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Remittance Advice (RA) Message

Title: **Policy Guidance: Pneumatic Compression Devices**

Issue Date: 05/05/2021

Run Length: 8 weeks

Provider Type(s): 001, 005, 008, 020, 033, 034, 051, 076

Message: Alaska Medicaid issued policy guidance for pneumatic compression devices. The 5/5/2021 Alaska Medicaid Policy Guidance: Pneumatic Compression Devices flyer is available on the [Provider Updates](#) page.