

DME RENTAL ONLY

Decubitus Care Equipment

E0202 Phototherapy (bilirubin) light with photometer (daily rental)

Oxygen and Related Equipment

E0424 Stationary compressed gaseous oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask and tubing

E0431 * Portable Gas Oxygen

E0433 * Portable liquid oxygen system, rental; home liquefier used to fill portable liquid oxygen containers, includes portable containers, regulator, flowmeter, humidifier, cannula or mask and tubing, with or without supply reservoir and contents gauge

E0434 * Portable liquid oxygen system, rental; includes portable container, supply reservoir, humidifier, flowmeter, refill adapter, contents gauge, cannula or mask, and tubing

E0439* Stationary liquid oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing

E0465 * Home ventilator, any type, used with invasive interface, (e.g., tracheostomy tube)

E0466 * Home ventilator, any type, used with non-invasive interface, (e.g., mask, chest shell)

E0467* Home ventilator; multi-function respiratory device, also performs any or all of the additional functions of oxygen concentration, drug nebulization, aspiration, and cough stimulation, includes all accessories, components and supplies for all functions.

E0481 Intrapulmonary percussive ventilation system and related accessories. This code is reimbursable only for repairs to patient-owned equipment

E0482 Cough stimulating device, alternating positive and negative airway pressure

E0483 High frequency chest wall oscillation air-pulse generator system, includes all accessories and supplies

E1390* Oxygen concentrator, single delivery port, capable of delivering 85 percent or greater oxygen concentration at the prescribed flow rate

E1391* Oxygen concentrator, dual delivery port, capable of delivering 85 percent or greater oxygen concentration at the prescribed flow rate

E1392* Portable oxygen concentrator, rental

K0738 Portable gaseous oxygen system, rental; home compressor used to fill portable oxygen cylinders; includes portable containers, regulator, flowmeter, humidifier, cannula or mask, and tubing)

*Rental Only without a 10-month limit. (See MCUP3013 VI.C. for further information on DME rental limits)

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Traction and Trapeze Equipment

E0935	Continuous passive motion exercise device for use on knee only (daily rental)
E0936	Continuous passive motion exercise device for use other than knee (daily rental)

Miscellaneous

E0604	Breast Pump, heavy duty, hospital grade, electric (AC and/or DC), any type. This is also known as a hospital grade (multi-user) electric breast pump.
E0720	TENS device, two lead, localized stimulation ⁺
E0730	TENS device, four or more leads, for multiple nerve stimulation ⁺ <i>⁺Partnership does not require prior authorization for TENS units unless the request is outside of the allowable frequency limits per DHCS Medi-Cal Provider Manual/Guidelines: Durable Medical Equipment (DME) Billing Codes: Frequency Limits (dura cd fre)</i>
E0766	Electrical stimulation device used for cancer treatment, includes all accessories, any type must be billed with modifier RR (rental) and KF
E2402	Negative pressure wound therapy electrical pump, stationary or portable (daily rental)
K0606	Automatic external defibrillator, with integrated electrocardiogram analysis, garment type
K0743	Suction pump, home model, portable, for use on wounds (modifier RR)

Rental Period

- Unless otherwise noted, DME rental is based on a rental period of one calendar month, with the beginning date of rental as the date of service.
- Ten months rental is equal to purchase except as noted above by *.