
CHAPTER 18: DURABLE MEDICAL EQUIPMENT

REVISION HISTORY LOG

Revised/ Issued Date	Section	Section Title	Number of Page(s)	Reason for Revision
02/01/12		TABLE OF CONTENTS	5	Additions and changes were made to manual sections.
02/01/12	18.1	SERVICES AND LIMITATIONS	6	Additions and changes needed to be made.
02/01/12	18.2	SPECIFIC COVERAGE CRITERIA	47	Additions and changes needed to be made.
02/01/12	18.4	PROVIDER REQUIREMENTS	8	Additions and changes needed to be made.
02/01/12	18.5	PRIOR AUTHORIZATION	5	Additions and changes needed to be made.
02/01/12	18.6	CLAIMS RELATED INFORMATION	2	Additions and changes needed to be made.
02/01/12	APPENDIX F	COVERED SERVICES/CODES	46	Section added.