



February 28, 2020

Web Announcement 2113

**Attention Provider Type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies):**

**Update Regarding Claims for Wheelchair Accessory Procedure Code E1012**

Update to [Web Announcement 1881](#): Provider type (PT) 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies) claims for Healthcare Common Procedural Coding System (HCPCS) code E1012 (Wheelchair accessory, center mount power elevating leg rest/platform, complete system, any type, each) with dates of service January 1, 2017, through November 30, 2017, that had an approved prior authorization and denied in error have been automatically reprocessed.

Results of the reprocessed claims appear on remittance advices dated February 14, 2020. Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received.