



Medicare Noncovered Items effective July 1, 2021

Some items may not meet the definition of a Medicare benefit or may be statutorily excluded. The items listed below will always be denied as non-covered. The Medicare National Coverage Determinations (NCD) Manual provides a list of items that are noncovered with the reason for denial. The following items will be denied as noncovered when submitted to MVP Health Care.

HCPCS Code	Description
A4210	NEEDLE-FREE INJECTION DEVICE, EACH
A4490	SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH
A4495	SURGICAL STOCKINGS THIGH LENGTH, EACH
A4500	SURGICAL STOCKINGS BELOW KNEE LENGTH, EACH
A4510	SURGICAL STOCKINGS FULL-LENGTH, EACH
A4520	INCONTINENCE GARTMENT, ANY TYPE, (E.G. BRIEF, DIAPER), EACH
A4554	DISPOSABLE UNDERPADS, ALL SIZES
A4575	TOPICAL HYPERBARIC OXYGEN CHAMGER, DISPOSABLE
A4627	SPACER, BAG OR RESERVOIR, WITH OR WITHOUT MASK, FOR USE WITH METERED DOSE INHALER
A6000	NON CONTACT WOUND-WARMING WOUND COVER FOR USE WITH THE NON CONTACT WOUND-WARMING DEVICE AND WARMING CARD
A6530	GRADIENT COMPRESSION STOCKING, BELOW KNEE, 18-30 MMHG, EACH
A6533	GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 18-30 MMHG, EACH
A6534	GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 30-40 MMHG, EACH
A6535	GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 40-50 MMGH, EACH
A6536	GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 18-30 MMHG, EACH
A6537	GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 30-40 MMHG, EACH
A6538	GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH
A6540	GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 30-40 MMHG, EACH
A6541	GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 40-50 MMHG, EACH
A6542	GRADIENT COMPRESSION STOCKING, CUSTOM MADE
A6543	GRADIENT COMPRESSION STOCKING, LYMPHEDEMA
A6544	GRADIENT COMPRESSION STOCKING, GARTER BELT
A6549	GRADIENT COMPRESSION STOCKING, NOT OTHERWISE SPECIFIED
A9270	NONCOVERED ITEM OR SERVICE
A9275	HOME GLUCOSE DISPOSABLE MONITOR, INCLUDES TEST STRIPS
A9276	SENSOR, INVASIVE, DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ONE UNIT = 1 DAY SUPPLY
A9277	TRANSMITTER, EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
A9278	RECEIVER (MONITOR), EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
A9280	ALERT OR ALARM DEVICE, NOT OTHERWISE CLASSIFIED
A9281	REACHING/GRABBING DEVICE, ANY TYPE, ANY LENGTH, EACH
A9282	WIG, ANY TYPE, EACH
A9300	EXERCISE EQUIPMENT
E0172	SEAT LIFT MECHANISM PLACED OVER OR ON TOP OF TOILET, ANY TYPE
E0191	HEEL OR ELBOW PROTECTOR, EACH
E0203	THERAPEUTIC LIGHTBOX, MINIMUM 10,000 LUX, TABLE TOP MODEL

E0220	HOT WATER BOTTLE
E0230	CAP OR COLLAR
E0231	NON-CONTACT WOUND WARMING DEVICE (TEMPERATURE CONTROL UNIT, AC ADAPTER AND POWER CORD) FOR USE WITH WARMING CARD AND WOUND COVER
E0232	WARMING CARD FOR USE WITH THE NON-CONTACT WOUND WARMING DEVICE AND NON-CONTACT WOUND WARMING WOUND COVER
E0240	BATH/SHOWER CHAIR, WITH OR WITHOUT WHEELS, ANY SIZE
E0241	BATH TUB WALL RAIL, EACH
E0242	BATH TUB RAIL, FLOOR BASE
E0243	TOILET RAIL, EACH
E0244	RAISED TOILET SEAT
E0245	TUB STOOL OR BENCH
E0246	TRANSFER TUB RAIL ATTACHMENT
E0247	TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT COMMODOE OPENING
E0248	TRANSFER BENCH, HEAVY-DUTY, FOR TUB OR TOILET WITH OR WITHOUT COMMODOE OPENING
E0270	HOSPITAL BED, INSTITUTIONAL TYPE INCLUDES: OSCILLATING, CIRCULATING AND STRYKER FRAME WITH MATTRESS
E0273	BED BOARD
E0274	OVER-BED TABLE
E0315	BED ACCESSORY: BOARD, TABLE, OR SUPPORT DEVICE, ANY TYPE
E0481	INTRAPULMONARY PERCUSSIVE VENTILATION SYSTEM AND RELATED ACCESSORIES
E0625	PATIENT LIFT, BATHROOM OR TOILET, NOT OTHERWISE CLASSIFIED
E0637	COMBINATION SIT TO STAND SYSTEM, ANY SIZE INCLUDING PEDIATRIC, WITH SEATLIFT FEATURE, WITH OR WITHOUT WHEELS
E0638	STANDING FRAME SYSTEM, ONE POSITION (E.G. UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS
E0641	STANDING FRAME SYSTEM, MULTI-POSITION (E.G. THREE-WAY STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS
E0642	STANDING FRAME SYSTEM, MOBILE (DYNAMIC STANDER), ANY SIZE INCLUDING PEDIATRIC
E0700	SAFETY EQUIPMENT, DEVICE OR ACCESSORY, ANY TYPE
E0710	RESTRAINTS, ANY TYPE (BODY, CHEST, WRIST, OR ANKLE)
E0936	CONTINUOUS PASSIVE MOTION EXERCISE DEVICE (CPM) FOR USE OTHER THAN KNEE
E1300	WHIRLPOOL, NON-PORTABLE (OVERTUB TYPE)
L0210	THORACIC RIB BELT
L1800	KNEE ORTHOSIS, ELASTIC WITH STAYS, PREFABRICATED
L1815	KNEE ORTHOSIS, ELASTIC OR OTHER ELASTIC TYPE MATERIAL, WITH CONDYLAR PADS, PREFABRICATED
L1825	KNEE ORTHOSIS, ELASTIC KNEE CAP, PREFABRICATED
L1901	ANKLE ORTHOSIS, ELASTIC, PREFABRICATED
L3215	ORTHOPEDIC FOOTWEAR, LADIES SHOES, OXFORD, EACH
L3216	ORTHOPEDIC FOOTWEAR, LADIES SHOES, DEPTH INLAY, EACH
L3217	ORTHOPEDIC FOOTWEAR, LADIES SHOES, HIGHTOP, DEPTH INLAY, EACH
L3219	ORTHOPEDIC FOOTWEAR, MENS SHOES, OXFORD, EACH
L3221	ORTHOPEDIC FOOTWEAR, MENS SHOES, DEPTH INLAY, EACH
L3222	ORTHOPEDIC FOOTWEAR, MENS SHOES, HIGHTOP, DEPTH INLAY, EACH
L3651	SHOULDER ORTHOSIS, SINGLE SHOULDER, ELASTIC, PREFABRICATED
L3652	SHOULDER ORTHOSIS, DOUBLE SHOULDER, ELASTIC, PREFABRICATED
L3700	ELBOW ORTHOSIS ELASTIC WITH STAYS, PREFABRICATED
L3701	ELBOW ORTHOSIS, ELASTIC, PREFABRICATED
L3909	WRIST ORTHOSIS, ELASTIC, PREFABRICATED
L3911	WRIST HAND ORTHOSIS, ELASTIC, PREFABRICATED

L7600	PROSTHETIC DONNING SLEEVE, ANY MATERIAL, EACH
L7900	MALE VACUUM ERECTION SYSTEM
L7902	TENSION RING, FOR VACUUM ERECTION DEVICE, ANY TYPE, REPLACEMENT
V2600	HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS
V2610	SINGLE LENS SPECTACLE MOUNTED LOW VISION AIDS
V2615	TELESCOPIC AND OTHER COMPOUND LENS SYSTEM, INCLUDING DISTANCE VISION TELESCOPIC, NEAR VISION TELESCOPES AND COMPOUND MICROSCOPIC LENS SYSTEM
V2702	DELUXE LENS FEATURE
V2760	SCRATCH RESISTANT COATING, PER LENS
V5336	REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATION SYSTEM OR DEVICE (EXCLUDES ADAPTIVE HEARING AID)

Source: <https://med.noridianmedicare.com/web/jadme/topics/noncovered-items> Dec 19, 2019