

Dated 4-1-2011

Memo

To: MEDICAID ENROLLED DURABLE MEDICAL EQUIPMENT PROVIDERS
From: NORTH DAKOTA MEDICAID
MARY HELMERS, RN, PROGRAM ADMINISTRATOR
QUALITY OF CARE/DISABILITY PROGRAMS/DME
Date: 4-1-2011
Re: ADDED/DELETED HCPC CODES

THE FOLLOWING HCPC CODES HAVE BEEN DELETED FROM THE PROVIDER PRICE FILE

E1340 K0734 K0735 K0736 K0737 L0210

THE FOLLOWING HCPC CODES HAVE BEEN ADDED TO THE PROVIDER PRICE FILE

A6457 E2203 E0240 E0911 E2622 E2623
E2624 E2625 L3674 L4631 L8627 L8628
L8629