LOUISIANA MEDICAID PROGRAM

ISSUED: REPLACED:

CHAPTER 18: DURABLE MEDICAL EQUIPMENT

REVISION HISTORY LOG

Revised/Is sued Date	Section	Section Title	Number of Page (s)	Reason for Revision
09/27/24	18.	Table of Contents	8	Revisions made to incorporate new section, Disposable (Elastomeric) Infusion Pumps.
09/27/24	18.2.28	Specific Coverage Criteria – Disposable (Elastomeric) Infusion Pumps	2	Incorporating criteria for new services.