

HCP Code	Descriptor	Effective Date	Code Type
A4212	Non coring needle or stylet	4/1/2018	Non-routine Supply
A4213	Syringe, Sterile, 20 cc or greater	4/1/2018	Non-routine Supply
A4215	Needle, sterile, any size, each	4/1/2018	Non-routine Supply
A4216	Sterile water/saline up to 10ml	4/1/2018	Non-routine Supply
A4217	Sterile water/saline 500ml	4/1/2018	Non-routine Supply
A4244	Alcohol or peroxide, per pint	4/1/2018	Non-routine Supply
A4245	Alcohol wipes, per box	4/1/2018	Non-routine Supply
A4246	Betadine or phiso hex solution, per pint	4/1/2018	Non-routine Supply
A4247	Betadine or iodine swabs/wipes, per box	4/1/2018	Non-routine Supply
A4248	Chlorhexidine, containing anticeptic, 1ml	4/1/2018	Non-routine Supply
A4310	Insert tray w/o bag/cath	4/1/2018	Non-routine Supply
A4311	Catheter w/o bag 2-way latex	4/1/2018	Non-routine Supply
A4312	Cath w/o bag 2-way silicone	4/1/2018	Non-routine Supply
A4313	Catheter w/bag 3-way	4/1/2018	Non-routine Supply
A4314	Cath w/drainage 2-way latex	4/1/2018	Non-routine Supply
A4315	Cath w/drainage 2-way silcne	4/1/2018	Non-routine Supply
A4316	Cath w/drainage 3-way	4/1/2018	Non-routine Supply
A4320	Irrigation tray	4/1/2018	Non-routine Supply
A4321	Cath therapeutic irrig agent	4/1/2018	Non-routine Supply
A4322	Irrigation syringe	4/1/2018	Non-routine Supply
A4326	Male external catheter	4/1/2018	Non-routine Supply
A4327	Fem urinary collect dev cup	4/1/2018	Non-routine Supply
A4328	Fem urinary collect pouch	4/1/2018	Non-routine Supply
A4330	Stool collection pouch	4/1/2018	Non-routine Supply
A4331	Extension drainage tubing	4/1/2018	Non-routine Supply
A4332	Lubricant for cath insertion	4/1/2018	Non-routine Supply
A4333	Urinary cath anchor device	4/1/2018	Non-routine Supply
A4334	Urinary cath leg strap	4/1/2018	Non-routine Supply
A4335	Incontinence supply	4/1/2018	Non-routine Supply
A4338	Indwelling catheter latex	4/1/2018	Non-routine Supply
A4340	Indwelling catheter special	4/1/2018	Non-routine Supply
A4344	Cath indw foley 2 way silicn	4/1/2018	Non-routine Supply
A4346	Cath indw foley 3 way	4/1/2018	Non-routine Supply
A4349	Male ext catheter, with or without adhesive, disposable, each	4/1/2018	Non-routine Supply
A4351	Straight tip urine catheter	4/1/2018	Non-routine Supply
A4352	Coude tip urinary catheter	4/1/2018	Non-routine Supply
A4353	Intermittent urinary cath	4/1/2018	Non-routine Supply
A4354	Cath insertion tray w/bag	4/1/2018	Non-routine Supply
A4355	Bladder irrigation tubing	4/1/2018	Non-routine Supply
A4356	Ext ureth clmp or compr dvc	4/1/2018	Non-routine Supply
A4357	Bedside drainage bag	4/1/2018	Non-routine Supply
A4358	Urinary leg bag	4/1/2018	Non-routine Supply
A4360	disposable external urethral clamp or compression device with pad and/or pouch	4/1/2018	Non-routine Supply
A4361	Ostomy face plate	4/1/2018	Non-routine Supply
A4362	Solid skin barrier	4/1/2018	Non-routine Supply
A4363	Ostomy clamp, any type, replacement only, each	4/1/2018	Non-routine Supply
A4364	Liq adhes for facial prosth	4/1/2018	Non-routine Supply
A4366	Ostomy vent, any type, each	4/1/2018	Non-routine Supply
A4367	Ostomy belt	4/1/2018	Non-routine Supply
A4368	Ostomy filter	4/1/2018	Non-routine Supply
A4368	Ostomy pouch filter	4/1/2018	Non-routine Supply

HCPCS Code	Descriptor	Effective Date	Code Type
A4369	Skin barrier liquid per oz	4/1/2018	Non-routine Supply
A4371	Skin barrier powder per oz	4/1/2018	Non-routine Supply
A4372	Skin barrier solid 4x4 equiv	4/1/2018	Non-routine Supply
A4373	Skin barrier with flange	4/1/2018	Non-routine Supply
A4375	Drainable plastic pch w fcpl	4/1/2018	Non-routine Supply
A4376	Drainable rubber pch w fcpl	4/1/2018	Non-routine Supply
A4377	Drainable plstic pch w/o fp	4/1/2018	Non-routine Supply
A4378	Drainable rubber pch w/o fp	4/1/2018	Non-routine Supply
A4379	Urinary plastic pouch w fcpl	4/1/2018	Non-routine Supply
A4380	Urinary rubber pouch w fcpl	4/1/2018	Non-routine Supply
A4381	Urinary plastic pouch w/o fp	4/1/2018	Non-routine Supply
A4382	Urinary hvy plstc pch w/o fp	4/1/2018	Non-routine Supply
A4383	Urinary rubber pouch w/o fp	4/1/2018	Non-routine Supply
A4384	Ostomy facepl/silicone ring	4/1/2018	Non-routine Supply
A4385	Ost skn barrier sld ext wear	4/1/2018	Non-routine Supply
A4387	Ost clsd pouch w att st barr	4/1/2018	Non-routine Supply
A4388	Drainable pch w ex wear barr	4/1/2018	Non-routine Supply
A4389	Drainable pch w st wear barr	4/1/2018	Non-routine Supply
A4390	Drainable pch ex wear convex	4/1/2018	Non-routine Supply
A4391	Urinary pouch w ex wear barr	4/1/2018	Non-routine Supply
A4392	Urinary pouch w st wear barr	4/1/2018	Non-routine Supply
A4393	Urine pch w ex wear bar conv	4/1/2018	Non-routine Supply
A4394	Ostomy pouch liq deodorant	4/1/2018	Non-routine Supply
A4395	Ostomy pouch solid deodorant	4/1/2018	Non-routine Supply
A4396	Peristomal hernia supprt blt	4/1/2018	Non-routine Supply
A4397	Irrigation supply sleeve	4/1/2018	Non-routine Supply
A4398	Ostomy irrigation bag	4/1/2018	Non-routine Supply
A4399	Ostomy irrig cone/cath w brs	4/1/2018	Non-routine Supply
A4400	Ostomy irrigation set	4/1/2018	Non-routine Supply
A4402	Lubricant per ounce	4/1/2018	Non-routine Supply
A4404	Ostomy ring each	4/1/2018	Non-routine Supply
A4405	Nonpectin based ostomy paste	4/1/2018	Non-routine Supply
A4406	Pectin based ostomy paste	4/1/2018	Non-routine Supply
A4407	Ext wear ost skn barr <=4sq"	4/1/2018	Non-routine Supply
A4408	Ext wear ost skn barr >4sq"	4/1/2018	Non-routine Supply
A4409	Ost skn barr w flng <=4 sq"	4/1/2018	Non-routine Supply
A4410	Ost skn barr w flng >4sq"	4/1/2018	Non-routine Supply
A4411	Ostomy skin barrier, solid 4x4 or equiv., extended wear, w/ built-in convexity, each	4/1/2018	Non-routine Supply
A4412	Ostomy pouch, drainable, high output, for use on a barrier w/ flange (2 piece system) without filter, each	4/1/2018	Non-routine Supply
A4413	2 pc drainable ost pouch w/ filter	4/1/2018	Non-routine Supply
A4414	Ostomy skn barr w/ flng < 4sq"	4/1/2018	Non-routine Supply
A4415	Ostomy skn barr w/ flng > 4sq"	4/1/2018	Non-routine Supply
A4416	Ost pch clsd w barrier/fltr	4/1/2018	Non-routine Supply
A4417	Ost pch w bar/bltinconv/fltr	4/1/2018	Non-routine Supply
A4418	Ost pch clsd w/o bar w fltr	4/1/2018	Non-routine Supply
A4419	Ost pch for bar w flange/flt	4/1/2018	Non-routine Supply
A4420	Ost pch clsd for bar w lk fl	4/1/2018	Non-routine Supply
A4421 (6)	Ostomy supply misc	4/1/2018	Non-routine Supply
A4422	Ost pouch absorbent material	4/1/2018	Non-routine Supply
A4423	Ost pch for bar w lk fl/fltr	4/1/2018	Non-routine Supply
A4424	Ost pch drain w bar & filter	4/1/2018	Non-routine Supply

HCP Code	Descriptor	Effective Date	Code Type
A4425	Ost pch drain for barrier fl	4/1/2018	Non-routine Supply
A4426	Ost pch drain 2 piece system	4/1/2018	Non-routine Supply
A4427	Ost pch drain/barr lk flng/f	4/1/2018	Non-routine Supply
A4428	Urine ost pouch w faucet/tap	4/1/2018	Non-routine Supply
A4429	Urine ost pouch w bltinconv	4/1/2018	Non-routine Supply
A4430	Ost urine pch w b/bltin conv	4/1/2018	Non-routine Supply
A4431	Ost pch urine w barrier/tapv	4/1/2018	Non-routine Supply
A4432	Os pch urine w bar/fange/tap	4/1/2018	Non-routine Supply
A4433	Urine ost pch bar w lock fln	4/1/2018	Non-routine Supply
A4434	Ost pch urine w lock flng/ft	4/1/2018	Non-routine Supply
	Ostomy pouch, drainable, high output, with extended wear barrier (one-piece system), with or without filter, each.		
A4435		4/1/2018	Non-routine Supply
A4455	Adhesive remover per ounce	4/1/2018	Non-routine Supply
A4456	Adhesive remover, wipes, any type	4/1/2018	Non-routine Supply
A4458	Reusable enema bag	4/1/2018	Non-routine Supply
	Manual Pump Enema System, Includes Balloon, Catheter		
A4459	And All Accessories, Reusable, Any Type	4/1/2018	Non-routine Supply
A4460	Elastic compression bandage	4/1/2018	Non-routine Supply
A4461	Surgical dressing holder, non-reusable, each	4/1/2018	Non-routine Supply
A4463	Surgical dressing holder, reusable, each	4/1/2018	Non-routine Supply
A4481	Tracheostoma filter	4/1/2018	Non-routine Supply
	Topical hyperbaric oxygen chamber, disposable (Hyperbaric		
A4575	o2 chamber disp)	4/1/2018	Non-routine Supply
A4623	Tracheostomy inner cannula	4/1/2018	Non-routine Supply
A4625	Trach care kit for new trach	4/1/2018	Non-routine Supply
A4626	Tracheostomy cleaning brush	4/1/2018	Non-routine Supply
A4649	Surgical supplies	4/1/2018	Non-routine Supply
A4657	Syringe, with or without needle, each	4/1/2018	Non-routine Supply
A4930	Sterile, gloves per pair	4/1/2018	Non-routine Supply
A4932	Rectal thermometer, reusable, any type, each	4/1/2018	Non-routine Supply
A5051	Pouch clsd w barr attached	4/1/2018	Non-routine Supply
A5052	Clsd ostomy pouch w/o barr	4/1/2018	Non-routine Supply
A5053	Clsd ostomy pouch faceplate	4/1/2018	Non-routine Supply
A5054	Clsd ostomy pouch w/flange	4/1/2018	Non-routine Supply
A5055	Stoma cap	4/1/2018	Non-routine Supply
	Ostomy pouch, drainable, with extended wear barrier		
A5056	attached, with filter, (1 piece), each	4/1/2018	Non-routine Supply
	Ostomy pouch, drainable, with extended wear barrier		
A5057	attached, with built in convexity, with filter, (1 piece), each	4/1/2018	Non-routine Supply
A5061	Pouch drainable w barrier at	4/1/2018	Non-routine Supply
A5062	Drnble ostomy pouch w/o barr	4/1/2018	Non-routine Supply
A5063	Drain ostomy pouch w/flange	4/1/2018	Non-routine Supply
A5071	Urinary pouch w/barrier	4/1/2018	Non-routine Supply
A5072	Urinary pouch w/o barrier	4/1/2018	Non-routine Supply
A5073	Urinary pouch on barr w/flng	4/1/2018	Non-routine Supply
A5081	Continent stoma plug	4/1/2018	Non-routine Supply
A5082	Continent stoma catheter	4/1/2018	Non-routine Supply
	Continent Device, Stoma Absorptive Cover for Continent		
A5083	Stoma	4/1/2018	Non-routine Supply
A5093	Ostomy accessory convex inse	4/1/2018	Non-routine Supply
A5102	Bedside drain btl w/wo tube	4/1/2018	Non-routine Supply

HCPCS Code	Descriptor	Effective Date	Code Type
A5105	Urinary Suspensory With Leg Bag or Without Tube, Each	4/1/2018	Non-routine Supply
A5112	Urinary leg bag	4/1/2018	Non-routine Supply
A5113	Latex leg strap	4/1/2018	Non-routine Supply
A5114	Foam/fabric leg strap	4/1/2018	Non-routine Supply
A5120	Skin barrier, wipes or swabs, each	4/1/2018	Non-routine Supply
A5121	Solid skin barrier 6x6	4/1/2018	Non-routine Supply
A5122	Solid skin barrier 8x8	4/1/2018	Non-routine Supply
A5126	Disk/foam pad +or- adhesive	4/1/2018	Non-routine Supply
A5131	Appliance cleaner	4/1/2018	Non-routine Supply
A6010	Collagen based wound filler, dry form, sterile, per gram of collagen	4/1/2018	Non-routine Supply
A6011	Collagen based wound filler, gel/paste, sterile, per gram of collagen	4/1/2018	Non-routine Supply
A6020	Collage wound dressing	4/1/2018	Non-routine Supply
A6021	Collagen dressing, sterile, 16 sq. in. or less, each	4/1/2018	Non-routine Supply
A6022	Collagen dressing, sterile, more than 16 sq. in. but less than or equal to 48 sq. in., each	4/1/2018	Non-routine Supply
A6023	Collagen dressing, sterile, more than 48 sq. in., each	4/1/2018	Non-routine Supply
A6024	Collagen dressing wound filler, sterile, per 6 inches	4/1/2018	Non-routine Supply
A6154	Wound pouch each	4/1/2018	Non-routine Supply
A6196	Alginate or other fiber gelling dressing, wound cover, sterile, pad size 16 sq. in. or less, each dressing	4/1/2018	Non-routine Supply
A6197	Alginate or other fiber gelling dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6198	Alginate or other fiber gelling dressing, wound cover, sterile, pad size more than 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6199	Alginate or other fiber gelling dressing, wound filler, sterile, per 6 inches	4/1/2018	Non-routine Supply
A6203	Composite dressing, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6204	Composite dressing, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6205	Composite dressing, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6206	Contact layer, sterile, 16 sq. in. or less, each dressing	4/1/2018	Non-routine Supply
A6207	Contact layer, sterile, more than 16 sq. in. but less than or equal to 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6208	Contact layer, sterile, more than 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6209	Foam dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6210	Foam dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6211	Foam dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6212	Foam dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6213	Foam dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply

HCP Code	Descriptor	Effective Date	Code Type
A6214	Foam dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6215	Foam dressing, wound filler, sterile, per gram	4/1/2018	Non-routine Supply
A6219	Gauze, non-impregnated, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6220	Gauze, non-impregnated, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6221	Gauze, non-impregnated, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6222	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6223	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6224	Gauze, impregnated with other than water, normal saline, or hydrogel, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6228	Gauze, impregnated water or normal saline, sterile, pad size 16 sq. in. or less, without adhesive border each dressing	4/1/2018	Non-routine Supply
A6229	Gauze, impregnated, water or normal saline, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6230	Gauze, impregnated, water or normal saline, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6231	Gauze, impregnated, hydrogel, for direct wound contact, sterile, pad size 16 sq. in. or less, each dressing	4/1/2018	Non-routine Supply
A6232	Gauze, impregnated, hydrogel, for direct wound contact, sterile, pad size greater than 16 sq. in. but less than or equal to 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6233	Gauze, impregnated, hydrogel, for direct wound contact, sterile, pad size more than 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6234	Hydrocolloid dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6235	Hydrocolloid dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6236	Hydrocolloid dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6237	Hydrocolloid dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6238	Hydrocolloid dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6239	Hydrocolloid dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply

Home Health Consolidated Billing List as of Tr. 3923

HCPCS Code	Descriptor	Effective Date	Code Type
A6240	Hydrocolloid dressing, wound filler, paste, sterile, per ounce	4/1/2018	Non-routine Supply
A6241	Hydrocolloid dressing, wound filler, dry form, sterile, per gram	4/1/2018	Non-routine Supply
A6242	Hydrogel dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6243	Hydrogel dressing, wound cover, sterile, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6244	Hydrogel dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6245	Hydrogel dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6246	Hydrogel dressing, wound cover, sterile, pad size, more than 16 sq. in. but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6247	Hydrogel dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6248	Hydrogel dressing, wound filler, gel, sterile, per fluid ounce	4/1/2018	Non-routine Supply
A6251	Specialty absorptive dressing, wound cover, sterile, pad size 16 sq. in. or less, without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6252	Specialty absorptive dressing, wound cover, sterile, pad size more than 16 sq. in., but less than or equal to 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6253	Specialty absorptive dressing, wound cover, sterile, pad size more than 48 sq. in., without adhesive border, each dressing	4/1/2018	Non-routine Supply
A6254	Specialty absorptive dressing, wound cover, sterile, pad size 16 sq. in. or less, with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6255	Specialty absorptive dressing, wound cover, sterile, pad size more than 16 sq. in., but less than or equal to 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6256	Specialty absorptive dressing, wound cover, sterile, pad size more than 48 sq. in., with any size adhesive border, each dressing	4/1/2018	Non-routine Supply
A6257	Transparent film, sterile, 16 sq. in. or less, each dressing	4/1/2018	Non-routine Supply
A6258	Transparent film, sterile, more than 16 sq. in. but less than or equal to 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6259	Transparent film, sterile, more than 48 sq. in., each dressing	4/1/2018	Non-routine Supply
A6261	Wound filler, gel/paste sterile, per fluid ounce, not otherwise specified	4/1/2018	Non-routine Supply
A6262	Wound filler, dry form, sterile, per gram, not otherwise specified	4/1/2018	Non-routine Supply
A6266	Gauze, impregnated, other than water, normal saline, or zinc paste, sterile, any width, per linear yard	4/1/2018	Non-routine Supply
A6402	Sterile gauze <= 16 sq in	4/1/2018	Non-routine Supply
A6403	Sterile gauze >16 <= 48 sq in	4/1/2018	Non-routine Supply
A6404	Sterile gauze > 48 sq in	4/1/2018	Non-routine Supply

HCP Code	Descriptor	Effective Date	Code Type
A6405	Sterile elastic gauze /yd	4/1/2018	Non-routine Supply
A6406	Sterile non-elastic gauze/yd	4/1/2018	Non-routine Supply
A6407	Packing strips, non-impregnated, sterile, up to 2 inches in width, per linear yard	4/1/2018	Non-routine Supply
A6410	Sterile eye pad	4/1/2018	Non-routine Supply
A6412	Eye patch, occlusive, each	4/1/2018	Non-routine Supply
A6440	Zinc Paste >=3"<5" w/roll	4/1/2018	Non-routine Supply
A6441	Padding bandage, non-elastic, non-woven/non-knitted, width > or = 3" and < 5", per yard	4/1/2018	Non-routine Supply
A6442	Conforming bandage, non-elastic, knitted/woven, non-sterile, width less than three inches, per yard	4/1/2018	Non-routine Supply
A6443	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6444	Conforming bandage, non-elastic, knitted/woven, non-sterile, width greater than or equal to 5 inches, per yard	4/1/2018	Non-routine Supply
A6445	Conforming bandage, non-elastic, knitted/woven, sterile, width less than three inches, per yard	4/1/2018	Non-routine Supply
A6446	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6447	Conforming bandage, non-elastic, knitted/woven, sterile, width greater than or equal to five inches, per yard	4/1/2018	Non-routine Supply
A6448	Light compression bandage, elastic, knitted/woven, width less than three inches, per yard	4/1/2018	Non-routine Supply
A6449	Light compression bandage, elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6450	Light compression bandage, elastic, knitted/woven, width greater than or equal to five inches, per yard	4/1/2018	Non-routine Supply
A6451	Moderate compression bandage, elastic, knitted/woven, load resistance of 1.25 to 1.34 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6452	High compression bandage, elastic, knitted/woven, load resistance greater than or equal to 1.35 foot pounds at 50% maximum stretch, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6453	Self-adherent bandage, elastic, non-knitted/non-woven, width less than three inches, per yard	4/1/2018	Non-routine Supply
A6454	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6455	Self-adherent bandage, elastic, non-knitted/non-woven, width greater than or equal to five inches, per yard	4/1/2018	Non-routine Supply
A6456	Zinc paste impregnated bandage, non-elastic, knitted/woven, width greater than or equal to three inches and less than five inches, per yard	4/1/2018	Non-routine Supply
A6457	Tubular dressing with or without elastic, any width, per linear yard	4/1/2018	Non-routine Supply
A6531	Gradient Compression Stocking, Below Knee, 30-40 MMHG, Each	4/1/2018	Non-routine Supply

HCPCS Code	Descriptor	Effective Date	Code Type
A6532	Gradient Compression Stocking, Below Knee, 40-50 MMHG, Each	4/1/2018	Non-routine Supply
A6545	Gradient Compression Wrap, non-elastic, below knee, 30-50 mmHg, each	4/1/2018	Non-routine Supply
A7040	One way chest drain valve	4/1/2018	Non-routine Supply
A7041	Water seal drainage container and tubing for use with implanted chest tube	4/1/2018	Non-routine Supply
A7045	Exhalation port with or without swivel used with accessories for postive airway devices, replacement only	4/1/2018	Non-routine Supply
A7047	Oral Interface Used With Respiratory Suction Pump, each Vacuum drainage collection unit and tubing kit, including all supplies needed for collection unit change, for use with implanted catheter, each	4/1/2018	Non-routine Supply
A7048	Tracheostoma valve w diaphra	4/1/2018	Non-routine Supply
A7501	Replacement diaphragm/fplate	4/1/2018	Non-routine Supply
A7502	HMES filter holder or cap	4/1/2018	Non-routine Supply
A7503	Tracheostoma HMES filter	4/1/2018	Non-routine Supply
A7504	HMES or trach valve housing	4/1/2018	Non-routine Supply
A7505	HMES/trachvalve adhesivedisk	4/1/2018	Non-routine Supply
A7506	Integrated filter & holder	4/1/2018	Non-routine Supply
A7507	Housing & Integrated Adhesiv	4/1/2018	Non-routine Supply
A7508	Heat & moisture exchange sys	4/1/2018	Non-routine Supply
A7509	Tracheostomy/larynectomy tube, non-cuffed	4/1/2018	Non-routine Supply
A7520	Tracheostomy/larynectomy tube, cuffed	4/1/2018	Non-routine Supply
A7521	Tracheostomy/larynectomy tube, stainless steel	4/1/2018	Non-routine Supply
A7522	Tracheostomy shower protector, each	4/1/2018	Non-routine Supply
A7523	Tracheostomy stent/stud/button, each	4/1/2018	Non-routine Supply
A7524	Tracheostomy laryngectomy tube plug/stop, each	4/1/2018	Non-routine Supply
A7527	chem/antiseptic solution, 8oz.	4/1/2018	Non-routine Supply
K0614	tubular elastic dressing	4/1/2018	Therapy
K0620	Endoscopic study swallow functn	4/1/2018	Therapy
G0193	Sensory testing endoscopic study	4/1/2018	Therapy
G0194	Clinical eval swallowing funct	4/1/2018	Therapy
G0195	Eval of swallowing with radioopa	4/1/2018	Therapy
G0196	Eval of pt for prescip speech devi	4/1/2018	Therapy
G0197	Patient adapation & train for spe	4/1/2018	Therapy
G0198	Reevaluation of patient use spec	4/1/2018	Therapy
G0199	Eval of patient prescip of voice p	4/1/2018	Therapy
G0200	Modi for training in use voice pro	4/1/2018	Therapy
G0201	Elec stim unattend for press	4/1/2018	Therapy
G0281	Elect stim wound care not pd	4/1/2018	Therapy
G0282	Elec stim other than wound	4/1/2018	Therapy
G0283	Electromagntic tx for ulcers	4/1/2018	Therapy
G0329	Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes	4/1/2018	Therapy
G0515	Extracorp shock wave tx, ms	4/1/2018	Therapy
0019T	Extracorp shock wave tx, ft	4/1/2018	Therapy
0020T	Apply neurostimulator	4/1/2018	Therapy
64550	Biofeedback train, any meth	4/1/2018	Therapy
90901	Biofeedback peri/uro/rectal	4/1/2018	Therapy
90911	Speech/hearing therapy	4/1/2018	Therapy
92507			

HCPCS Code	Descriptor	Effective Date	Code Type
92508	Speech/hearing therapy	4/1/2018	Therapy
92510	Rehab for ear implant	4/1/2018	Therapy
92521	Evaluation of speech fluency (eg, stuttering, cluttering)	4/1/2018	Therapy
92522	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria)	4/1/2018	Therapy
92523	with evaluation of language comprehension and expression (eg, receptive and expressive language)	4/1/2018	Therapy
92524	Behavioral and qualitative analysis of voice and resonance	4/1/2018	Therapy
92526	Oral function therapy	4/1/2018	Therapy
92601	Cochlear implt f/up exam < 7	4/1/2018	Therapy
92602	Reprogram cochlear implt < 7	4/1/2018	Therapy
92603	Cochlear implt f/up exam 7 >	4/1/2018	Therapy
92604	Reprogram cochlear implt 7 >	4/1/2018	Therapy
92605	Eval for nonspeech device rx	4/1/2018	Therapy
92606	Non-speech device service	4/1/2018	Therapy
92607	Ex for speech device rx, 1hr	4/1/2018	Therapy
92608	Ex for speech device rx addl	4/1/2018	Therapy
92609	Use of speech device service	4/1/2018	Therapy
92610	Evaluate swallowing function	4/1/2018	Therapy
92611	Motion fluoroscopy/swallow	4/1/2018	Therapy
92612	Endoscopy swallow tst (fees)	4/1/2018	Therapy
92614	Laryngoscopic sensory test	4/1/2018	Therapy
92616	Fees w/laryngeal sense test	4/1/2018	Therapy
95831	Limb muscle testing, manual	4/1/2018	Therapy
95832	Hand muscle testing, manual	4/1/2018	Therapy
95833	Body muscle testing, manual	4/1/2018	Therapy
95834	Body muscle testing, manual	4/1/2018	Therapy
95851	Range of motion measurements	4/1/2018	Therapy
95852	Range of motion measurements	4/1/2018	Therapy
96000	Motion analysis, video/3d	4/1/2018	Therapy
96001	Motion test w/ft press meas	4/1/2018	Therapy
96002	Dynamic surface emg	4/1/2018	Therapy
96003	Dynamic fine wire emg	4/1/2018	Therapy
96105	Assessment of aphasia	4/1/2018	Therapy
96125	Standardized Cognitive Performance Testing Per Hour	4/1/2018	Therapy
97012	Mechanical traction therapy	4/1/2018	Therapy
97016	Vasopneumatic device therapy	4/1/2018	Therapy
97018	Paraffin bath therapy	4/1/2018	Therapy
97022	Whirlpool therapy	4/1/2018	Therapy
97024	Diathermy treatment	4/1/2018	Therapy
97026	Infrared therapy	4/1/2018	Therapy
97028	Ultraviolet therapy	4/1/2018	Therapy
97032	Electrical stimulation	4/1/2018	Therapy
97033	Electric current therapy	4/1/2018	Therapy
97034	Contrast bath therapy	4/1/2018	Therapy
97035	Ultrasound therapy	4/1/2018	Therapy
97036	Hydrotherapy	4/1/2018	Therapy
97039	Physical therapy treatment	4/1/2018	Therapy
97110	Therapeutic exercises	4/1/2018	Therapy
97112	Neuromuscular reeducation	4/1/2018	Therapy
97113	Aquatic therapy/exercises	4/1/2018	Therapy
97116	Gait training therapy	4/1/2018	Therapy

HCPCS Code	Descriptor	Effective Date	Code Type
97124	Massage therapy	4/1/2018	Therapy
97139	Physical medicine procedure	4/1/2018	Therapy
97140	Manual therapy	4/1/2018	Therapy
97150	Group therapeutic procedures	4/1/2018	Therapy
97161	PT Eval Low Complex 20 Min	4/1/2018	Therapy
97162	PT Eval Mod Complex 30 Min	4/1/2018	Therapy
97163	PT Eval High Complex 45 Min	4/1/2018	Therapy
97164	PT Re-eval Est Plan Care	4/1/2018	Therapy
97165	OT Eval Low Complex 20 Min	4/1/2018	Therapy
97166	OT Eval Mod Complex 30 Min	4/1/2018	Therapy
97167	OT Eval High Complex 45 Min	4/1/2018	Therapy
97168	OT Re-eval Est Plan Care	4/1/2018	Therapy
97530	Therapeutic activities	4/1/2018	Therapy
97533	Sensory integration	4/1/2018	Therapy
97535	Self care mngment training	4/1/2018	Therapy
97537	Community/work reintegration	4/1/2018	Therapy
97542	Wheelchair mngment training	4/1/2018	Therapy
97545	Work hardening	4/1/2018	Therapy
97546	Work hardening add-on	4/1/2018	Therapy
97597	debridement; surface area less than or equal to 20 square centimeters	4/1/2018	Therapy
97598	debridement; total wound(s) surface greater than 20 square centimeters	4/1/2018	Therapy
97602	Wound care non-selective	4/1/2018	Therapy
97605	Negative pressure wound therapy (eg vacuum assisted drainage collection); total wound(s) surface area less than or equal to 50 square centimeters	4/1/2018	Therapy
97606	Negative pressure wound therapy (eg vacuum assisted drainage collection); total wound(s) surface area greater than 50 square centimeters	4/1/2018	Therapy
97607	Negative pressure wound therapy, (eg, vacuum assisted drainage collection), utilizing disposable, non-durable medical equipment including provision of exudate management collection system, topical application(s), wound assessment, and instructions for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters	4/1/2018	Therapy
97608	Negative pressure wound therapy, (eg, vacuum assisted drainage collection), utilizing disposable, non-durable medical equipment including provision of exudate management collection system, topical application(s), wound assessment, and instructions for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters	4/1/2018	Therapy
97750	Physical performance test	4/1/2018	Therapy
97755	Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact by provider, with written report, each 15 minutes	4/1/2018	Therapy

Home Health Consolidated Billing List as of Tr. 3923

HCPCS Code	Descriptor	Effective Date	Code Type
97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes	4/1/2018	Therapy
97761	Prosthetic training, upper and/or lower extremity(s), each 15 minutes	4/1/2018	Therapy
97763	Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower extremity(ies), and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15 minutes	4/1/2018	Therapy
97799	Physical medicine procedure	4/1/2018	Therapy