Procedure Code	Full Description	Allowable or Required Modifiers	Rental Days Before PA / Max Fee	<u>Purchase</u> PA Needed / Max Fee	Life Expectancy	In NH Facility Rate?	Allowable Provider Types	Effective Date	Allowable Place of Service
A4210	NEEDLE-FREE INJECTION DEVICE, EACH		No Rental	Y / \$492.57	3 YEARS	In Rate	05, 24, 25, 53	20080701	01, 05, 06, 07, 08, 11, 12, 13, 14, 19, 20, 26, 34, 49, 50, 57, 60, 71, 72
E0740	NON-IMPLANTED PELVIC FLOOR ELECTRICAL STIMULATOR, COMPLETE SYSTEM	NU	No Rental	N / \$695.40	5 YEARS	Not In Rate	25, 53	20230101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 15, 19, 20, 26, 31, 32, 34, 49, 50, 56, 57, 60, 71, 72, 99
E0747	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, OTHER THAN SPINAL APPLICATIONS		No Rental	Y / \$4,656.99	2 YEARS	Not In Rate	25	20230101	01, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
E0748	OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS		No Rental	Y / \$5,174.14	2 YEARS	Not In Rate	25	20230101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 33, 49, 50, 71, 72
E0760	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NONINVASIVE		No Rental	Y / \$4,299.61	5 YEARS	Not In Rate	25	20230101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 33, 49, 50, 71, 72
E0766	ELECTRICAL STIMULATION DEVICE USED FOR CANCER TREATMENT, INCLUDES ALL ACCESSORIES, ANY TYPE	RR	90 / \$10,706.54 Per MO.	No Purchase		Not In Rate	25	20211115	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 71, 72, 99
E0783	INFUSION PUMP SYSTEM, IMPLANTABLE, PROGRAMMABLE (INCLUDES ALL COMPONENTS, E.G., PUMP, CATHETER, CONNECTORS, ETC.)		No Rental	N / \$7,162.20 Surgery Requires PA	5 YEARS	Not In Rate	25	20140401	22, 23, 24
K0606	AUTOMATIC EXTERNAL DEFIBRILLATOR, WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS, GARMENT TYPE	RR	0 / \$61.91	No Purchase	N/A	Not In Rate	03, 25, 57	20210101	11, 12, 31, 32
K1013	ENEMA TUBE, ANY TYPE, REPLACEMENT ONLY, EACH		No Rental	Y / \$62.33 Represents MiniACE or Chait Access Adapter with Connection Tube	1 Year	In Rate	05, 25	20210401	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 33, 49, 50, 71, 72
L0810	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO JACKET VEST		No Rental	N / \$1,997.14	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0820	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO PLASTER BODY JACKET		No Rental	N / \$970.09	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0830	HALO PROCEDURE; CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE ORTHOSIS		No Rental	N / \$1,091.35	3 YEARS	Not In Rate	04, 05, 17, 24, 25, 53, 77, 78	20080701	21, 22, 23
L0859	ADDITION TO HALO PROCEDURE, MAGNETIC RESONANCE IMAGE COMPATIBLE SYSTEMS, RINGS AND PINS, ANY MATERIAL		No Rental	N / \$1,002.35	3 YEARS	Not In Rate	09, 10, 31, 33	20120901	21, 22, 23
L7510	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS		No Rental	Y / Only If Over \$150	Varies	Not In Rate	20, 24, 25, 53, 74	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8500	ARTIFICIAL LARYNX, ANY TYPE		No Rental	N / \$536.12	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8501	TRACHEOSTOMY SPEAKING VAVLE		No Rental	N / \$84.84	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8507	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, PATIENT INSERTED, ANY TYPE, EACH		No Rental	N / \$40.16	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20160101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72

Procedure Code	Full Description	Allowable or Required Modifiers	Rental Days Before PA / Max Fee	Purchase PA Needed / Max Fee	Life Expectancy	In NH Facility Rate?	Allowable Provider Types	Effective Date	Allowable Place of Service
L8509	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, INSERTED BY A LICENSED HEALTH CARE PROVIDER, ANY TYPE		No Rental	N / \$104.74	None	Not In Rate	04, 05, 17, 24, 25, 53, 74, 79	20160101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8510	VOICE AMPLIFIER		No Rental	N / \$194.46	None	Not In Rate	04, 05, 24, 25, 79	20180101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8511	INSERT FOR INDWELLING TRACHEOESOPHAGEAL PROSTHESIS, WITH OR WITHOUT VALVE, REPLACEMENT ONLY, EACH		No Rental	N / \$69.73	None	Not In Rate	04, 05, 24, 25, 53, 79	20160101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 31, 32, 33, 49, 50, 54, 71, 72
L8604	INJECTABLE BULKING AGENT, DEXTRANOMER/HYALURONIC ACID COPOLYMER IMPLANT, URINARY TRACT, 1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES		No Rental	N / \$551.14	None	Not In Rate	24, 25	20170701	01, 03, 04, 05, 06, 07, 08, 09, 11, 13, 14, 15, 20, 26, 31, 32, 33, 34, 49, 50, 54, 56, 57, 60, 71, 72, 99
L8605	INJECTABLE BULKING AGENT, DEXTRANOMER/HYALURONIC ACID COPOLYMER IMPLANT, ANAL CANAL, 1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES		No Rental	N / \$551.14	None	Not In Rate	24, 25	20170101	01, 03, 04, 05, 06, 07, 08, 09, 11, 13, 14, 15, 20, 26, 31, 32, 33, 34, 49, 50, 54, 56, 57, 60, 71, 72, 99
L8606	INJECTABLE BULKING AGENT, SYNTHETIC IMPLANT, URINARY TRACT, 1 ML SYRINGE, INCLUDES SHIPPING AND NECESSARY SUPPLIES		No Rental	N / \$158.03	None	Not In Rate	24, 25	20170701	01, 03, 04, 05, 06, 07, 08, 09, 11, 13, 14, 15, 19, 20, 26, 31, 32, 33, 34, 49, 50, 54, 56, 57, 60, 71, 72, 99
L8607	INJECTIBLE BULKING AGENT FOR VOCAL CORD MEDIALIZATION, 0.1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES		No Rental	N / \$33.01	None	Not In Rate	05, 24, 25, 53	20170701	01, 03, 04, 05, 06, 07, 08, 09, 11, 13, 14, 15, 20, 26, 31, 32, 33, 34, 49, 50, 54, 56, 57, 60, 71, 72, 99
L8610	OCULAR IMPLANT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8612	AQUEOUS SHUNT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8613	OSSICULA IMPLANT		No Rental	N / Priced on Claim	None	Not In Rate	05, 24, 25, 53	20080701	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 31, 32, 33, 49, 50, 54, 71, 72
L8614	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS	RT, LT	No Rental	N / \$17,262.95 Must be billed with implantation	Not Applicable	Not In Rate	25	20120901	22, 23, 24
L8615	HEADSET/HEADPIECE FOR USE WITH COCLEAR IMPLANT DEVICE, REPLACMENT		No Rental	N / \$360.00	3 Years	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8616	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$240.00	1 Year	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8617	TRANSMITTING COIL FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$77.19	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8618	TRANSMITTER CABLE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$20.41	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8619	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT	RT, LT	No Rental	N / \$6,000.00	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20110501	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8621	ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT, EACH		No Rental	N / \$1.02	33 Per Month	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8622	ALAKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, ANY SIZE, REPLACMENT, EACH		No Rental	N / \$1.02	33 Per Month	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72

Procedure Code	Full Description	Allowable or Required Modifiers	Rental Days Before PA / Max Fee	<u>Purchase</u> PA Needed / Max Fee	Life Expectancy	In NH Facility Rate?	Allowable Provider Types	Effective Date	Allowable Place of Service
L8623	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICESPEECH PROCESSOR, OTHER THAN EAR LEVEL, REPLACEMENT		No Rental	N / \$53.00	1 Per Year (Set of 2)	Not In Rate	05, 20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8624	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, EAR LEVEL, REPLACEMENT		No Rental	N / \$125.46	1 Per Year (Set of 2)	Not In Rate	05, 20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8625	EXTERNAL RECHARGING SYSTEM FOR BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE, REPLACEMENT ONLY, EACH		No Rental	N / \$146.94	1 Year	Not In Rate	20, 25	20180101	03, 05, 06, 07, 08, 11, 12, 19, 22, 49, 50, 71, 72
L8627	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR, COMPONENT, REPLACEMENT		No Rental	N / Priced on Claim	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8628	COCHLEAR IMPLANT, EXTERNAL CONTROLLER COMPONENT, REPLACEMENT		No Rental	N / Priced on Claim	3 YEARS	Not In Rate	20, 25, 31, 33, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8629	TRANSMITTING COIL AND CABLE, INTEGRATED FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT		No Rental	N / \$99.25	4 Per 6 Months	Not In Rate	20, 24, 25, 74	20100101	01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 22, 23, 24, 31, 32, 33, 49, 50, 54, 71, 72
L8680	IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH		No Rental	N / \$350.23	Up To 16 Per Surgery	Not In Rate	25	20120901	19, 22, 23, 24
L8685	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, RECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$11,999.00	10 YEARS	Not In Rate	25	20080701	22, 23, 24
L8686	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$11,999.00	10 YEARS	Not In Rate	25	20170501	22, 23, 24
L8687	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, RECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$11,999.00	10 YEARS	Not In Rate	25	20080701	22, 23, 24
L8688	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, NONRECHARGEABLE, INCLUDES EXTENSION		No Rental	N / \$9,831.68	10 YEARS	Not In Rate	25	20120901	22, 23, 24
L8690	AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS	RT, LT	No Rental	N / \$4742.00 Must be billed with implantation	Not Applicable	Not In Rate	25	20150101	22, 23, 24
L8691	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, REPLACEMENT		No Rental	N / \$1339.76	5 YEARS	Not In Rate	20, 25	20150601	05, 06, 07, 08, 11, 12, 19, 22, 49, 50, 71, 72
L8692	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND OR OTHER MEANS OF EXTERNAL ATTACHMENT		No Rental	Y / \$4361.00	5 YEARS	Not In Rate	20, 25	20150601	05, 06, 07, 08, 11, 12, 19, 22, 49, 50, 71, 72
L8693	AUDITORY OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY		No Rental	Y / \$1,336.90	5 YEARS	Not In Rate	25	20120901	19, 22, 23, 24
L8694	AUDITORY OSSEOINTEGRATED DEVICE, TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EACH		No Rental	N / \$734.70	5 YEARS	Not In Rate	20, 25	20180901	03, 05, 06, 07, 08, 11, 12, 19, 22, 49, 50, 71, 72
L8698	MISCELLANEOUS COMPONENT, SUPPLY OR ACCESSORY FOR USE WITH TOTAL ARTIFICIAL HEART SYSTEM		No Rental	Y / Priced on PA	None	Not In Rate	05, 24, 25	20190101	01, 04, 05, 06, 07, 08, 11, 12, 13, 14, 19, 20, 22, 31, 32, 33, 49, 50, 54
L8699	PROSTHETIC IMPLANT, NOT OTHERWISE SPECIFIED		No Rental	Y / Priced on PA	5 YEARS	Not In Rate	03, 04, 05, 17, 24, 25, 53, 57, 77, 78, 79	20080701	19, 22, 23, 24
S1040	CRANIAL REMOLDING ORTHOSIS, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)		No Rental	Y / \$2,331.08	1 PER LIFETIME	Not In Rate	53	20150901	05, 06, 07, 08, 11, 12, 19, 49, 72