DME Update 11-01-07

Effective with dates of service 11-1-07 and after, the Ken Pac provider number will no longer be required for provider type 90 (line 19) on the CMS 1500 forms.

L5995 has been added to the fee schedule with Manual pricing and prior authorization required.

L3763 has been added to the fee schedule with prior authorization required and a rate set at $886.65.