

UnitedHealthcare Community Plan of District of Columbia: DME prior authorization effective Oct.1 2025

Effective Oct. 1, 2025, UnitedHealthcare Community Plan of District of Columbia is aligning specific durable medical equipment (DME) prior authorization requirements with the UnitedHealthcare® Dual Complete® Special Needs Plan (DSNP) requirements.

This update applies to the following DME categories, with specific CPT codes® listed below and the authorization update applies to both UnitedHealthcare Community Plan District of Columbia as well as integrated DSNP plans for Long-Term Care Services and Supports (LTSS) enrollees.

- Hospital beds
- Patient lifts
- Power wheelchairs
- Respiratory support devices

E0194	Powered pressure-reducing mattress
E0304	Hospital bed, heavy-duty, extra wide
E0465	Home ventilator any type used with invasive interface (e.g. tracheostomy tube)
E0466	Home ventilator any type used with non-invasive interface (e.g. mask chest shell)
E0483	High-frequency chest wall oscillation air-pulse generator system
E0636	Patient lift, hydraulic
E0692	Alternating pressure pad, with pump
E0693	Alternating pressure pad, heavy duty, with pump
E0694	Alternating pressure pad, extra heavy duty, with pump
E0986	Wheelchair accessory, safety belt
E1002	Power wheelchair accessory, seat cushion
E1004	Power wheelchair accessory, back cushion
E1005	Power wheelchair accessory, headrest
E1007	Power wheelchair accessory, lateral thigh support
E1008	Power wheelchair accessory, lateral knee support
E1009	Power wheelchair accessory, medial thigh support

E1010	Power wheelchair accessory, medial knee support
E1035	Adjustable wheelchair back
E1230	Wheelchair accessory, tilt-in-space feature
E1399	Durable medical equipment, miscellaneous
E2510	Speech generating device accessory
K0108	Wheelchair component or accessory, not otherwise specified
K0800	Power operated vehicle, not otherwise classified
K0801	Power wheelchair, standard, not otherwise classified
K0806	Power wheelchair, heavy duty, not otherwise classified
K0808	Power wheelchair, single power option
K0835	Power wheelchair, multiple power options, standard
K0836	Power wheelchair, multiple power options, heavy duty
K0837	Power wheelchair, multiple power options, very heavy duty
K0838	Power wheelchair, multiple power options, extra heavy duty
K0839	Power wheelchair, multiple power options, pediatric
K0840	Power wheelchair, multiple power options, adult
K0841	Power wheelchair, multiple power options, with seat elevator
K0843	Power wheelchair, multiple power options, with tilt and recline
K0848	Power wheelchair, single power option, pediatric
K0849	Power wheelchair, single power option, adult
K0850	Power wheelchair, single power option, with seat elevator
K0851	Power wheelchair, single power option, with tilt
K0852	Power wheelchair, single power option, with recline
K0854	Power wheelchair, single power option, with tilt and recline
K0855	Power wheelchair, single power option, with seat elevator and tilt
K0856	Power wheelchair, single power option, with seat elevator and recline
K0857	Power wheelchair, single power option, with seat elevator, tilt and recline
K0858	Power wheelchair, single power option, pediatric, with tilt
K0859	Power wheelchair, single power option, pediatric, with recline
K0860	Power wheelchair, single power option, pediatric, with tilt and recline
K0861	Power wheelchair, single power option, pediatric, with seat elevator
K0862	Power wheelchair, single power option, pediatric, with seat elevator and tilt
K0863	Power wheelchair, single power option, pediatric, with seat elevator and recline
K0864	Power wheelchair, single power option, pediatric, with seat elevator, tilt and recline

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