

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
A4206 - A4209	Medical, Surgical, and Self-Administered Injection Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4210	Needle Free Injection Device	DME MAC	
A4211	Medical, Surgical, and Self-Administered Injection Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4213 - A4215	Medical , Surgical, and Self-Administered Injection Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4216 - A4218	Saline	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4221 - A4239	Self-Administered Injection and Diabetic Supplies	DME MAC	
A4244 - A4250	Medical, Surgical, and Self-Administered Injection Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4252 - A4259; A4271	Diabetic Supplies	DME MAC	
A4265	Paraffin	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC	
A4280	Accessory for Breast Prosthesis	DME MAC	
A4281 - A4287	Accessory for Breast Pump	DME MAC	
A4305 - A4306	Disposable Drug Delivery System	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
A4310 - A4340	Incontinence Supplies/ Urinary Supplies	Part B MAC if incident to a physician's service. If other, DME MAC.	
A4341-A4342	Urinary Supplies	DME MAC	
A4344 - A4358	Incontinence Supplies/ Urinary Supplies	Part B MAC if incident to a physician's service. If other, DME MAC.	
A4360 - A4437	Urinary Supplies	Part B MAC if incident to a physician's service. If other, DME MAC.	
A4450 - A4452	Tape; Adhesive Remover	Part B MAC if incident to a physician's service (not separately payable), or if supply for implanted prosthetic device. If other, DME MAC.	
A4453	Enema Catheter	DME MAC	
A4455 - A4456	Tape; Adhesive Remover	Part B MAC if incident to a physician's service (not separately payable), or if supply for implanted prosthetic device. If other, DME MAC.	
A4457	Enema Tube	Part B MAC if a supply for or inserted by a licensed healthcare provider. If other, DME MAC	
A4458-A4459	Enema Bag/System	DME MAC	
A4461-A4463	Surgical Dressing Holders	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4465 - A4468	Non-elastic Binder and Garment, Strap, Covering, Exsufflation Belt	DME MAC	
A4481	Tracheostomy Supply	Part B MAC if incident to a physician's	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
		service (not separately payable). If other, DME MAC.	
A4483	Moisture Exchanger	DME MAC	
A4490 - A4510	Surgical Stockings	DME MAC	
A4520	Diapers	DME MAC	
A4540 - A4545	Stimulator and Supplies	DME MAC	
A4553 - A4554	Underpads	DME MAC	
A4555 - A4558	Electrodes; Lead Wires; Conductive Paste	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4559	Coupling Gel	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4560	Disposable NMES	DME MAC	
A4575	Topical Hyperbaric Oxygen Chamber, Disposable	DME MAC	
A4593-A4594	Stimulator and Supplies	DME MAC	
A4595	TENS Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4596	Electrical Stimulator Supplies	DME MAC	
A4600	Sleeve for Intermittent Limb	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
	Compression Device		
A4601-A4602	Lithium Replacement Batteries	DME MAC	
A4604	Tubing for Positive Airway Pressure Device	DME MAC	
A4605	Tracheal Suction Catheter	DME MAC	
A4606	Oxygen Probe for Oximeter	DME MAC	
A4608	Transtracheal Oxygen Catheter	DME MAC	
A4611 - A4613	Oxygen Equipment Batteries and Supplies	DME MAC	
A4614	Peak Flow Rate Meter	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4615 - A4629	Oxygen & Tracheostomy Supplies	Part B MAC if incident to a physician's service (not separately payable). If other, DME MAC.	
A4630 - A4640	DME Supplies	DME MAC	
A4649	Miscellaneous Surgical Supplies	Part B MAC if incident to a physician's service (not separately payable), or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A4651 - A4932	Supplies for ESRD	DME MAC (not separately payable)	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
A5051 - A5093	Additional Ostomy Supplies	Part B MAC if incident to a physician's service. If other, DME MAC.	
A5102 - A5200	Additional Incontinence and Ostomy Supplies	Part B MAC if incident to a physician's service. If other, DME MAC.	
A5500 - A5514	Therapeutic Shoes	DME MAC	
A6000	Non-Contact Wound Warming Cover	DME MAC	
A6010-A6024	Surgical Dressing	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A6025	Silicone Gel Sheet	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
		DME. If other, DME MAC.	
A6154 - A6411	Surgical Dressing	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A6412	Eye Patch	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A6413	Adhesive Bandage	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A6441 - A6457	Surgical Dressings	Part B MAC if incident to a physician's service (not separately payable), or if supply for implanted prosthetic device or implanted DME. If other, DME MAC.	
A6501-A6512	Surgical Dressing	Part B MAC if incident to a physician's service (not separately payable) or if supply for implanted prosthetic device or implanted DME. If other, DME MAC	
A6513	Compression Burn Mask	DME MAC	
A6520 - A6549	Gradient Compression Garments	DME MAC	
A6550	Supplies for Negative Pressure	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
	Wound Therapy Electrical Pump		
A6552- A6589; A6593- A6610	Lymphedema Compression Items	DME MAC	
A6590 - A7002	Accessories for Suction Pumps	DME MAC	
A7003 - A7039	Accessories for Nebulizers, Aspirators and Ventilators	DME MAC	
A7044 - A7047	Respiratory Accessories	DME MAC	
A7049	Respiratory Item	DME MAC	
A7501-A7527	Tracheostomy Supplies	DME MAC	
A8000-A8004	Protective Helmets	DME MAC	
A9156; A9268-A9269	Mucoadhesive and Programable oral capsule	DME MAC	
A9270	Noncovered Items or Services	DME MAC	
A9272	Disposable Wound Suction Pump	DME MAC	
A9273	Hot Water Bottles, Ice Caps or Collars, and Heat and/or Cold Wraps	DME MAC	
A9274 - A9278	Glucose Monitoring	DME MAC	
A9279	Monitoring Feature/Device	DME MAC	
A9280	Alarm Device	DME MAC	
A9281	Reaching/Grabbing Device	DME MAC	
A9282	Wig	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
A9283	Foot Off Loading Device	DME MAC	
A9284- A9286	Non-electric Spirometer, Inversion Devices and Hygienic Items	DME MAC	
A9300	Exercise Equipment	DME MAC	
A9900	Miscellaneous DME Supply or Accessory	Part B MAC if used with implanted DME. If other, DME MAC.	
A9901	Delivery	DME MAC	
A9999	Miscellaneous DME Supply or Accessory	Part B MAC if used with implanted DME. If other, DME MAC.	
B4034 - B9999	Enteral and Parenteral Therapy	DME MAC	
E0100 - E0105	Canes	DME MAC	
E0110 - E0118	Crutches	DME MAC	
E0130 - E0159	Walkers	DME MAC	
E0160 - E0175	Commodes	DME MAC	
E0181 - E0199	Decubitus Care Equipment	DME MAC	
E0200 - E0239	Heat/Cold Applications	DME MAC	
E0240 - E0248	Bath and Toilet Aids	DME MAC	
E0249	Pad for Heating Unit	DME MAC	
E0250 - E0304	Hospital Beds	DME MAC	
E0305 - E0326	Hospital Bed Accessories	DME MAC	



**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
E0328 - E0329	Pediatric Hospital Beds	DME MAC	
E0350 - E0352	Electronic Bowel Irrigation System	DME MAC	
E0370	Heel Pad	DME MAC	
E0371 - E0373	Decubitus Care Equipment	DME MAC	
E0424 - E0484	Oxygen and Related Respiratory Equipment	DME MAC	
E0485 - E0486	Oral Device to Reduce Airway Collapsibility	DME MAC	
E0487	Electric Spirometer	DME MAC	
E0490- E0493	Oral Neuromuscular Stimulator	DME MAC	
E0500	IPPB Machine	DME MAC	
E0530	Electric Sleep Apnea Treatment	DME MAC	
E0550 - E0585	Compressors/Nebulizers	DME MAC	
E0600	Suction Pump	DME MAC	
E0601	CPAP Device	DME MAC	
E0602 - E0604	Breast Pump	DME MAC	
E0605	Vaporizer	DME MAC	
E0606	Drainage Board	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
E0607	Home Blood Glucose Monitor	DME MAC	
E0610 - E0615	Pacemaker Monitor	DME MAC	
E0617	External Defibrillator	DME MAC	
E0618 - E0619	Apnea Monitor	DME MAC	
E0620	Skin Piercing Device	DME MAC	
E0621 - E0636	Patient Lifts	DME MAC	
E0637 - E0642	Standing Devices/Lifts	DME MAC	
E0650 - E0683	Pneumatic/ Non-Pneumatic Devices and Appliances	DME MAC	
E0691 - E0694	Ultraviolet Light Therapy Systems	DME MAC	
E0700	Safety Equipment	DME MAC	
E0705	Transfer Board	DME MAC	
E0710 - E0716	Restraints/Enclosures; Pelvic Device	DME MAC	
E0720 - E0745	Electrical Nerve Stimulators; Rehab System	DME MAC	
E0747 - E0748	Osteogenic Stimulators	DME MAC	
E0755- E0770	Stimulation Devices	DME MAC	
E0776	IV Pole	DME MAC	
E0779 - E0780	External Infusion Pumps	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
E0781	Ambulatory Infusion Pump	DME MAC	
E0784	Infusion Pumps, Insulin	DME MAC	
E0791	Parenteral Infusion Pump	DME MAC	
E0830	Ambulatory Traction Device	DME MAC	
E0840 - E0900	Traction Equipment	DME MAC	
E0910 - E0930	Trapeze/Fracture Frame	DME MAC	
E0935 - E0936	Passive Motion Exercise Device	DME MAC	
E0940	Trapeze Equipment	DME MAC	
E0941	Traction Equipment	DME MAC	
E0942 - E0945	Orthopedic Devices	DME MAC	
E0946 - E0948	Fracture Frame	DME MAC	
E0950 - E1298	Wheelchairs	DME MAC	
E1300 - E1310	Whirlpool Equipment	DME MAC	
E1352 - E1392	Additional Oxygen Related Equipment	DME MAC	
E1399	Miscellaneous DME	Part B MAC if implanted DME. If other, DME MAC.	
E1405 - E1406	Additional Oxygen Equipment	DME MAC	
E1500 - E1625	Artificial Kidney Machines and Accessories	DME MAC (not separately payable)	
E1630 -E1699	Artificial Kidney Machines and	DME MAC (not separately payable)	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
	Accessories		
E1700 - E1702	TMJ Device and Supplies	DME MAC	
E1800 - E1841	Dynamic Flexion Devices	DME MAC	
E1902	Communication Board	DME MAC	
E1905	CBT Device	DME MAC	
E2000 - E2001	Suction Pump	DME MAC	
E2100 - E2104	Blood Glucose Monitors with special Features: Continuous Glucose Monitor	DME MAC	
E2120	Pulse Generator for Tympanic Treatment of Inner Ear	DME MAC	
E2201 - E2299	Wheelchair Accessories	DME MAC	
E2301 - E2398	Wheelchair Accessories	DME MAC	
E2402	Negative Pressure Wound Therapy Pump	DME MAC	
E2500 - E2599	Speech Generating Device	DME MAC	
E2601 - E2633	Wheelchair Cushions and Accessories	DME MAC	
E3000 - E3200	Devices	DME MAC	
E8000 - E8002	Gait Trainers	DME MAC	
G0333	Dispensing Fee	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J0120-J0134	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J0136-J0567	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	<b>J0135 has been terminated as of 12/31/24</b>
J0571-J0575	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	<b>J0570 has been terminated as of 12/31/24</b>
J0577-J0600	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
<b>J0606</b>	<b>Injection</b>	<b>Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.</b>	
<b>J0610-J0614</b>	<b>Injection</b>	<b>Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.</b>	
<b>J0616-J0749</b>	<b>Injection</b>	<b>Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.</b>	
J0750 - J0751	Oral	Part B MAC or DME MAC	
J0752 - J0798	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J0799	NOC Drugs	Part B MAC or DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J0800 - J0900	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J0902 - -J0910	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J0912 - J1019	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1021- -J1029	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1031 - -J1039	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1041 - -J1094	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1100-J1104	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1105	Oral	Part B MAC if incident to a physician's service If other, DME MAC.	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J1106 - J1169	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1171 - J1839	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1841 - J1849	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J1851 - J2000	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2002 -J2402	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2403	Miscellaneous Drug and Solutions	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J2404-J2779	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2781-J2786	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2788-J2795	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2797-J2805	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	<b>J2796 has been terminated as of 12/31/24</b>
J2807-J2919	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	<b>J2806 has been terminated as of 12/31/24</b>
J2921 -J2929	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J2931-J3356	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J3359-J3400	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	



**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J3401	Topical	Part B MAC if incident to a physician's service If other, DME MAC.	
J3410 - J3570	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J7030 - J7131	Miscellaneous Drugs and Solutions	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J7165	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J7171	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J7340	Carbidopa/Levodopa	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J7500 - J7599	Immunosuppressive Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
<b>J7601</b>	<b>Inhalation Suspension</b>	<b>Part B MAC if incident to a physician's service. If other, DME MAC.</b>	
J7604 - J7699	Inhalation Solutions	Part B MAC if incident to a physician's service. If other, DME MAC.	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
J7799 -J7999	NOC Drugs, Other than Inhalation Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
J8498	Anti-emetic Drug	DME MAC	
J8499	Prescription Drug, Oral, Non Chemotherapeutic	Part B MAC if incident to a physician's service. If other, DME MAC.	
J8501 - J8519	Oral Anti-Cancer Drugs	DME MAC	
J8522 - J8999	Oral Anti-Cancer Drugs	DME MAC	
J9000 - J9057	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	<b>J9058 and J9059 has been terminated as of 12/31/24</b>
J9060 - J9065	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	
J9071 - J9249	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	
J9251-J9257	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	
J9260 - J9370	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	<b>J9259 has been terminated as of 12/31/24</b>
J9372- J9999	Chemotherapy Drugs	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC	
K0001 - K0108	Wheelchairs	DME MAC	
K0195	Elevating Leg Rests	DME MAC	
K0455	Infusion Pump used for Uninterrupted Administration of	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
	Epoprostenal		
K0462	Loaner Equipment	DME MAC	
K0552	External Infusion Pump Supplies	DME MAC	
K0555-K0605	External Infusion Pump Supplies	DME MAC	
K0606 - K0609	Defibrillator Accessories	DME MAC	
K0669	Wheelchair Cushion	DME MAC	
K0672	Soft Interface for Orthosis	DME MAC	
K0730	Inhalation Drug Delivery System	DME MAC	
K0733	Power Wheelchair Accessory	DME MAC	
K0738	Oxygen Equipment	DME MAC	
K0739	Repair or Nonroutine Service for DME	Part B MAC if implanted DME. If other, DME MAC	
K0740	Repair or Nonroutine Service for Oxygen Equipment	DME MAC	
K0743 - K0746	Suction Pump and Dressings	DME MAC	
K0800 - K0899	Power Mobility Devices	DME MAC	
K0900	Custom DME, other than Wheelchair	DME MAC	
K1004	Devices	DME MAC when the supplier considers the item DMEPOS. Part B MAC if the supplier considers the item something other than DMEPOS (e.g., supplies furnished incident to the professional service of a physician)	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
K1007	Devices	DME MAC	
K1027	Devices	DME MAC when the supplier considers the item DMEPOS. Part B MAC if the supplier considers the item something other than DMEPOS (e.g., supplies furnished incident to the professional service of a physician)	
K1035-K1037	Devices	DME MAC	
L0112 - L4631	Orthotics & Devices	DME MAC	
L5000 - L5999	Lower Limb Prosthetics	DME MAC	
L6000 - L7499	Upper Limb Prosthetics	DME MAC	
L7510 - L7520	Repair of Prosthetic Device	Part B MAC if repair of implanted prosthetic device. If other, DME MAC.	
L7600 - L8485	Prosthetics	DME MAC	
L8499	Unlisted Procedure for Miscellaneous Prosthetic Services	Part B MAC if implanted prosthetic device. If other, DME MAC.	
L8500 - L8501	Artificial Larynx; Tracheostomy Speaking Valve	DME MAC	
L8505	Artificial Larynx Accessory	DME MAC	
L8507	Voice Prosthesis, Patient Inserted	DME MAC	
L8509	Voice Prosthesis, Inserted by a Licensed Health Care Provider	Part B MAC for dates of service on or after 10/01/2010. DME MAC for dates of service prior to 10/01/2010	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
L8510	Voice Prosthesis	DME MAC	
L8511 - L8515	Voice Prosthesis	Part B MAC if used with tracheoesophageal voice prostheses inserted by a licensed health care provider. If other, DME MAC	
L8701-L8721	Devices	DME MAC	
L9900	Miscellaneous Orthotic or Prosthetic Component or Accessory	Part B MAC if used with implanted prosthetic device. If other, DME MAC.	
Q0144	Azithromycin Dihydrate	Part B MAC if incident to a physician's service. If other, DME MAC.	
<b>Q0155</b>	<b>Anti-emetic</b>	<b>DME MAC</b>	
Q0161 - Q0181	Anti-emetic	DME MAC	
Q0510 - Q0514	Drug Dispensing Fees	DME MAC	
<b>Q0521</b>	Supply fee HIV prep	Part B MAC if incident to a physician's Service, If other, DME MAC	<b>Q0516-Q0520 has been terminated 12/31/24 and Q0521 has been added as of 1/1/25</b>
Q2049-Q2050	Doxorubicin	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
Q2052	IVIG	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

HCPCS	DESCRIPTION	JURISDICTION	COMMENT
Q4074	Inhalation Drug	Part B MAC if incident to a physician's service. If other, DME MAC.	
Q5101-Q5130	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	<b>Q5131 and Q5132 has been terminated as of 12/31/24</b>
<b>Q5133-Q5136</b>	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
<b>Q5139-Q5146</b>	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
Q9991-Q9992	Injection	Part B MAC if incident to a physician's service or used in an implanted infusion pump. If other, DME MAC.	
V2020 - V2025	Frames	DME MAC	
V2100 - V2513	Lenses	DME MAC	
V2520 - V2523	Hydrophilic Contact Lenses	Part B MAC if incident to a physician's service. If other, DME MAC.	
V2524- V2526	Hydrophilic Contact Lenses	DME MAC	
V2530 - V2531	Contact Lenses, Scleral	DME MAC	
V2599	Contact Lens, Other Type	Part B MAC if incident to a physician's service. If other, DME MAC.	
V2600 - V2615	Low Vision Aids	DME MAC	

**Attachment A:  
2024 Jurisdiction List for DMEPOS HCPCS Codes- October**

NOTE: Deleted codes are valid for dates of service on or before the date of deletion.

NOTE: Updated codes are in bold.

NOTE: The jurisdiction list includes codes that are not payable by Medicare. Please consult the Medicare contractor in whose jurisdiction a claim would be filed in order to determine coverage under Medicare.

NOTE: All HCPCS code listed have DME or joint MAC Jurisdiction. Any other codes not listed as DME MAC only or dual DME MAC/Part B MAC jurisdiction shall be considered to be A/B MAC (Part B) only jurisdiction.

<b>HCPCS</b>	<b>DESCRIPTION</b>	<b>JURISDICTION</b>	<b>COMMENT</b>
V2623 - V2629	Prosthetic Eyes	DME MAC	
V2700 - V2780	Miscellaneous Vision Service	DME MAC	
V2781	Progressive Lens	DME MAC	
V2782 - V2784	Lenses	DME MAC	
V2786	Lens	DME MAC	
V2797	Vision Supply	DME MAC	
V2799	Miscellaneous Vision Service	Part B MAC if supply for an implanted prosthetic device. If other, DME MAC	
V5336	Repair/Modification of Augmentative Communicative System or Device	DME MAC	