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Remittance Advice (RA) Message

Title: myAIRVO Guidance

Issue Date: 09/28/2021

Run Length: 8 weeks

Provider Type(s): 001, 005, 008, 020, 033, 034, 051, 071, 072, 076

Message: Alaska Medicaid issued policy guidance for the myAIRVO humidification system. The 09/21/2021 Alaska Medicaid service authorization and billing guidance for the myAIRVO is available on the [DMEPOS Provider Information](#) page.