



Network Notification

Notice Date: October 15, 2025
To: Mississippi Medicaid Providers
From: TrueCare™
Subject: Claim Edits for Durable Medical Equipment
Effective Date: January 15, 2026

Summary

Beginning with claims processed on or after January 15, 2026, TrueCare will implement claim edits for durable medical equipment prosthetics, orthotics and supplies (DMEPOS) in alignment with the Centers for Medicare & Medicaid Services (CMS) payment policies.

Impact

The following policy areas are affected:

- Modifiers for DMEPOS
- Wheelchair options/accessories
- Hospital beds and accessories
- Oxygen and oxygen equipment
- Respiratory assist devices (RAD), airway pressure devices, oral appliances/devices
- Ankle-foot/knee-ankle-foot orthosis
- Knee orthosis
- Orthopedic footwear
- Durable medical equipment quality of care
- Urological supplies
- Class III devices
- Surgical dressings
- Capped rentals
- Breast pump limitations:
 - Only one (E0602, E0603 or E0604) billed by any provider is allowed per delivery (240 days/eight months)

Important Policy Changes

Correct Use of Modifiers:

To prevent claim denials, it is essential to use the correct modifiers when billing for DMEPOS. This includes, but is not limited to:

- Rental modifiers: indicate whether the equipment is rented or purchased (i.e., RR)
- Anatomical modifiers: specify the body part or side of the body where the device will be used (i.e., LT, RT)
- Functional modifiers: K0-K4
- Surgical dressings: A1-A9 or GY
- Other modifiers: apply additional modifiers as required by the specific DMEPOS item (i.e., KF, KX, GA, GY, GZ)

State guidelines will be taken into consideration.

Questions?

Contact Provider Services at **1-833-230-2174**, Monday through Friday, 7:30 a.m. to 5:30 p.m. Central Time (CT).

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