 Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 30	01 to 450 pounds	Nationwide: 09/01/2018
K0838 Power wheelchair, group 2 heavy duty, single power option, captains chair, patient weight capacity 301 to 4	150 pounds	Nationwide: 09/01/2018
K0839 Power wheelchair, group 2 very heavy duty, single power option sling/solid seat/back, patient weight capaci	ity 451 to 600 pounds	Nationwide: 09/01/2018
K0840 Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capa	acity 601 pounds or more	Nationwide: 09/01/2018
K0841 Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to	and including 300 pounds	Nationwide: 09/01/2018
K0842 Power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to an	nd including 300 pounds	Nationwide: 09/01/2018
K0843 Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity	301 to 450 pounds	Nationwide: 09/01/2018
K0848 Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 p	pounds	Nationwide: 09/01/2018
K0849 Power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds		Nationwide: 09/01/2018
K0850 Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds		Nationwide: 09/01/2018
K0851 Power wheelchair, group 3 heavy duty, captains chair, patient weight capacity 301 to 450 pounds		Nationwide: 09/01/2018
K0852 Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds	S	Nationwide: 09/01/2018
K0853 Power wheelchair, group 3 very heavy duty, captains chair, patient weight capacity 451 to 600 pounds		Nationwide: 09/01/2018
K0854 Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or m	lore	Nationwide: 09/01/2018
K0855 Power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more		Nationwide: 09/01/2018
K0857 Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and	including 300 pounds	Nationwide: 07/22/2019
K0858 Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to 450	) pounds	Nationwide: 07/22/2019
K0859 Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 4	150 pounds	Nationwide: 07/22/2019
K0860 Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capac	city 451 to 600 pounds	Nationwide: 07/22/2019

HCPCS	Description	Effective Date <sup>1</sup>
K0862	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	Nationwide: 07/22/2019
K0863	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds	Nationwide: 07/22/2019
K0864	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more	Nationwide: 07/22/2019
E0193	Powered air flotation bed (low air loss therapy)	CA, IN, NJ, and NC: 07/22/ 2019 Nationwide: 10/21/2019
E0277	Powered pressure-reducing air mattress	CA, IN, NJ, and NC: 07/22/ 2019 Nationwide: 10/21/2019
E0371	Non-powered advanced pressure reducing overlay for mattress, standard mattress length and width	CA, IN, NJ, and NC: 07/22/ 2019 Nationwide: 10/21/2019
E0372	Powered air overlay for mattress, standard mattress length and width	CA, IN, NJ, and NC: 07/22/ 2019 Nationwide: 10/21/2019
E0373	Non-powered advanced pressure reducing mattress	CA, IN, NJ, and NC: 07/22/ 2019 Nationwide: 10/21/2019
L5856	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing and stance phase, includes electronic sensor(s), any type	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
L5857	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing phase only, includes electronic sensor(s), any type	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
L5858	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any type	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
L5973	Endoskeletal ankle foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes power source	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
L5980	All lower extremity prostheses, flex foot system	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
L5987	All lower extremity prosthesis, shank foot system with vertical loading pylon	CA, MI, PA, and TX: 05/11/ 2020 Nationwide: 10/08/2020
<sup>1</sup> For ini	tial rental series claims with a date of delivery on or after the effective date	

<sup>1</sup> For initial rental series claims with a date of delivery on or after the effective date Reprinted from the Centers for Medicare & Medicaid Services. Required Prior Authorization List. 2020. https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/DMEPOS/Downloads/DMEPOS\_PA\_Required-Prior-Authorization-List.pdf. Last accessed March 10, 2020.