

## New specialty Medicare Part B device preferred product program

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Effective for dates of service beginning **January 1, 2019**, the following Medicare Part B devices will be preferred to support cost-effective benefits. During precertification initiation or renewal, providers requesting a nonpreferred device will be encouraged to switch to a preferred product. The preferred and nonpreferred products are listed below.

Preferred devices	Nonpreferred devices
Euflexxa® (J7323) Hyalgan®/Supartz®/Visco-3® (J7321) Durolane® (J7318)	Gel-One® (J7326) Gelsyn-3® (J7328) Genvisc 850® (J7320) Hymovis® (J7322) Monovisc™ (J7327) Orthovisc® (J7324) Synvisc® or Synvisc-One® (J7325) Trivisc™ (J7329)

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