WV MEDICAID PRIOR AUTHORIZATION CODE LISTING

ORTHOTIC SERVICES

For Non-MCO enrolled Member benefit verIfication, CPT/HCPCS code coverage & service limits verification and billing/claims assistance, please contact claims vendor at 888-483-0793

Service Code	Code Description	ATREZZO Service Type	PRIOR AUTH REQUIRED?	AGE RESTRICTION	PRICED OR NOT PRICED	SERVICE LIMITS	ADDITIONAL INFORMATION
A5500	DIABETICS ONLY OFF THE SHELF DEPH-INLAY	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5501	FOR DIABETICS ONLY, SHOE MOLDED FROM CAST	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5502	FOR DIABETICS ONLY, MULTIPLE DENSITY INS	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5503	FOR DIABETICS ONLY,DEPH INLAY OR CUSTOM	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5504	FOR DIABETICS ONLY, DEPTH INLAY SHOES OR	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5505	FOR DIABETICS ONLY, DEPTH IN-LAY SHOE OR	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5506	FOR DIABETICS ONLY, DEPTH IN-LAY SHOE OR	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY** SUPPLIES INCLUDE: HEPLOCK START KITS, CENTRAL LINE KITS, INSYTES, ETOH SWABS, HUBER NEEDLES, SUB-Q- NEEDLE, SUB-Q KIT, **NON-REIMBURSABLE WITH A4230 OR A4231**
A5507	FOR DIABETICS ONLY, NOT OTHERWISE SPECIFIED MODIFICATION OF SHOE, PER SHOE	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5512	DIABETICS ONLY, MULTIPLE DENSITY INSERT DIRECT FORMED, MOLDED TO FOOT	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5513	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, CUSTOM MOLDED FROM MODEL OF PATIENT'S FOOT, TOTAL CONTACT WITH PATIENT'S FOOT, INCLUDING ARCH, BASE LAYER MINIMUM OF 3/16 INCH MATERIAL OF SHORE A 35 DUROMETER (OR HIGHER), INCLUDES ARCH FILLER AND OTHER SHAPING MATERIAL, CUSTOM FABRICATED, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	6 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
A5514	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, MADE BY DIRECT CARVING WITH CAM TECHNOLOGY FROM A RECTIFIED CAD MODEL CREATED FROM A DIGITIZED SCAN OF THE PATIENT, TOTAL CONTACT WITH PATIENT'S FOOT, INCLUDING ARCH, BASE LAYER MINIMUM OF 3/16 INCH MATERIAL OF SHORE A 35 DUROMETER (OR HIGHER), INCLUDES ARCH FILLER AND OTHER SHAPING MATERIAL, CUSTOM FABRICATED, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	6 per year	**DIAGNOSTIC RESTRICTIONS APPLY**

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L0112	CRANIAL CERVICAL ORTHOSIS, CONGENITAL TORTICOLLIS TYPE WITH OR WITHOUT SOFT INTERFACE MATERIAL, ADJUSTABLE RANGE OF MOTION JOINT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 requests per year	
L0113	CRANIAL CERVICAL ORTHOSIS, TORTICOLLIS TYPE, WITH OR WITHOUT JOINT, WITH OR WITHOUT SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
L0456	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, RSTRICTS GROSS TRUNK MOTION IN THE SAGGITAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No Restriction	PRICED	2 per year	
L0466	TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0468	TLSO, SAGITTAL-CORONAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION OVER SCAPULAE, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC AND LATERAL FRAME PIECES, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, AND CORONAL PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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L0470	TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC AND LATERAL FRAME PIECES, ROTATIONAL STRENGTH PROVIDED BY SUBCLAVICULAR EXTENSIONS, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANVERSE PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDING FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limit	No restriction	PRICED	2 per year	
L0472	TLSO, TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND SHAPING FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0480	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0482	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	

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L0484	TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0486	TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0488	TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limit	No restriction	PRICED	2 per year	
L0490	TLSO, SAGITTAL-CORONAL CONTROL, ONE PIECE RIGID PLASTIC SHELL, WITH OVERLAPPING REINFORCED ANTERIOR, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES AT OR BEFORE THE T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XIPHOID, ANTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL AND CORONAL PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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L0491	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0492	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0621	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0622	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDES PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0623	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOIN, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0624	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI-RIGID PANELS PLACED OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOIN, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**	2 per year	**COST INVOICE REQUIRED**

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L0625	LUMBAR ORTHOSIS, FLEXIBLE, PROVIDES LUMBAR SUPPORT, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDE STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, SHOULDER STRAPS, STAYS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0626	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES, STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0627	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDES PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0628	LSO, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDES STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0629	LSO, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISC, INCLUDES STRAPS, CLOSURES, MAY INCLUDE STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0630	LSO, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULD STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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L0631	LSO, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABR	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0632	LSO, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**	2 per year	**COST INVOICE REQUIRED**
L0633	LSO, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0634	LSO, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**	2 per year	**COST INVOICE REQUIRED**
L0635	LSO, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANEL(S), LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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L0636	LSO, AGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANELS, LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0637	LSO, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ONINTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0638	LSO, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0639	LSO, SAGITTAL-CORONAL CONTROL, RIGID SHELL (S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	

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L0640	LSO, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L0700	CTLSO, ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT MODEL; (MINERVA TYPE)	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L0710	CTLSO, ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL, (MINERVA TYPE)	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L0810	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO JACKET VEST	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L0820	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO PLASTER BODY JACKET	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L0830	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE ORTHOSIS	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L0859	ADDITION TO HALO PROCEDURE, MAGNETIC RESONANCE IMAGE COMPATIBLE SYSTEMS, RINGS AND PINS, ANY MATERIAL	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L0861	ADDITIONAL TO HALO PROCEDURE, REPLACEMENT LINER/INTERFACE MATERIAL	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0970	TLSO, CORSET FRONT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L0972	LSO, CORSET FRONT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L0974	TLSO, FULL CORSET	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L0976	LSO, FULL CORSET	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L0978	AXILLARY CRUTCH EXTENSION	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L0980	PERONEAL STRAPS, PREFABRICATED, OFF-THE-SHELF, PAIR	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	1 per year	

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L0982	STOCKING SUPPORTER GRIPS, PREFABRICATED, OFF-THE-SHELF, SET OF FOUR (4)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	6 per year	
L0984	PROTECTIVE BODY SOCK, PREFABRICATED, OFF-THE-SHELF, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	6 per year	
L0999	ADDITIONAL TO SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L1000	CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) (MILWAUKEE), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS, INCLUDING MODEL	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L1001	CERVICAL THORACIC LUMBAR SACRAL ORTHOSIS IMMOBILIZER, INFANT SIZE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	<= 24 months	**NOT PRICED**	2 per year	**COST INVOICE REQUIRED**
L1200	THORACIC-LUMBAR-SACRAL-ORTHOSIS (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS ONLY	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per year	
L1290	ADDITION TO TLSO, (LOW PROFILE), LATERAL TROCHANTERIC PAD	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	3 per year	
L1300	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L1310	OTHER SCOLIOSIS PROCEDURE, POST OPERATIVE BODY JACKET	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per lifetime	
L1499	SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L1630	HIP ORTHOSIS (HO), ABDUCTION CONTROL OF HIP JOINTS, SEMI-FLEXIBLE (VAN ROSEN TYPE), CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	3 per year	
L1640	HO, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PELVIC BAND OR SPREADER BAR, THIGH CUFFS, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	3 per year	
L1680	HO, ABDUCTION CONTROL OF HIP JOINTS; DYNAMIC, PELVIC CONTROL, ADJUSTABLE HIP MOTION CONTROL, THIGH CUFFS (RANCHO HIP ACTION TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L1685	HO, ABDUCTION CONTROL OF HIP JOINTS; POSTOPERATIVE HIP ABDUCTION TYPE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L1686	HO, ABDUCTION CONTROL OF HIP JOINTS; POSTOPERATIVE HIP ABDUCTION TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L1690	COMBINATION, BILATERAL, LUMBO-SACRAL, HIP, FEMUR ORTHOSIS PROVIDING ABDUCTION AND INTERNAL ROTATION CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per year	
L1700	LEGG PERTHES ORTHOSIS, (TORONTO TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	

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L1710	LEGG PERTHES ORTHOSIS, (NEWINGTON TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L1720	LEGG PERTHES ORTHOSIS, TRILATERAL, (TACHDIJAN TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L1730	LEGG PERTHES ORTHOSIS, (SCOTTISH RITE TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per year	
L1755	LEGG PERTHES ORTHOSIS, (PATTERN BOTTOM TYPE), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	
L1810	KNEE ORTHOSIS (KO), ELASTIC WITH JOINTS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	3 per year	**Non-Reimbursable with:** L2397
L1820	KO, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	3 per year	**Non-Reimbursable with:** L2397
L1830	KO, IMMOBILIZER, CANVAS LONGITUDINAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2397
L1831	KO, LOCKING KNEE JOINT(S), POSITIONAL ORTHOSIS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2397 OR L2795
L1832	KO, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	**Non-Reimbursable with:** L2405, L2415, L2493 OR L2785
L1834	KO, WITHOUT KNEE JOINT, RIGID, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	**Non-Reimbursable with:** L2397 OR L2800
L1836	KO, RIGID, WITHOUT JOINT(S), INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2397
L1840	KO, DEROTATION, MEDIAL-LATERAL, ANTERIOR CRUCIATE LIGAMENT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2275 OR L2800
L1843	KO, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, PREFABRICARED ITEMTHAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE.	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	**Non-Reimbursable with:** L2405, L2492 OR L2875
L1844	KO, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	**Non-Reimbursable with ANY ADDITIONAL CODES**

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L1845	KO, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	**Non-Reimbursable with:** L2405, L2415, L2492 OR L2875
L1846	KO, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	**Non-Reimbursable with ANY ADDITIONAL CODES**
L1847	KO, DOUBLE UPRIGHT WITH ADJUSTABLE JOINT, WITH INFLATABLE AIR SUPPORT CHAMBER(S), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2397 OR L2795
L1850	KO, SWEDISH TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2275
L1860	KO, MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM FABRICATED (SK)	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per Year	**Non-Reimbursable with:** L2397
L1900	ANKLE-FOOT ORTHOSIS (AFO), SPRING WIRE, DORSIFLEXION ASSIST CALF BAND, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	3 per year	
L1930	AFO, PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1932	AFO, RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L1940	AFO, PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L1945	AFO, MOLDED TO PATIENT MODEL, PLASTIC, RIGID ANTERIOR TIBIAL SECTION (FLOOR REACTION), CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1950	AFO, SPIRAL (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1951	AFO, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE) PLASTIC OR OTHER MATERIAL, PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L1960	AFO, POSTERIORSOLID ANKLE, PLASTIC, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	

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L1970	AFO, PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1971	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, WITH OR WITHOUT DORSIFLEXION ASSIST,PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1980	AFO, SINGLE UPRIGHT,FREE PLANTAR DORSIFLEXION, SSOLID STIRRUP, CALF BAND/CUFF (SINGLE BAR "BK" ORTHOSIS, CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L1990	AFO, DOUBLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (DOUBLE BAR "BK" ORTHOSIS), CUSTOM FABRICATED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2000	KNEE-ANKLE-FOOT-ORTHOSIS (KAFO); SINGLE UPRIGHT, FREE KNEE, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR "AK" ORTHOSIS), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2005	KAFO, ANY MATERIAL, SINGLE OR DOUBLE UPRIGHT, STANCE CONTROL, AUTOMATIC LOCK AND SWING PHASE RELEASE, MECHANICAL ACTIVATION, INCLUDES ANKLE JOINT, ANY TYPE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 per year	
L2010	KAFO, SINGLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR "AK" ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2020	KAFO, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (DOUBLE BAR "AK" ORTHOSIS), CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2030	KAFO DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS, (DOUBLE BAR "AK" ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2034	KAFO, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, MEDIAL LATERAL ROTATION CONTROL, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2035	KAFO, FULL PLASTIC, STATIC (PEDIATRIC SIZE), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	Under 13 (<= Age 12)	PRICED	4 per year	
L2036	KAFO, FULL PLASTIC, DOUBLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2037	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	

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L2038	KAFO, FULL PLASTIC, WITH OR WITHOUT FREE MOTION KNEE, MULTI-AXIS ANKLE, CUSTOM FABKNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, WITH OR WITHOUT FREE MOTION KNEE, MULTI-AXIS ANKLE, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2108	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2126	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS; THERMOPLASTIC TYPE CASTING MATERIAL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2128	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2132	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SOFT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2134	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SEMI-RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2136	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L2180	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, PLASTIC SHOE INSERT WITH ANKLE JOINTS	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	REQUIRES FITTER'S CERTIFICATION BY THE AMERICAN BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS OR BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS
L2182	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, DROP LOCK KNEE JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	REQUIRES FITTER'S CERTIFICATION BY THE AMERICAN BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS OR BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS
L2184	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, LIMITED MOTION KNEE JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	REQUIRES FITTER'S CERTIFICATION BY THE AMERICAN BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS OR BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS
L2186	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, ADJUSTABLE MOTION KNEE JOINT, LERMAN TYPE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	REQUIRES FITTER'S CERTIFICATION BY THE AMERICAN BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS OR BOARD FOR CERTIFICATION OF ORTHOTICS & PROSTHETICS
L2188	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, QUADRILATERAL BRIM	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2190	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, WAIST BELT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2192	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, HIP JOINT, PELVIC BAND, THIGH FLANGE, AND PELVIC BELT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	

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L2200	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2210	ADDITION TO KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2220	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2230	ADDITION TO LOWER EXTREMITY, SPLIT FLAT CALIPER STIRRUPS AND PLATE ATTACHMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2232	ADDITION TO LOWER EXTREMITY, ROCKER BOTTOM FOR TOTAL CONTACT ANKLE FOOT ORTHOSIS, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2240	ADDITION TO LOWER EXTREMITY, ROUND CALIPER AND PLATE ATTACHMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2250	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2260	ADDITION TO LOWER EXTREMITY, REINFORCED SOLID STIRRUP (SCOTT-CRAIG TYPE)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2265	ADDITION TO LOWER EXTREMITY, LONG TONGUE STIRRUP	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2270	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION, ("T") STRAP, PADDED/LNED OR MALLEOLUS PAD	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2275	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION, PLASTIC MODIFICATION, PADDED/LINED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2280	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2320	ADDITION TO LOWER EXTREMITY, NON-MOLDED LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2330	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2335	ADDITION TO LOWER EXTREMITY, ANTERIOR SWING BAND	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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Service Code	Code Description	ATREZZO Service Type	PRIOR AUTH REQUIRED?	AGE RESTRICTION	PRICED OR NOT PRICED	SERVICE LIMITS	ADDITIONAL INFORMATION
L2340	ADDITION TO LOWER EXTREMITY, PRETIBIAL SHELL, MOLDED TO PATIENT MODEL	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2350	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR "PTB" "AFO" ORTHOSES)	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2360	ADDITION TO LOWER EXTREMITY, PATTEN BOTTOM	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2370	ADDITION TO LOWER EXTREMITY, PATTEN BOTTOM	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2375	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, ANKLE JOINT AND HALF SOLID STIRRUP	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2380	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, STRAIGHT KNEE JOINT, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2385	ADDITION TO LOWER EXTREMITY, STRAIGHT KNEE JOINT, HEAVY DUTY, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2387	ADDITION TO LOWER EXTREMITY, POLYCENTRIC KNEE JOINT, FOR CUSTOM FABRICATED KNEE ANKLE FOOT ORTHOSIS, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2390	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2395	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, HEAVY DUTY, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2397	ADDITION TO LOWER EXTREMITY, ORTHOSIS, SUSPENSION SLEEVE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L2405	ADDITION TO KNEE JOINT, DROP LOCK, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2415	ADDITION TO KNEE LOCK WITH INTEGRATED RELEASE MECHANISM (BAIL, CABLE, OR EQUAL), ANY MATERIAL, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2425	ADDITION TO KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2430	ADDITION TO KNEE JOINT, RATCHET LOCK FOR ACTIVE AND PROGRESSIVE KNEE EXTENSION, EACH JOINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	

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L2492	ADDITION TO KNEE JOINT, LIFE LOOK FOR DROP LOCK RING	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2525	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM MOLDED TO PATIENT MODEL	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2526	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM, CUSTOM FITTED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2620	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT; HEAVY DUTY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2622	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT; ADJUSTABLE FLEXION, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2627	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PLASTIC, MOLDED TO PATIENT MODEL, RECIPROCATING HIP JOINT AND CABLES	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2628	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, METAL FRAME, RECIPROCATING HIP JOINT AND CABLES	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 per year	
L2750	ADDITION TO LOWER EXTREMITY ORTHOSIS, PLATING CHROME OR NICKEL, PER BAR	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2755	ADDITION TO LOWER EXTREMITY ORTHOSIS, HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE, PER SEGMENT (DESCRIPTION IS TOTALLY WRONG)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2760	ADDITION TO LOWER EXTREMITY ORTHOSIS, EXTENSION, PER EXTENSION, PER BAR (FOR LINEAL ADJUSTMENT FOR GROWTH)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	16 per year	
L2780	ADDITION TO LOWER EXTREMITY ORTHOSIS, NON-CORROSIVE FINISH, PER BAR	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2785	ADDITION TO LOWER EXTREMITY ORTHOSIS, DROP LOCK RETAINER, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2795	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, FULL KNEECAP	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2800	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, KNEE CAP, MEDIAL OR LATERAL PULL, FOR USE WITH CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2810	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, CONDYLAR PAD	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	

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L2820	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2830	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 per year	
L2840	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2850	ADDITION TO LOWER EXTREMITY ORTHOSIS, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L2999	LOWER EXTREMITY ORTHOSIS, NOT OTHERWISE SPECIFIED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L3000	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, "UCB" TYPE, BERKELEY SHELL, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L3030	FOOT, INSERT, REMOVABLE, FORMED TO PATIENT FOOT EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L3031	FOOT, INSERT/PLATE, REMOVABLE, ADDITION TO LOWER EXTREMITY ORTHOSIS, HIGH, STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE, EACH	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	4 per year	
L3040	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	
L3100	HALLUS-VALGUS NIGHT DYNAMIC SPLINT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L3140	FOOT, ABDUCTION ROTATION BAR, INCLUDING SHOES	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L3150	FOOT, ABDUCTION ROTATION BARS, WITHOUT SHOES	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L3170	FOOT, PLASTIC, SILICONE OR EQUAL, HEEL STABILIZER	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	
L3215	ORTHOPEDIC FOOTWEAR, LADIES SHOES, OXFORD, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3216	ORTHOPEDIC FOOTWEAR, LADIES SHOES, DEPTH INLAY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**

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L3217	ORTHOPEDIC FOOTWEAR, LADIES SHOES, HIGHTOP, DEPTH INLAY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3219	ORTHOPEDIC FOOTWEAR, MEN'S SHOES, OXFORD, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3221	ORTHOPEDIC FOOTWEAR, MEN'S SHOES, DEPTH INLAY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3222	ORTHOPEDIC FOOTWEAR, MEN'S SHOES, SHOES, HIGHTOP, DEPTH INLAY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3224	ORTHOPEDIC FOOTWEAR, WOMAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3225	ORTHOPEDIC FOOTWEAR, MAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3230	ORTHOPEDIC FOOTWEAR, CUSTOM SHOES, DEPTH INLAY, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3250	ORTHOPEDIC FOOTWEAR, CUSTOM MOLDED SHOE, REMOVABLE INNER MOLD, PROSTHETIC SHOE, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3251	FOOT, SHOE MOLDED TO PATIENT MODEL, SILICONE SHOE, EACH	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY COST INVOICE REQUIRED**
L3252	FOOT, SHOE MOLDED TO PATIENT MODEL, PLASTAZOTE (OR SIMILAR), CUSTOM FABRICATED, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3253	FOOT, MOLDED SHOE PLASTAZOTE (OR SIMILAR) CUSTOM FITTED, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3254	NON-STANDARD SIZE OR WIDTH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3255	NON-STANDARD SIZE OR LENGTH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3257	ORTHOPEDIC FOOTWEAR, ADDITIONAL CHARGE FOR SPLIT SIZE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	1 PER YEAR	
L3260	SURGICAL BOOT/SHOE, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	

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L3265	PLASTAZOTE SANDAL, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3300	LIFT, ELEVATION, HEEL, TAPERED TO METATARSAL, PER INCH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	6 PER YEAR	
L3310	LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER INCH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 PER YEAR	
L3320	LIFT, ELEVATION, HEEL AND SOLE, CORK, PER INCH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3330	LIFT, ELEVATION, METAL EXTENSION (SKATE)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3340	HEEL WEDGE, SACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3350	HEEL WEDGE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3360	SOLE WEDGE, OUTSIDE SOLE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3370	SOLE WEDGE, BETWEEN SOLE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3380	CLUBFOOT WEDGE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3390	OUTFLARE WEDGE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3420	FULL SOLE AND HEEL WEDGE; BETWEEN SOLE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 per year	**DIAGNOSTIC RESTRICTIONS APPLY**
L3465	HEEL, THOMAS WITH WEDGE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3470	HEEL, THOMAS EXTENDED TO BALL	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3570	ORTHOPEDIC SHOE ADDITION, SPECIAL EXTENSION TO INSTEP (LEATHER WITH EYELETS)	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	

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L3580	ORTHOPEDIC SHOE ADDITION, CONVERT INSTEP TO VELCRO CLOSURE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 PER YEAR	
L3620	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, EXISTING	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3649	ORTHOPEDIC SHOE, MODIFICATION, ADDITION OR TRANSFER, NOT OTHERWISE SPECIFIED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L3650	SHOULDER ORTHOSIS, (SO); FIGURE OF EIGHT DESIGN ABDUCTION RESTRAINER, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3670	SHOULDER ORTHOSIS, ACROMIO/CLAVICULAR (CANVAS AND WEBBING TYPE), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3671	ELBOW ORTHOTIC (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED		
L3674	SHOULDER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITH OR WITHOUT NONTORSION JOINT/TURNBUCKLE, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
L3702	ELBOW ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3730	ELBOW ORTHOSIS (EO), DOUBLE UPRIGHT WITH FORE/ARM CUFFS, EXTENSION/FLEXION ASSIST, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3740	ELBOW ORTHOSIS (EO), DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, ADJUSTABLE POSITION LOCK WITH ACTIVE CONTROL, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3760	ELBOW ORTHOTIC (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 requests per year over service limit in BMS manual	
L3761	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, OFF-THE-SHELF	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	1 per Calendar Year	
L3762	ELBOW ORTHOSIS (EO), RIGID, WITHOUT JOINTS, INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 requests per year over service limit in BMS manual	
L3763	EWHO, RIGID, WITHOUT JOINTS, MAY INCLUDES SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		

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L3764	EWHO, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
L3765	EWHFO, RIGID, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
L3766	EWHFO, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
L3806	WRIST-HAND-FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDES SOFT INTERFACE MATERIAL, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3807	WRIST-HAND-FINGER-ORTHOSIS (WHFO), WITHOUT JOINT(S), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	1 PER YEAR	
L3808	WRIST-HAND-FINGER ORTHOSIS, RIGID WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE MATERIAL; STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3900	WRIST-HAND-FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION, WRIST OR FINGER DRIVEN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3901	WRIST-HAND-FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION CABLE DRIVEN, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3904	WRIST-HAND-FINGER ORTHOSIS, EXTERNAL POWERED, ELECTRIC, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3905	WRIST-HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3906	WRIST-HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3908	WRIST-HAND ORTHOSIS (WHO), WRIST EXTENSION CONTROL COCK-UP, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3912	HAND-FINGER ORTHOSIS, FLEXION GLOVE WITH ELASTIC FINGER CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	

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L3913	HAND-FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3915	WRIST-HAND-FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3917	HAND ORTHOSIS, METACARPAL FRACTURE ORTHOSIS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3919	HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3921	HAND-FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3923	HFO, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L3925	FINGER ORTHOSIS PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), NONTORSION JOINT/SPRING, EXTENSION/FLEXION, MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3927	FINGER ORTHOSIS, PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), WITHOUT JOINT/SPRING, EXTENSION/FLEXION (E.G., STATIC OR RING TYPE), MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3929	HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S) TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3931	WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3933	FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3935	FINGER ORTHOSIS, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	

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Service Code	Code Description	ATREZZO Service Type	PRIOR AUTH REQUIRED?	AGE RESTRICTION	PRICED OR NOT PRICED	SERVICE LIMITS	ADDITIONAL INFORMATION
L3956	ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L3960	SHOULDER-ELBOW-WRIST-HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3961	SHOULDER-ELBOW-WRIST-HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3962	SHOULDER-ELBOW-WRIST-HAND ORTHOSIS, ABDUCTION POSITIONING, ERBS PALSY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L3967	SEWHO, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3971	SEWHO, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3973	SEWHO, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3975	SEWHFO, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3976	SEWHFO, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3977	SEWHFO, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3978	SEWHFO, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	1 PER YEAR	
L3995	ADDITION TO UPPER EXTREMITY ORTHOSIS, SOCK, FRACTURE OR EQUAL, EACH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L3999	UPPER LIMB ORTHOSIS, NOT OTHERWISE SPECIFIED	**ORTHOTICS**	***REQUIRED***	No restriction	**NOT PRICED**		**COST INVOICE REQUIRED**
L4000	REPLACE GIRDLE FOR SPINAL ORTHOSIS (CTLSO OR SO)	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	

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Service Code	Code Description	ATREZZO Service Type	PRIOR AUTH REQUIRED?	AGE RESTRICTION	PRICED OR NOT PRICED	SERVICE LIMITS	ADDITIONAL INFORMATION
L4020	REPLACE QUADRILATERAL SOCKET BRIM, MOLDED TO PATIENT MODEL	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED	2 PER YEAR	
L4030	REPLACE QUADRILATERAL SOCKET BRIM, CUSTOM FITTED	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4040	REPLACE MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4045	REPLACE NON-MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4050	REPLACE MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4055	REPLACE NON-MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4060	REPLACE HIGH ROLL CUFF	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4070	REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4080	REPLACE METAL BANDS KAFO, PROXIMAL THIGH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4090	REPLACE METAL BANDS KAFO-AFO, CALF OR DISTAL THIGH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4100	REPLACE LEATHER CUFF KAFO, PROXIMAL THIGH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4110	REPLACE LEATHER CUFF KAFO-AFO, CALF OR DISTAL THIGH	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L4130	REPLACE PRETIBIAL SHELL	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4205	REPAIR OF ORTHOTIC DEVICE, LABOR COMPONENT, PER 15 MINUTES	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	8 PER MONTH	
L4210	REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS	**ORTHOTICS**	***REQUIRED***	No restriction	NOT PRICED		**COST INVOICE REQUIRED**
L4350	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC GEL), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	

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L4360	WALKING BOOT, PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L4370	PNEUMATIC FULL LEG SPLINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	4 PER YEAR	
L4386	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4396	STATIC ANKLE FOOT ORTHOSIS, INCLUDING SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, PRESSURE REDUCTION, MAY BE USED FOR MINIMAL AMBULATION, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4398	FOOT DROP SPLINT, RECUMBENT POSITIONING DEVICE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	**ORTHOTICS**	Required - Beyond Service Limits	No restriction	PRICED	2 PER YEAR	
L4631	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC OR OTHER MATERIAL, INCLUDES STRAPS AND CLOSURES, CUSTOM FABRICATED	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
S1040	CRANIAL REMOLDING ORTHOSIS, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENTS	**ORTHOTICS**	***REQUIRED***	No restriction	PRICED		
EPSDT	EPSDT SERVICE	**ORTHOTICS**	***REQUIRED***	Age <= 20 years old	**NOT PRICED**		**For program requirements and additional resources, please visit the following website: https://dhhr.wv.gov/HealthCheck/Pages/default.aspx**
OONService	OUT-OF-NETWORK SERVICE	**ORTHOTICS**	***REQUIRED***	No Restriction	**NOT PRICED**		For WV Medical, Acentra Health will add a placeholder for an Out-of-Network (OON) Provider. This provider should be selected as the servicing provider for all out-of-network authorization requests. The 'Out-of-Network' provider will be available as a servicing provider for all request types/service codes.