This is further discussed in section II.D. of this final rule.

We are finalizing the Master List as proposed with two modifications. First, we are adding oxygen concentrator (E1390) since it meets the criteria and should have been added to the proposed Master List. The addition is bolded and italicized for easy reference on the Master List (Table 5). Second, we are removing five proposed items from the list that did not meet the 2015 DMEPOS

Fee Schedule list criteria of \$1,000 or greater average purchase fee schedule or an average rental fee schedule of \$100 or greater. These items include the following:

- Custom shaped protective cover, above knee (L5705).
- Custom shaped protective cover, knee disarticulation (L5706).
- Addition, exoskeletal knee-shin system, polycentric, friction swing and stance phase control (L5718).
- Addition, exoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control (L5722).
- Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock (L5816).

DMEPOS items meeting the proposed criteria are listed in the Final Master List, which is found in Table 5.

TABLE 5—FINAL MASTER LIST OF DMEPOS ITEMS SUBJECT TO FREQUENT UNNECESSARY UTILIZATION FOR PRIOR AUTHORIZATION

[Items added to the proposed Master List are bolded and italicized]

Power dir Intotation bed (low air loss therapy). E0280. Hosp bad same-leart windst. E02877. Proved pres-redu air matts. E02877. Proved pres-redu air matts. E0371. Powered air overlay for mattress, standard mattress length and width. E0372. Powered air overlay for mattress, standard mattress length and width. E0373. Powered air overlay for mattress, standard mattress length and width. E0373. Powered air overlay for mattress, standard mattress length and width. E0373. Ropposition of the standard mattress length and width. E0373. Ropposition of the standard mattress length and width. E0374. Respiratory assist device, bi-level pressure capability, without backup rate feature, used with noninvasive interface, e. g., nasal or facial masks (inemittent ansist device with continuous positive airway pressure device). E0301. Continuous Airway Pressure (CPAP) Device. E1390. Oxygen Concentrator. E2402. Negative pressure wound therapy electrical pump, stationary or portable. E19190. Oxygen Concentrator. E2402. Negative pressure wound therapy electrical pump, stationary or portable. E0401. Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds. E0401. Power wheelchair, group 1 standard, sing/solid seat and back, patient weight capacity up to and including 300 pounds. E0401. Power wheelchair, group 2 standard, portable, sing/solid seatback, patient weight capacity up to and including 300 pounds. E0402. Power wheelchair, group 2 standard, schalable, sing/solid seatback, patient weight capacity up to and including 300 pounds. E0403. Power wheelchair, group 2 standard, schalable, seafback patient weight capacity up to and including 300 pounds. E0403. Power wheelchair, group 2 standard, schalable, seafback patient weight capacity up to and including 300 pounds. E0404. Power wheelchair, group 2 standard, schalable, seafback patient weight capacity 910 pounds. E0404. Power wheelchair, group 2 standard, single power option, sing/solid seat	HCPCS	Description
Hosp bed semi-electr wimatt.	F0193	Powered air flotation bed (low air loss therapy)
Power de pres-redu air mattrs		
Nonpowered advanced pressure reducing overlay for mattress, standard mattress length and width.		
F0372 — Powered air overlay for mattress, standard mattress length and width. F0373 — Nonpowered ad vanced pressure reducing mattress. F0373 — Nonpowered ad vanced pressure reducing mattress. F0374 — Respiratory assist device, bi-level pressure capability, without backup rate feature, used with noninvasive interface, e. g. , nasal or facial mask (intermittent assist device with continuous positive airway pressure device). F0360 — Continuous Airway Pressure (CPAP) Device. F1390 — Oxygar Concentrator. F2402 — Negative pressure wound therapy electrical pump, stationary or portable. High strength, lightweight wheelchair. K0813 — Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0814 — Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0815 — Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds. K0820 — Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds. K0821 — Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0822 — Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0824 — Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds. K0825 — Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity to 10 450 pounds. K0826 — Power wheelchair, group 2 beavy duty, captains chair, patient weight capacity 30 to 450 pounds. K0827 — Power wheelchair, group 2 beavy duty, captains chair, patient weight capacity 451 to 600 pounds. K0828 — Power wheelchair, group 2 extra heavy duty, sing/solid seat/back, patient weight capacity up to and including 300 pounds. K0836 — Power wheelchair, group 2 standard, single power option, sl		· ·
E0373 — Nonpowered advanced pressure reducing mattress. E0470 — Respiratory assist device, believel pressure capability, without backup rate feature, used with noninvasive interface, e. g., nasal or facial mask (intermittent assist device with continuous positive ainway pressure device). E1380 — Oxygen Concentrator. Regative pressure wound therapy electrical pump, stationary or portable. High strength, lightweight wheelchair. R0813 — Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds. K0814 — Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0815 — Power wheelchair, group 1 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0816 — Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds. K0820 — Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0821 — Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0822 — Power wheelchair, group 2 standard, portable, captains chair, patient weight capacity up to and including 300 pounds. K0823 — Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds. K0824 — Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds. K0825 — Power wheelchair, group 2 standard, captains chair, patient weight capacity up to and including 300 pounds. K0826 — Power wheelchair, group 2 very heavy duty, captains chair, patient weight capacity up to 45 to 600 pounds. K0827 — Power wheelchair, group 2 very heavy duty, sing/solid seatback, patient weight patient weight patient weight capacity up to and including 300 pounds. K0828 — Power wheelchair, group 2 standard, single power option, sing/solid seatback, patient w		
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 K0836	KU835	
pounds. RO837	K0836	
 K0838		
 K0838	K0837	Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds.
 K0840	K0838	
 K0840	K0839	
more. Roset wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 2 standard, multiple power option, captains chair, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds. Roset power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, captains chair, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds. Roset power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds. Roset power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds. Roset power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more. Roset power wheelchair, group 3 extra heavy duty, captains chair, patient weight capacity 601 pounds or more. Roset power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds. Roset power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including		
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 K0852		
K0853 K0854 K0855 K0856 K0857 K0858 K0858 K0858 K0859		
 K0854		
 K0856	K0854	
pounds. K0857 Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds. K0858 K0858 Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to 450 pounds.	K0855	
pounds. K0857 Power wheelchair, group 3 standard, single power option, captains chair, patient weight capacity up to and including 300 pounds. K0858 K0858 Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to 450 pounds.	K0856	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300
pounds. K0858 Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to 450 pounds.		pounds.
K0858 Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight 301 to 450 pounds.	K0857	
K0859 Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds.		
	K0859	Power wheelchair, group 3 heavy duty, single power option, captains chair, patient weight capacity 301 to 450 pounds.

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TABLE 5—FINAL MASTER LIST OF DMEPOS ITEMS SUBJECT TO FREQUENT UNNECESSARY UTILIZATION FOR PRIOR AUTHORIZATION—Continued

[Items added to the proposed Master List are bolded and italicized]

HCPCS	Description
K0860	Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600
K0861	pounds. Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds.
K0862	Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds.
K0863	Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds.
K0864	Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more.
L5010 L5020	Partial foot, molded socket, ankle height, with toe filler.
L5050	Partial foot, molded socket, tibial tubercle height, with toe filler. Ankle, symes, molded socket, sach foot.
L5060	Ankle, symes, metal frame, molded leather socket, articulated ankle/foot.
L5100	Below knee, molded socket, shin, sach foot.
L5105	
L5150	Knee disarticulation (or through knee), molded socket, external knee joints, shin, sach foot.
L5160 L5200	Knee disarticulation (or through knee), molded socket, bent knee configuration, external knee joints, shin, sach foot. Above knee, molded socket, single axis constant friction knee, shin, sach foot.
L5210	Above knee, short prosthesis, no knee joint ('stubbies'), with foot blocks, no ankle joints, each.
L5220	Above knee, short prosthesis, no knee joint ('stubbies'), with articulated ankle/foot, dynamically aligned, each.
L5230	Above knee, for proximal femoral focal deficiency, constant friction knee, shin, sach foot.
L5250	Hip disarticulation, canadian type; molded socket, hip joint, single axis constant friction knee, shin, sach foot.
L5270	Hip disarticulation, tilt table type; molded socket, locking hip joint, single axis constant friction knee, shin, sach foot.
L5280 L5301	Hemipelvectomy, canadian type; molded socket, hip joint, single axis constant friction knee, shin, sach foot. Below knee, molded socket, shin, sach foot, endoskeletal system.
L5312	Knee disarticulation (or through knee), molded socket, single axis knee, pylon, sach foot, endoskeletal system.
L5321	Above knee, molded socket, open end, sach foot, endoskeletal system, single axis knee.
L5331	Hip disarticulation, canadian type, molded socket, endoskeletal system, hip joint, single axis knee, sach foot.
L5341	Hemipelvectomy, canadian type, molded socket, endoskeletal system, hip joint, single axis knee, sach foot.
L5400	Immediate post surgical or early fitting, application of initial rigid dressing, including fitting, alignment, suspension, and one cast change, below knee.
L5420	Immediate post surgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension and one cast change 'ak' or knee disarticulation.
L5500 L5505	Initial, below knee 'ptb' type socket, non-alignable system, pylon, no cover, sach foot, plaster socket, direct formed. Initial, above knee—knee disarticulation, ischial level socket, non-alignable system, pylon, no cover, sach foot, plaster socket, direct formed.
L5510 L5520	Preparatory, below knee 'ptb' type socket, non-alignable system, pylon, no cover, sach foot, plaster socket, molded to model. Preparatory, below knee 'ptb' type socket, non-alignable system, pylon, no cover, sach foot, thermoplastic or equal, direct formed.
L5530	
L5535	
L5540	
L5560	Preparatory, above knee—knee disarticulation, ischial level socket, non-alignable system, pylon, no cover, sach foot, plaster socket, molded to model.
L5570	
L5580	Preparatory, above knee—knee disarticulation ischial level socket, non-alignable system, pylon, no cover, sach foot, thermoplastic or equal, molded to model.
L5585	Preparatory, above knee—knee disarticulation, ischial level socket, non-alignable system, pylon, no cover, sach foot, prefabricated adjustable open end socket.
L5590	Preparatory, above knee—knee disarticulation ischial level socket, non-alignable system, pylon no cover, sach foot, laminated socket, molded to model.
L5595	Preparatory, hip disarticulation-hemipelvectomy, pylon, no cover, sach foot, thermoplastic or equal, molded to patient model.
L5600	Preparatory, hip disarticulation-hemipelvectomy, pylon, no cover, sach foot, laminated socket, molded to patient model.
L5610	Addition to lower extremity, endoskeletal system, above knee, hydracadence system.
L5611	Addition to lower extremity, endoskeletal system, above knee—knee disarticulation, 4 bar linkage, with friction swing phase control. Addition to lower extremity, endoskeletal system, above knee—knee disarticulation, 4 bar linkage, with hydraulic swing phase.
L5614	Addition to lower extremity, endoskeletal system, above knee—knee disarticulation, 4 bar linkage, with hydraulic swing phase control. Addition to lower extremity, exoskeletal system, above knee—knee disarticulation, 4 bar linkage, with pneumatic swing phase
L5614	control.
L5616 L5639	Addition to lower extremity, endoskeletal system, above knee, universal multiplex system, friction swing phase control. Addition to lower extremity, below knee, wood socket.
L5643	Addition to lower extremity, hip disarticulation, flexible inner socket, external frame.
L5649	Addition to lower extremity, ischial containment/narrow m-l socket.
L5651	Addition to lower extremity, above knee, flexible inner socket, external frame.
L5681	Addition to lower extremity, below knee/above knee, custom fabricated socket insert for congenital or atypical traumatic ampu-
	tee, silicone gel, elastomeric or equal, for use with or without locking mechanism, initial only (for other than initial, use code 15673 or 15679).

TABLE 5—FINAL MASTER LIST OF DMEPOS ITEMS SUBJECT TO FREQUENT UNNECESSARY UTILIZATION FOR PRIOR AUTHORIZATION—Continued

[Items added to the proposed Master List are bolded and italicized]

HCPCS	Description
L5683	Addition to lower extremity, below knee/above knee, custom fabricated socket insert for other than congenital or atypical traumatic amputee, silicone gel, elastomeric or equal, for use with or without locking mechanism, initial only (for other than initial, use code l5673 or l5679).
L5700	
L5701	Replacement, socket, above knee/knee disarticulation, including attachment plate, molded to patient model.
L5702	
L5703	
L5707	
L5724	Addition, exoskeletal knee-shin system, single axis, fluid swing phase control.
L5726	Addition, exoskeletal knee-shin system, single axis, external joints fluid swing phase control.
L5728	Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control.
L5780	Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control.
L5781	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system.
L5782	Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy duty.
L5795	Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium, carbon fiber or equal).
L5814	Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock.
L5818	
L5822	Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control.
L5824	Addition, endoskeletal knee-shin system, single axis, fluid swing phase control.
L5826	Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame.
L5828	Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control.
L5830	Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control.
L5840	
L5845	
L5848	Addition to endoskeletal knee-shin system, fluid stance extension, dampening feature, with or without adjustability.
L5856	
L5857	
L5858	
	cludes electronic sensor(s), any type.
L5930	
L5960	
L5964	
L5966	
L5968	
L5973	
20070	source.
L5979	
L5980	
L5981	
L5987	
	Addition to lower limb prosthesis, vertical shock reducing pylon feature.
	Addition to lower extremity prosthesis, user adjustable heel height.
	reducer to terror extremity prestriction, door deglectable from frongers.

In addition, we are finalizing our proposal to notify the public annually of any additions and deletions from the Master List by posting the notification in the **Federal Register** and on the CMS Prior Authorization Web site as described in § 414.234(b)(2). We are also finalizing our proposal to suspend or cease prior authorization for the entire list or individual items at any time as described in § 414.234(f)(1).

D. Process for Selecting Items From the Master List To Be Subject to the Prior Authorization Program

In the May 28, 2014 proposed rule (79 FR 30519), we stated that an item's presence on the Master List would not automatically require prior

authorization. We proposed implementing the prior authorization program by limiting the number of items from the Master List that would be subject to prior authorization. We stated that by implementing prior authorization for a subset of Master List items, we would minimize provider and supplier burden while safeguarding the Medicare program. This subset of Master List items is hereafter referred to as the "Required Prior Authorization List" as described in § 414.234 (c). We proposed that we would inform the public of the Required Prior Authorization List in the Federal Register with 60-day notice before implementation.

Additionally, we proposed a prior authorization program for eligible items that may be implemented nationally or locally. For example, we noted that OIG and GAO reports and the CERT DME and/or DMEPOS Service Specific Report(s) often include regional data, and we proposed that we could elect to limit the prior authorization requirement to a particular region of the country if claims data show that unnecessary utilization of the selected item(s) is concentrated in a particular region. Alternately, we proposed that we may elect to implement prior authorization nationally if claims data show that unnecessary utilization of the selected item(s) is widespread and