MDCH
Medical Supplier/DME/Prosthetics and Orthotics Database
July 2013

HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A4206			1 CC Sterile Syringe&Needle		$0.25			Y	N	Y	N			
A4207			2 CC Sterile Syringe&Needle		$0.16			Y	N	Y	N			
A4208			3 CC Sterile Syringe&Needle		$0.16			Y	N	Y	N			
A4209			5+ CC Sterile Syringe&Needle		$0.57			Y	N	Y	N			
A4210			Nonneedle Injection Device		$679.26			N	N	Y	N			
A4213			20+ CC Syringe Only		$0.74			Y	N	Y	N			
A4215			Sterile Needle		$0.13			Y	N	Y	N			
A4220			Infusion Pump Refill Kit		$73.48			N	N	Y	N			
A4230			Infus Insulin Pump Non Needl		$9.38		30 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4231			Infusion Insulin Pump Needle		$4.85		30 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4232			Syringe W/Needle Insulin 3cc		$2.34		60 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4244			Alcohol Or Peroxide Per Pint		$0.92		8 per Month	Y	N	N	N			
A4245			Alcohol Wipes Per Box		$1.88		2 per Month	Y	N	N	N			
A4246			Betadine/Phisohex Solution		$7.53		8 per Month	Y	N	N	N			
A4247			Betadine/Iodine Swabs/Wipes		$11.77		4 per Month	Y	N	N	N			
A4250			Urine Reagent Strips/Tablets		$15.12		2 per Month	Y	N	N	N			
A4253			Blood Glucose/Reagent Strips		$27.19		4 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4256			Calibrator Solution/Chips		$7.38		1 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4259			Lancets Per Box		$6.78		2 per Month	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
A4265			Paraffin		$2.41		6 per 6 Months	Y	N	N	N			
A4280			Brst Prsths Adhsv Attchmnt		$4.30			N	N	Y	N			
A4305			Drug Delivery System >=50 ML		$14.69			Y	N	Y	N			
A4306			Drug Delivery System <=50 Ml		$14.69			Y	N	Y	N			
A4310			Insert Tray W/O Bag/Cath		$5.12		2 per Month	Y	N	N	N			
A4311			Catheter W/O Bag 2-Way Latex		$13.11		2 per Month	Y	N	N	N			
A4312			Cath W/O Bag 2-Way Silicone		$11.95		2 per Month	Y	N	N	N			
A4313			Catheter W/Bag 3-Way		$13.91		2 per Month	Y	N	N	N			
A4314			Cath W/Drainage 2-Way Latex		$16.75		2 per Month	Y	N	N	N			
A4315			Cath W/Drainage 2-Way Silcne		$17.48		2 per Month	Y	N	N	N			
A4316			Cath W/Drainage 3-Way		$19.06		2 per Month	Y	N	N	N			
A4320			Irrigation Tray		$3.27		30 per Month	Y	N	N	N			
A4322			Irrigation Syringe		$2.01		30 per Month	Y	N	N	N			
A4326			Male External Catheter		$6.20		30 per Month	Y	N	N	N			
A4328			Fem Urinary Collect Pouch		$6.90		10 per Month	Y	N	N	N			
A4330			Stool Collection Pouch		$6.32		10 per Month	Y	N	N	N			
A4331			Extension Drainage Tubing		$2.79		4 per Month	Y	N	N	N			
A4333			Urinary Cath Anchor Device		$1.95		4 per Month	Y	N	N	N			
A4334			Urinary Cath Leg Strap		$3.27		6 per 6 Months	Y	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A4335			Incontinence Supply		$0.56	3-124	150 per Month	N	N	N	N			
A4338			Indwelling Catheter Latex		$10.83		2 per Month	Y	N	N	N			
A4340			Indwelling Catheter Special		$23.64		5 per Month	Y	N	N	N			
A4344			Cath Indw Foley 2 Way Silicn		$11.78		2 per Month	Y	N	N	N			
A4346			Cath Indw Foley 3 Way		$12.98		6 per Month	Y	N	N	N			
A4349			Disposable Male External Cat		$0.92		96 per Month	Y	N	N	N			
A4351			Straight Tip Urine Catheter		$1.60		150 per Month	Y	N	N	N			
A4351	U4		Straight Tip Urine Catheter		$2.08	0-20	150 per Month	Y	N	Y	N	0-20		
A4352			Coude Tip Urinary Catheter		$3.62		150 per Month	Y	N	N	N			
A4352	U4		Coude Tip Urinary Catheter		$3.62	0-20	150 per Month	Y	N	Y	N	0-20		
A4353			Intermittent Urinary Cath		$4.64		150 per Month	Y	N	N	N			
A4354			Cath Insertion Tray W/Bag		$7.86		10 per Month	Y	N	N	N			
A4355			Bladder Irrigation Tubing		$5.89	0-20	6 per Month	Y	N	N	N			
A4357			Bedside Drainage Bag		$6.43		3 per Month	Y	N	N	N			
A4358			Urinary Leg Or Abdomen Bag		$4.82		10 per Month	Y	N	N	N			
A4361			Ostomy Face Plate		$16.22		2 per Month	Y	N	N	N			
A4362			Solid Skin Barrier		$2.62		36 per Month	Y	N	N	N			
A4363			Ostomy Clamp, Replacement **(RO)**		$2.18		1 per Month	Y	N	N	N			
A4364			Adhesive, Liquid Or Equal		$2.59		10 per Month	Y	N	N	N			
A4367			Ostomy Belt		$5.52		2 per Month	Y	N	N	N			
A4368			Ostomy Filter		$0.23		10 per Month	Y	N	N	N			
A4369			Skin Barrier Liquid Per Oz		$2.14		10 per Month	N	N	N	N			
A4371			Skin Barrier Powder Per Oz		$3.22		10 per Month	N	N	N	N			
A4372			Skin Barrier Solid 4x4 Equiv		$3.26		36 per Month	N	N	N	N			
A4373			Skin Barrier With Flange		$4.16		30 per Month	N	N	N	N			
A4375			Drainable Plastic Pch W Fcpl		$15.06		30 per Month	N	N	N	N			
A4376			Drainable Rubber Pch W Fcplt		$41.69		30 per Month	N	N	N	N			
A4377			Drainable Plstic Pch W/O Fp		$3.76		30 per Month	N	N	N	N			
A4378			Drainable Rubber Pch W/O Fp		$26.94		30 per Month	N	N	N	N			
A4379			Urinary Plastic Pouch W Fcpl		$13.16		30 per Month	N	N	N	N			
A4380			Urinary Rubber Pouch W Fcplt		$32.70		30 per Month	N	N	N	N			
A4381			Urinary Plastic Pouch W/O Fp		$4.04		30 per Month	N	N	N	N			
A4382			Urinary Hvy Plstc Pch W/O Fp		$21.56		30 per Month	N	N	N	N			
A4383			Urinary Rubber Pouch W/O Fp		$24.71		30 per Month	N	N	N	N			
A4385			Ost Skn Barrier Sld Ext Wear		$4.29		15 per Month	N	N	N	N			
A4387			Ost Clsd Pouch W Att St Barr		$3.52		30 per Month	N	N	N	N			
A4388			Drainable Pch W Ex Wear Barr		$3.82		30 per Month	N	N	N	N			
A4389			Drainable Pch W St Wear Barr		$5.44		30 per Month	N	N	N	N			
A4390			Drainable Pch Ex Wear Convex		$8.42		30 per Month	N	N	N	N			
A4391			Urinary Pouch W Ex Wear Barr		$6.19		30 per Month	N	N	N	N			
A4392			Urinary Pouch W St Wear Barr		$5.83		30 per Month	N	N	N	N			
A4393			Urine Pch W Ex Wear Bar Conv		$7.98		30 per Month	N	N	N	N			
A4394			Ostomy Pouch Liq Deodorant		$2.26		16 per Month	N	N	N	N			
A4395			Ostomy Pouch Solid Deodorant		$0.05		30 per Month	N	N	N	N			
A4397			Irrigation Supply Sleeve		$4.24		25 per Month	Y	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A4398			Ostomy Irrigation Bag		$12.20		1 per Month	Y	N	N	N			
A4399			Ostomy Irrig Cone/Cath W Brs		$8.05		30 per Month	Y	N	N	N			
A4400			Ostomy Irrigation Set		$36.68		1 per Month	Y	N	N	N			
A4402			Lubricant Per Ounce		$0.30		10 per Month	Y	N	N	N			
A4404			Ostomy Ring Each		$1.12		8 per Month	Y	N	N	N			
A4405			Nonpectin Based Ostomy Paste		$3.00		10 per Month	N	N	N	N			
A4406			Pectin Based Ostomy Paste		$4.06		10 per Month	N	N	N	N			
A4407			Ext Wear Ost Skn Barr <=4sq"		$5.81		15 per Month	N	N	N	N			
A4408			Ext Wear Ost Skn Barr >4sq"		$6.54		15 per Month	N	N	N	N			
A4409			Ost Skn Barr Convex <=4 Sq I		$5.07		15 per Month	N	N	N	N			
A4410			Ost Skn Barr Extnd >4 Sq		$5.99		15 per Month	N	N	N	N			
A4411			Ost Skn Barr Extnd =4sq		$3.84		30 per Month	N	N	N	N			
A4412			Ost Pouch Drain High Output		$2.48		30 per Month	N	N	N	N			
A4413			2 Pc Drainable Ost Pouch		$3.88		30 per Month	N	N	N	N			
A4414			Ost Sknbar W/O Conv<=4 Sq In		$3.81		30 per Month	N	N	N	N			
A4415			Ost Skn Barr W/O Conv >4 Sqi		$3.98		30 per Month	N	N	N	N			
A4416			Ost Pch Clsd W Barrier/Filtr		$1.95		30 per Month	N	N	N	N			
A4417			Ost Pch W Bar/Bltinconv/Fltr		$2.64		30 per Month	N	N	N	N			
A4418			Ost Pch Clsd W/O Bar W Filtr		$1.27		30 per Month	N	N	N	N			
A4419			Ost Pch For Bar W Flange/Flt		$1.23		30 per Month	N	N	N	N			
A4420			Ost Pch Clsd For Bar W Lk Fl		$1.27		30 per Month	Y	N	N	N			
A4421			Ostomy Supply Misc		M			N	N	Y	N			
A4422			Ost Pouch Absorbent Material		$0.10		30 per Month	N	N	N	N			
A4423			Ost Pch For Bar W Lk Fl/Fltr		$1.46		30 per Month	N	N	N	N			
A4424			Ost Pch Drain W Bar & Filter		$3.35		30 per Month	N	N	N	N			
A4425			Ost Pch Drain For Barrier Fl		$2.53		30 per Month	N	N	N	N			
A4426			Ost Pch Drain 2 Piece System		$1.70		30 per Month	N	N	N	N			
A4427			Ost Pch Drain/Barr Lk Flng/F		$1.88		30 per Month	N	N	N	N			
A4428			Urine Ost Pouch W Faucet/Tap		$4.52		30 per Month	N	N	N	N			
A4429			Urine Ost Pouch W Bltinconv		$5.32		30 per Month	N	N	N	N			
A4430			Ost Urine Pch W B/Bltin Conv		$6.03		30 per Month	N	N	N	N			
A4431			Ost Pch Urine W Barrier/Tapv		$3.58		30 per Month	N	N	N	N			
A4432			Os Pch Urine W Bar/Fange/Tap		$2.54		30 per Month	N	N	N	N			
A4433			Urine Ost Pch Bar W Lock Fln		$2.36		30 per Month	N	N	N	N			
A4434			Ost Pch Urine W Lock Flng/Ft		$2.65		30 per Month	N	N	N	N			
A4435			1PC Ost PCH Drain High Output		$4.61		30 per Month	N	N	N	N			
A4450			Non-Waterproof Tape		$0.09		240 per Month	Y	N	N	N			
A4452			Waterproof Tape		$0.33		240 per Month	Y	N	N	N			
A4455			Adhesive Remover Per Ounce		$1.26		1 per Month	Y	N	N	N			
A4456			Adhesive Remover, Wipes		M		60 per Month	Y	N	Y	N			
A4458			Reusable Enema Bag		$5.18		30 per Month	Y	N	N	N			
A4466			Elastic Garment/Covering		M			N	N	Y	N			
A4481			Tracheostoma Filter		$0.30		6 per Month	N	N	N	N			
A4490			Above Knee Surgical Stocking		$5.40		4 per Surgical Event	Y	N	N	N			
A4495			Thigh Length Surg Stocking		$8.15		4 per Surgical Event	Y	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A4500			Below Knee Surgical Stocking		$5.40		4 per Surgical Event	Y	N	N	N			
A4510			Full Length Surg Stocking		$9.05		4 per Surgical Event	Y	N	N	N			
A4520			Incontinence Garment Anytype		$13.79	3-124	1 per Month	Y	N	N	N			
A4556			Electrodes, Pair		$8.05			Y	N	Y	N			
A4557			Lead Wires, Pair		$11.88			Y	N	Y	N			
A4558			Conductive Gel Or Paste		$3.77			Y	N	Y	N			
A4595			TENS Suppl 2 Lead Per Month		$19.09		1 per Month	N	N	N	N			
A4606			Oxygen Probe Used W Oximeter **(RO)**		$113.94	0-20	1 per Year	Y	N	N	N			
A4614			Hand-Held PEFR Meter		$21.01		1 per Year	Y	N	N	N			
A4615			Cannula Nasal		M			Y	N	Y	N			
A4619			Face Tent		M			Y	N	Y	N			
A4620			Variable Concentration Mask		M			Y	N	Y	N			
A4623			Tracheostomy Inner Cannula		$4.33		4 per Month	Y	N	N	N			
A4624			Tracheal Suction Tube		$1.49		150 per Month	Y	N	N	N			
A4625			Trach Care Kit For New Trach		$5.09		30 per Month	Y	N	N	N			
A4626			Tracheostomy Cleaning Brush		$1.79		30 per Month	Y	N	N	N			
A4627			Spacer Bag/Reservoir		$14.68		4 per Year	Y	N	N	N			
A4628			Oropharyngeal Suction Cath		$2.48		150 per Month	Y	N	N	N			
A4629			Tracheostomy Care Kit		$3.07		30 per Month	Y	N	N	N			
A4635			Underarm Crutch Pad **(RO)**		$2.87		2 per Year	Y	N	N	N			
A4636			Handgrip For Cane Etc **(RO)**		$2.38		2 per Year	Y	N	N	N			
A4637			Repl Tip Cane/Crutch/Walker **(RO)**		$1.55		6 per Year	Y	N	N	N			
A4640			Alternating Pressure Pad **(RO)**		$40.21		1 per 2 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.0-335.29, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4-348.5, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
A4640	RR		Alternating Pressure Pad **(RO)**		$4.02		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.0-335.29, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4-3485, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
A4649			Surgical Supplies		M			N	N	Y	N			
A4657			Syringe W/Wo Needle		$1.37		10 per Month	Y	N	Y	N			
A4660			Sphyg/Bp App W Cuff And Stet		$19.62			Y	N	Y	N			
A4663			Dialysis Blood Pressure Cuff		$20.58			Y	N	Y	N			
A4670			Automatic Bp Monitor, Dial		$62.30	11-124		Y	N	Y	N	11-124		
A4927			Non-Sterile Gloves		$6.62		4 Units per Month	Y	N	N	N			
A4930			Sterile, Gloves Per Pair		$0.59		200 per Month	Y	N	N	N			

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A5051			Pouch Clsd W Barr Attached		$1.64		30 per Month	Y	N	N	N			
A5052			Clsd Ostomy Pouch W/O Barr		$1.11		30 per Month	Y	N	N	N			
A5053			Clsd Ostomy Pouch Faceplate		$0.93		30 per Month	Y	N	N	N			
A5054			Clsd Ostomy Pouch W/Flange		$1.26		30 per Month	Y	N	N	N			
A5055			Stoma Cap		$0.97		30 per Month	Y	N	N	N			
A5056			1 PC Ost Pouch W Filter		$3.75		15 per Month	Y	N	N	N			
A5057			1 Pc Ost Pou W Built-In Conv		$7.74		15 per Month	Y	N	N	N			
A5061			Pouch Drainable W Barrier At		$1.84		30 per Month	Y	N	N	N			
A5062			Drnble Ostomy Pouch W/O Barr		$1.94		30 per Month	Y	N	N	N			
A5063			Drain Ostomy Pouch W/Flange		$1.84		30 per Month	Y	N	N	N			
A5071			Urinary Pouch W/Barrier		$4.61		30 per Month	Y	N	N	N			
A5072			Urinary Pouch W/O Barrier		$3.00		30 per Month	Y	N	N	N			
A5073			Urinary Pouch On Barr W/Flng		$2.41		30 per Month	Y	N	N	N			
A5081			Continent Stoma Plug		$1.87		5 per Month	Y	N	N	N			
A5082			Continent Stoma Catheter		$9.60		5 per Month	Y	N	N	N			
A5083			Stoma Absorptive Cover		M		30 per Month	Y	N	Y	N			
A5093			Ostomy Accessory Convex Inse		$1.28		5 per Month	Y	N	N	N			
A5112			Urinary Leg Bag		$22.93		2 per Month	Y	N	N	N			
A5120			Skin Barrier, Wipe Or Swab		$0.19		100 per Month	Y	N	N	N			
A5121			Solid Skin Barrier 6x6		$4.94		30 per Month	Y	N	N	N			
A5122			Solid Skin Barrier 8x8		$9.01		30 per Month	Y	N	N	N			
A5126			Disk/Foam Pad +Or- Adhesive		$0.75		30 per Month	Y	N	N	N			
A5200			Percutaneous Catheter Anchor		$8.19		4 per Month	Y	N	N	N			
A5500		LT-RT	Diab Shoe For Density Insert		$52.43		1 per Year	N	N	N	N			
A5501		LT-RT	Diabetic Custom Molded Shoe		$157.24			N	N	Y	N			
A5503		LT-RT	Diabetic Shoe W/Roller/Rockr		$23.32		1 per 6 Months	N	N	N	N			
A5504		LT-RT	Diabetic Shoe With Wedge		$23.32		1 per 6 Months	N	N	N	N			
A5505		LT-RT	Diab Shoe W/Metatarsal Bar		$23.32		1 per 6 Months	N	N	N	N			
A5506		LT-RT	Diabetic Shoe W/Off Set Heel		$23.32		1 per 6 Months	N	N	N	N			
A5507		LT-RT	Modification Diabetic Shoe		$18.22			**N**	N	Y	N			
A5510		LT-RT	Compression Form Shoe Insert		$29.14		Up to 3 per Year	N	N	N	N			
A5512		LT-RT	Multi Den Insert Direct Form		$21.39		Up to 3 per Year	N	N	N	N			
A5513		LT-RT	Multi Den Insert Custom Mold		$29.14		Up to 3 per Year	N	N	N	N			
A6010		A1-A9	Collagen Based Wound Filler		$21.36		30 per Month	N	N	N	N			
A6011		A1-A9	Collagen Gel/Paste Wound Fil		$1.61		30 per Month	N	N	N	N			
A6021		A1-A9	Collagen Dressing <=16 Sq In		$14.51		30 per Month	Y	N	N	N			
A6022		A1-A9	Collagen Drsg>6<=48 Sq In		$14.51		30 per Month	Y	N	N	N			
A6023		A1-A9	Collagen Dressing >48 Sq In		$131.31		30 per Month	Y	N	N	N			
A6024		A1-A9	Collagen Dsg Wound Filler		$4.26		30 per Month	Y	N	N	N			
A6025		A1-A9	Silicone Gel Sheet, Each		$36.28		30 per Month	Y	N	N	N			
A6196		A1-A9	Alginate Dressing <=16 Sq In		$6.44		30 per Month	N	N	N	N			
A6197		A1-A9	Alginate Drsg >16 <=48 Sq In		$14.40		30 per Month	N	N	N	N			
A6198		A1-A9	Alginate Dressing > 48 Sq In		$22.37		30 per Month	N	N	N	N			
A6199		A1-A9	Alginate Drsg Wound Filler		$4.63		30 per Month	Y	N	N	N			
A6203		A1-A9	Composite Drsg <= 16 Sq In		$2.93		30 per Month	N	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A6204		A1-A9	Composite Drsg >16<=48 Sq In		$5.45		30 per Month	N	N	N	N			
A6205		A1-A9	Composite Drsg > 48 Sq In		$7.98		30 per Month	N	N	N	N			
A6206		A1-A9	Contact Layer <= 16 Sq In		$4.59		30 per Month	N	N	N	N			
A6207		A1-A9	Contact Layer >16<= 48 Sq In		$6.43		30 per Month	N	N	N	N			
A6208		A1-A9	Contact Layer > 48 Sq In		$8.27		30 per Month	N	N	N	N			
A6209		A1-A9	Foam Drsg <=16 Sq In W/O Bdr		$6.55		30 per Month	N	N	N	N			
A6210		A1-A9	Foam Drg >16<=48 Sq In W/O B		$17.45		30 per Month	N	N	N	N			
A6211		A1-A9	Foam Drg > 48 Sq In W/O Brdr		$25.72		30 per Month	N	N	N	N			
A6212		A1-A9	Foam Drg <=16 Sq In W/Border		$8.50		30 per Month	N	N	N	N			
A6213		A1-A9	Foam Drg >16<=48 Sq In W/Bdr		$8.77		30 per Month	N	N	N	N			
A6214		A1-A9	Foam Drg > 48 Sq In W/Border		$9.02		30 per Month	N	N	N	N			
A6215		A1-A9	Foam Dressing Wound Filler		$0.22		240 per Month	N	N	N	N			
A6216		A1-A9	Non-Sterile Gauze<=16 Sq In		$0.05		200 per Month	Y	N	N	N			
A6217		A1-A9	Non-Sterile Gauze>16<=48 Sq		$0.10		200 per Month	Y	N	N	N			
A6218		A1-A9	Non-Sterile Gauze > 48 Sq In		$0.22		200 per Month	Y	N	N	N			
A6219		A1-A9	Gauze <= 16 Sq In W/Border		$0.83		200 per Month	Y	N	N	N			
A6220		A1-A9	Gauze >16 <=48 Sq In W/Bordr		$2.26		200 per Month	Y	N	N	N			
A6221		A1-A9	Gauze > 48 Sq In W/Border		$3.68		200 per Month	Y	N	N	N			
A6222		A1-A9	Gauze <=16 In No W/Sal W/O B		$1.87		200 per Month	Y	N	N	N			
A6223		A1-A9	Gauze >16<=48 No W/Sal W/O B		$2.11		200 per Month	Y	N	N	N			
A6224		A1-A9	Gauze > 48 In No W/Sal W/O B		$3.16		200 per Month	Y	N	N	N			
A6231		A1-A9	Hydrogel Dsg<=16 Sq In		$4.13		30 per Month	Y	N	N	N			
A6232		A1-A9	Hydrogel Dsg>16<=48 Sq In		$5.38		30 per Month	Y	N	N	N			
A6233		A1-A9	Hydrogel Dressing >48 Sq In		$16.94		30 per Month	Y	N	N	N			
A6234		A1-A9	Hydrocolld Drg <=16 W/O Bdr		$5.73		30 per Month	N	N	N	N			
A6235		A1-A9	Hydrocolld Drg >16<=48 W/O B		$14.74		30 per Month	N	N	N	N			
A6236		A1-A9	Hydrocolld Drg > 48 In W/O B		$23.87		30 per Month	N	N	N	N			
A6237		A1-A9	Hydrocolld Drg <=16 In W/Bdr		$6.93		30 per Month	N	N	N	N			
A6238		A1-A9	Hydrocolld Drg >16<=48 W/Bdr		$19.97		30 per Month	N	N	N	N			
A6239		A1-A9	Hydrocolld Drg > 48 In W/Bdr		$33.00		30 per Month	N	N	N	N			
A6240		A1-A9	Hydrocolld Drg Filler Paste		$8.11		10 per Month	N	N	N	N			
A6241		A1-A9	Hydrocolloid Drg Filler Dry		$1.71		240 per Month	N	N	N	N			
A6242		A1-A9	Hydrogel Drg <=16 In W/O Bdr		$5.32		30 per Month	N	N	N	N			
A6243		A1-A9	Hydrogel Drg >16<=48 W/O Bdr		$10.79		30 per Month	N	N	N	N			
A6244		A1-A9	Hydrogel Drg >48 In W/O Bdr		$34.40		30 per Month	N	N	N	N			
A6245		A1-A9	Hydrogel Drg <= 16 In W/Bdr		$6.36		30 per Month	N	N	N	N			
A6246		A1-A9	Hydrogel Drg >16<=48 In W/B		$8.69		30 per Month	N	N	N	N			
A6247		A1-A9	Hydrogel Drg > 48 Sq In W/B		$20.83		30 per Month	N	N	N	N			
A6248		A1-A9	Hydrogel Drsg Gel Filler		$10.75		10 per Month	N	N	N	N			
A6250			Skin Seal Protect Moisturizr		$4.57		2 per Month	Y	N	N	N			
A6251		A1-A9	Absorpt Drg <=16 Sq In W/O B		$1.74		30 per Month	N	N	N	N			
A6252		A1-A9	Absorpt Drg >16 <=48 W/O Bdr		$2.85		30 per Month	N	N	N	N			
A6253		A1-A9	Absorpt Drg > 48 Sq In W/O B		$5.56		30 per Month	N	N	N	N			
A6254		A1-A9	Absorpt Drg <=16 Sq In W/Bdr		$1.06		30 per Month	N	N	N	N			
A6255		A1-A9	Absorpt Drg >16<=48 In W/Bdr		$2.65		30 per Month	N	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
A6256		A1-A9	Absorpt Drg > 48 Sq In W/Bdr		$4.25		30 per Month	N	N	N	N			
A6257		A1-A9	Transparent Film <= 16 Sq In		$1.34		30 per Month	Y	N	N	N			
A6258		A1-A9	Transparent Film >16<=48 In		$3.77		30 per Month	Y	N	N	N			
A6259		A1-A9	Transparent Film > 48 Sq In		$9.58		30 per Month	Y	N	N	N			
A6260		A1-A9	Wound Cleanser Any Type/Size		$7.35		1 per Month	Y	N	N	N			
A6261		A1-A9	Wound Filler Gel/Paste /Oz		$3.71		10 per Month	Y	N	N	N			
A6262		A1-A9	Wound Filler Dry Form / Gram		$0.22		240 per Month	Y	N	N	N			
A6266		A1-A9	Impreg Gauze No H20/Sal/Yard		$1.26		30 per Month	Y	N	N	N			
A6402		A1-A9	Sterile Gauze <= 16 Sq In		$0.11		200 per Month	Y	N	N	N			
A6403		A1-A9	Sterile Gauze>16 <= 48 Sq In		$0.37		200 per Month	Y	N	N	N			
A6404		A1-A9	Sterile Gauze > 48 Sq In		$0.64		200 per Month	Y	N	N	N			
A6407		A1-A9	Packing Strips, Non-Impreg		$1.25		30 per Month	Y	N	N	N			
A6410			Sterile Eye Pad		$0.34	0-9	60 per Month	Y	N	N	N			
A6411			Non-Sterile Eye Pad		$0.28		60 per Month	Y	N	N	N			
A6412			Occlusive Eye Patch		M		60 per Month	Y	N	Y	N			
A6441		A1-A9	Pad Band W>=3" <5"/Yd		$0.46		12 per Month	Y	N	N	N			
A6442		A1-A9	Conform Band N/S W<3"/Yd		$0.14		72 per Month	Y	N	N	N			
A6443		A1-A9	Conform Band N/S W>=3"<5"/Yd		$0.26		72 per Month	Y	N	N	N			
A6444		A1-A9	Conform Band N/S W>=5"/Yd		$0.50		72 per Month	Y	N	N	N			
A6445		A1-A9	Conform Band S W <3"/Yd		$0.29		72 per Month	Y	N	N	N			
A6446		A1-A9	Conform Band S W>=3" <5"/Yd		$0.35		72 per Month	Y	N	N	N			
A6447		A1-A9	Conform Band S W >=5"/Yd		$0.58		72 per Month	Y	N	N	N			
A6448		A1-A9	Lt Compres Band <3"/Yd		$0.22		20 per Month	Y	N	N	N			
A6449		A1-A9	Lt Compres Band >=3" <5"/Yd		$0.27		20 per Month	Y	N	N	N			
A6450		A1-A9	Lt Compres Band >=5"/Yd		$0.46		20 per Month	Y	N	N	N			
A6451		A1-A9	Mod Compres Band W>=3"<5"/Yd		$0.57		20 per Month	Y	N	N	N			
A6452		A1-A9	High Compres Band W>=3"<5"Yd		$4.07			Y	N	Y	N			
A6453		A1-A9	Self-Adher Band W <3"/Yd		$0.42			Y	N	Y	N			
A6454		A1-A9	Self-Adher Band W>=3" <5"/Yd		$0.54			Y	N	Y	N			
A6455		A1-A9	Self-Adher Band >=5"/Yd		$0.96			Y	N	Y	N			
A6456		A1-A9	Zinc Paste Band W >=3"<5"/Yd		$0.57		40 per Month	Y	N	N	N			
A6457			Tubular Dressing		$0.77		30 per Month	Y	N	N	N			
A6501			Compres Burngarment Bodysuit		M			N	N	Y	N			
A6502			Compres Burngarment Chinstrp		M			N	N	Y	N			
A6503			Compres Burngarment Facehood		M			N	N	Y	N			
A6504			Cmprsburngarment Glove-Wrist		M			N	N	Y	N			
A6505			Cmprsburngarment Glove-Elbow		M			N	N	Y	N			
A6506			Cmprsburngrmnt Glove-Axilla		M			N	N	Y	N			
A6507			Cmprs Burngarment Foot-Knee		M			N	N	Y	N			
A6508			Cmprs Burngarment Foot-Thigh		M			N	N	Y	N			
A6509			Compres Burn Garment Jacket		M			N	N	Y	N			
A6510			Compres Burn Garment Leotard		M			N	N	Y	N			
A6511			Compres Burn Garment Panty		M			N	N	Y	N			
A6512			Compres Burn Garment, Noc		M			N	N	Y	N			
A6513			Compress Burn Mask Face/Neck		M			N	N	Y	N			

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A6530		LT-RT	Compression Stocking BK18-30		$18.26		2 per 3 Months	Y	N	N	N			
A6531		LT-RT	Compression Stocking BK30-40		$20.29		2 per 3 Months	Y	N	N	N			
A6532		LT-RT	Compression Stocking BK40-50		$25.87		2 per 3 Months	Y	N	N	N			
A6533		LT-RT	Gc Stocking Thighlngth 18-30		$23.98		2 per 3 Months	Y	N	N	N			
A6534		LT-RT	Gc Stocking Thighlngth 30-40		$27.26		2 per 3 Months	Y	N	N	N			
A6535		LT-RT	Gc Stocking Thighlngth 40-50		$29.39		2 per 3 Months	Y	N	N	N			
A6536		LT-RT	Gc Stocking Full Lngth 18-30		$43.57		2 per 3 Months	Y	N	N	N			
A6537		LT-RT	Gc Stocking Full Lngth 30-40		$43.57		2 per 3 Months	Y	N	N	N			
A6538		LT-RT	Gc Stocking Full Lngth 40-50		$55.04		2 per 3 Months	Y	N	N	N			
A6539			Gc Stocking Waistlngth 18-30		$71.20		2 per 3 Months	Y	N	N	N			
A6540			Gc Stocking Waistlngth 30-40		$71.20		2 per 3 Months	Y	N	N	N			
A6541			Gc Stocking Waistlngth 40-50		$79.24		2 per 3 Months	Y	N	N	N			
A6544			Gc Stocking Garter Belt		$13.18		2 per 3 Months	Y	N	Y	N			
A6545		LT-RT	Grad Comp Non-Elastic BK		M		2 per 3 Months	Y	N	Y	N			
A6549			G Compression Stocking		M			N	N	Y	N			
A6550			Neg Pres Wound Ther Drsg Set		$18.17			N	N	Y	Y			
A7000			Disposable Canister For Pump		$7.76		12 per Year	Y	N	N	Y**			
A7002			Tubing Used W Suction Pump		$2.54		4 per Month	Y	N	N	N			
A7003			Nebulizer Administration Set		$2.07		12 per Year	Y	N	N	N			
A7004			Disposable Nebulizer Sml Vol		$1.58		36 per Year	Y	N	N	N			
A7005			Nondisposable Nebulizer Set		$20.42		2 per Year	Y	N	N	N			
A7006			Filtered Nebulizer Admin Set		$8.36			Y	N	Y	N			
A7007			Lg Vol Nebulizer Disposable		$3.06		4 per Month	Y	N	N	N			
A7009			Nebulizer Reservoir Bottle		$36.83		1 per Year	Y	N	N	N			
A7010			Disposable Corrugated Tubing		$20.66		2 per Year	Y	N	N	N			
A7012			Nebulizer Water Collec Devic		$2.82		24 per Year	Y	N	N	N			
A7015			Aerosol Mask Used W Nebulize		$1.48		24 per Year	Y	N	N	N			
A7016			Nebulizer Dome & Mouthpiece		$6.34		1 per Year	Y	N	N	N			
A7018			Water Distilled W/Nebulizer		$0.34		120 per Year	Y	N	N	N			
A7025			Replace Chest Compress Vest **(RO)**		$374.48			N	N	Y	N			
A7026			Replace Chst Cmprss Sys Hose **(RO)**		$20.32			N	N	Y	N			
A7027			Combination Oral/Nasal Mask		$137.12		1 per Year	N	N	N	N			
A7028			Repl Oral Cushion Combo Mask **(RO)**		$36.45		1 per Year	N	N	N	N			
A7029			Repl Nasal Pillow Comb Mask **(RO)**		$14.89		1 per Year	N	N	N	N			
A7030			CPAP Full Face Mask		$133.28		1 per Year	N	N	N	N			
A7031			Replacement Facemask Interfa **(RO)**		$61.62		1 per Year	N	N	N	N			
A7032			Replacement Nasal Cushion **(RO)**		$28.63		1 per Year	N	N	N	N			
A7033			Replacement Nasal Pillows **(RO)**		$22.96		1 per Year	N	N	N	N			
A7034			Nasal Application Device		$77.92		1 per Year	N	N	N	N			
A7035			Pos Airway Press Headgear		$35.10		1 per Year	N	N	N	N			
A7036			Pos Airway Press Chinstrap		$13.19		1 per Year	N	N	N	N			
A7037			Pos Airway Pressure Tubing		$36.00		1 per Year	N	N	N	N			
A7038			Pos Airway Pressure Filter		$4.02		18 per Year	N	N	N	N			
A7044			PAP Oral Interface		$106.79		1 per Year	N	N	N	N			
A7045			Repl Exhalation Port For PAP **(RO)**		$17.19		1 per Year	N	N	N	N			

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A7046			Repl Water Chamber, PAP Dev **(RO)**		$10.44		1 per 6 Months	N	N	N	N			
A7501			Tracheostoma Valve W Diaphra		$72.47			N	N	Y	N			
A7502			Replacement Diaphragm/Fplate **(RO)**		$34.43			N	N	Y	N			
A7503			HMES Filter Holder Or Cap		$7.82			N	N	Y	N			
A7504			Tracheostoma HMES Filter		$0.46			N	N	Y	N			
A7505			HMES Or Trach Valve Housing		$3.23			N	N	Y	N			
A7506			HMES/Trachvalve Adhesivedisk		$0.23			N	N	Y	N			
A7507			Integrated Filter & Holder		$1.72			N	N	Y	N			
A7508			Housing & Integrated Adhesiv		$1.97			N	N	Y	N			
A7509			Heat & Moisture Exchange Sys		$1.01			N	N	Y	N			
A7520			Trach/Laryn Tube Non-Cuffed		$41.94		2 per Month	Y	N	N	N			
A7520	U4		Trach/Laryn Tube Non-Cuffed		$60.23	0-20	2 per Month	Y	N	N	N			
A7521			Trach/Laryn Tube Cuffed		$41.55		2 per Month	Y	N	N	N			
A7522			Trach/Laryn Tube Stainless		M			Y	N	Y	N			
A7523			Tracheostomy Shower Protect		$5.96		4 per Month	Y	N	N	N			
A7524			Tracheostoma Stent/Stud/Bttn		$53.41			Y	N	Y	N			
A7525			Tracheostomy Mask		$1.23		30 per Month	Y	N	N	N			
A7526			Tracheostomy Tube Collar		$2.34		30 per Month	Y	N	N	N			
A7527			Trach/Laryn Tube Plug/Stop		$3.16			Y	N	Y	N			
A8000			Soft Protect Helmet Prefab		$86.32			N	N	Y	N		300.9, 318.0-319, 345.90	
A8001			Hard Protect Helmet Prefab		$86.32			N	N	Y	N		300.9, 318.0-319, 345.90	
A8002			Soft Protect Helmet Custom		$367.74		1 per Year	N	Y	Y	N			
A8003			Hard Protect Helmet Custom		M		1 per Year	N	Y	Y	N			
A8004			Repl Soft Interface, Helmet **(RO)**		$13.80			N	N	Y	N			
A9999			DME Supply Or Accessory, Nos		M			N	N	Y	N			
B4034			Enter Feed Supkit Syr By Day		$2.64		30 per Month	Y	N	N	Y**			
B4035			Enteral Feed Supp Pump Per D		$7.62		30 per Month	Y	N	N	Y**			
B4036			Enteral Feed Sup Kit Grav By		$6.53		30 per Month	Y	N	N	Y**			
B4081			Enteral Ng Tubing W/ Stylet		$13.12		5 per Month	Y	N	N	Y**			
B4082			Enteral Ng Tubing W/O Stylet		$11.14		5 per Month	Y	N	N	Y**			
B4083			Enteral Stomach Tube Levine		$1.06		30 per Month	Y	N	N	Y**			
B4087			Gastro/Jejuno Tube, Std		$21.86		4 per Month	Y	N	N	Y**			
B4087	U3		Gastro/Jejuno Tube, Std		$10.92		8 per Month	Y	N	N	Y**			
B4088			Gastro/Jejuno Tube, Low-Pro		$122.17		3 per 6 Months	Y	N	N	Y**			
B4102			EF Adult Fluids And Electro		$1.47			Y	N	Y	Y			
B4102	BO		EF Adult Fluids And Electro		$1.47			Y	N	Y	Y			
B4149			EF Blenderized Foods		$1.12			Y	N	Y	Y			
B4150			EF Complet W/Intact Nutrient		$0.56		900 per Month	Y	N	N	Y**			
B4150	BO		EF Complet W/Intact Nutrient		$0.56			Y	N	Y	Y			
B4152			EF Calorie Dense>/=1.5Kcal		$0.46		900 per Month	Y	N	N	Y**			
B4152	BO		EF Calorie Dense>/=1.5Kcal		$0.46			Y	N	Y	Y			
B4153			EF Hydrolyzed/Amino Acids		$1.36			Y	N	Y	Y			
B4153	BO		EF Hydrolyzed/Amino Acids		$1.36			Y	N	Y	Y			
B4154			EF Spec Metabolic Noninherit		$0.86			Y	N	Y	Y			
B4154	BO		EF Spec Metabolic Noninherit		$0.86			Y	N	Y	Y			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
B4155			EF Incomplete/Modular		$0.68			Y	N	Y	Y			
B4155	BO		EF Incomplete/Modular		$0.68			Y	N	Y	Y			
B4157			EF Special Metabolic Inherit		$1.09			Y	N	Y	Y			
B4157	BO		EF Special Metabolic Inherit		$1.09			Y	N	Y	Y			
B4158			EF Ped Complete Intact Nut		$0.56	0-20	900 per Month	Y	N	N	Y**			
B4158	BO		EF Ped Complete Intact Nut		$0.56	0-20		Y	N	Y	Y	0-20		
B4159			EF Ped Complete Soy Based		$0.75	0-20		Y	N	Y	Y	0-20		
B4159	BO		EF Ped Complete Soy Based		$0.75	0-20		Y	N	Y	Y	0-20		
B4160			EF Ped Caloric Dense>/=0.7kc		$0.56	0-20	900 per Month	Y	N	N	Y**			
B4160	BO		EF Ped Caloric Dense>/=0.7kc		$0.56	0-20		Y	N	Y	Y	0-20		
B4161			EF Ped Hydrolyzed/Amino Acid		$1.47	0-20		Y	N	Y	Y	0-20		
B4161	BO		EF Ped Hydrolyzed/Amino Acid		$1.47	0-20		Y	N	Y	Y	0-20		
B4162			EF Ped Specmetabolic Inherit		$1.09	0-20		Y	N	Y	Y	0-20		
B4162	BO		EF Ped Specmetabolic Inherit		$1.09	0-20		Y	N	Y	Y	0-20		
B4185			Parenteral Sol 10 Gm Lipids		$6.26		Up to 300 Units per Month	N	N	Y	Y		555.0-555.2, 556.0-556.6, 557.0-557.1, 558.1-558.42, 560.9, 569.81, 577.0-577.2, 579.3	
B4189			Parenteral Sol Amino Acid &		$139.25		30 per Month	N	N	Y	Y		555.0-555.2, 556.0-556.6, 557.0-557.1, 558.1-558.42, 560.9, 569.81, 577.0-577.2, 579.3	
B4193			Parenteral Sol 52-73 Gm Prot		$139.25		30 per Month	N	N	Y	Y		555.0-555.2, 556.0-556.6, 557.0-557.1, 558.1-558.42, 560.9, 569.81, 577.0-577.2, 579.3	
B4197			Parenteral Sol 74-100 Gm Pro		$139.25		30 per Month	N	N	Y	Y		555.0-555.2, 556.0-556.6, 557.0-557.1, 558.1-558.42, 560.9, 569.81, 577.0-577.2, 579.3	
B4199			Parenteral Sol > 100gm Prote		$139.25		30 per Month	N	N	Y	Y		555.0-555.2, 556.0-556.6, 557.0-557.1, 558.1-558.42, 560.9, 569.81, 577.0-577.2, 579.3	
B4220			Parenteral Supply Kit Premix		$6.28		30 per Month	N	N	N	Y**			
B4224			Parenteral Administration Ki		$19.60		30 per Month	N	N	N	Y**			
B9000			Enter Infusion Pump W/O Alrm		$659.10			Y	N	Y	Y			
B9000	RB		Enter Infusion Pump W/O Alrm		M			Y	N	Y	Y			
B9000	RR		Enter Infusion Pump W/O Alrm		$65.90		10 Months=Purchase	Y	N	N	Y**			
B9002			Enteral Infusion Pump W/ Ala		$659.10			Y	N	Y	Y			
B9002	RB		Enteral Infusion Pump W/ Ala		M			Y	N	Y	Y			
B9002	RR		Enteral Infusion Pump W/ Ala		$65.90		10 Months=Purchase	Y	N	N	Y**			
B9004	RB		Parenteral Infus Pump Portab		M			N	N	Y	Y**			
B9004	RR		Parenteral Infus Pump Portab		$10.44		30 per Month	N	N	N	Y**			
B9006	RB		Parenteral Infus Pump Statio		M			N	N	Y	Y**			
B9006	RR		Parenteral Infus Pump Statio		$10.44		30 per Month	N	N	N	Y**			
B9998			Enteral Supp Not Otherwise C		M			Y	N	Y	Y			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
B9999			Parenteral Supp Not Othrws C		M			N	N	Y	Y			
E0100			Cane Adjust/Fixed With Tip		$15.81		2 per 2 Years	Y	N	N	N			
E0100	RR		Cane Adjust/Fixed With Tip		$1.58		10 Months=Purchase	Y	N	N	N			
E0105			Cane Adjust/Fixed Quad/3 Pro		$35.77		2 per 2 Years	Y	N	N	N			
E0105	RB		Cane Adjust/Fixed Quad/3 Pro		M			Y	N	Y	N			
E0105	RR		Cane Adjust/Fixed Quad/3 Pro		$3.77		10 Months=Purchase	Y	N	N	N			
E0110			Crutch Forearm Pair		$58.25		1 per 2 Years	Y	N	N	N			
E0110	RB		Crutch Forearm Pair		M			Y	N	Y	N			
E0110	RR		Crutch Forearm Pair		$5.84		10 Months=Purchase	Y	N	N	N			
E0111			Crutch Forearm Each		$35.29		1 per 2 Years	Y	N	N	N			
E0111	RB		Crutch Forearm Each		M			Y	N	Y	N			
E0111	RR		Crutch Forearm Each		$3.54		10 Months=Purchase	Y	N	N	N			
E0112			Crutch Underarm Pair Wood		$20.83		1 per 2 Years	Y	N	N	N			
E0112	RR		Crutch Underarm Pair Wood		$2.09		10 Months=Purchase	Y	N	N	N			
E0113			Crutch Underarm Each Wood		$14.00		1 per 2 Years	Y	N	N	N			
E0113	RR		Crutch Underarm Each Wood		$1.41		10 Months=Purchase	Y	N	N	N			
E0114			Crutch Underarm Pair No Wood		$32.01		1 per 2 Years	Y	N	N	N			
E0114	RR		Crutch Underarm Pair No Wood		$3.20		10 Months=Purchase	Y	N	N	N			
E0116			Crutch Underarm Each No Wood		$18.38		1 per 2 Years	Y	N	N	N			
E0116	RR		Crutch Underarm Each No Wood		$1.84		10 Months=Purchase	Y	N	N	N			
E0130			Walker Rigid Adjust/Fixed Ht		$52.73		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0130	RB		Walker Rigid Adjust/Fixed Ht		M			Y	N	Y	N			
E0130	RR		Walker Rigid Adjust/Fixed Ht		$5.27		10 Months=Purchase	Y	N	N	N			
E0130	U4		Walker Rigid Adjust/Fixed Ht		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0135			Walker Folding Adjust/Fixed		$64.97		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0135	RB		Walker Folding Adjust/Fixed		M			Y	N	Y	N			
E0135	RR		Walker Folding Adjust/Fixed		$6.51		10 Months=Purchase	Y	N	N	N			
E0135	U4		Walker Folding Adjust/Fixed		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0140			Walker W Trunk Support		$282.62	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0140	RR		Walker W Trunk Support		$28.26	0-20		Y	N	N	N			
E0140	U4		Walker W Trunk Support		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0141			Rigid Wheeled Walker Adj/Fix		$96.97		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0141	RB		Rigid Wheeled Walker Adj/Fix		M			Y	N	Y	N			
E0141	RR		Rigid Wheeled Walker Adj/Fix		$9.71		10 Months=Purchase	Y	N	N	N			
E0141	U4		Rigid Wheeled Walker Adj/Fix		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0143			Walker Folding Wheeled W/O S		$88.50		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0143	RB		Walker Folding Wheeled W/O S		M			Y	N	Y	N			
E0143	RR		Walker Folding Wheeled W/O S		$8.85		10 Months=Purchase	Y	N	N	N			
E0143	U4		Walker Folding Wheeled W/O S		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0144			Enclosed Walker W Rear Seat		$281.25		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0144	RB		Enclosed Walker W Rear Seat		M			Y	N	Y	N			
E0144	RR		Enclosed Walker W Rear Seat		$28.12		10 Months=Purchase	Y	N	N	N			
E0144	U4		Enclosed Walker W Rear Seat		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0147			Walker Variable Wheel Resist		$380.76		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0147	RB		Walker Variable Wheel Resist		M			Y	N	Y	N			
E0147	RR		Walker Variable Wheel Resist		$38.07			Y	N	N	N			
E0147	U4		Walker Variable Wheel Resist		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0148			Heavyduty Walker No Wheels		$69.80		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0148	RR		Heavyduty Walker No Wheels		$6.98		10 Months=Purchase	Y	N	N	N			
E0148	U4		Heavyduty Walker No Wheels		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0149			Heavy Duty Wheeled Walker		$197.13		< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	N	N			
E0149	RR		Heavy Duty Wheeled Walker		$19.71		10 Months=Purchase	Y	N	N	N			
E0149	U4		Heavy Duty Wheeled Walker		M	0-20	< 21 1 per 2 Years 21 & > 1 per 5 Years	Y	N	Y	N	0-20		
E0153			Forearm Crutch Platform Atta		$52.09		2 per Year	Y	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0153	RR		Forearm Crutch Platform Atta		$5.20		10 Months=Purchase	Y	N	N	N			
E0153	U4		Forearm Crutch Platform Atta		M	0-20	2 per Year	Y	N	Y	N	0-20		
E0154			Walker Platform Attachment		$52.93		2 per 2 Years	Y	N	N	N			
E0154	RR		Walker Platform Attachment		$5.29		10 Months=Purchase	Y	N	N	N			
E0154	U4		Walker Platform Attachment		M	0-20	2 per 2 Years	Y	N	Y	N	0-20		
E0155			Walker Wheel Attachment,Pair		$22.60		1 per Year	Y	N	N	N			
E0155	RR		Walker Wheel Attachment,Pair		$2.21		10 Months=Purchase	Y	N	N	N			
E0155	U4		Walker Wheel Attachment,Pair		M	0-20	1 per Year	Y	N	Y	N	0-20		
E0156			Walker Seat Attachment		$17.51		1 per Year	Y	N	N	N			
E0156	RR		Walker Seat Attachment		$1.75		10 Months=Purchase	Y	N	N	N			
E0156	U4		Walker Seat Attachment		M	0-20	1 per Year	Y	N	Y	N	0-20		
E0157			Walker Crutch Attachment		$63.09		2 per Year	Y	N	N	N			
E0157	RR		Walker Crutch Attachment		$6.31		10 Months=Purchase	Y	N	N	N			
E0157	U4		Walker Crutch Attachment		M	0-20	2 per Year	Y	N	Y	N	0-20		
E0158			Walker Leg Extenders Set Of4		$22.60		1 per Year	Y	N	N	N			
E0158	RR		Walker Leg Extenders Set Of4		$2.26		10 Months=Purchase	Y	N	N	N			
E0158	U4		Walker Leg Extenders Set Of4		M	0-20	1 per Year	Y	N	Y	N	0-20		
E0159			Brake For Wheeled Walker, **(RO)**		$15.78			Y	N	Y	N			
E0159	U4		Brake For Wheeled Walker, **(RO)**		M	0-20		Y	N	Y	N	0-20		
E0163			Commode Chair With Fixed Arm		$97.40		1 per 2 Years	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0163	RB		Commode Chair With Fixed Arm		M			Y	N	Y	N			
E0163	RR		Commode Chair With Fixed Arm		$9.75		10 Months=Purchase	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1 806.00-806.39	
E0163	U4		Commode Chair With Fixed Arm		M	0-20	1 per 2 Years	Y	N	Y	N	0-20		
E0165			Commode Chair With Detacharm		$164.10		1 per 2 Years	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0165	RB		Commode Chair With Detacharm		M			Y	N	Y	N			
E0165	RR		Commode Chair With Detacharm		$16.42		10 Months=Purchase	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0167			Commode Chair Pail Or Pan **(RO)**		$10.60		1 per Year	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0167	U4		Commode Chair Pail Or Pan		M	0-20	1 per Year	Y	N	Y	N	0-20	335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0168			Heavyduty/Wide Commode Chair		$109.35		1 per 2 Years	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0168	RR		Heavyduty/Wide Commode Chair		$10.93		10 Months=Purchase	Y	N	Y	N		335.20, 340, 343.0-343.9, 359.0-359.1, 806.00-806.39	

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E0171			Commode Chair Non-Electric		$212.86			Y	N	Y	N			
E0171	RB		Commode Chair Non-Electric		M			Y	N	Y	N			
E0171	RR		Commode Chair Non-Electric		$21.28			Y	N	Y	N			
E0175			Commode Chair Foot Rest		$54.62			Y	N	Y	N			
E0175	RR		Commode Chair Foot Rest		$5.46		10 Months=Purchase	Y	N	Y	N			
E0175	U4		Commode Chair Foot Rest		M	0-20		Y	N	Y	N	0-20		
E0181			Press Pad Alternating W/ Pum		$191.82		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 333.71-333.99, 335.10-335.29, 340-344.1, 348.1, 348.30-348.5, 359.0-359.3, 707.02-707.05, 741.00-742.2, 780.01-780.03, 806.00-806.39	
E0181	RB		Press Pad Alternating W/ Pum		M			Y	N	Y	N			
E0181	RR		Press Pad Alternating W/ Pum		$19.19		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 333.71-333.99, 335.10-335.29, 340-344.1, 348.1, 348.30-348.5, 359.0-359.3, 707.02-707.05, 741.00-742.2, 780.01-780.03, 806.00-806.39	
E0182			Replace Pump, Alt Press Pad **(RO)**		$163.76			Y	N	Y	N			
E0182	RR		Replace Pump, Alt Press Pad **(RO)**		$16.38			Y	N	Y	N			
E0184			Dry Pressure Mattress		$146.16		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0184	RR		Dry Pressure Mattress		$14.61		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0185			Gel Pressure Mattress Pad		$240.12		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0185	RR		Gel Pressure Mattress Pad		$24.02		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0186			Air Pressure Mattress		$179.28		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0186	RB		Air Pressure Mattress		M			Y	N	Y	N			
E0186	RR		Air Pressure Mattress		$17.93		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0187			Water Pressure Mattress		$87.27		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0187	RB		Water Pressure Mattress		M			Y	N	Y	N			
E0187	RR		Water Pressure Mattress		$8.72		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	

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E0188			Synthetic Sheepskin Pad		$9.41		1 per Year	Y	N	N	N			
E0188	RR		Synthetic Sheepskin Pad		$0.94		10 Months=Purchase	Y	N	N	N			
E0189			Lambswool Sheepskin Pad		$39.00			Y	N	Y	N			
E0189	RR		Lambswool Sheepskin Pad		$3.90		10 Months=Purchase	Y	N	Y	N			
E0190			Positioning Cushion		$97.96			Y	N	Y	N			
E0191			Protector Heel Or Elbow		$6.61		4 per Year	Y	N	N	N			
E0191	RR		Protector Heel Or Elbow		$0.66		10 Months=Purchase	Y	N	N	N			
E0193	MS		Powered Air Flotation Bed		$496.00		1 per 6 Months	N	N	Y	N			
E0193	RR		Powered Air Flotation Bed		$27.55			N	N	Y	N			
E0194	MS		Air Fluidized Bed		$826.68		1 per 6 Months	N	N	Y	N			
E0194	RR		Air Fluidized Bed		$55.10			N	N	Y	N			
E0196			Gel Pressure Mattress		$224.18			Y	N	Y	N			
E0196	RB		Gel Pressure Mattress		M			Y	N	Y	N			
E0196	RR		Gel Pressure Mattress		$22.42			Y	N	Y	N			
E0197			Air Pressure Pad For Mattres		$189.05		1 per 5 Years	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0197	RB		Air Pressure Pad For Mattres		M			Y	N	Y	N			
E0197	RR		Air Pressure Pad For Mattres		$18.91		10 Months=Purchase	Y	N	Y	N		237.70-237.79, 330.0-330.9, 332.0-332.1, 333.4, 334.8-334.9, 340-344.1, 344.60-344.61, 348.1, 348.30-348.31, 348.4, 359.0-359.24, 359.3, 707.01-707.07, 741.00-742.3, 780.01-780.03, 806.00-806.39	
E0198			Water Pressure Pad For Mattr		$141.79		1 per 2 Years	Y	N	Y	N			
E0198	RB		Water Pressure Pad For Mattr		M			Y	N	Y	N			
E0198	RR		Water Pressure Pad For Mattr		$14.17			Y	N	Y	N			
E0199			Dry Pressure Pad For Mattres		$21.24			Y	N	Y	N			
E0199	RR		Dry Pressure Pad For Mattres		$2.13		10 Months=Purchase	Y	N	Y	N			
E0200			Heat Lamp Without Stand		$49.58	0-1		Y	N	Y	N	0-1		
E0200	RR		Heat Lamp Without Stand		$4.95	0-1		Y	N	Y	N	0-1		
E0202	RR		Phototherapy Light W/ Photom		$55.31	0-30 days	7 per Lifetime	Y	N	Y	N	0-30 days	773.0-773.2, 774.1-774.39, 774.6-774.7	
E0205			Heat Lamp With Stand		$125.22	0-1		Y	N	Y	N	0-1		
E0205	RR		Heat Lamp With Stand		$12.53	0-1		Y	N	Y	N	0-1		

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0235			Paraffin Bath Unit Portable		$120.33		1 per 5 Years	Y	N	Y	N		714.0-714.4, 714.9	
E0235	RR		Paraffin Bath Unit Portable		$12.04		10 Months=Purchase	Y	N	Y	N		714.0-714.4, 714.9	
E0236	RB		Pump For Water Circulating P		M			Y	N	Y	N			
E0236	RR		Pump For Water Circulating P		$25.95		10 Months=Purchase	Y	N	Y	N			
E0240			Bath/Shower Chair		M			Y	N	Y	N			Effective 10/01/2011
E0241			Bath Tub Wall Rail		M	0-20		Y	N	Y	N	0-20		
E0243			Toilet Rail		M	0-20		Y	N	Y	N	0-20		
E0244			Toilet Seat Raised		M	0-20		Y	N	Y	N	0-20		
E0245			Tub Stool Or Bench		M	0-20		Y	N	Y	N	0-20		
E0246			Transfer Tub Rail Attachment		$48.01			Y	N	Y	N			
E0247			Trans Bench W/Wo Comm Open		M	0-20		Y	N	Y	N	0-20		
E0248			Hdtrans Bench W/Wo Comm Open		M	0-20		Y	N	Y	N	0-20		
E0249			Pad Water Circulating Heat U **(RO)**		$59.70	0-20	1 per 2 Years	Y	N	Y	N	0-20		
E0250			Hosp Bed Fixed Ht W/ Mattres		$863.42		1 per 8 Years	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0250	RB		Hosp Bed Fixed Ht W/ Mattres		M			Y	N	Y	N			
E0250	RR		Hosp Bed Fixed Ht W/ Mattres		$86.35		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0251			Hosp Bed Fixd Ht W/O Mattres		$603.55			Y	N	Y	N			
E0251	RB		Hosp Bed Fixd Ht W/O Mattres		M			Y	N	Y	N			
E0251	RR		Hosp Bed Fixd Ht W/O Mattres		$60.36			Y	N	Y	N			
E0255			Hospital Bed Var Ht W/ Mattr		$979.23		1 per 5 Years	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0255	RB		Hospital Bed Var Ht W/ Mattr		M			Y	N	Y	N			
E0255	RR		Hospital Bed Var Ht W/ Mattr		$97.92		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0256			Hospital Bed Var Ht W/O Matt		$736.14			Y	N	Y	N			
E0256	RB		Hospital Bed Var Ht W/O Matt		M			Y	N	Y	N			
E0256	RR		Hospital Bed Var Ht W/O Matt		$73.61		10 Months=Purchase	Y	N	Y	N			
E0260			Hosp Bed Semi-Electr W/ Matt		$1,240.54		1 per 5 Years	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0260	RB		Hosp Bed Semi-Electr W/ Matt		M			Y	N	Y	N			
E0260	RR		Hosp Bed Semi-Electr W/ Matt		$124.06		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0261			Hosp Bed Semi-Electr W/O Mat		$1,111.55			Y	N	Y	N			
E0261	RB		Hosp Bed Semi-Electr W/O Mat		M			Y	N	Y	N			
E0261	RR		Hosp Bed Semi-Electr W/O Mat		$110.24			Y	N	Y	N			
E0265			Hosp Bed Total Electr W/ Mat		$1,600.68			Y	N	Y	N			
E0265	RB		Hosp Bed Total Electr W/ Mat		M			Y	N	Y	N			
E0265	RR		Hosp Bed Total Electr W/ Mat		$160.07			Y	N	Y	N			
E0266			Hosp Bed Total Elec W/O Matt		$1,412.37			Y	N	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0266	RB		Hosp Bed Total Elec W/O Matt		M			Y	N	Y	N			
E0266	RR		Hosp Bed Total Elec W/O Matt		$141.23			Y	N	Y	N			
E0271			Mattress Innerspring		$167.60		1 per 2 Years	Y	N	N	N			
E0271	RR		Mattress Innerspring		$16.76		10 Months=Purchase	Y	N	N	N			
E0272			Mattress Foam Rubber		$132.95		1 per 2 Years	Y	N	N	N			
E0272	RR		Mattress Foam Rubber		$13.29		10 Months=Purchase	Y	N	N	N			
E0274			Over-Bed Table		$141.12	0-20	10 Months=Purchase	Y	N	N	N			
E0274	RR		Over-Bed Table		$14.12	0-20	10 Months=Purchase	Y	N	N	N			
E0275			Bed Pan Standard		$8.62		1 per Year	Y	N	N	N			
E0275	RR		Bed Pan Standard		$0.86		10 Months=Purchase	Y	N	N	N			
E0276			Bed Pan Fracture		$11.75		1 per Year	Y	N	N	N			
E0276	RR		Bed Pan Fracture		$1.18		10 Months=Purchase	Y	N	N	N			
E0277			Powered Pres-Redu Air Mattrs		M		1 per 2 Years	Y	N	Y	N			
E0277	RB		Powered Pres-Redu Air Mattrs		M			Y	N	Y	N			
E0277	RR		Powered Pres-Redu Air Mattrs		M			Y	N	Y	N			
E0290			Hosp Bed Fx Ht W/O Rails W/M		$468.90			Y	N	Y	N			
E0290	RB		Hosp Bed Fx Ht W/O Rails W/M		M			Y	N	Y	N			
E0290	RR		Hosp Bed Fx Ht W/O Rails W/M		$46.89			Y	N	Y	N			
E0291			Hosp Bed Fx Ht W/O Rail W/O		$356.86			Y	N	Y	N			
E0291	RB		Hosp Bed Fx Ht W/O Rail W/O		M			Y	N	Y	N			
E0291	RR		Hosp Bed Fx Ht W/O Rail W/O		$35.69			Y	N	Y	N			
E0292			Hosp Bed Var Ht W/O Rail W/O		$742.24			Y	N	Y	N			
E0292	RB		Hosp Bed Var Ht W/O Rail W/O		M			Y	N	Y	N			
E0292	RR		Hosp Bed Var Ht W/O Rail W/O		$74.22			Y	N	Y	N			
E0293			Hosp Bed Var Ht W/O Rail W/		$625.22			Y	N	Y	N			
E0293	RB		Hosp Bed Var Ht W/O Rail W/		M			Y	N	Y	N			
E0293	RR		Hosp Bed Var Ht W/O Rail W/		$62.52			Y	N	Y	N			
E0294			Hosp Bed Semi-Elect W/ Mattr		$1,153.90			Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 805.00-805.3	
E0294	RB		Hosp Bed Semi-Elect W/ Mattr		M			Y	N	Y	N			
E0294	RR		Hosp Bed Semi-Elect W/ Mattr		$115.38			Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 805.00-805.3	
E0295			Hosp Bed Semi-Elect W/O Matt		$1,072.45			Y	N	Y	N			
E0295	RB		Hosp Bed Semi-Elect W/O Matt		M			Y	N	Y	N			
E0295	RR		Hosp Bed Semi-Elect W/O Matt		$107.24			Y	N	Y	N			
E0296			Hosp Bed Total Elect W/ Matt		$1,450.22			Y	N	Y	N			
E0296	RB		Hosp Bed Total Elect W/ Matt		M			Y	N	Y	N			
E0296	RR		Hosp Bed Total Elect W/ Matt		$145.01			Y	N	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0297			Hosp Bed Total Elect W/O Mat		$1,172.88			Y	N	Y	N			
E0297	RB		Hosp Bed Total Elect W/O Mat		M			Y	N	Y	N			
E0297	RR		Hosp Bed Total Elect W/O Mat		$117.29			Y	N	Y	N			
E0301			HD Hosp Bed, 350-600 Lbs		$1,857.48			N	N	Y	N			
E0301	RR		HD Hosp Bed, 350-600 Lbs		$185.75			N	N	Y	N			
E0302			Ex Hd Hosp Bed > 600 Lbs		$2,923.60			N	N	Y	N			
E0302	RR		Ex Hd Hosp Bed > 600 Lbs		$292.36			N	N	Y	N			
E0303			Hosp Bed Hvy Dty Xtra Wide		$2,025.08			N	N	Y	N			
E0303	RR		Hosp Bed Hvy Dty Xtra Wide		$202.51			N	N	Y	N			
E0304			Hosp Bed Xtra Hvy Dty X Wide		$3,091.20			N	N	Y	N			
E0304	RR		Hosp Bed Xtra Hvy Dty X Wide		$309.12			N	N	Y	N			
E0305			Rails Bed Side Half Length		$135.48			Y	N	Y	N			
E0305	RB		Rails Bed Side Half Length		M			Y	N	Y	N			
E0305	RR		Rails Bed Side Half Length		$13.55			Y	N	Y	N			
E0310			Rails Bed Side Full Length		$134.64			Y	N	Y	N			
E0310	RB		Rails Bed Side Full Length		M			Y	N	Y	N			
E0310	RR		Rails Bed Side Full Length		$13.46			Y	N	Y	N			
E0316			Bed Safety Enclosure		$1,728.42			N	N	Y	N			
E0316	RR		Bed Safety Enclosure		$172.84		10 Months=Purchase	N	N	Y	N			
E0325			Urinal Male Jug-Type		$7.59		2 per Year	Y	N	N	N			
E0325	RR		Urinal Male Jug-Type		$0.77		10 Months=Purchase	Y	N	N	N			
E0326			Urinal Female Jug-Type		$7.89		2 per Year	Y	N	N	N			
E0326	RR		Urinal Female Jug-Type		$0.80		10 Months=Purchase	Y	N	N	N			
E0328			Ped Hospital Bed, Manual		M	0-20		Y	N	Y	N	0-20		
E0328	RR		Ped Hospital Bed, Manual		M	0-20	10 Months=Purchase	Y	N	Y	N	0-20		
E0329			Ped Hospital Bed Semi/Elect		M	0-20		Y	N	Y	N	0-20		
E0329	RR		Ped Hospital Bed Semi/Elect		M	0-20	10 Months=Purchase	Y	N	Y	N	0-20		
E0371	RB		Nonpower Mattress Overlay		M			Y	N	Y	N			
E0371	RR		Nonpower Mattress Overlay		$281.57			Y	N	Y	N			
E0372	RB		Powered Air Mattress Overlay		M			Y	N	Y	N			
E0372	RR		Powered Air Mattress Overlay		$341.66			Y	N	Y	N			
E0373	RB		Nonpowered Pressure Mattress		M			Y	N	Y	N			
E0373	RR		Nonpowered Pressure Mattress		$391.36			Y	N	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0424	RR		Stationary Compressed Gas 02		$176.99		1 per Month	N	N	Y	N		011.00-011.96, 114.0-114.9, 162.0-165.9, 197.0-197.3, 277.00-277.09, 289.0, 289.6, 327.21, 327.23-327.27, 358.00-359.9, 416.0-416.9, 428.0-428.9, 491.0-492.8, 494.0-494.1, 496, 500-505, 506.4, 508.1, 515, 516.0-516.9, 518.1-518.3, 519.19, 746.9, 748.3, 770.7-770.84, 780.53, 780.57	
E0431	RR		Portable Gaseous 02		$28.33		1 per Month	N	N	Y	N		011.00-011.96, 114.0-114.9, 162.0-165.9, 197.0-197.3, 277.00-277.09, 289.0, 289.6, 327.21, 327.23-327.27, 358.00-359.9, 416.0-416.9, 428.0-428.9, 491.0-492.8, 494.0-494.1, 496, 500-505, 506.4, 508.1, 515, 516.0-516.9, 518.1-518.3, 519.19, 746.9, 748.3, 770.7-770.84, 780.53, 780.57	
E0434	RR		Portable Liquid 02		$28.33			Y	N	Y	N			
E0439	RR		Stationary Liquid 02		M			N	N	Y	N			
E0441			Stationary O2 Contents, Gas		$57.00		1 per Month	N	N	Y	N		011.00-011.96, 114.0-114.9, 162.0-165.9, 197.0-197.3, 277.00-277.09, 289.0, 289.6, 327.21, 327.23-327.27, 358.00-359.9, 416.0-416.9, 428.0-428.9, 491.0-492.8, 494.0-494.1, 496, 500-505, 506.4, 508.1, 515, 516.0-516.9, 518.1-518.3, 519.19, 746.9, 748.3, 770.7-770.84, 780.53, 780.57	
E0442			Stationary O2 Contents, Liq		$57.00		1 per Month	N	N	Y	N			
E0443			Portable 02 Contents, Gas		$18.91		1 per Month	N	N	Y	N		011.00-011.96, 114.0-114.9, 162.0-165.9, 197.0-197.3, 277.00-277.09, 289.0, 289.6, 327.21, 327.23-327.27, 358.00-359.9, 416.0-416.9, 428.0-428.9, 491.0-492.8, 494.0-494.1, 496, 500-505, 506.4, 508.1, 515, 516.0-516.9, 518.1-518.3, 519.19, 746.9, 748.3, 770.7-770.84, 780.53, 780.57	
E0444			Portable 02 Contents, Liquid		$1.20			N	N	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0445	RR		Oximeter Non-Invasive		$338.01		10 Months=Purchase	Y	N	Y	N		V44.0, V55.0 (UNDER 21)	
E0450	RR		Vol Control Vent Invasiv Int		$843.04		1 per Month	Y	N	Y	N			
E0455			Oxygen Tent Excl Croup/Ped T		$25.72		1 per 3 Months	Y	N	N	N			
E0457			Chest Shell		M			Y	N	Y	N			
E0457	RR		Chest Shell		M			Y	N	Y	N			
E0460	RR		Neg Press Vent Portabl/Statn		$381.80			Y	N	Y	N			
E0461	RR		Vol Control Vent Noninv Int		$708.01		1 per Month	Y	N	Y	N			
E0462	RR		Rocking Bed W/ Or W/O Side R		$218.76			Y	N	Y	N			
E0463	RR		Press Supp Vent Invasive Int		$843.04			Y	N	Y	N			
E0464	RR		Press Supp Vent Noninv Int		M			Y	N	Y	N			
E0470	RR		RAD W/O Backup Non-Inv Intfc		$183.61		10 Months=Purchase	N	N	Y	N			
E0471	RR		RAD W/Backup Non Inv Intrfc		$416.35		10 Months=Purchase	N	N	Y	N			
E0480			Percussor Elect/Pneum Home M		$329.88		1 per 2 Years	Y	N	Y	N		277.00-277.09	
E0480	RB		Percussor Elect/Pneum Home M		M			Y	N	Y	N			
E0480	RR		Percussor Elect/Pneum Home M		$33.00		10 Months=Purchase	Y	N	Y	N		277.00-277.09	
E0482			Cough Stimulating Device		$3,783.40			Y	N	Y	N			
E0482	RB		Cough Stimulating Device		M			Y	N	Y	N			
E0482	RR		Cough Stimulating Device		$378.34		10 Months=Purchase	Y	N	Y	N			
E0483	RR		Chest Compression Gen System		$938.96		10 Months=Purchase	N	N	Y	N			
E0484			Non-Elec Oscillatory Pep Dvc		$23.40		1 per Year	Y	N	Y	N		277.00-277.09	
E0484	RR		Non-Elec Oscillatory Pep Dvc		$2.34		10 Months=Purchase	Y	N	Y	N		277.00-277.09	
E0500			Ippb All Types		$660.04			Y	N	Y	N			
E0500	RB		Ippb All Types		M			Y	N	Y	N			
E0500	RR		Ippb All Types		$66.00			Y	N	Y	N			
E0550			Humidif Extens Supple W Ippb		$345.92	0-20		Y	N	Y	N	0-20		
E0550	RB		Humidif Extens Supple W Ippb		M	0-20		Y	N	Y	N	0-20		
E0550	RR		Humidif Extens Supple W Ippb		$34.60	0-20		Y	N	Y	N	0-20		
E0560			Humidifier Supplemental W/ I		$138.69	0-20		Y	N	Y	N	0-20		
E0560	RB		Humidifier Supplemental W/ I		M	0-20		Y	N	Y	N	0-20		
E0560	RR		Humidifier Supplemental W/ I		$13.88	0-20		Y	N	Y	N	0-20		
E0561			Humidifier Nonheated W PAP		$90.27			Y	N	Y	N		327.21, 327.23, 327.25-327.26, 519.00-519.09, 519.19, 748.3, 780.51, 780.53, 780.57	
E0561	RR		Humidifier Nonheated W PAP		$9.03		10 Months=Purchase	Y	N	Y	N		327.21, 327.23, 327.25-327.26, 519.00-519.09, 519.19, 748.3, 780.51, 780.53, 780.57	
E0562			Humidifier Heated Used W PAP		$143.06			Y	N	Y	N			

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E0562	RR		Humidifier Heated Used W PAP		$14.31		10 Months=Purchase	Y	N	Y	N			
E0565			Compressor Air Power Source		$376.62			Y	N	Y	N		V44.0, V55.0	
E0565	RB		Compressor Air Power Source		M			Y	N	Y	N			
E0565	RR		Compressor Air Power Source		$37.65		10 Months=Purchase	Y	N	Y	N		V44.0, V55.0	
E0570			Nebulizer With Compression		$142.20		1 per 5 Years	Y	N	N	N			
E0570	RB		Nebulizer With Compression		M			Y	N	Y	N			
E0570	RR		Nebulizer With Compression		$14.22		10 Months=Purchase	Y	N	N	N			
E0574	RR		Ultrasonic Generator W Svneb		$27.55			Y	N	Y	N			
E0575			Nebulizer Ultrasonic		$903.33			Y	N	Y	N			
E0575	RB		Nebulizer Ultrasonic		M			Y	N	Y	N			
E0575	RR		Nebulizer Ultrasonic		$90.33			Y	N	Y	N			
E0585			Nebulizer W/ Compressor & He		$263.28		1 per 5 Years	Y	N	N	N			
E0585	RB		Nebulizer W/ Compressor & He		M			Y	N	Y	N			
E0585	RR		Nebulizer W/ Compressor & He		$26.33		10 Months=Purchase	Y	N	N	N			
E0600			Suction Pump Portab Hom Modl		$299.44		1 per 5 Years	Y	N	N	N			
E0600	RB		Suction Pump Portab Hom Modl		M			Y	N	Y	N			
E0600	RR		Suction Pump Portab Hom Modl		$29.94		10 Months=Purchase	Y	N	N	N			
E0601	RR		Cont Airway Pressure Device		$76.09		10 Months=Purchase	Y	N	Y	N		327.21, 327.23, 327.25-327.26, 519.00-519.09, 519.19, 748.3, 780.51, 780.53, 780.57	
E0604	KH		Hosp Grade Elec Breast Pump		$61.82		1 per Year	N	N	N	N			
E0604	RR		Hosp Grade Elec Breast Pump		$32.14		2 per Year	N	N	N	N			
E0605			Vaporizer Room Type		$17.51		1 per 2 Years	Y	N	N	N			
E0605	RR		Vaporizer Room Type		$1.74		10 Months=Purchase	Y	N	N	N			
E0606			Drainage Board Postural		$28.47		1 per 2 Years	Y	N	Y	N		277.00-277.09	
E0606	RR		Drainage Board Postural		$2.86		10 Months=Purchase	Y	N	Y	N		277.00-277.09	
E0607			Blood Glucose Monitor Home		$59.01		1 per 3 Years	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	End-date RB modifier effective 12/31/2011.
E0619	RR		Apnea Monitor W Recorder		$225.97		3 per Lifetime	N	N	Y	N		033.0-033.9, 079.6, 486, 516.61-516.69, 770.7, 770.81-770.84, 786.03, 799.82, V17.41	
E0621			Patient Lift Sling Or Seat		$54.20		1 per 2 Years	Y	N	N	N			
E0621	RB		Patient Lift Sling Or Seat		M			Y	N	Y	N			
E0621	RR		Patient Lift Sling Or Seat		$5.41		10 Months=Purchase	Y	N	N	N			
E0625	U4		Patient Lift Bathroom Or Toi		M	0-20	1 per 5 Years	Y	N	Y	N	0-20		
E0630			Patient Lift Hydraulic		$824.83		1 per 10 Years	Y	N	N	N			

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E0630	RB		Patient Lift Hydraulic		M			Y	N	Y	N			
E0630	RR		Patient Lift Hydraulic		$82.48		10 Months=Purchase	Y	N	N	N			
E0635			Patient Lift Electric		M			Y	N	Y	N			
E0635	RB		Patient Lift Electric		M			Y	N	Y	N			
E0635	RR		Patient Lift Electric		M		10 Months=Purchase	Y	N	Y	N			
E0636			PT Support & Positioning Sys		$727.64			Y	N	Y	N			
E0636	RB		PT Support & Positioning Sys		M			Y	N	Y	N			
E0636	RR		PT Support & Positioning Sys		$72.77		10 Months=Purchase	Y	N	Y	N			
E0637			Combination Sit To Stand Sys		M	0-20		N	N	Y	N	0-20		
E0638			Standing Frame Sys		$3,951.86	0-20		N	N	Y	N	0-20		
E0638	RB		Standing Frame Sys		M	0-20		N	N	Y	N	0-20		
E0638	RR		Standing Frame Sys		$395.19	0-20	10 Months=Purchase	N	N	Y	N	0-20		
E0639			Moveable Patient Lift System		M			Y	N	Y	N			
E0639	RB		Moveable Patient Lift System		M			Y	N	Y	N			
E0639	RR		Moveable Patient Lift System		M			Y	N	Y	N			
E0641			Multi-Position Stnd Fram Sys		M	0-20		Y	N	Y	N	0-20		
E0641	RB		Multi-Position Stnd Fram Sys		M	0-20		Y	N	Y	N	0-20		
E0641	RR		Multi-Position Stnd Fram Sys		M	0-20		Y	N	Y	N	0-20		
E0642			Dynamic Standing Frame		$3,951.86	0-20		Y	N	Y	N	0-20		
E0642	RB		Dynamic Standing Frame		M	0-20		Y	N	Y	N	0-20		
E0642	RR		Dynamic Standing Frame		M	0-20		Y	N	Y	N	0-20		
E0650			Pneuma Compresor Non-Segment		$540.68		1 per 2 Years	Y	N	Y	N			
E0650	RB		Pneuma Compresor Non-Segment		M			Y	N	Y	N			
E0650	RR		Pneuma Compresor Non-Segment		$54.07		10 Months=Purchase	Y	N	Y	N			
E0651			Pneum Compressor Segmental		$608.37		1 per 2 Years	Y	N	Y	N			
E0651	RB		Pneum Compressor Segmental		M			Y	N	Y	N			
E0651	RR		Pneum Compressor Segmental		$60.83			Y	N	Y	N			
E0652			Pneum Compres W/Cal Pressure		$3,850.47		1 per 2 Years	Y	N	Y	N			
E0652	RB		Pneum Compres W/Cal Pressure		M			Y	N	Y	N			
E0652	RR		Pneum Compres W/Cal Pressure		$384.47			Y	N	Y	N			
E0655			Pneumatic Appliance Half Arm		$75.32			Y	N	Y	N			
E0655	RR		Pneumatic Appliance Half Arm		$7.53			Y	N	Y	N			
E0656			Segmental Pneumatic Trunk		M			Y	N	Y	N			
E0656	RR		Segmental Pneumatic Trunk		M			Y	N	Y	N			
E0657			Segmental Pneumatic Chest		M			Y	N	Y	N			
E0657	RR		Segmental Pneumatic Chest		M			Y	N	Y	N			
E0660			Pneumatic Appliance Full Leg		$122.77			Y	N	Y	N			
E0660	RR		Pneumatic Appliance Full Leg		$12.27			Y	N	Y	N			
E0665			Pneumatic Appliance Full Arm		$110.69			Y	N	Y	N			
E0665	RR		Pneumatic Appliance Full Arm		$11.08			Y	N	Y	N			

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E0666			Pneumatic Appliance Half Leg		$100.62			Y	N	Y	N			
E0666	RR		Pneumatic Appliance Half Leg		$10.05			Y	N	Y	N			
E0667			Seg Pneumatic Appl Full Leg		$285.96			Y	N	Y	N			
E0667	RR		Seg Pneumatic Appl Full Leg		$28.60			Y	N	Y	N			
E0668			Seg Pneumatic Appl Full Arm		$331.74			Y	N	Y	N			
E0668	RR		Seg Pneumatic Appl Full Arm		$33.17			Y	N	Y	N			
E0669			Seg Pneumatic Appli Half Leg		$159.87			Y	N	Y	N			
E0669	RR		Seg Pneumatic Appli Half Leg		$15.98			Y	N	Y	N			
E0670			Seg Pneuma Int Legs/Trunk		M			Y	N	Y	N			
E0670	RR		Seg Pneuma Int Legs/Trunk		M		10 Months=Purchase	Y	N	Y	N			
E0671			Pressure Pneum Appl Full Leg		$286.63			Y	N	Y	N			
E0671	RR		Pressure Pneum Appl Full Leg		$28.66			Y	N	Y	N			
E0672			Pressure Pneum Appl Full Arm		$222.74			Y	N	Y	N			
E0672	RR		Pressure Pneum Appl Full Arm		$22.27			Y	N	Y	N			
E0673			Pressure Pneum Appl Half Leg		$185.05			Y	N	Y	N			
E0673	RR		Pressure Pneum Appl Half Leg		$18.51			Y	N	Y	N			
E0700			Safety Equipment		$63.09		1 per Year	Y	N	N	N			
E0700	RB		Safety Equipment		M			Y	N	Y	N			
E0705			Transfer Device		$41.05		1 per 2 Years	Y*	N	N	N			*Refer to policy
E0705	RB		Transfer Device		M			Y*	N	Y	N			*Refer to policy
E0705	RR		Transfer Device		$4.10		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0710			Restraints Any Type		$11.02		1 per Year	Y	N	N	N			
E0720			Tens Two Lead		$306.41			N	N	Y	N			
E0720	RB		Tens Two Lead		M			N	N	Y	N			
E0720	RR		Tens Two Lead		$30.64			N	N	Y	N			
E0730			Tens Four Lead		$327.28			N	N	Y	N			
E0730	RB		Tens Four Lead		M			N	N	Y	N			
E0730	RR		Tens Four Lead		$32.74			N	N	Y	N			
E0731			Conductive Garment For Tens/		$209.19	21-124		N	N	Y	N	21-124		
E0747			Elec Osteogen Stim Not Spine		$2,462.33			Y	N	Y	N			
E0748			Elec Osteogen Stim Spinal		$2,614.01			Y	N	Y	N			
E0776			Iv Pole		$94.84			Y	N	Y	N			
E0776	RB		Iv Pole		M			Y	N	Y	N			
E0776	RR		Iv Pole		$9.49			Y	N	N	N			
E0784			Ext Amb Infusn Pump Insulin		$3,687.97		1 per 5 Years	Y	N	Y	N		249.00-250.93, 648.00-648.04, 648.80-648.84	
E0784	RB		Ext Amb Infusn Pump Insulin		M			Y	N	Y	N			
E0840			Tract Frame Attach Headboard		$41.27		1 per Lifetime	Y	N	N	N			
E0840	RR		Tract Frame Attach Headboard		$4.12		10 Months=Purchase	Y	N	N	N			
E0850			Traction Stand Free Standing		$59.16		1 per Lifetime	Y	N	N	N			
E0850	RR		Traction Stand Free Standing		$5.91		10 Months=Purchase	Y	N	N	N			

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E0860			Tract Equip Cervical Tract		$28.24		1 per Lifetime	Y	N	N	N			
E0860	RR		Tract Equip Cervical Tract		$2.82		10 Months=Purchase	Y	N	N	N			
E0870			Tract Frame Attach Footboard		$77.04		1 per Lifetime	Y	N	N	N			
E0870	RR		Tract Frame Attach Footboard		$7.70		10 Months=Purchase	Y	N	N	N			
E0880			Trac Stand Free Stand Extrem		$83.15		1 per Lifetime	Y	N	N	N			
E0880	RR		Trac Stand Free Stand Extrem		$8.32		10 Months=Purchase	Y	N	N	N			
E0890			Traction Frame Attach Pelvic		$67.79		1 per Lifetime	Y	N	N	N			
E0890	RR		Traction Frame Attach Pelvic		$6.78		10 Months=Purchase	Y	N	N	N			
E0900			Trac Stand Free Stand Pelvic		$74.39		1 per Lifetime	Y	N	N	N			
E0900	RR		Trac Stand Free Stand Pelvic		$7.43		10 Months=Purchase	Y	N	N	N			
E0910			Trapeze Bar Attached To Bed		$139.35		1 per Lifetime	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0910	RB		Trapeze Bar Attached To Bed		M			Y	N	Y	N			
E0910	RR		Trapeze Bar Attached To Bed		$13.93		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0911			HD Trapeze Bar Attach To Bed		$315.56		1 per Lifetime	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0911	RB		HD Trapeze Bar Attach To Bed		M			Y	N	Y	N			
E0911	RR		HD Trapeze Bar Attach To Bed		$31.56		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0912			HD Trapeze Bar Free Standing		$315.56		1 per Lifetime	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0912	RB		HD Trapeze Bar Free Standing		M			Y	N	Y	N			
E0912	RR		HD Trapeze Bar Free Standing		$31.56		10 Months=Purchase	Y	N	Y	N		340, 343.0-343.9, 359.0-359.1, 806.00-806.39	
E0920			Fracture Frame Attached To B		$346.39			Y	N	Y	N			
E0920	RR		Fracture Frame Attached To B		$34.63			Y	N	Y	N			
E0930			Fracture Frame Free Standing		$109.22			Y	N	Y	N			
E0930	RR		Fracture Frame Free Standing		$10.92			Y	N	Y	N			
E0935	RR		Cont Pas Motion Exercise Dev		$20.91		Up to 21 Days of Rental	N	N	Y	N			
E0936	RR		CPM Device, Other Than Knee		$20.91		Up to 21 Days of Rental	N	N	Y	N			
E0940			Trapeze Bar Free Standing		$277.76			Y	N	Y	N			
E0940	RB		Trapeze Bar Free Standing		M			Y	N	Y	N			
E0940	RR		Trapeze Bar Free Standing		$27.77			Y	N	Y	N			
E0942			Cervical Head Harness/Halter		$13.15		1 per Medical Event	Y	N	N	N			
E0942	RR		Cervical Head Harness/Halter		$1.31		10 Months=Purchase	Y	N	N	N			

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E0944			Pelvic Belt/Harness/Boot		$32.95		1 per Medical Event	Y	N	N	N			
E0944	RR		Pelvic Belt/Harness/Boot		$3.30		10 Months=Purchase	Y	N	N	N			
E0945			Belt/Harness Extremity		$32.95		2 per 2 Years	Y	N	N	N			
E0945	RR		Belt/Harness Extremity		$3.30		10 Months=Purchase	Y	N	N	N			
E0946			Fracture Frame Dual W Cross		$203.39			Y	N	Y	N			
E0946	RR		Fracture Frame Dual W Cross		$20.34			Y	N	Y	N			
E0947			Fracture Frame Attachmnts Pe		$368.87			Y	N	Y	N			
E0947	RR		Fracture Frame Attachmnts Pe		$36.90			Y	N	Y	N			
E0948			Fracture Frame Attachmnts Ce		$343.90			Y	N	Y	N			
E0948	RR		Fracture Frame Attachmnts Ce		$34.38		10 Months=Purchase	Y	N	Y	N			
E0950			Tray		$91.81			Y*	N	Y	N			*Refer to policy
E0950	RB		Tray		M			Y*	N	Y	N			*Refer to policy
E0950	RR		Tray		$9.19			Y*	N	Y	N			*Refer to policy
E0950	U4		Tray		M	0-20		Y*	N	Y	N	0-20		*Refer to policy
E0951			Loop Heel		$14.51		1 Each Side per Year	Y*	N	N	N			*Refer to policy
E0951	RR		Loop Heel		$1.45		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0952			Toe Loop/Holder, Each		$14.02		2 per 2 Years	Y*	N	N	N			*Refer to policy
E0952	RR		Toe Loop/Holder, Each		$1.41		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0955			Cushioned Headrest		$178.57			N*	N	Y	N			*Refer to policy
E0955	RB		Cushioned Headrest		M			N*	N	Y	N			*Refer to policy
E0955	RR		Cushioned Headrest		$17.85		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0955	U4		Cushioned Headrest		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E0956			W/C Lateral Trunk/Hip Suppor		$87.06			N*	N	Y	N			*Refer to policy
E0956	RB		W/C Lateral Trunk/Hip Suppor		M			N*	N	Y	N			*Refer to policy
E0956	RR		W/C Lateral Trunk/Hip Suppor		$8.70		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0957			W/C Medial Thigh Support		$121.81			N*	N	Y	N			*Refer to policy
E0957	RB		W/C Medial Thigh Support		M			N*	N	Y	N			*Refer to policy
E0957	RR		W/C Medial Thigh Support		$12.18		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0958			Whlchr Att- Conv 1 Arm Drive		$367.67			N*	N	Y	N			*Refer to policy
E0958	RB		Whlchr Att- Conv 1 Arm Drive		M			N*	N	Y	N			*Refer to policy
E0958	RR		Whlchr Att- Conv 1 Arm Drive		$36.76		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0959			Amputee Adapter		$35.68		2 per 2 Years	N*	N	Y	N			*Refer to policy
E0959	RR		Amputee Adapter		$3.56		10 Months=Purchase	N*	N	Y	N			*Refer to policy

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E0960			W/C Shoulder Harness/Straps		$80.36			N*	N	Y	N			*Refer to policy
E0960	RR		W/C Shoulder Harness/Straps		$8.03		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0960	U4		W/C Shoulder Harness/Straps		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E0961			Wheelchair Brake Extension		$23.80		2 per 2 Years	N*	N	N	N			*Refer to policy
E0961	RR		Wheelchair Brake Extension		$2.39		10 Months=Purchase	N*	N	N	N			*Refer to policy
E0966			Wheelchair Head Rest Extensi		$63.02		4 per 2 Years	N*	N	Y	N			*Refer to policy
E0966	RR		Wheelchair Head Rest Extensi		$6.30		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0967			Manual Wc Hand Rim W Project		$58.02		1 Each per Side for 5 Years	N*	N	N	N			*Refer to policy
E0967	RR		Manual Wc Hand Rim W Project		$5.81		10 Months=Purchase	N*	N	N	N			*Refer to policy
E0968			Wheelchair Commode Seat		$157.83			Y*	N	Y	N			*Refer to policy
E0968	RR		Wheelchair Commode Seat		$15.78		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E0969			Wheelchair Narrowing Device		$137.22			Y*	N	Y	N			*Refer to policy
E0969	RR		Wheelchair Narrowing Device		$13.72		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E0971			Wheelchair Anti-Tipping Devi		$39.91		1 Each per Side for 5 Years	Y*	N	N	N			*Refer to policy
E0971	RR		Wheelchair Anti-Tipping Devi		$4.00		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0973			W/Ch Access Det Adj Armrest		$64.74		2 per 2 Years	Y*	N	Y	N			*Refer to policy
E0973	RB		W/Ch Access Det Adj Armrest		M			Y*	N	Y	N			*Refer to policy
E0973	RR		W/Ch Access Det Adj Armrest		$6.48		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E0974			W/Ch Access Anti-Rollback		$69.25		2 per 2 Years	Y*	N	Y	N			*Refer to policy
E0974	RR		W/Ch Access Anti-Rollback		$6.93		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E0978			W/C Acc,Saf Belt Pelv Strap		$32.14		1 per 5 Years	Y*	N	N	N			*Refer to policy
E0978	RR		W/C Acc,Saf Belt Pelv Strap		$3.21		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0978	U4		W/C Acc,Saf Belt Pelv Strap		M	0-20	1 per 5 Years	Y*	N	Y	N	0-20		*Refer to policy
E0980			Wheelchair Safety Vest		$25.86		1 per 2 Years	Y*	N	N	N			*Refer to policy
E0980	RR		Wheelchair Safety Vest		$2.59		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0981			Seat Upholstery, Replacement **(RO)**		$36.66		1 per 3 Years	N*	N	N	N			*Refer to policy
E0982			Back Upholstery, Replacement **(RO)**		$34.80		1 per 3 Years	N*	N	N	N			*Refer to policy
E0983			Add Pwr Joystick		$2,099.61			N*	N	Y	N			*Refer to policy
E0983	RR		Add Pwr Joystick		$209.96		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0984			Add Pwr Tiller		$1,434.31			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E0984	RR		Add Pwr Tiller		$143.42		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0986			Man W/C Push-Rim Pow Assist		$4,129.84			N*	N	Y	N			*Refer to policy
E0986	RB		Man W/C Push-Rim Pow Assist		M			N*	N	Y	N			*Refer to policy
E0986	RR		Man W/C Push-Rim Pow Assist		$412.98		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E0990			Wheelchair Elevating Leg Res		$88.17		2 per 2 Years	Y*	N	Y	N			*Refer to policy
E0990	RB		Wheelchair Elevating Leg Res		M			Y*	N	Y	N			*Refer to policy
E0990	RR		Wheelchair Elevating Leg Res		$8.82		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E0992			Wheelchair Solid Seat Insert		$71.42		1 per 5 Years	Y*	N	N	N			*Refer to policy
E0992	RR		Wheelchair Solid Seat Insert		$7.14		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E0995			Wheelchair Calf Rest		$26.63		1 per 5 Years	Y*	N	N	N			*Refer to policy
E0995	RR		Wheelchair Calf Rest		$2.66		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E1002			Pwr Seat Tilt		M			N*	N	Y	N			*Refer to policy
E1002	RR		Pwr Seat Tilt		M			N*	N	Y	N			*Refer to policy
E1003			Pwr Seat Recline		M			N*	N	Y	N			*Refer to policy
E1003	RB		Pwr Seat Recline		M			N*	N	Y	N			*Refer to policy
E1003	RR		Pwr Seat Recline		M			N*	N	Y	N			*Refer to policy
E1005			Pwr Seat Recline Pwr		M			N*	N	Y	N			*Refer to policy
E1005	RB		Pwr Seat Recline Pwr		M			N*	N	Y	N			*Refer to policy
E1006			Pwr Seat Combo W/O Shear		M			N*	N	Y	N			*Refer to policy
E1006	RB		Pwr Seat Combo W/O Shear		M			N*	N	Y	N			*Refer to policy
E1007			Pwr Seat Combo W/Shear		M			N*	N	Y	N			*Refer to policy
E1007	RB		Pwr Seat Combo W/Shear		M			N*	N	Y	N			*Refer to policy
E1008			Pwr Seat Combo Pwr Shear		M			N*	N	Y	N			*Refer to policy
E1008	RB		Pwr Seat Combo Pwr Shear		M			N*	N	Y	N			*Refer to policy
E1009			Add Mech Leg Elevation		M			N*	N	Y	N			*Refer to policy
E1009	RB		Add Mech Leg Elevation		M			N*	N	Y	N			*Refer to policy
E1010			Add Pwr Leg Elevation		$736.59			N*	N	Y	N			*Refer to policy
E1011			Ped Wc Modify Width Adjustm		$176.64	0-20	1 per 2 Years	N*	N	Y	N	0-20		*Refer to policy
E1011	RR		Ped Wc Modify Width Adjustm		$17.66	0-20	10 Months=Purchase	N*	N	Y	N	0-20		*Refer to policy
E1014			Reclining Back Add Ped W/C		$322.49	0-20		N*	N	Y	N	0-20		*Refer to policy
E1014	RR		Reclining Back Add Ped W/C		$32.26	0-20	10 Months=Purchase	N*	N	Y	N	0-20		*Refer to policy
E1015			Shock Absorber For Man W/C		$101.31			Y*	N	Y	N			*Refer to policy
E1015	RR		Shock Absorber For Man W/C		$10.12		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1016			Shock Absorber For Power W/C		$115.98			N*	N	Y	N			*Refer to policy
E1016	RR		Shock Absorber For Power W/C		$11.61		10 Months=Purchase	N*	N	Y	N			*Refer to policy

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E1017			HD Shck Absrbr For Hd Man Wc		M			N*	N	Y	N			*Refer to policy
E1017	RR		HD Shck Absrbr For Hd Man Wc		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1018			HD Shck Absrber For Hd Powwc		M			N*	N	Y	N			*Refer to policy
E1018	RR		HD Shck Absrber For Hd Powwc		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1020			Residual Limb Support System		$214.97			Y*	N	Y	N			*Refer to policy
E1020	RR		Residual Limb Support System		$21.49		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1028			W/C Manual Swingaway		$133.01			Y*	N	Y	N			*Refer to policy
E1028	RR		W/C Manual Swingaway		$13.30		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1029			W/C Vent Tray Fixed		$237.97			Y*	N	Y	N			*Refer to policy
E1029	RR		W/C Vent Tray Fixed		$23.80		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1030			W/C Vent Tray Gimbaled		$750.42			Y*	N	Y	N			*Refer to policy
E1030	RR		W/C Vent Tray Gimbaled		$75.05		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1037			Transport Chair, Ped Size		$487.22	0-20	1 per 2 Years	Y*	N	Y	N	0-20	335.0-335.9, 342.00-343.9, 358.8-359.9, 741.00-742.9	*Refer to policy
E1037	RB		Transport Chair, Ped Size		M	0-20		Y*	N	Y	N	0-20		*Refer to policy
E1037	RR		Transport Chair, Ped Size		$48.71	0-20	10 Months=Purchase	Y*	N	Y	N	0-20	335.0-335.9, 342.00-343.9, 358.8-359.9, 741.00-742.9	*Refer to policy
E1038			Transport Chair Pt Wt<=300lb		$165.88			Y*	N	Y	N			*Refer to policy
E1038	RB		Transport Chair Pt Wt<=300lb		M			Y*	N	Y	N			*Refer to policy
E1038	RR		Transport Chair Pt Wt<=300lb		$16.59		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1039			Transport Chair Pt Wt >300lb		$314.64			Y*	N	Y	N			*Refer to policy
E1039	RR		Transport Chair Pt Wt >300lb		$31.46		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1161			Manual Adult Wc W Tiltinspac		$2,083.65			Y*	N	N	N			*Refer to policy
E1161	RB		Manual Adult Wc W Tiltinspac		M			Y*	N	Y	N			*Refer to policy
E1161	RR		Manual Adult Wc W Tiltinspac		$208.36		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E1225			Manual Semi-Reclining Back		M			N*	N	Y	N			*Refer to policy Revised: Coverage added effective: 05/01/2013.
E1225	RB		Manual Semi-Reclining Back		M			N*	N	Y	N			*Refer to policy Revised: Coverage added effective: 05/01/2013.
E1225	RR		Manual Semi-Reclining Back		M			N*	N	Y	N			*Refer to policy Revised: Coverage added effective: 05/01/2013.
E1226			Manual Fully Reclining Back		$481.92		1 per 2 Years	Y*	N	Y	N			*Refer to policy

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E1226	RB		Manual Fully Reclining Back		M			Y*	N	Y	N			*Refer to policy
E1226	RR		Manual Fully Reclining Back		$48.19		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E1227			Wheelchair Spec Sz Spec Ht A		$245.08			N*	N	Y	N			*Refer to policy
E1227	RR		Wheelchair Spec Sz Spec Ht A		$24.50		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1228			Wheelchair Spec Sz Spec Ht B		$247.47			N*	N	Y	N			*Refer to policy
E1228	RR		Wheelchair Spec Sz Spec Ht B		$24.74		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1229			Pediatric Wheelchair NOS		M	0-20		N*	N	N	N			*Refer to policy
E1229	RB		Pediatric Wheelchair NOS		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1230			Power Operated Vehicle		$1,697.97			N*	N	Y	N			*Refer to policy
E1230	RR		Power Operated Vehicle		$169.80		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1231			Rigid Ped W/C Tilt-In-Space		$2,204.46	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1231	RB		Rigid Ped W/C Tilt-In-Space		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1231	RR		Rigid Ped W/C Tilt-In-Space		$220.45	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1232			Folding Ped Wc Tilt-In-Space		$1,884.93	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1232	RB		Folding Ped Wc Tilt-In-Space		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1232	RR		Folding Ped Wc Tilt-In-Space		$188.49	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1233			Rig Ped Wc Tltnspc W/O Seat		$1,956.94	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1233	RB		Rig Ped Wc Tltnspc W/O Seat		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1233	RR		Rig Ped Wc Tltnspc W/O Seat		$195.69	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1234			Fld Ped Wc Tltnspc W/O Seat		$1,703.65	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1234	RB		Fld Ped Wc Tltnspc W/O Seat		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1234	RR		Fld Ped Wc Tltnspc W/O Seat		$170.36	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1235			Rigid Ped Wc Adjustable		$1,640.47	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1235	RB		Rigid Ped Wc Adjustable		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1235	RR		Rigid Ped Wc Adjustable		$164.05	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1236			Folding Ped Wc Adjustable		$1,086.63	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1236	RB		Folding Ped Wc Adjustable		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1236	RR		Folding Ped Wc Adjustable		$108.67	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1237			Rgd Ped Wc Adjstabl W/O Seat		$1,459.97	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1237	RB		Rgd Ped Wc Adjstabl W/O Seat		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1237	RR		Rgd Ped Wc Adjstabl W/O Seat		$145.99	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1238			Fld Ped Wc Adjstabl W/O Seat		$1,086.63	0-20	1 per 2 Years	N*	N	N	N			*Refer to policy
E1238	RB		Fld Ped Wc Adjstabl W/O Seat		M	0-20		N*	N	Y	N	0-20		*Refer to policy

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E1238	RR		Fld Ped Wc Adjstabl W/O Seat		$108.67	0-20	10 Months=Purchase	N*	N	N	N			*Refer to policy
E1239			Ped Power Wheelchair NOS		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1239	RB		Ped Power Wheelchair NOS		M	0-20		N*	N	Y	N	0-20		*Refer to policy
E1296			Wheelchair Special Seat Heig		$366.14			N*	N	Y	N			*Refer to policy
E1296	RR		Wheelchair Special Seat Heig		$36.62		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1297			Wheelchair Special Seat Dept		$92.39			N*	N	Y	N			*Refer to policy
E1297	RR		Wheelchair Special Seat Dept		$9.24		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1298			Wheelchair Spec Seat Depth/W		$318.04			N*	N	Y	N			*Refer to policy
E1298	RR		Wheelchair Spec Seat Depth/W		$31.81		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E1356			Batt Pack/Cart, Port Conc **(RO)**		M		1 per Year	N	N	Y	N			
E1357			Battery Charger, Port Conc **(RO)**		M		1 per 3 Years	N	N	Y	N			
E1390	RR		Oxygen Concentrator		$147.51		1 per Month	N	N	Y	N		011.00-011.96, 114.0-114.9, 162.0-165.9, 197.0-197.3, 277.00-277.09, 289.0, 289.6, 327.21, 327.23-327.27, 358.00-359.9, 416.0-416.9, 428.0-428.9, 491.0-492.8, 494.0-494.1, 496, 500-505, 506.4, 508.1, 515, 516.0-516.9, 518.1-518.3, 519.19, 746.9, 748.3, 770.7-770.84, 780.53, 780.57	
E1391	RR		Oxygen Concentrator, Dual		$147.51			N	N	Y	N			
E1399			Durable Medical Equipment Mi		M			N	N	Y	N			
E1399	RB		Durable Medical Equipment Mi		M			N	N	Y	N			
E1399	RR		Durable Medical Equipment Mi		M			N	N	Y	N			
E1405	RR		O2/Water Vapor Enrich W/Heat		$203.33		1 per Month	N	N	N	N			
E1406	RR		O2/Water Vapor Enrich W/O He		$157.88		1 per Month	N	N	N	N			
E1639			Dialysis Scale		M	0-20		N	N	Y	N	0-20		
E1902			AAC Non-Electronic Board		$26.50			N	N	Y	N			
E1902	RB		AAC Non-Electronic Board		M			N	N	Y	N			
E2000	RR		Gastric Suction Pump Hme Mdl		$34.19			Y	N	Y	N			
E2100			Bld Glucose Monitor W Voice		$377.23			Y	N	Y	N			
E2100	RR		Bld Glucose Monitor W Voice		$37.72			Y	N	Y	N			
E2201			Man W/Ch Acc Seat W>=20"<24"		$257.45			Y	N	Y	N			
E2201	RR		Man W/Ch Acc Seat W>=20"<24"		$25.74			Y	N	Y	N			
E2202			Seat Width 24-27 In		$327.05			Y	N	Y	N			
E2202	RR		Seat Width 24-27 In		$32.71			Y	N	Y	N			
E2203			Frame Depth Less Than 22 In		$330.55			Y	N	Y	N			
E2203	RR		Frame Depth Less Than 22 In		$33.05			Y	N	Y	N			
E2204			Frame Depth 22 To 25 In		$561.25			Y	N	Y	N			

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E2204	RR		Frame Depth 22 To 25 In		$56.13			Y	N	Y	N			
E2205			Manual Wc Accessory, Handrim **(RO)**		$28.86		2 per 2 Years	Y	N	N	N			
E2206			Complete Wheel Lock Assembly		$35.64		2 per 2 Years	Y	N	N	N			
E2206	RR		Complete Wheel Lock Assembly		$3.56		10 Months=Purchase	Y	N	N	N			
E2207			Crutch And Cane Holder		$37.98		2 per 2 Years	Y	N	N	N			
E2207	RR		Crutch And Cane Holder		$3.80		10 Months=Purchase	Y	N	N	N			
E2208			Cylinder Tank Carrier		$104.07		1 per 2 Years	Y	N	Y	N			
E2208	RR		Cylinder Tank Carrier		$10.41		10 Months=Purchase	Y	N	Y	N			
E2209			Arm Trough Each		$93.89		2 per 2 Years	Y	N	Y	N			
E2209	RR		Arm Trough Each		$9.38		10 Months=Purchase	Y	N	Y	N			
E2210			Wheelchair Bearings **(RO)**		$6.03		4 per Year	Y	N	N	N			
E2211			Pneumatic Propulsion Tire		$30.12		2 per 2 Years	Y*	N	Y	N			*Refer to policy
E2211	RR		Pneumatic Propulsion Tire		$3.01		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2212			Pneumatic Prop Tire Tube		$5.16		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2212	RR		Pneumatic Prop Tire Tube		$0.52		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2213			Pneumatic Prop Tire Insert		$26.85		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2213	RR		Pneumatic Prop Tire Insert		$2.68		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2214			Pneumatic Caster Tire Each		$31.54		1 per 2 Years	Y*	N	Y	N			*Refer to policy
E2214	RR		Pneumatic Caster Tire Each		$3.15		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2215			Pneumatic Caster Tire Tube		$8.41		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2215	RR		Pneumatic Caster Tire Tube		$0.84		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2216			Foam Filled Propulsion Tire		$51.52		1 per 2 Years	Y*	N	Y	N			*Refer to policy
E2216	RR		Foam Filled Propulsion Tire		$5.16		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2217			Foam Filled Caster Tire Each		$38.64		1 per 2 Years	Y*	N	Y	N			*Refer to policy
E2217	RR		Foam Filled Caster Tire Each		$3.86		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2219			Foam Caster Tire Any Size Ea		$38.51		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2219	RR		Foam Caster Tire Any Size Ea		$3.85		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2220			Solid Propulsion Tire Each		$21.24		1 per 2 Years	Y*	N	N	N			*Refer to policy

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E2220	RR		Solid Propulsion Tire Each		$2.13		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2221			Solid Caster Tire Each		$22.39		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2221	RR		Solid Caster Tire Each		$2.23		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2222			Solid Caster Integrated Whl		$15.36		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2222	RR		Solid Caster Integrated Whl		$1.53		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2224			Propulsion Whl Excludes Tire		$76.69		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2224	RR		Propulsion Whl Excludes Tire		$7.68		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2225			Caster Wheel Excludes Tire **(RO)**		$16.00		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2226			Caster Fork Replacement Only **(RO)**		$34.90		1 per Side per 2 Years	Y*	N	N	N			*Refer to policy
E2230			Manual Standing System		M			Y*	N	Y	N			*Refer to policy
E2231			Solid Seat Support Base		$118.76		< 21 2 per Year 21 & > 1 per 5 Years	Y	N	Y	N			
E2291			Planar Back For Ped Size Wc		M	0-20		N	N	Y	N	0-20		
E2292			Planar Seat For Ped Size Wc		M	0-20		N	N	Y	N	0-20		
E2293			Contour Back For Ped Size Wc		M	0-20		N	N	Y	N	0-20		
E2294			Contour Seat For Ped Size Wc		M	0-20		N	N	Y	N	0-20		
E2295			Ped Dynamic Seating Frame		M		< 21 1 per 2 Years 21 & > 1 per 5 Years	N	N	Y	N			Revised: Limits
E2300			Pwr Seat Elevation Sys		M			N*	N	Y	N			*Refer to policy
E2300	RB		Pwr Seat Elevation Sys		M			N*	N	Y	N			*Refer to policy
E2301			Pwr Standing		M			N*	N	Y	N			*Refer to policy
E2301	RB		Pwr Standing		M			N*	N	Y	N			*Refer to policy
E2310			Electro Connect Btw Control		$753.62		1 per 2 Years	N*	N	Y	N			*Refer to policy
E2310	RB		Electro Connect Btw Control		M		1 per 2 Years	N*	N	Y	N			*Refer to policy
E2310	RR		Electro Connect Btw Control		$75.36		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2311			Electro Connect Btw 2 Sys		$1,525.76		1 per 2 Years	N*	N	Y	N			*Refer to policy
E2311	RB		Electro Connect Btw 2 Sys		M		1 per 2 Years	N*	N	Y	N			*Refer to policy
E2311	RR		Electro Connect Btw 2 Sys		$152.58		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2312			Mini-prop remote joystick		M			N*	N	Y	N			*Refer to policy
E2312	RB		Mini-prop remote joystick		M			N*	N	Y	N			*Refer to policy
E2313			PWC Harness, Expand Control		M			N*	N	Y	N			*Refer to policy
E2321			Hand Interface Joystick		$1,096.49			N*	N	Y	N			*Refer to policy
E2321	RB		Hand Interface Joystick		M			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E2321	RR		Hand Interface Joystick		$109.64		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2323			Special joystick handle		$54.68			N*	N	Y	N			*Refer to policy
E2324			Chin cup interface		M			N*	N	Y	N			*Refer to policy
E2325			Sip And Puff Interface		$929.31			N*	N	Y	N			*Refer to policy
E2325	RB		Sip And Puff Interface		M			N*	N	Y	N			*Refer to policy
E2325	RR		Sip And Puff Interface		$92.93		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2326			Breath tube kit for sipand puff interface		$274.44			N*	N	Y	N			*Refer to policy
E2327			Head Control Interface Mech		$1,802.55			N*	N	Y	N			*Refer to policy
E2327	RB		Head Control Interface Mech		M			N*	N	Y	N			*Refer to policy
E2327	RR		Head Control Interface Mech		$180.25		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2328			Head/Extremity Control Inter		$2,499.17			N*	N	Y	N			*Refer to policy
E2328	RB		Head/Extremity Control Inter		M			N*	N	Y	N			*Refer to policy
E2328	RR		Head/Extremity Control Inter		$249.91		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2329			Head Control Nonproportional		$1,218.64			N*	N	Y	N			*Refer to policy
E2329	RB		Head Control Nonproportional		M			N*	N	Y	N			*Refer to policy
E2329	RR		Head Control Nonproportional		$121.86		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2330			Head Control Proximity Switc		$2,361.25			N*	N	Y	N			*Refer to policy
E2330	RB		Head Control Proximity Switc		M			N*	N	Y	N			*Refer to policy
E2330	RR		Head Control Proximity Switc		$236.12		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2331			Attendant Control		M			N*	N	Y	N			*Refer to policy
E2340			W/C Wdth 20-23 In Seat Frame		$247.27			N*	N	Y	N			*Refer to policy
E2340	RR		W/C Wdth 20-23 In Seat Frame		$24.72		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2341			W/C Wdth 24-27 In Seat Frame		$370.93			N*	N	Y	N			*Refer to policy
E2341	RR		W/C Wdth 24-27 In Seat Frame		$37.10		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2342			W/C Dpth 20-21 In Seat Frame		$309.11			N*	N	Y	N			*Refer to policy
E2342	RR		W/C Dpth 20-21 In Seat Frame		$30.92		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2343			W/C Dpth 22-25 In Seat Frame		$494.59			N*	N	Y	N			*Refer to policy
E2343	RR		W/C Dpth 22-25 In Seat Frame		$49.46		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2351			Electronic SGD Interface		$482.05			N*	N	Y	N			*Refer to policy
E2351	RR		Electronic SGD Interface		$48.20		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2358			Gr 34 Nonsealed Leadacid		M		2 per Year	N*	N	Y	N			*Refer to policy
E2358	RR		Gr 34 Nonsealed Leadacid		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E2359			GR34 Sealed Leadacid Battery		$140.28			N*	N	Y	N			*Refer to policy
E2359	RR		GR34 Sealed Leadacid Battery		$14.03		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2360			22nf Nonsealed Leadacid		$83.66		1 Each per 2 Years	N*	N	N	N			*Refer to policy
E2360	RR		22nf Nonsealed Leadacid		$8.38		10 Months=Purchase	N*	N	N	N			*Refer to policy
E2361			22nf Sealed Leadacid Battery		$122.20			N*	N	Y	N			*Refer to policy
E2361	RR		22nf Sealed Leadacid Battery		$12.22		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2362			Gr24 Nonsealed Leadacid		$80.59		1 Each per 2 Years	N*	N	N	N			*Refer to policy
E2362	RR		Gr24 Nonsealed Leadacid		$8.02		10 Months=Purchase	N*	N	N	N			*Refer to policy
E2363			Gr24 Sealed Leadacid Battery		$162.96			N*	N	Y	N			*Refer to policy
E2363	RR		Gr24 Sealed Leadacid Battery		$16.29		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2364			U1nonsealed Leadacid Battery		$83.66		1 Each per 2 Years	N*	N	N	N			*Refer to policy
E2364	RR		U1nonsealed Leadacid Battery		$8.37		10 Months=Purchase	N*	N	N	N			*Refer to policy
E2365			U1 Sealed Leadacid Battery		$98.28			N*	N	Y	N			*Refer to policy
E2365	RR		U1 Sealed Leadacid Battery		$9.82		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2366			Battery Charger, Single Mode		$148.44		1 per 5 Years	N*	N	N	N			*Refer to policy
E2366	RR		Battery Charger, Single Mode		$14.83		10 Months=Purchase	N*	N	N	N			*Refer to policy
E2367			Battery Charger, Dual Mode		$277.60			N*	N	Y	N			*Refer to policy
E2367	RR		Battery Charger, Dual Mode		$27.75		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2368			Power Wc Motor Replacement **(RO)**		$332.67			N*	N	Y	N			*Refer to policy
E2369			Pwr Wc Gear Box Replacement **(RO)**		$289.75			N*	N	Y	N			*Refer to policy
E2370			Pwr Wc Motor/Gear Box Combo **(RO)**		$517.02			N*	N	Y	N			*Refer to policy
E2371			Gr27 Sealed Leadacid Battery		$138.68		1 per Year	N*	N	Y	N			*Refer to policy
E2371	RR		Gr27 Sealed Leadacid Battery		$13.87		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2372			Gr27 Non-Sealed Leadacid		$89.79		1 per Year	N*	N	Y	N			*Refer to policy
E2372	RR		Gr27 Non-Sealed Leadacid		$8.98		10 Months=Purchase	N*	N	Y	N			*Refer to policy
E2373			Hand/Chin Ctrl Spec Joystick		$560.10			N*	N	Y	N			*Refer to policy
E2373	RB		Hand/Chin Ctrl Spec Joystick		M			N*	N	Y	N			*Refer to policy
E2374			Hand/Chin Ctrl Std Joystick **(RO)**		$343.91			N*	N	Y	N			*Refer to policy
E2375			Non-Expandable Controller **(RO)**		$551.63			N*	N	Y	N			*Refer to policy
E2376			Expandable Controller, Repl **(RO)**		$864.42			N*	N	Y	N			*Refer to policy
E2377			Expandable Controller, Initl		$312.79			N*	N	Y	N			*Refer to policy
E2378			PW Actuator Replacement **(RO)**		M			N*	N	Y	N			*Refer to policy
E2381			Pneum Drive Wheel Tire **(RO)**		$66.75		2 per 2 Years	N*	N	N	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E2382			Tube, Pneum Wheel Drive Tire **(RO)**		$15.29		2 per 2 Years	N*	N	N	N			*Refer to policy
E2383			Insert, Pneum Wheel Drive **(RO)**		$111.36		2 per 2 Years	N*	N	N	N			*Refer to policy
E2384			Pneumatic Caster Tire **(RO)**		$43.36		4 per 2 Years	N*	N	N	N			*Refer to policy
E2385			Tube, Pneumatic Caster Tire **(RO)**		$43.36		4 per 2 Years	N*	N	N	N			*Refer to policy
E2386			Foam Filled Drive Wheel Tire **(RO)**		$66.75		2 per 2 Years	N*	N	N	N			*Refer to policy
E2387			Foam Filled Caster Tire **(RO)**		$43.36		4 per 2 Years	N*	N	N	N			*Refer to policy
E2388			Foam Drive Wheel Tire **(RO)**		$32.45		2 per 2 Years	N*	N	Y	N			*Refer to policy
E2389			Foam Caster Tire **(RO)**		$17.61		4 per 2 Years	N*	N	Y	N			*Refer to policy
E2390			Solid Drive Wheel Tire **(RO)**		$27.55		2 per 2 Years	N*	N	N	N			*Refer to policy
E2391			Solid Caster Tire **(RO)**		$15.08		4 per 2 Years	N*	N	N	N			*Refer to policy
E2392			Solid Caster Tire, Integrate **(RO)**		$34.69		4 per 2 Years	N*	N	Y	N			*Refer to policy
E2394			Drive Wheel Excludes Tire **(RO)**		$49.42		2 per 2 Years	N*	N	Y	N			*Refer to policy
E2395			Caster Wheel Excludes Tire **(RO)**		$35.12		4 per 2 Years	N*	N	Y	N			*Refer to policy
E2396			Caster Fork **(RO)**		$41.60		4 per 2 Years	N*	N	N	N			*Refer to policy
E2402	RR		Neg Press Wound Therapy Pump		$37.89			N	N	Y	Y			
E2500			SGD Digitized Pre-Rec <=8min		$330.40			N	N	Y	N			
E2500	RB		SGD Digitized Pre-Rec <=8min		M			N	N	Y	N			
E2500	RR		SGD Digitized Pre-Rec <=8min		$33.03		10 Months=Purchase	N	N	Y	N			
E2502			SGD Prerec Msg >8min <=20min		$792.10			N	N	Y	N			
E2502	RB		SGD Prerec Msg >8min <=20min		M			N	N	Y	N			
E2502	RR		SGD Prerec Msg >8min <=20min		$79.22		10 Months=Purchase	N	N	Y	N			
E2504			SGD Prerec Msg>20min <=40min		$1,277.15			N	N	Y	N			
E2504	RB		SGD Prerec Msg>20min <=40min		M			N	N	Y	N			
E2504	RR		SGD Prerec Msg>20min <=40min		$127.89		10 Months=Purchase	N	N	Y	N			
E2506			SGD Prerec Msg > 40 Min		$1,701.64			N	N	Y	N			
E2506	RB		SGD Prerec Msg > 40 Min		M			N	N	Y	N			
E2506	RR		SGD Prerec Msg > 40 Min		$170.16		10 Months=Purchase	N	N	Y	N			
E2508			SGD Spelling Phys Contact		$3,022.06			N	N	Y	N			
E2508	RB		SGD Spelling Phys Contact		M			N	N	Y	N			
E2508	RR		SGD Spelling Phys Contact		$302.21		10 Months=Purchase	N	N	Y	N			
E2510			SGD W Multi Methods Msg/Accs		$5,718.83			N	N	Y	N			
E2510	RB		SGD W Multi Methods Msg/Accs		M			N	N	Y	N			
E2510	RR		SGD W Multi Methods Msg/Accs		$571.89		10 Months=Purchase	N	N	Y	N			
E2511			SGD Sftwre Prgrm For PC/PDA		M			N	N	Y	N			
E2511	RR		SGD Sftwre Prgrm For PC/PDA		M		10 Months=Purchase	N	N	Y	N			
E2512			SGD Accessory, Mounting Sys		M			N	N	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E2512	RR		SGD Accessory, Mounting Sys		M		10 Months=Purchase	N	N	Y	N			
E2599			SGD Accessory Noc		M			N	N	Y	N			
E2599	RR		SGD Accessory Noc		M		10 Months=Purchase	N	N	Y	N			
E2601			Gen W/C Cushion Wdth < 22 In		$51.79		1 per 2 Years	Y*	N	N	N			*Refer to policy
E2601	RR		Gen W/C Cushion Wdth < 22 In		$5.17		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2602			Gen W/C Cushion Wdth >=22 In		$87.86		1 per 2 Years	Y*	N	N	N			*Refer to policy
E2602	RR		Gen W/C Cushion Wdth >=22 In		$8.79		10 Months=Purchase	Y*	N	N	N			*Refer to policy
E2603			Skin Protect Wc Cus Wd <22in		$139.47			Y*	N	Y	N			*Refer to policy
E2603	RR		Skin Protect Wc Cus Wd <22in		$13.95		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2604			Skin Protect Wc Cus Wd>=22in		$121.32			Y*	N	Y	N			*Refer to policy
E2604	RR		Skin Protect Wc Cus Wd>=22in		$12.13		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2605			Position Wc Cush Wdth <22 In		$173.33			Y*	N	Y	N			*Refer to policy
E2605	RR		Position Wc Cush Wdth <22 In		$17.34		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2606			Position Wc Cush Wdth>=22 In		$270.43			Y*	N	Y	N			*Refer to policy
E2606	RR		Position Wc Cush Wdth>=22 In		$27.04		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2607			Skin Pro/Pos Wc Cus Wd <22in		$261.08			Y*	N	Y	N			*Refer to policy
E2607	RR		Skin Pro/Pos Wc Cus Wd <22in		$26.10		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2608			Skin Pro/Pos Wc Cus Wd>=22in		$224.16			Y*	N	Y	N			*Refer to policy
E2608	RR		Skin Pro/Pos Wc Cus Wd>=22in		$22.42		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2609			Custom Fabricate W/C Cushion		M			N*	N	Y	N			*Refer to policy
E2611			Gen Use Back Cush Wdth <22in		$220.68			Y*	N	Y	N			*Refer to policy
E2611	RR		Gen Use Back Cush Wdth <22in		$22.07		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2612			Gen Use Back Cush Wdth>=22in		$272.11			Y*	N	Y	N			*Refer to policy
E2612	RR		Gen Use Back Cush Wdth>=22in		$27.22		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2613			Position Back Cush Wd <22in		$347.14			Y*	N	Y	N			*Refer to policy
E2613	RR		Position Back Cush Wd <22in		$34.71		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2614			Position Back Cush Wd>=22in		$350.29			Y*	N	Y	N			*Refer to policy
E2614	RR		Position Back Cush Wd>=22in		$35.04		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2615			Pos Back Post/Lat Wdth <22in		$291.29			Y*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
E2615	RR		Pos Back Post/Lat Wdth <22in		$29.12		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2616			Pos Back Post/Lat Wdth>=22in		$391.92			Y*	N	Y	N			*Refer to policy
E2616	RR		Pos Back Post/Lat Wdth>=22in		$39.20		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2617			Custom Fab W/C Back Cushion		M			N*	N	Y	N			*Refer to policy
E2619			Replace Cover W/C Seat Cush **(RO)**		$44.96		2 per 2 Years	Y*	N	N	N			*Refer to policy
E2620			WC Planar Back Cush Wd <22in		$352.71			Y*	N	Y	N			*Refer to policy
E2620	RR		WC Planar Back Cush Wd <22in		$35.28		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2621			WC Planar Back Cush Wd>=22in		$370.15			Y*	N	Y	N			*Refer to policy
E2621	RR		WC Planar Back Cush Wd>=22in		$37.01		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2622			Adj Skin Pro W/C Cus Wd<22in		M			Y*	N	Y	N			*Refer to policy
E2622	RB		Adj Skin Pro W/C Cus Wd<22in		M			Y*	N	Y	N			*Refer to policy
E2622	RR		Adj Skin Pro W/C Cus Wd<22in		M		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2623			Adj Skin Pro Wc Cus Wd>=22in		M			Y*	N	Y	N			*Refer to policy
E2623	RB		Adj Skin Pro Wc Cus Wd>=22in		M			Y*	N	Y	N			*Refer to policy
E2623	RR		Adj Skin Pro Wc Cus Wd>=22in		M		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2624			Adj Skin Pro/Pos Cus<22in		M			Y*	N	Y	N			*Refer to policy
E2624	RB		Adj Skin Pro/Pos Cus<22in		M			Y*	N	Y	N			*Refer to policy
E2624	RR		Adj Skin Pro/Pos Cus<22in		M		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2625			Adj Skin Pro/Pos Wc Cus>=22		M			Y*	N	Y	N			*Refer to policy
E2625	RB		Adj Skin Pro/Pos Wc Cus>=24		M			Y*	N	Y	N			*Refer to policy
E2625	RR		Adj Skin Pro/Pos Wc Cus>=25		M		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
E2626		LT-RT	Seo Mobile Arm Sup Att To Wc		$500.37	0-20	1 per Year	Y	N	Y	N	0-20		
E2626	RR		Seo Mobile Arm Sup Att To Wc		$50.03	0-20	10 Months=Purchase	Y	N	Y	N	0-20		
E8000			Posterior Gait Trainer		M	0-20		N	N	Y	N	0-20		
E8000	RR		Posterior Gait Trainer		M	0-20	10 Months=Purchase	N	N	Y	N	0-20		
E8001			Upright Gait Trainer		M	0-20		N	N	Y	N	0-20		
E8001	RR		Upright Gait Trainer		M	0-20	10 Months=Purchase	N	N	Y	N	0-20		
E8002			Anterior Gait Trainer		M	0-20		N	N	Y	N	0-20		
E8002	RR		Anterior Gait Trainer		M	0-20	10 Months=Purchase	N	N	Y	N	0-20		
K0001			Standard Wheelchair		$470.47			Y*	N	N	N			*Refer to policy
K0001	RB		Standard Wheelchair		M			Y*	N	Y	N			*Refer to policy
K0001	RR		Standard Wheelchair		$47.10			Y*	N	N	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0002			Stnd Hemi (Low Seat) Whlchr		$476.02			Y*	N	N	N			*Refer to policy
K0002	RB		Stnd Hemi (Low Seat) Whlchr		M			Y*	N	Y	N			*Refer to policy
K0002	RR		Stnd Hemi (Low Seat) Whlchr		$47.60		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0003			Lightweight Wheelchair		$684.92			Y*	N	N	N			*Refer to policy
K0003	RB		Lightweight Wheelchair		M			Y*	N	Y	N			*Refer to policy
K0003	RR		Lightweight Wheelchair		$68.49		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0004			High Strength Ltwt Whlchr		$1,001.09			Y*	N	N	N			*Refer to policy
K0004	RB		High Strength Ltwt Whlchr		M			Y*	N	Y	N			*Refer to policy
K0004	RR		High Strength Ltwt Whlchr		$100.12		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0005			Ultralightweight Wheelchair		$1,632.83			Y*	N	N	N			*Refer to policy
K0005	RB		Ultralightweight Wheelchair		M			Y*	N	Y	N			*Refer to policy
K0005	RR		Ultralightweight Wheelchair		$163.27		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0006			Heavy Duty Wheelchair		$670.12			N*	N	N	N			*Refer to policy
K0006	RB		Heavy Duty Wheelchair		M			N*	N	Y	N			*Refer to policy
K0006	RR		Heavy Duty Wheelchair		$67.01		10 Months=Purchase	N*	N	N	N			*Refer to policy
K0007			Extra Heavy Duty Wheelchair		$724.49			N*	N	N	N			*Refer to policy
K0007	RB		Extra Heavy Duty Wheelchair		M			N*	N	Y	N			*Refer to policy
K0007	RR		Extra Heavy Duty Wheelchair		$72.45		10 Months=Purchase	N*	N	N	N			*Refer to policy
K0009			Other Manual Wheelchair/Base		M			N*	N	Y	N			*Refer to policy
K0009	RB		Other Manual Wheelchair/Base		M			N*	N	Y	N			*Refer to policy
K0009	RR		Other Manual Wheelchair/Base		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0015		LT-RT	Detach Non-Adjus Hght Armrst		$159.19		1 per 2 Years	Y*	N	N	N			*Refer to policy
K0015	RB		Detach Non-Adjus Hght Armrst		M			Y*	N	Y	N			*Refer to policy
K0015	RR		Detach Non-Adjus Hght Armrst		$15.91		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0017		LT-RT	Detach Adjust Armrest Base		$44.26		1 per 2 Years	Y*	N	N	N			*Refer to policy
K0017	RB		Detach Adjust Armrest Base		M			Y*	N	Y	N			*Refer to policy
K0017	RR		Detach Adjust Armrest Base		$4.43		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0018			Detach Adjust Armrst Upper		$25.01		1 per 2 Years	Y*	N	N	N			*Refer to policy
K0018	RB		Detach Adjust Armrst Upper		M			Y*	N	Y	N			*Refer to policy
K0018	RR		Detach Adjust Armrst Upper		$2.50		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0019			Arm Pad Each		$14.90		1 Each Side per 2 Years	Y*	N	N	N			*Refer to policy Revised: Limits clarified
K0019	RB		Arm Pad Each		M			Y*	N	Y	N		k0019	*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0019	RR		Arm Pad Each		$1.49		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0020			Fixed Adjust Armrest Pair		$40.70			Y*	N	Y	N			*Refer to policy
K0020	RB		Fixed Adjust Armrest Pair		M			Y*	N	Y	N			*Refer to policy
K0020	RR		Fixed Adjust Armrest Pair		$4.07		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
K0037		LT-RT	High Mount Flip-Up Footrest		$27.12		1 Each per 4 Years	Y*	N	N	N			*Refer to policy
K0037	RB		High Mount Flip-Up Footrest		M			Y*	N	Y	N			*Refer to policy
K0037	RR		High Mount Flip-Up Footrest		$2.71		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0038			Leg Strap Each		$21.43		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0038	RR		Leg Strap Each		$2.15		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0039			Leg Strap H Style Each		$47.21		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0039	RR		Leg Strap H Style Each		$4.72		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0040			Adjustable Angle Footplate		$49.46		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0040	RB		Adjustable Angle Footplate		M			Y*	N	Y	N			*Refer to policy
K0040	RR		Adjustable Angle Footplate		$4.94		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0041			Large Size Footplate Each		$35.06		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0041	RB		Large Size Footplate Each		M			Y*	N	Y	N			*Refer to policy
K0041	RR		Large Size Footplate Each		$3.52		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0042		LT-RT	Standard Size Footplate Each		$28.69		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0042	RB		Standard Size Footplate Each		M			Y*	N	Y	N			*Refer to policy
K0042	RR		Standard Size Footplate Each		$2.87		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0043			Ftrst Lower Extension Tube		$17.12		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0043	RB		Ftrst Lower Extension Tube		M			Y*	N	Y	N			*Refer to policy
K0043	RR		Ftrst Lower Extension Tube		$1.72		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0044			Ftrst Upper Hanger Bracket		$14.58		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0044	RB		Ftrst Upper Hanger Bracket		M			Y*	N	Y	N			*Refer to policy
K0044	RR		Ftrst Upper Hanger Bracket		$1.46		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0045			Footrest Complete Assembly		$49.59		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0045	RB		Footrest Complete Assembly		M			Y*	N	Y	N			*Refer to policy
K0045	RR		Footrest Complete Assembly		$4.95		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0046			Elevat Legrst Low Extension		$17.12		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0046	RB		Elevat Legrst Low Extension		M			Y*	N	Y	N			*Refer to policy
K0046	RR		Elevat Legrst Low Extension		$1.72		10 Months=Purchase	Y*	N	N	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0047			Elevat Legrst Up Hangr Brack		$67.02		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0047	RB		Elevat Legrst Up Hangr Brack		M			Y*	N	Y	N			*Refer to policy
K0047	RR		Elevat Legrst Up Hangr Brack		$6.70		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0050			Ratchet Assembly		$28.47		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0050	RB		Ratchet Assembly		M			Y*	N	Y	N			*Refer to policy
K0050	RR		Ratchet Assembly		$2.86		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0051			Cam Relese Assem Ftrst/Lgrst		$46.10		1 Each per 5 Years	N*	N	N	N			*Refer to policy
K0051	RB		Cam Relese Assem Ftrst/Lgrst		M			N*	N	Y	N			*Refer to policy
K0051	RR		Cam Relese Assem Ftrst/Lgrst		$4.61		10 Months=Purchase	N*	N	N	N			*Refer to policy
K0052			Swingaway Detach Footrest		$80.99		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0052	RR		Swingaway Detach Footrest		$8.10		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0053			Elevate Footrest Articulate		$90.09			Y*	N	Y	N			*Refer to policy
K0053	RR		Elevate Footrest Articulate		$9.00		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
K0056			Seat Ht <17 Or >=21 Ltwt Wc		$83.33			Y*	N	Y	N			*Refer to policy
K0056	RR		Seat Ht <17 Or >=21 Ltwt Wc		$8.33		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
K0065			Spoke Protectors		$39.26		1 per 2 Years	N*	N	Y	N			*Refer to policy
K0065	RR		Spoke Protectors		$3.93		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0069			Rear Whl Complete Solid Tire		$87.53		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0069	RB		Rear Whl Complete Solid Tire		M			Y*	N	Y	N			*Refer to policy
K0069	RR		Rear Whl Complete Solid Tire		$8.76		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0070			Rear Whl Compl Pneum Tire		$160.47		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0070	RB		Rear Whl Compl Pneum Tire		M			Y*	N	Y	N			*Refer to policy
K0070	RR		Rear Whl Compl Pneum Tire		$16.04		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0071			Front Castr Compl Pneum Tire		$95.72		1 Each per 5 Years	Y*	N	N	N			*Refer to policy
K0071	RB		Front Castr Compl Pneum Tire		M			Y*	N	Y	N			*Refer to policy
K0071	RR		Front Castr Compl Pneum Tire		$9.56		10 Months=Purchase	Y*	N	N	N			*Refer to policy
K0072			Frnt Cstr Cmpl Sem-Pneum Tir		$57.61		1 Each per 5 Years	N*	N	N	N			*Refer to policy
K0072	RB		Frnt Cstr Cmpl Sem-Pneum Tir		M			N*	N	Y	N			*Refer to policy
K0072	RR		Frnt Cstr Cmpl Sem-Pneum Tir		$5.76		10 Months=Purchase	N*	N	N	N			*Refer to policy
K0073			Caster Pin Lock Each		$30.73		1 Each per 5 Years	N*	N	N	N			*Refer to policy
K0073	RB		Caster Pin Lock Each		M			N*	N	Y	N			*Refer to policy
K0073	RR		Caster Pin Lock Each		$3.08		10 Months=Purchase	N*	N	N	N			*Refer to policy

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K0077			Front Caster Assem Complete		$46.89		1 per Side per 2 Years	N*	N	N	N			*Refer to policy
K0098			Drive Belt Power Wheelchair		$23.65		1 Each per 2 Years	N*	N	N	N			*Refer to policy
K0098	RB		Drive Belt Power Wheelchair		M			N*	N	Y	N			*Refer to policy
K0098	RR		Drive Belt Power Wheelchair		$2.37		10 Months=Purchase	N*	N	N	N			*Refer to policy
K0105			IV Hanger		$64.04		1 per 2 Years	Y*	N	Y	N			*Refer to policy
K0105	RR		IV Hanger		$6.40		10 Months=Purchase	Y*	N	Y	N			*Refer to policy
K0108			W/C Component-Accessory NOS		M			N*	N	Y	N			*Refer to policy
K0108	RB		W/C Component-Accessory NOS		M			N*	N	Y	N			*Refer to policy
K0108	RR		W/C Component-Accessory NOS		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0195	RR		Elevating Whlchair Leg Rests		$15.18		10 Months=Purchase	N	N	Y	N			
K0603			Repl Batt Alkaline 1.5 V **(RO)**		$0.40		6 per 3 Months	Y	N	N	N			
K0606	RR		AED Garment W Elec Analysis		M			N	N	Y	N			Revised: Coverage added effective: 05/01/2013.
K0607			Repl Batt For AED **(RO)**		M			N	N	Y	N			Revised: Coverage added effective: 05/01/2013.
K0608			Repl Garment For AED **(RO)**		M			N	N	Y	N			Revised: Coverage added effective: 05/01/2013.
K0609			Repl Electrode For AED **(RO)**		M			N	N	Y	N			Revised: Coverage added effective: 05/01/2013.
K0733			12-24hr Sealed Lead Acid		$20.75		2 per 6 Months	N	N	N	N			
K0739			Repair/Svc DME Non-Oxygen Eq		$9.94			N	N	Y	N			
K0800			POV Group 1 Std Up To 300lbs		$832.53			N	N	Y	N			
K0800	RB		POV Group 1 Std Up To 300lbs		M			N	N	Y	N			
K0800	RR		POV Group 1 Std Up To 300lbs		$83.25		10 Months=Purchase	N	N	Y	N			
K0801			POV Group 1 Hd 301-450 Lbs		$1,342.23			N*	N	Y	N			*Refer to policy
K0801	RB		POV Group 1 Hd 301-450 Lbs		M			N*	N	Y	N			*Refer to policy
K0801	RR		POV Group 1 Hd 301-450 Lbs		$134.22		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0802			POV Group 1 Vhd 451-600 Lbs		$1,518.98			N*	N	Y	N			*Refer to policy
K0802	RB		POV Group 1 Vhd 451-600 Lbs		M			N*	N	Y	N			*Refer to policy
K0802	RR		POV Group 1 Vhd 451-600 Lbs		$151.91		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0806			POV Group 2 Std Up To 300lbs		$1,007.15			N*	N	Y	N			*Refer to policy
K0806	RB		POV Group 2 Std Up To 300lbs		M			N*	N	Y	N			*Refer to policy
K0806	RR		POV Group 2 Std Up To 300lbs		$100.71		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0807			POV Group 2 Hd 301-450 Lbs		$1,528.23			N*	N	Y	N			*Refer to policy
K0807	RB		POV Group 2 Hd 301-450 Lbs		M			N*	N	Y	N			*Refer to policy

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K0807	RR		POV Group 2 Hd 301-450 Lbs		$152.83		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0808			POV Group 2 Vhd 451-600 Lbs		$2,364.51			N*	N	Y	N			*Refer to policy
K0808	RB		POV Group 2 Vhd 451-600 Lbs		M			N*	N	Y	N			*Refer to policy
K0808	RR		POV Group 2 Vhd 451-600 Lbs		$236.45		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0812			Power Operated Vehicle NOC		M			N*	N	Y	N			*Refer to policy
K0812	RB		Power Operated Vehicle NOC		M			N*	N	Y	N			*Refer to policy
K0812	RR		Power Operated Vehicle NOC		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0813			PWC Gp 1 Std Port Seat/Back		$1,553.58			N*	N	Y	N			*Refer to policy
K0813	RB		PWC Gp 1 Std Port Seat/Back		M			N*	N	Y	N			*Refer to policy
K0813	RR		PWC Gp 1 Std Port Seat/Back		$155.36		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0814			PWC Gp 1 Std Port Cap Chair		$1,988.54			N*	N	Y	N			*Refer to policy
K0814	RB		PWC Gp 1 Std Port Cap Chair		M			N*	N	Y	N			*Refer to policy
K0814	RR		PWC Gp 1 Std Port Cap Chair		$198.85		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0815			PWC Gp 1 Std Seat/Back		$2,264.49			N*	N	Y	N			*Refer to policy
K0815	RB		PWC Gp 1 Std Seat/Back		M			N*	N	Y	N			*Refer to policy
K0815	RR		PWC Gp 1 Std Seat/Back		$226.44		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0816			PWC Gp 1 Std Cap Chair		$2,168.60			N*	N	Y	N			*Refer to policy
K0816	RB		PWC Gp 1 Std Cap Chair		M			N*	N	Y	N			*Refer to policy
K0816	RR		PWC Gp 1 Std Cap Chair		$216.86		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0820			PWC Gp 2 Std Port Seat/Back		$1,659.33			N*	N	Y	N			*Refer to policy
K0820	RB		PWC Gp 2 Std Port Seat/Back		M			N*	N	Y	N			*Refer to policy
K0820	RR		PWC Gp 2 Std Port Seat/Back		$165.94		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0821			PWC Gp 2 Std Port Cap Chair		$2,130.15			N*	N	Y	N			*Refer to policy
K0821	RB		PWC Gp 2 Std Port Cap Chair		M			N*	N	Y	N			*Refer to policy
K0821	RR		PWC Gp 2 Std Port Cap Chair		$213.02		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0822			PWC Gp 2 Std Seat/Back		$2,574.39			N*	N	Y	N			*Refer to policy
K0822	RB		PWC Gp 2 Std Seat/Back		M			N*	N	Y	N			*Refer to policy
K0822	RR		PWC Gp 2 Std Seat/Back		$257.45		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0823			PWC Gp 2 Std Cap Chair		$2,591.27			N*	N	Y	N			*Refer to policy
K0823	RB		PWC Gp 2 Std Cap Chair		M			N*	N	Y	N			*Refer to policy
K0823	RR		PWC Gp 2 Std Cap Chair		$259.12		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0824			PWC Gp 2 Hd Seat/Back		$3,118.69			N*	N	Y	N			*Refer to policy
K0824	RB		PWC Gp 2 Hd Seat/Back		M			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0824	RR		PWC Gp 2 Hd Seat/Back		$311.87		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0825			PWC Gp 2 Hd Cap Chair		$2,854.98			N*	N	Y	N			*Refer to policy
K0825	RB		PWC Gp 2 Hd Cap Chair		M			N*	N	Y	N			*Refer to policy
K0825	RR		PWC Gp 2 Hd Cap Chair		$285.50		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0826			PWC Gp 2 Vhd Seat/Back		$4,037.43			N*	N	Y	N			*Refer to policy
K0826	RB		PWC Gp 2 Vhd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0826	RR		PWC Gp 2 Vhd Seat/Back		$403.75		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0827			PWC Gp Vhd Cap Chair		$3,433.09			N*	N	Y	N			*Refer to policy
K0827	RB		PWC Gp Vhd Cap Chair		M			N*	N	Y	N			*Refer to policy
K0827	RR		PWC Gp Vhd Cap Chair		$343.30		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0828			PWC Gp 2 Xtra Hd Seat/Back		$4,448.88			N*	N	Y	N			*Refer to policy
K0828	RB		PWC Gp 2 Xtra Hd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0828	RR		PWC Gp 2 Xtra Hd Seat/Back		$444.89		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0829			PWC Gp 2 Xtra Hd Cap Chair		$4,085.34			N*	N	Y	N			*Refer to policy
K0829	RB		PWC Gp 2 Xtra Hd Cap Chair		M			N*	N	Y	N			*Refer to policy
K0829	RR		PWC Gp 2 Xtra Hd Cap Chair		$404.86		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0830			PWC Gp2 Std Seat Elevate S/B		M			N*	N	Y	N			*Refer to policy
K0830	RB		PWC Gp2 Std Seat Elevate S/B		M			N*	N	Y	N			*Refer to policy
K0830	RR		PWC Gp2 Std Seat Elevate S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0831			PWC Gp2 Std Seat Elevate Cap		M			N*	N	Y	N			*Refer to policy
K0831	RB		PWC Gp2 Std Seat Elevate Cap		M			N*	N	Y	N			*Refer to policy
K0831	RR		PWC Gp2 Std Seat Elevate Cap		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0835			PWC Gp2 Std Sing Pow Opt S/B		$2,612.96			N*	N	Y	N			*Refer to policy
K0835	RB		PWC Gp2 Std Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0835	RR		PWC Gp2 Std Sing Pow Opt S/B		$261.30		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0836			PWC Gp2 Std Sing Pow Opt Cap		$2,709.63			N*	N	Y	N			*Refer to policy
K0836	RB		PWC Gp2 Std Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0836	RR		PWC Gp2 Std Sing Pow Opt Cap		$270.97		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0837			PWC Gp 2 Hd Sing Pow Opt S/B		$3,118.69			N*	N	Y	N			*Refer to policy
K0837	RB		PWC Gp 2 Hd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0837	RR		PWC Gp 2 Hd Sing Pow Opt S/B		$311.87		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0838			PWC Gp 2 Hd Sing Pow Opt Cap		$2,790.00			N*	N	Y	N			*Refer to policy
K0838	RB		PWC Gp 2 Hd Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0838	RR		PWC Gp 2 Hd Sing Pow Opt Cap		$279.00		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0839			PWC Gp2 Vhd Sing Pow Opt S/B		$4,037.43			N*	N	Y	N			*Refer to policy
K0839	RB		PWC Gp2 Vhd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0839	RR		PWC Gp2 Vhd Sing Pow Opt S/B		$403.75		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0840			PWC Gp2 Xhd Sing Pow Opt S/B		$6,116.91			N*	N	Y	N			*Refer to policy
K0840	RB		PWC Gp2 Xhd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0840	RR		PWC Gp2 Xhd Sing Pow Opt S/B		$611.68		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0841			PWC Gp2 Std Mult Pow Opt S/B		$2,781.18			N*	N	Y	N			*Refer to policy
K0841	RB		PWC Gp2 Std Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0841	RR		PWC Gp2 Std Mult Pow Opt S/B		$278.12		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0842			PWC Gp2 Std Mult Pow Opt Cap		$2,781.18			N*	N	Y	N			*Refer to policy
K0842	RB		PWC Gp2 Std Mult Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0842	RR		PWC Gp2 Std Mult Pow Opt Cap		$278.12		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0843			PWC Gp2 Hd Mult Pow Opt S/B		$3,348.54			N*	N	Y	N			*Refer to policy
K0843	RB		PWC Gp2 Hd Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0843	RR		PWC Gp2 Hd Mult Pow Opt S/B		$334.85		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0848			PWC Gp 3 Std Seat/Back		$3,403.16			N*	N	Y	N			*Refer to policy
K0848	RB		PWC Gp 3 Std Seat/Back		M			N*	N	Y	N			*Refer to policy
K0848	RR		PWC Gp 3 Std Seat/Back		$340.31		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0849			PWC Gp 3 Std Cap Chair		$3,721.97			N*	N	Y	N			*Refer to policy
K0849	RB		PWC Gp 3 Std Cap Chair		M			N*	N	Y	N			*Refer to policy
K0849	RR		PWC Gp 3 Std Cap Chair		$327.19		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0850			PWC Gp 3 Hd Seat/Back		$3,947.59			N*	N	Y	N			*Refer to policy
K0850	RB		PWC Gp 3 Hd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0850	RR		PWC Gp 3 Hd Seat/Back		$394.77		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0851			PWC Gp 3 Hd Cap Chair		$3,795.54			N*	N	Y	N			*Refer to policy
K0851	RB		PWC Gp 3 Hd Cap Chair		M			N*	N	Y	N			*Refer to policy
K0851	RR		PWC Gp 3 Hd Cap Chair		$379.56		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0852			PWC Gp 3 Vhd Seat/Back		$4,561.20			N*	N	Y	N			*Refer to policy
K0852	RB		PWC Gp 3 Vhd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0852	RR		PWC Gp 3 Vhd Seat/Back		$456.12		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0853			PWC Gp 3 Vhd Cap Chair		$4,685.48			N*	N	Y	N			*Refer to policy
K0853	RB		PWC Gp 3 Vhd Cap Chair		M			N*	N	Y	N			*Refer to policy

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K0853	RR		PWC Gp 3 Vhd Cap Chair		$468.55		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0854			PWC Gp 3 Xhd Seat/Back		$6,207.26			N*	N	Y	N			*Refer to policy
K0854	RB		PWC Gp 3 Xhd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0854	RR		PWC Gp 3 Xhd Seat/Back		$620.72		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0855			PWC Gp 3 Xhd Cap Chair		$5,863.69			N*	N	Y	N			*Refer to policy
K0855	RB		PWC Gp 3 Xhd Cap Chair		M			N*	N	Y	N			*Refer to policy
K0855	RR		PWC Gp 3 Xhd Cap Chair		$586.38		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0856			PWC Gp3 Std Sing Pow Opt S/B		$3,652.96			N*	N	Y	N			*Refer to policy
K0856	RB		PWC Gp3 Std Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0856	RR		PWC Gp3 Std Sing Pow Opt S/B		$365.30		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0857			PWC Gp3 Std Sing Pow Opt Cap		$3,726.18			N*	N	Y	N			*Refer to policy
K0857	RB		PWC Gp3 Std Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0857	RR		PWC Gp3 Std Sing Pow Opt Cap		$372.62		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0858			PWC Gp3 Hd Sing Pow Opt S/B		$4,532.22			N*	N	Y	N			*Refer to policy
K0858	RB		PWC Gp3 Hd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0858	RR		PWC Gp3 Hd Sing Pow Opt S/B		$453.21		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0859			PWC Gp3 Hd Sing Pow Opt Cap		$4,322.33			N*	N	Y	N			*Refer to policy
K0859	RB		PWC Gp3 Hd Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0859	RR		PWC Gp3 Hd Sing Pow Opt Cap		$432.24		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0860			PWC Gp3 Vhd Sing Pow Opt S/B		$6,474.84			N*	N	Y	N			*Refer to policy
K0860	RB		PWC Gp3 Vhd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0860	RR		PWC Gp3 Vhd Sing Pow Opt S/B		$647.49		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0861			PWC Gp3 Std Mult Pow Opt S/B		$3,658.82			N*	N	Y	N			*Refer to policy
K0861	RB		PWC Gp3 Std Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0861	RR		PWC Gp3 Std Mult Pow Opt S/B		$365.88		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0862			PWC Gp3 Hd Mult Pow Opt S/B		$4,532.22			N*	N	Y	N			*Refer to policy
K0862	RB		PWC Gp3 Hd Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0862	RR		PWC Gp3 Hd Mult Pow Opt S/B		$453.21		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0863			PWC Gp3 Vhd Mult Pow Opt S/B		$6,474.84			N*	N	Y	N			*Refer to policy
K0863	RB		PWC Gp3 Vhd Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0863	RR		PWC Gp3 Vhd Mult Pow Opt S/B		$647.49		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0864			PWC Gp3 Xhd Mult Pow Opt S/B		$7,705.13			N*	N	Y	N			*Refer to policy
K0864	RB		PWC Gp3 Xhd Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0864	RR		PWC Gp3 Xhd Mult Pow Opt S/B		$770.52		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0868			PWC Gp 4 Std Seat/Back		M			N*	N	Y	N			*Refer to policy
K0868	RB		PWC Gp 4 Std Seat/Back		M			N*	N	Y	N			*Refer to policy
K0868	RR		PWC Gp 4 Std Seat/Back		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0869			PWC Gp 4 Std Cap Chair		M			N*	N	Y	N			*Refer to policy
K0869	RB		PWC Gp 4 Std Cap Chair		M			N*	N	Y	N			*Refer to policy
K0869	RR		PWC Gp 4 Std Cap Chair		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0870			PWC Gp 4 Hd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0870	RB		PWC Gp 4 Hd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0870	RR		PWC Gp 4 Hd Seat/Back		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0871			PWC Gp 4 Vhd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0871	RB		PWC Gp 4 Vhd Seat/Back		M			N*	N	Y	N			*Refer to policy
K0871	RR		PWC Gp 4 Vhd Seat/Back		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0877			PWC Gp4 Std Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0877	RB		PWC Gp4 Std Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0877	RR		PWC Gp4 Std Sing Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0878			PWC Gp4 Std Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0878	RB		PWC Gp4 Std Sing Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0878	RR		PWC Gp4 Std Sing Pow Opt Cap		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0879			PWC Gp4 Hd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0879	RB		PWC Gp4 Hd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0879	RR		PWC Gp4 Hd Sing Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0880			PWC Gp4 Vhd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0880	RB		PWC Gp4 Vhd Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0880	RR		PWC Gp4 Vhd Sing Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0884			PWC Gp4 Std Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0884	RB		PWC Gp4 Std Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0884	RR		PWC Gp4 Std Mult Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0885			PWC Gp4 Std Mult Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0885	RB		PWC Gp4 Std Mult Pow Opt Cap		M			N*	N	Y	N			*Refer to policy
K0885	RR		PWC Gp4 Std Mult Pow Opt Cap		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0886			PWC Gp4 Hd Mult Pow S/B		M			N*	N	Y	N			*Refer to policy
K0886	RB		PWC Gp4 Hd Mult Pow S/B		M			N*	N	Y	N			*Refer to policy

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
K0886	RR		PWC Gp4 Hd Mult Pow S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0890			PWC Gp5 Ped Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0890	RB		PWC Gp5 Ped Sing Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0890	RR		PWC Gp5 Ped Sing Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0891			PWC Gp5 Ped Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0891	RB		PWC Gp5 Ped Mult Pow Opt S/B		M			N*	N	Y	N			*Refer to policy
K0891	RR		PWC Gp5 Ped Mult Pow Opt S/B		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
K0898			Power Wheelchair NOC		M			N*	N	Y	N			*Refer to policy
K0898	RB		Power Wheelchair NOC		M			N*	N	Y	N			*Refer to policy
K0898	RR		Power Wheelchair NOC		M		10 Months=Purchase	N*	N	Y	N			*Refer to policy
L0112			Cranial Cervical Orthosis		M			N	Y	Y	N			
L0120			Cerv Flexible Non-Adjustable		$18.79		1 per Year	N	N	N	N			
L0130			Flex Thermoplastic Collar Mo		$81.40		1 per Year	N	Y	N	N			
L0140			Cervical Semi-Rigid Adjustab		$31.91		1 per Year	N	N	N	N			
L0150			Cerv Semi-Rig Adj Molded Chn		$58.76		1 per Year	N	Y	N	N			
L0170			Cervical Collar Molded To Pt		$514.11		1 per Year	N	Y	N	N			
L0172			Cerv Col Thermplas Foam 2 Pi		$75.54		1 per Year	N	Y	N	N			
L0174			Cerv Col Foam 2 Piece W Thor		$148.49		1 per Year	N	Y	N	N			
L0180			Cer Post Col Occ/Man Sup Adj		$254.61		1 per Year	N	Y	N	N			
L0190			Cerv Collar Supp Adj Cerv Ba		$283.74		1 per Year	N	Y	N	N			
L0200			Cerv Col Supp Adj Bar & Thor		$329.12		1 per Year	N	Y	N	N			
L0220			Thor Rib Belt Custom Fabrica		$68.89			N	Y	Y	N			
L0430			Dewall Posture Protector		M			N	Y	Y	N			
L0450			TLSO Flex Prefab Thoracic		$92.43		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0452			Tlso Flex Custom Fab Thoraci		$224.88		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0454			TLSO Flex Prefab Sacrococ-T9		$246.60		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0456			TLSO Flex Prefab		$538.38		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0458			TLSO 2Mod Symphis-Xipho Pre		$521.52		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0460			TLSO2Mod Symphysis-Stern Pre		$543.37		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0462			TLSO 3Mod Sacro-Scap Pre		$521.52		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0464			TLSO 4Mod Sacro-Scap Pre		$804.62		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L0466			TLSO Rigid Frame Pre Soft Ap		$215.82		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0468			TLSO Rigid Frame Prefab Pelv		$270.46		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0470			TLSO Rigid Frame Pre Subclav		$374.25		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0472			TLSO Rigid Frame Hyperex Pre		$230.29		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0480			TLSO Rigid Plastic Custom Fa		$966.57		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0482			TLSO Rigid Lined Custom Fab		$1,079.66		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0484			TLSO Rigid Plastic Cust Fab		$1,166.00		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0486			TLSO Rigidlined Cust Fab Two		$838.58		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0488			TLSO Rigid Lined Pre One Pie		$713.76		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0490			TLSO Rigid Plastic Pre One		$201.13		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0491			TLSO 2 Piece Rigid Shell		$529.92		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0492			TLSO 3 Piece Rigid Shell		$355.04		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0621			SIO Flex Pelvisacral Prefab		$57.32		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0622			SIO Flex Pelvisacral Custom		$152.77		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0623			SIO Panel Prefab		$44.16		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0624			SIO Panel Custom		$211.11		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0625			LO Flexibl L1-Below L5 Pre		$39.17		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0626			LO Sag Stays/Panels Pre-Fab		$55.08		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0627			LO Sagitt Rigid Panel Prefab		$46.87		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0628			LO Flex W/O Rigid Stays Pre		$59.65		< 21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L0629			LSO Flex W/Rigid Stays Cust		$147.85		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0630			LSO Post Rigid Panel Pre		$115.16		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L0631			LSO Sag-Coro Rigid Frame Pre		$111.84		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0632			LSO Sag Rigid Frame Cust		M		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N			
L0633			LSO Flexion Control Prefab		$203.89		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0634			LSO Flexion Control Custom		M		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N			
L0635			LSO Sagit Rigid Panel Prefab		$212.66		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0636			LSO Sagittal Rigid Panel Cus		$293.78		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0637			LSO Sag-Coronal Panel Prefab		$147.90		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L0638			LSO Sag-Coronal Panel Custom		$448.96		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N			
L0639			LSO S/C Shell/Panel Prefab		$690.83		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0640			LSO S/C Shell/Panel Custom		$744.01		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L0700			Ctlso A-P-L Control Molded		$1,061.60		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L0710			Ctlso A-P-L Control W/ Inter		$1,166.99		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L0970			Tlso Corset Front		$56.98		1 per Year	N	Y	N	N			
L0972			Lso Corset Front		$51.86		1 per Year	N	Y	N	N			
L0974			Tlso Full Corset		$93.20		1 per Year	N	Y	N	N			
L0976			Lso Full Corset		$79.72		1 per Year	N	Y	N	N			
L0980			Peroneal Straps Pair		$9.12		1 per Year	N	N	N	N			
L0984			Protective body sock each		$46.42		4 per Year	N	Y	N	N			
L0999			Add To Spinal Orthosis NOS		M			N	N	Y	N			
L1000			Ctlso Milwauke Initial Model		$1,107.53		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1001			CTLSO Infant Immobilizer		M	0-2	1 per 2 Years	N	N	Y	N	0-2	343.4-343.9, 737.30-737.39, 737.43, 754.2	
L1005			Tension Based Scoliosis Orth		$1,706.81		< 21 1 per Year 21 & > 1 per 2 Years	N	N	Y	N		737.30-737.39, 737.43, 754.2	
L1010			Ctlso Axilla Sling		$44.62		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1020			Kyphosis Pad		$66.58		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1030			Lumbar Bolster Pad		$53.87		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L1040			Lumbar Or Lumbar Rib Pad		$47.28		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1050			Sternal Pad		$53.50		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1060			Thoracic Pad		$57.75		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1070			Trapezius Sling		$59.82		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		737.30-737.39, 737.43, 754.2	
L1090			Lumbar Sling		$53.68		< 21 1 per Year 21 & > 1 per 2 Years	N	N	Y	N		737.30-737.39, 737.43, 754.2	
L1200			Furnsh Initial Orthosis Only		$954.30		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1210			Lateral Thoracic Extension		$130.48		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1220			Anterior Thoracic Extension		$127.00		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1230			Milwaukee Type Superstructur		$355.76		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1240			Lumbar Derotation Pad		$48.50		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1250			Anterior Asis Pad		$42.16		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1260			Anterior Thoracic Derotation		$50.29		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1270			Abdominal Pad		$44.22		< 21 3 per Year 21 & > 3 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1280			Rib Gusset (Elastic) Each		$52.55		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1290			Lateral Trochanteric Pad		$41.43		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N		237.71, 356.1, 737.30, 737.32, 737.43, 737.0, 754.2, 756.12	
L1300			Body Jacket Mold To Patient		$942.04			N	Y	Y	N		737.30, 737.32, 737.43, 754.2	
L1499			Spinal Orthosis NOS		M			N	N	Y	N			
L1600			Abduct Hip Flex Frejka W Cvr		$72.00		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1620			Abduct Hip Flex Pavlik Harne		$83.80	0-1	< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1630			Abduct Control Hip Semi-Flex		$146.88		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1640			Pelv Band/Spread Bar Thigh C		$252.43		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1650			HO Abduction Hip Adjustable		$131.50		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1652		LT-RT	HO Bi Thighcuffs W Sprdr Bar		$253.45		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			

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L1660			HO Abduction Static Plastic		$122.41		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1680			Pelvic & Hip Control Thigh C		$607.54			N	Y	Y	N			
L1690			Combination Bilateral HO		$1,161.96			N	N	Y	N			
L1700			Leg Perthes Orth Toronto Typ		$881.32		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		732.1	
L1710			Legg Perthes Orth Newington		$1,056.50		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		732.1	
L1720		LT-RT	Legg Perthes Orthosis Trilat		$998.26	0-20	2 per Side per Year	N	Y	Y	N	0-20	732.1	
L1730			Legg Perthes Orth Scottish R		$685.48		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		732.1	
L1755			Legg Perthes Patten Bottom T		$954.83		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		732.1	
L1810		LT-RT	Ko Elastic With Joints		$64.63		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1820		LT-RT	Ko Elas W/ Condyle Pads & Jo		$85.20		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1830		LT-RT	Ko Immobilizer Canvas Longit		$49.93		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1831		LT-RT	Knee Orth Pos Locking Joint		$209.27		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1832		LT-RT	KO Adj Jnt Pos Rigid Support		$367.32		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1834		LT-RT	Ko W/0 Joint Rigid Molded To		$452.79		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		717.83	
L1836		LT-RT	Rigid KO Wo Joints		$94.86		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1840		LT-RT	Ko Derot Ant Cruciate Custom		$624.76		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		717.83	
L1843		LT-RT	KO Single Upright Custom Fit		$478.49		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1844		LT-RT	Ko W/Adj Jt Rot Cntrl Molded		$812.09		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		717.83	
L1845		LT-RT	Ko W/ Adj Flex/Ext Rotat Cus		$446.70		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1846		LT-RT	Ko W Adj Flex/Ext Rotat Mold		$598.01		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		717.83	
L1847		LT-RT	KO Adjustable W Air Chambers		$319.50			N	N	Y	N			
L1850		LT-RT	Ko Swedish Type		$168.01		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1860		LT-RT	Ko Supracondylar Socket Mold		$708.00		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		717.83	
L1900		LT-RT	Afo Sprng Wir Drsflx Calf Bd		$177.61		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			

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L1902		LT-RT	Afo Ankle Gauntlet		$40.63		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1906		LT-RT	Afo Multiligamentus Ankle Su		$77.12		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1907		LT-RT	AFO Supramalleolar Custom		$353.28		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		343.0, 343.8-343.9, 359.0-359.1	
L1920		LT-RT	Afo Sing Upright W/ Adjust S		$222.29		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1930		LT-RT	Afo Plastic		$179.14		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1940		LT-RT	Afo Molded To Patient Plasti		$335.88		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1945		LT-RT	Afo Molded Plas Rig Ant Tib		$598.57		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1950		LT-RT	Afo Spiral Molded To Pt Plas		$410.12		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1960		LT-RT	Afo Pos Solid Ank Plastic Mo		$330.56		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1970		LT-RT	Afo Plastic Molded W/Ankle J		$402.46		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1971		LT-RT	AFO W/Ankle Joint, Prefab		$176.64		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L1980		LT-RT	Afo Sing Solid Stirrup Calf		$232.08		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L1990		LT-RT	Afo Doub Solid Stirrup Calf		$269.29		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2000		LT-RT	Kafo Sing Fre Stirr Thi/Calf		$660.98		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2010		LT-RT	Kafo Sng Solid Stirrup W/O J		$538.57		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L2020		LT-RT	Kafo Dbl Solid Stirrup Band/		$768.72		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2030		LT-RT	Kafo Dbl Solid Stirrup W/O J		$636.51		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2034		LT-RT	KAFO Pla Sin Up W/Wo K/A Cus		$942.54		1 per 6 Months	N	Y	Y	N			
L2035		LT-RT	KAFO Plastic Pediatric Size		$96.24			N	N	Y	N			
L2036		LT-RT	Kafo Plas Doub Free Knee Mol		$988.65		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2037		LT-RT	Kafo Plas Sing Free Knee Mol		$1,137.14			N	Y	N	N			
L2038		LT-RT	Kafo W/O Joint Multi-Axis An		$712.89		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2040			Hkafo Torsion Bil Rot Straps		$122.41			N	Y	Y	N			
L2050			Hkafo Torsion Cable Hip Pelv		$259.86			N	Y	Y	N			
L2060			Hkafo Torsion Ball Bearing J		$325.04			N	Y	Y	N			

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L2070			Hkafo Torsion Unilat Rot Str		$93.03			N	Y	Y	N			
L2080			Hkafo Unilat Torsion Cable		$199.02			N	Y	Y	N			
L2090			Hkafo Unilat Torsion Ball Br		$265.16			N	Y	Y	N			
L2106		LT-RT	Afo Tib Fx Cast Plaster Mold		$519.70		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		823.00-824.7	
L2108		LT-RT	Afo Tib Fx Cast Molded To Pt		$613.06		1 per 6 Months	N	Y	Y	N			
L2112		LT-RT	Afo Tibial Fracture Soft		$274.69		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L2114		LT-RT	Afo Tib Fx Semi-Rigid		$344.04		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	N	N			
L2116		LT-RT	Afo Tibial Fracture Rigid		$411.02		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	N	Y	N		823.00 -824.7	
L2128		LT-RT	Kafo Fem Fx Cast Molded To P		$855.02			N	N	Y	N		821.20-821.39, 823.00-824.7	
L2136		LT-RT	Kafo Femoral Fx Cast Rigid		$672.51		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		821.20-821.39, 823.00-824.7	
L2180		LT-RT	Plas Shoe Insert W Ank Joint		$70.70		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		823.20-824.7	
L2182		LT-RT	Drop Lock Knee		$60.93		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N		824.0-824.7	
L2184		LT-RT	Limited Motion Knee Joint		$61.76		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	Y	N		824.0-824.7	
L2186		LT-RT	Adj Motion Knee Jnt Lerman T		$82.15		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	Y	N		824.0-824.7	
L2200		LT-RT	Limited Ankle Motion Ea Jnt		$13.40		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	N	N			
L2210		LT-RT	Dorsiflexion Assist Each Joi		$16.76		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	N	N			
L2220		LT-RT	Dorsi & Plantar Flex Ass/Res		$21.58		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	N	N			
L2230		LT-RT	Split Flat Caliper Stirr & P		$55.81		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2240		LT-RT	Round Caliper And Plate Atta		$88.81			N	Y	Y	N			
L2250		LT-RT	Foot Plate Molded Stirrup At		$178.13			N	Y	Y	N			
L2260		LT-RT	Reinforced Solid Stirrup		$76.39			N	Y	Y	N			
L2265		LT-RT	Long Tongue Stirrup		$92.17		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2270		LT-RT	Varus/Valgus Strap Padded/Li		$42.09		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2275		LT-RT	Plastic Mod Low Ext Pad/Line		$89.37		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2280		LT-RT	Molded Inner Boot		$367.21			N	Y	Y	N			
L2310			Abduction Bar-Straight		$61.33		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L2320		LT-RT	Non-Molded Lacer		$127.30		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2330		LT-RT	Lacer Molded To Patient Mode		$195.84		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2335		LT-RT	Anterior Swing Band		$187.13		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2340		LT-RT	Pre-Tibial Shell Molded To P		$222.85		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2350		LT-RT	Prosthetic Type Socket Molde		$551.32		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	Y	N			
L2360		LT-RT	Extended Steel Shank		$32.31		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2370		LT-RT	Patten Bottom		$213.07			N	Y	Y	N			
L2375		LT-RT	Torsion Ank & Half Solid Sti		$87.49	0-20		N	Y	Y	N	0-20		
L2380		LT-RT	Torsion Straight Knee Joint		$34.41	0-20	2 per 2 Years	Y	Y	Y	N	0-20		
L2385		LT-RT	Straight Knee Joint Heavy Du		$39.18		2 per 2 Years	N	Y	Y	N			
L2387		LT-RT	Add LE Poly Knee Custom KAFO		$43.61		2 per 6 Months	N	Y	Y	N			
L2390		LT-RT	Offset Knee Joint Each		$54.59		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	N	N			
L2395		LT-RT	Offset Knee Joint Heavy Duty		$78.03			N	Y	Y	N			
L2397			Suspension Sleeve Lower Ext		$41.85		2 per 2 Years	N	Y	Y	N			
L2405		LT-RT	Knee Joint Drop Lock Ea Jnt		$23.25		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2415		LT-RT	Knee Joint Cam Lock Each Joi		$32.40		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2425		LT-RT	Knee Disc/Dial Lock/Adj Flex		$38.23		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2430		LT-RT	Knee Jnt Ratchet Lock Ea Jnt		$38.23		< 21 2 per 6 Months 21 & > 2 per 2 Years	N	Y	N	N			
L2492		LT-RT	Knee Lift Loop Drop Lock Rin		$62.54		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2500		LT-RT	Thi/Glut/Ischia Wgt Bearing		$166.87			N	Y	Y	N			
L2510		LT-RT	Th/Wght Bear Quad-Lat Brim M		$504.30			N	Y	Y	N			
L2520		LT-RT	Th/Wght Bear Quad-Lat Brim C		$286.63			N	Y	Y	N			
L2530		LT-RT	Thigh/Wght Bear Lacer Non-Mo		$142.96			N	Y	Y	N			
L2540		LT-RT	Thigh/Wght Bear Lacer Molded		$242.00			N	Y	Y	N			
L2550		LT-RT	Thigh/Wght Bear High Roll Cu		$181.44		1 per Year	N	Y	N	N			
L2570			Hip Clevis Type 2 Posit Jnt		$305.39			N	Y	Y	N			
L2580			Pelvic Control Pelvic Sling		$231.42			N	Y	Y	N			
L2600		LT-RT	Hip Clevis/Thrust Bearing Fr		$113.73			N	Y	Y	N			
L2610		LT-RT	Hip Clevis/Thrust Bearing Lo		$137.09			N	Y	Y	N			
L2620		LT-RT	Pelvic Control Hip Heavy Dut		$133.31			N	Y	Y	N			
L2627			Plastic Mold Recipro Hip & C		$1,465.53	0-20		N	Y	Y	N	0-20		
L2628			Metal Frame Recipro Hip & Ca		$1,074.21	0-20		N	Y	Y	N	0-20		

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L2630			Pelvic Control Band & Belt U		$146.88			N	Y	Y	N			
L2640			Pelvic Control Band & Belt B		$205.65			N	Y	Y	N			
L2650			Pelv & Thor Control Gluteal		$73.79			N	Y	Y	N			
L2660			Thoracic Control Thoracic Ba		$127.40			N	Y	Y	N			
L2670			Thorac Cont Paraspinal Uprig		$97.92			N	Y	Y	N			
L2680		LT-RT	Thorac Cont Lat Support Upri		$97.92			N	Y	Y	N			
L2760		LT-RT	Extension Per Extension Per		$30.29		4 per 2 Years	N	Y	N	N			
L2768		LT-RT	Ortho Sidebar Disconnect		$69.49			N	N	Y	N			
L2780		LT-RT	Non-Corrosive Finish		$33.74		< 21 4 per 6 Months 21 & > 4 per 2 Years	N	Y	N	N			
L2795		LT-RT	Knee Control Full Kneecap		$54.57		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2800		LT-RT	Knee Cap Medial Or Lateral P		$54.57		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2810		LT-RT	Knee Control Condylar Pad		$43.56		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2820		LT-RT	Soft Interface Below Knee Se		$57.24		< 21 1 per 6 Months 21 & > 1 per 2 Years	N	Y	N	N			
L2850		LT-RT	Femoral Lgth Sock Fx Or Equa		$32.27		1 per Year	N	Y	Y	N		821.10	
L2861		LT-RT	Torsion Mechanism Knee/Ankle		M		2 per Year	N	Y	Y	N			
L2999			Lower Extremity Orthosis NOS		M			N	N	Y	N			
L3000		LT-RT	Ft Insert Ucb Berkeley Shell		$120.43		2 per Year	N	Y	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3001		LT-RT	Foot Insert Remov Molded Spe		$39.36		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3002		LT-RT	Foot Insert Plastazote Or Eq		$53.76		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3003		LT-RT	Foot Insert Silicone Gel Eac		$90.25		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3010		LT-RT	Foot Longitudinal Arch Suppo		$63.36		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3020		LT-RT	Foot Longitud/Metatarsal Sup		$63.36		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3030		LT-RT	Foot Arch Support Remov Prem		$56.50		2 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3040		LT-RT	Ft Arch Suprt Premold Longit		$19.20			N	N	Y	N			
L3050		LT-RT	Foot Arch Supp Premold Metat		$23.04			N	N	Y	N			
L3060		LT-RT	Foot Arch Supp Longitud/Meta		$32.64			N	N	Y	N			
L3070		LT-RT	Arch Suprt Att To Sho Longit		$11.52			N	N	Y	N			
L3140			Abduction Rotation Bar Shoe		$39.18			N	N	Y	N			
L3150			Abduct Rotation Bar W/O Shoe		$32.31			N	N	Y	N			
L3160			Shoe Styled Positioning Dev		M			N	N	Y	N			
L3170		LT-RT	Foot Plastic Heel Stabilizer		$37.68		1 Each Side per 6 Months	N	N	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L3201		LT-RT	Oxford W Supinat/Pronat Inf		$17.13		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3202		LT-RT	Oxford W/ Supinat/Pronator C		$22.52		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3203		LT-RT	Oxford W/ Supinator/Pronator		$24.97		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3204		LT-RT	Hightop W/ Supp/Pronator Inf		$20.07		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3206		LT-RT	Hightop W/ Supp/Pronator Chi		$23.48		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3207		LT-RT	Hightop W/ Supp/Pronator Jun		$27.92		1 Each Side per 6 Months	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3208		LT-RT	Surgical Boot Each Infant		$20.57		1 Each Side per 6 Months	N	N	N	N			
L3209		LT-RT	Surgical Boot Each Child		$24.48		1 Each Side per 6 Months	N	N	N	N			
L3211		LT-RT	Surgical Boot Each Junior		$26.43		1 Each Side per 6 Months	N	N	N	N			
L3212			Benesch Boot Pair Infant		$40.13		1 per 6 Months	N	N	N	N			
L3213			Benesch Boot Pair Child		$48.95		1 per 6 Months	N	N	N	N			
L3214			Benesch Boot Pair Junior		$55.81		1 per 6 Months	N	N	N	N			
L3215		LT-RT	Orthopedic Ftwear Ladies Oxf		$41.61		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3216		LT-RT	Orthoped Ladies Shoes Dpth I		$44.06		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3217		LT-RT	Ladies Shoes Hightop Depth I		$48.96		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3219		LT-RT	Orthopedic Mens Shoes Oxford		$43.58		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3221		LT-RT	Orthopedic Mens Shoes Dpth I		$44.06		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3222		LT-RT	Mens Shoes Hightop Depth Inl		$53.37		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 728.71, 736.81, 754.51, 755.32, 896.0- 896.3	
L3224		LT-RT	Woman"s Shoe Oxford Brace		$36.79		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3225		LT-RT	Man"s Shoe Oxford Brace		$40.18		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3230		LT-RT	Custom Shoes Depth Inlay		$152.76		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 736.81, 754.51, 755.32, 896.0- 896.3	
L3250		LT-RT	Custom Mold Shoe Remov Prost		$143.29		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 736.81, 754.51, 755.32, 896.0- 896.3	
L3251		LT-RT	Shoe Molded To Pt Silicone S		$142.96		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		728.10-728.19, 736.81, 754.51, 755.32, 896.0- 896.3	

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L3252		LT-RT	Shoe Molded Plastazote Cust		$110.64		< 21 1 per 6 Months 21 & > 1 per Year	N	N	Y	N		250.10 - 250.93, 707.15, 728.10-728.19, 736.81, 754.51, 755.32, 896.0-896.3	
L3253		LT-RT	Shoe Molded Plastazote Cust		$73.45		< 21 1 per 6 Months 21 & > 1 per Year	N	Y	Y	N		250.10 - 250.93, 707.15, 728.10-728.19, 736.81, 754.51, 755.32, 896.0-896.3	
L3254			Orth Foot Non-Stndard Size/W		$8.81		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3255			Orth Foot Non-Standard Size/		$8.47		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3257			Orth Foot Add Charge Split S		$61.82		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3260		LT-RT	Ambulatory Surgical Boot Eac		$48.95		< 21 1 per 6 Months 21 & > 1 per Year	N	N	N	N			
L3265		LT-RT	Plastazote Sandal Each		$19.58			N	N	Y	N		707.15, 728.0-728.19, 736.81, 754.51, 755.32, 825.20-825.29, 826.0, 845.00, 845.10-845.12, 895.0, 896.0-896.3, V66.0	
L3300		LT-RT	Sho Lift Taper To Metatarsal		$23.50		2 per Year (Up to 2" EA.)	N	N	N	N			
L3310		LT-RT	Shoe Lift Elev Heel/Sole Neo		$30.35		2 per Year (Up to 2" EA.)	N	N	N	N			
L3320		LT-RT	Shoe Lift Elev Heel/Sole Cor		$73.45		2 per Year (Up to 2" EA.)	N	N	N	N			
L3330		LT-RT	Lifts Elevation Metal Extens		$184.11		2 per Year	N	N	Y	N			
L3332		LT-RT	Shoe Lifts Tapered To One-Ha		$11.75		2 per Year	N	N	N	N			
L3334		LT-RT	Shoe Lifts Elevation Heel /I		$18.60		2 per Year (Up to 2" EA.)	N	N	N	N			
L3340		LT-RT	Shoe Wedge Sach		$52.88		4 per Year	N	N	N	N			
L3350		LT-RT	Shoe Heel Wedge		$8.81		2 per Year	N	N	N	N			
L3360		LT-RT	Shoe Sole Wedge Outside Sole		$11.75		2 per Year	N	N	N	N			
L3370		LT-RT	Shoe Sole Wedge Between Sole		$14.68		4 per Year	N	N	N	N			
L3380		LT-RT	Shoe Clubfoot Wedge		$14.68		4 per Year	N	N	N	N			
L3390		LT-RT	Shoe Outflare Wedge		$36.73		4 per Year	N	N	N	N			
L3400		LT-RT	Shoe Metatarsal Bar Wedge Ro		$30.16		2 per Year	N	N	N	N			
L3410		LT-RT	Shoe Metatarsal Bar Between		$37.20		2 per Year	N	N	N	N			
L3420		LT-RT	Full Sole/Heel Wedge Btween		$29.37		2 per Year	N	N	N	N			
L3430		LT-RT	Sho Heel Count Plast Reinfor		$26.43		2 per Year	N	N	N	N			
L3440		LT-RT	Heel Leather Reinforced		$29.37		2 per Year	N	N	N	N			
L3450		LT-RT	Shoe Heel Sach Cushion Type		$44.04		2 per Year	N	N	N	N			
L3455		LT-RT	Shoe Heel New Leather Standa		$11.75		2 per Year	N	N	N	N			
L3460		LT-RT	Shoe Heel New Rubber Standar		$11.75		2 per Year	N	N	N	N			
L3465		LT-RT	Shoe Heel Thomas With Wedge		$15.67		2 per Year	N	N	N	N			
L3470		LT-RT	Shoe Heel Thomas Extend To B		$22.51			N	N	Y	N			

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L3500		LT-RT	Ortho Shoe Add Leather Insol		$7.84		2 per Year	N	N	N	N			
L3510		LT-RT	Orthopedic Shoe Add Rub Insl		$7.84		2 per Year	N	N	N	N			
L3520		LT-RT	O Shoe Add Felt W Leath Insl		$14.12		2 per Year	N	N	N	N			
L3530		LT-RT	Ortho Shoe Add Half Sole		$11.75		2 per Year	N	N	N	N			
L3540		LT-RT	Ortho Shoe Add Full Sole		$23.50		2 per Year	N	N	N	N			
L3550		LT-RT	O Shoe Add Standard Toe Tap		$1.95		2 per Year	N	N	N	N			
L3560		LT-RT	O Shoe Add Horseshoe Toe Tap		$2.93		2 per Year	N	N	N	N			
L3570		LT-RT	O Shoe Add Instep Extension		$19.58		2 per Year	N	N	N	N			
L3580		LT-RT	O Shoe Add Instep Velcro Clo		$14.68		2 per Year	N	N	N	N			
L3590		LT-RT	O Shoe Convert To Sof Counte		$18.60		2 per Year	N	N	N	N			
L3595		LT-RT	Ortho Shoe Add March Bar		$18.60		2 per Year	N	N	N	N			
L3600		LT-RT	Trans Shoe Calip Plate Exist		$52.43		2 per Year	N	Y	N	N			
L3610		LT-RT	Trans Shoe Caliper Plate New		$74.41		2 per Year	N	Y	N	N			
L3620		LT-RT	Trans Shoe Solid Stirrup Exi		$42.98		2 per Year	N	Y	N	N			
L3630		LT-RT	Trans Shoe Solid Stirrup New		$74.41		2 per Year	N	Y	N	N			
L3640			Shoe Dennis Browne Splint Bo		$21.50		1 per Year	N	Y	N	N			
L3649			Orthopedic Shoe Modifica NOS		M			N	N	Y	N			
L3650		LT-RT	Shlder Fig 8 Abduct Restrain		$34.97		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3660		LT-RT	Abduct Restrainer Canvas&Web		$50.15		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3670		LT-RT	Acromio/Clavicular Canvas&We		$55.18		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3674		LT-RT	So Airplane W/Wo Joint Cf		$275.95		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L3675			Canvas Vest So		$88.72	0-20		N	N	Y	N	0-20		
L3677			So Hard Plastic Stabilizer		$168.60		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3702		LT-RT	EO W/O Joints CF		$133.39		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L3710		LT-RT	Elbow Elastic With Metal Joi		$72.32		2 per Year	N	N	N	N			
L3720		LT-RT	Forearm/Arm Cuffs Free Motio		$331.58		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3730		LT-RT	Forearm/Arm Cuffs Ext/Flex A		$439.86		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3740		LT-RT	Cuffs Adj Lock W/ Active Con		$521.48		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3760		LT-RT	EO Withjoint, Prefabricated		$247.82		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3762		LT-RT	Rigid EO Wo Joints		$69.57		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3807		LT-RT	WHFO,No Joint, Prefabricated		$123.90		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3808			WHFO, Rigid W/O Joints		M			N	Y	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L3891		LT-RT	Torsion Mechanism Wrist/Elbo		M		2 per Year	N	Y	Y	N			
L3900		LT-RT	Hinge Extension/Flex Wrist/F		$1,010.94			N	Y	Y	N			
L3904		LT-RT	Whfo Electric Custom Fitted		$1,640.23	0-20		N	Y	Y	N	0-20		
L3906		LT-RT	WHO W/O Joints CF		$245.95			N	Y	Y	N			
L3908		LT-RT	Wrist Cock-Up Non-Molded		$39.18		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3912		LT-RT	Flex Glove W/Elastic Finger		$51.14		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3913		LT-RT	HFO W/O Joints CF		$53.81		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L3917		LT-RT	Prefab Metacarpl Fx Orthosis		$68.34		1 per Year	N	N	N	N			
L3919		LT-RT	HO W/O Joints CF		$30.31		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L3925			FO Pip/Dip With Joint/Spring		$37.94		1 per 2 Years	N	N	N	N			
L3927			FO Pip/Dip W/O Joint/Spring		M		1 per 2 Years	N	N	Y	N			
L3929			HFO Nontorsion Joint, Prefab		$52.76		1 per 2 Years	N	N	N	N			
L3931			WHFO Nontorsion Joint Prefab		$120.42		1 per 2 Years	N	N	N	N			
L3960			Sewho Airplan Desig Abdu Pos		$477.87		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3962		LT-RT	Sewho Erbs Palsey Design Abd		$395.21		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3980		LT-RT	Upp Ext Fx Orthosis Humeral		$220.32		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3982		LT-RT	Upper Ext Fx Orthosis Rad/Ul		$220.32		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3984		LT-RT	Upper Ext Fx Orthosis Wrist		$195.84		<21 1 per Year 21 & > 1 per 2 Years	N	N	N	N			
L3995		LT-RT	Sock Fracture Or Equal Each		$19.93			N	Y	Y	N			
L3999			Upper Limb Orthosis NOS		M			N	N	Y	N			
L3999	RR		Upper Limb Orthosis NOS		M			N	N	Y	N			
L4000			Repl Girdle Milwaukee Orth **(RO)**		$704.67			N	Y	Y	N			
L4002			Replace Strap, Any Orthosis **(RO)**		$13.24		2 per Year	N	N	N	N			
L4010			Replace Trilateral Socket Br **(RO)**		$550.74	0-20		N	Y	Y	N	0-20		
L4020			Replace Quadlat Socket Brim **(RO)**		$514.51			N	Y	Y	N			
L4030			Replace Socket Brim Cust Fit **(RO)**		$367.21			N	Y	Y	N			
L4045		LT-RT	Replace Non-Molded Thigh Lac **(RO)**		$163.57			N	Y	Y	N			
L4050			Replace Molded Calf Lacer **(RO)**		$219.30			N	Y	Y	N			
L4055		LT-RT	Replace Non-Molded Calf Lace **(RO)**		$133.28		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4060		LT-RT	Replace High Roll Cuff **(RO)**		$173.28		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4070		LT-RT	Replace Prox & Dist Upright **(RO)**		$140.33		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L4080		LT-RT	Repl Met Band Kafo-Afo Prox **(RO)**		$52.97		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4090		LT-RT	Repl Met Band Kafo-Afo Calf/ **(RO)**		$45.06			N	Y	Y	N			
L4100		LT-RT	Repl Leath Cuff Kafo Prox Th **(RO)**		$54.16		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4110		LT-RT	Repl Leath Cuff Kafo-Afo Cal **(RO)**		$42.28		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4130			Replace Pretibial Shell **(RO)**		$255.60		<21 1 per Year 21 & > 1 per 2 Years	N	Y	N	N			
L4205			Ortho Dvc Repair Per 15 Min		$11.02		Up to 1 Hour Twice a Year	N	N	N	N			
L4210			Orth Dev Repair/Repl Minor P **(RO)**		$44.16		2 per Year	N	N	N	N			
L4350		LT-RT	Ankle Control Orthosi Prefab		$65.27		1 Each Side per Year	N	N	Y	N		824.0-824.7, 845.00-845.09	
L4360		LT-RT	Pneumati Walking Boot Prefab		$138.07		1 Each Side per Year	N	N	Y	N			
L4370		LT-RT	Pneumatic Full Leg Splint		$125.51		1 Each Side per Year	N	N	Y	N			
L4386		LT-RT	Non-Pneum Walk Boot Prefab		$90.20		1 per Year	N	N	N	N			
L4392		LT-RT	Replace AFO Soft Interface **(RO)**		$15.95		1 per Year	N	Y	N	N			
L4394		LT-RT	Replace Foot Drop Spint **(RO)**		$11.64		1 per Year	N	Y	N	N			
L4396		LT-RT	Static Afo		$118.30			N	Y	Y	N			
L4398		LT-RT	Foot Drop Splint Recumbent		$54.45			N	Y	Y	N			
L4631			Afo, Walk Boot Type, Cus Fab		$1,013.00			N	Y	Y	N			
L5000		LT-RT	Sho Insert W Arch Toe Filler		$306.22		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5010		LT-RT	Mold Socket Ank Hgt W/ Toe F		$855.61		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5020		LT-RT	Tibial Tubercle Hgt W/ Toe F		$1,456.13		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5050		LT-RT	Ank Symes Mold Sckt Sach Ft		$1,599.10		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5060		LT-RT	Symes Met Fr Leath Socket Ar		$1,804.73		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5100		LT-RT	Molded Socket Shin Sach Foot		$1,713.68		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5105		LT-RT	Plast Socket Jts/Thgh Lacer		$2,483.69		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5150		LT-RT	Mold Sckt Ext Knee Shin Sach		$2,287.16		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5160		LT-RT	Mold Socket Bent Knee Shin S		$2,511.20		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5200		LT-RT	Kne Sing Axis Fric Shin Sach		$2,254.23		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L5210		LT-RT	No Knee/Ankle Joints W/ Ft B		$1,542.12		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5220		LT-RT	No Knee Joint With Artic Ali		$1,698.75		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5230		LT-RT	Fem Focal Defic Constant Fri		$2,570.52		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5250		LT-RT	Hip Canad Sing Axi Cons Fric		$3,093.43		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5270		LT-RT	Tilt Table Locking Hip Sing		$3,328.61		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5280		LT-RT	Hemipelvect Canad Sing Axis		$3,427.35		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5301		LT-RT	BK Mold Socket SACH Ft Endo		$1,660.76		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5312		LT-RT	Knee Disart, Sach Ft, Endo		$2,938.20		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	Y	N			
L5321		LT-RT	AK Open End SACH		$2,521.19		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5331		LT-RT	Hip Disart Canadian SACH Ft		$3,413.34		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5341		LT-RT	Hemipelvectomy Canadian SACH		$3,702.56		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5500		LT-RT	Init Bk Ptb Plaster Direct		$787.92		1 per Medical Event	N	Y	N	N			
L5505		LT-RT	Init Ak Ischal Plstr Direct		$1,108.40		1 per Medical Event	N	Y	N	N			
L5510		LT-RT	Prep BK Ptb Plaster Molded		$940.93		1 per Medical Event	N	Y	N	N			
L5520		LT-RT	Perp BK Ptb Thermopls Direct		$1,040.94		1 per Medical Event	N	Y	N	N			
L5530		LT-RT	Prep BK Ptb Thermopls Molded		$1,238.74		1 per Medical Event	N	Y	N	N			
L5535		LT-RT	Prep BK Ptb Open End Socket		$1,146.32			N	Y	Y	N			
L5540		LT-RT	Prep BK Ptb Laminated Socket		$1,238.74		1 per Medical Event	N	Y	N	N			
L5560		LT-RT	Prep AK Ischial Plast Molded		$1,247.37		1 per Medical Event	N	Y	N	N			
L5570		LT-RT	Prep AK Ischial Direct Form		$1,517.84		1 per Medical Event	N	Y	N	N			
L5580		LT-RT	Prep AK Ischial Thermo Mold		$1,713.68		1 per Medical Event	N	Y	N	N			
L5590		LT-RT	Prep AK Ischial Laminated		$1,722.50		1 per Medical Event	N	Y	N	N			
L5595		LT-RT	Hip Disartic Sach Thermopls		$2,448.09		1 per Medical Event	N	Y	N	N			
L5600		LT-RT	Hip Disart Sach Laminat Mold		$2,790.34			N	Y	Y	N			
L5610		LT-RT K1-K4	Above Knee Hydracadence		$1,343.81			N	Y	Y	N			
L5611		LT-RT K1-K4	Ak 4 Bar Link W/Fric Swing		$931.38			N	Y	Y	N			
L5613		LT-RT K1-K4	Ak 4 Bar Ling W/Hydraul Swig		$1,409.03			N	Y	Y	N			
L5616		LT-RT K1-K4	Ak Univ Multiplex Sys Frict		$785.00			N	Y	Y	N			
L5618		LT-RT	Test Socket Symes		$238.03		1 Prep/2 Defin	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L5620		LT-RT	Test Socket Below Knee		$211.20		1 Prep/2 Defin	N	Y	N	N			
L5622		LT-RT	Test Socket Knee Disarticula		$284.52		1 Prep/2 Defin	N	Y	N	N			
L5624		LT-RT	Test Socket Above Knee		$284.42		1 Prep/2 Defin	N	Y	N	N			
L5626		LT-RT	Test Socket Hip Disarticulat		$450.27		1 Prep/2 Defin	N	Y	N	N			
L5628			Test Socket Hemipelvectomy		$455.97		1 Prep/2 Defin	N	Y	N	N			
L5629		LT-RT	Below Knee Acrylic Socket		$168.82		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5630		LT-RT	Syme Typ Expandabl Wall Sckt		$305.52		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5631		LT-RT	Ak/Knee Disartic Acrylic Soc		$262.70		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5632		LT-RT	Symes Type Ptb Brim Design S		$152.77		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5634		LT-RT	Symes Type Poster Opening So		$179.92		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5636		LT-RT	Symes Type Medial Opening So		$137.50		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5637		LT-RT	Below Knee Total Contact		$272.83		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5638		LT-RT	Below Knee Leather Socket		$381.91			N	Y	Y	N			
L5639		LT-RT	Below Knee Wood Socket		$595.59			N	Y	Y	N			
L5640		LT-RT	Knee Disarticulat Leather So		$458.28			N	Y	Y	N			
L5642		LT-RT	Above Knee Leather Socket		$440.65			N	Y	Y	N			
L5644		LT-RT	Above Knee Wood Socket		$367.21			N	Y	Y	N			
L5646		LT-RT	Below Knee Cushion Socket		$329.87			N	Y	Y	N			
L5648		LT-RT	Above Knee Cushion Socket		$389.75			N	Y	Y	N			
L5650		LT-RT	Tot Contact Ak/Knee Disart S		$345.79		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5652		LT-RT	Suction Susp Ak/Knee Disart		$308.79		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5653		LT-RT	Knee Disart Expand Wall Sock		$361.35		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	Y	N			
L5654		LT-RT	Socket Insert Symes		$229.14		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5655		LT-RT	Socket Insert Below Knee		$201.67		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5656		LT-RT	Socket Insert Knee Articulat		$268.31		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5658		LT-RT	Socket Insert Above Knee		$285.94		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5666		LT-RT	Below Knee Cuff Suspension		$54.62		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5668		LT-RT	Socket Insert W/O Lock Lower		$61.04		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L5670		LT-RT	Bk Molded Supracondylar Susp		$192.19		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5671		LT-RT	BK/AK Locking Mechanism		$352.31		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5672		LT-RT	Bk Removable Medial Brim Sus		$254.32		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5673		LT-RT	Socket Insert W Lock Mech		$326.05		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5676		LT-RT	Bk Knee Joints Single Axis P		$259.51			N	Y	Y	N			
L5678		LT-RT	Bk Joint Covers Pair		$22.51		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5679		LT-RT	Socket Insert W/O Lock Mech		$277.84		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5680		LT-RT	Bk Thigh Lacer Non-Molded		$181.16		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5681		LT-RT	Intl Custm Cong/Latyp Insert		$578.25		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	Y	N			
L5682			Bk Thigh Lacer Glut/Ischia M		$332.23			N	Y	Y	N			
L5683		LT-RT	Initial Custom Socket Insert		$507.67		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5684		LT-RT	Bk Fork Strap		$25.57		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5685		LT-RT	Below Knee Sus/Seal Sleeve		$48.30		<21 4 per Year 21 & > 2 per Year	N	Y	N	N			
L5686		LT-RT	Bk Back Check		$30.73		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5688			Bk Waist Belt Webbing		$36.22		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5690			Bk Waist Belt Padded And Lin		$88.89		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5692			Ak Pelvic Control Belt Light		$70.58		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5694			Ak Pelvic Control Belt Pad/L		$96.38		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5695		LT-RT	Ak Sleeve Susp Neoprene/Equa		$90.74		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5696		LT-RT	Ak/Knee Disartic Pelvic Join		$117.51		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5697		LT-RT	Ak/Knee Disartic Pelvic Band		$56.80		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5698		LT-RT	Ak/Knee Disartic Silesian Ba		$63.75		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5699		LT-RT	Shoulder Harness		$97.92		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			

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L5700		LT-RT	Replace Socket Below Knee **(RO)**		$1,638.90			N	Y	Y	N			
L5701			Replace Socket Above Knee **(RO)**		$2,033.22			N	Y	Y	N			
L5702			Replace Socket Hip **(RO)**		$2,562.55			N	Y	Y	N			
L5703			Symes Ankle W/O (SACH) Foot **(RO)**		$132.02		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5704			Custom Shape Cover BK		$429.69		2 per 2 Years	N	Y	N	N			
L5705			Custom Shape Cover AK		$612.63		2 per 2 Years	N	Y	N	N			
L5706			Custom Shape Cvr Knee Disart		$597.57			N	Y	Y	N			
L5707			Custom Shape Cvr Hip Disart		$802.82			N	Y	Y	N			
L5710		LT-RT K1-K4	Kne-Shin Exo Sng Axi Mnl Loc		$191.06		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5712		LT-RT K1-K4	Knee-Shin Exo Frict Swg & St		$228.91		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5714		LT-RT K1-K4	Knee-Shin Exo Variable Frict		$232.91		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5716		LT-RT K1-K4	Knee-Shin Exo Mech Stance Ph		$460.55			N	Y	Y	N			
L5718		LT-RT K1-K4	Knee-Shin Exo Frct Swg & Sta		$492.48			N	Y	Y	N			
L5722		LT-RT K1-K4	Knee-Shin Pneum Swg Frct Exo		$598.87			N	Y	Y	N			
L5724		LT-RT K1-K4	Knee-Shin Exo Fluid Swing Ph		$923.07			N	Y	Y	N			
L5726		LT-RT K1-K4	Knee-Shin Ext Jnts Fld Swg E		$1,098.95			N	Y	Y	N			
L5728		LT-RT K1-K4	Knee-Shin Fluid Swg & Stance		$1,287.84			N	Y	Y	N			
L5780		LT-RT K1-K4	Knee-Shin Pneum/Hydra Pneum		$709.06			N	Y	Y	N			
L5810		LT-RT K1-K4	Endoskel Knee-Shin Mnl Lock		$303.91		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5812		LT-RT K1-K4	Endo Knee-Shin Frct Swg & St		$315.59		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5816		LT-RT K1-K4	Endo Knee-Shin Polyc Mch Sta		$451.78			N	Y	Y	N			
L5818		LT-RT K1-K4	Endo Knee-Shin Frct Swg & St		$510.15			N	Y	Y	N			
L5822		LT-RT K1-K4	Endo Knee-Shin Pneum Swg Frc		$935.85			N	Y	Y	N			
L5824		LT-RT K1-K4	Endo Knee-Shin Fluid Swing P		$884.66			N	Y	Y	N			
L5828		LT-RT K1-K4	Endo Knee-Shin Fluid Swg/Sta		$1,574.45			N	Y	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L5830		LT-RT K1-K4	Endo Knee-Shin Pneum/Swg Pha		$1,061.60			N	Y	Y	N			
L5840		LT-RT K1-K4	Multi-Axial Knee/Shin System		M			N	Y	Y	N			
L5845		LT-RT K1-K4	Knee-Shin Sys Stance Flexion		$957.69			N	Y	Y	N			
L5850		LT-RT	Endo Ak/Hip Knee Extens Assi		$67.96		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5855		LT-RT	Mech Hip Extension Assist		$170.89			N	Y	Y	N			
L5925		LT-RT	Above Knee Manual Lock		$185.94			N	Y	Y	N			
L5962		LT-RT	Below Knee Flex Cover System		$401.52			N	Y	Y	N			
L5964		LT-RT	Above Knee Flex Cover System		$770.17			N	Y	Y	N			
L5966		LT-RT	Hip Flexible Cover System		$992.10			N	Y	Y	N			
L5970		LT-RT K1-K4	Foot External Keel Sach Foot		$124.81		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5971		LT-RT K1-K4	SACH Foot, Replacement **(RO)**		$117.76		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5972		LT-RT K1-K4	Flexible Keel Foot		$211.42		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5974		LT-RT K1-K4	Foot Single Axis Ankle/Foot		$165.04		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5975		LT-RT K1-K4	Combo Ankle/Foot Prosthesis		$258.02			N	Y	Y	N			
L5976		LT-RT K1-K4	Energy Storing Foot		$364.90		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5978		LT-RT K1-K4	Ft Prosth Multiaxial Ankl/Ft		$199.70		<21 1 per 2 Years 21 & > 1 per 5 Years	N	Y	N	N			
L5979		LT-RT	Multi-Axial Ankle/Ft Prosth		$1,776.22			N	Y	Y	N			
L5980		LT-RT K1-K4	Flex Foot System		$2,029.69			N	Y	Y	N			
L5981		LT-RT K1-K4	Flex-Walk Sys Low Ext Prosth		$2,344.35			N	Y	Y	N			
L5982		LT-RT K1-K4	Exoskeletal Axial Rotation U		$342.50		1 per 5 Years	N	Y	Y	N			
L5984		LT-RT K1-K4	Endoskeletal Axial Rotation		$343.55			N	Y	Y	N			
L5990		LT-RT	User Adjustable Heel Height		$969.33			N	Y	Y	N			
L5999			Lowr Extremity Prosthes NOS		M			N	Y	Y	N			
L6000		LT-RT	Part Hand Thumb Rem		$941.11			N	Y	Y	N			
L6010		LT-RT	Part Hand Little/Ring		$1,047.30			N	Y	Y	N			
L6020		LT-RT	Part Hand No Fingers		$976.46			N	Y	Y	N			
L6050		LT-RT	Wrst Mld Sck Flx Hng Tri Pad		$1,604.98		1 per 5 Years	N	Y	Y	N			
L6100		LT-RT	Elb Mold Sock Flex Hinge Pad		$1,613.79		1 per 5 Years	N	Y	Y	N	21-124		
L6110		LT-RT	Elbow Mold Sock Suspension T		$1,564.83		1 per 5 Years	N	Y	Y	N	21-124		

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L6120		LT-RT	Elbow Mold Doub Splt Soc Ste		$1,845.86		1 per 5 Years	N	Y	Y	N	21-124		
L6130		LT-RT	Elbow Stump Activated Lock H		$1,920.31		1 per 5 Years	N	Y	Y	N	21-124		
L6200		LT-RT	Elbow Mold Outsid Lock Hinge		$2,052.49		1 per 5 Years	N	Y	Y	N	21-124		
L6250		LT-RT	Elbow Inter Loc Elbow Forarm		$2,034.88		1 per 5 Years	N	Y	Y	N	21-124		
L6300		LT-RT	Shlder Disart Int Lock Elbow		$2,648.85		1 per 5 Years	N	Y	Y	N	21-124		
L6350		LT-RT	Thoracic Intern Lock Elbow		$2,598.62			N	Y	Y	N			
L6400		LT-RT	Below Elbow Prosth Tiss Shap		$1,527.63			N	Y	Y	N			
L6450		LT-RT	Elb Disart Prosth Tiss Shap		$1,909.54			N	Y	Y	N			
L6500		LT-RT	Above Elbow Prosth Tiss Shap		$1,865.96			N	Y	Y	N			
L6550		LT-RT	Shldr Disar Prosth Tiss Shap		$2,662.57			N	Y	Y	N			
L6570		LT-RT	Scap Thorac Prosth Tiss Shap		$2,809.46			N	Y	Y	N			
L6600		LT-RT	Polycentric Hinge Pair		$161.59		1 per 5 Years	N	Y	Y	N	21-124		
L6605		LT-RT	Single Pivot Hinge Pair		$166.33		1 per 5 Years	N	Y	Y	N	21-124		
L6610		LT-RT	Flexible Metal Hinge Pair		$117.92		1 per 5 Years	N	Y	Y	N	21-124		
L6615		LT-RT	Disconnect Locking Wrist Uni		$114.46		1 per 5 Years	N	Y	Y	N	21-124		
L6616		LT-RT	Disconnect Insert Locking Wr		$36.06		1 per 5 Years	N	Y	Y	N	21-124		
L6620		LT-RT	Flexion/Extension Wrist Unit		$200.12		1 per 5 Years	N	Y	Y	N	21-124		
L6625		LT-RT	Rotation Wrst W/ Cable Lock		$282.54			N	Y	Y	N			
L6630		LT-RT	Stainless Steel Any Wrist		$152.65			N	Y	Y	N			
L6635		LT-RT	Lift Assist For Elbow		$110.33		1 per 2 Years	N	Y	Y	N	21-124		
L6640		LT-RT	Shoulder Abduction Joint Pai		$201.72			N	Y	Y	N			
L6645		LT-RT	Shoulder Flexion-Abduction J		$199.75		1 per 2 Years	N	Y	Y	N	21-124		
L6646		LT-RT	Multipo Locking Shoulder Jnt		$1,797.56			N	Y	Y	N			
L6647		LT-RT	Shoulder Lock Actuator		$332.93			N	Y	Y	N			
L6650		LT-RT	Shoulder Universal Joint		$211.01		1 per 2 Years	N	Y	Y	N	21-124		
L6655		LT-RT	Standard Control Cable Extra		$40.93		1 per 2 Years	N	Y	Y	N	21-124		
L6660		LT-RT	Heavy Duty Control Cable		$54.77		1 per 2 Years	N	Y	Y	N	21-124		
L6665		LT-RT	Teflon Or Equal Cable Lining		$24.48		1 per 2 Years	N	Y	Y	N	21-124		
L6670		LT-RT	Hook To Hand Cable Adapter		$25.48		1 per 2 Years	N	Y	Y	N			
L6672		LT-RT	Harness Chest/Shlder Saddle		$116.92		1 per 2 Years	N	Y	Y	N	21-124		
L6675		LT-RT	Harness Figure Of 8 Sing Con		$63.80		1 per 2 Years	N	Y	Y	N	21-124		
L6676		LT-RT	Harness Figure Of 8 Dual Con		$66.74		1 per 2 Years	N	Y	Y	N	21-124		
L6677		LT-RT	UE Triple Control Harness		$80.04		1 per 2 Years	N	Y	Y	N	21-124		
L6680		LT-RT	Test Sock Wrist Disart/Bel E		$219.11		2 per 5 Years	N	Y	Y	N	21-124		
L6682		LT-RT	Test Sock Elbw Disart/Above		$242.26		2 per 5 Years	N	Y	Y	N	21-124		
L6684		LT-RT	Test Socket Shldr Disart/Tho		$329.20		2 per 5 Years	N	Y	Y	N	21-124		
L6691		LT-RT	Removable Insert Each		$250.44		1 per 2 Years	N	Y	Y	N	21-124		
L6692		LT-RT	Silicone Gel Insert Or Equal		$396.43		1 per 2 Years	N	Y	Y	N	21-124		
L6693			Lockingelbow Forearm Cntrbal		$1,580.12			N	Y	Y	N			
L6694		LT-RT	Elbow Socket Ins Use W/Lock		M			N	Y	Y	N			
L6695		LT-RT	Elbow Socket Ins Use W/O Lck		M			N	Y	Y	N			
L6696		LT-RT	Cus Elbo Skt In For Con/Atyp		M			N	Y	Y	N			
L6697		LT-RT	Cus Elbo Skt In Not Con/Atyp		M			N	Y	Y	N			
L6698		LT-RT	Below/Above Elbow Lock Mech		M			N	Y	Y	N			
L6706		LT-RT	Term Dev Mech Hook Vol Open		M		2 every 2 Years	N	Y	Y	N			

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
L6707		LT-RT	Term Dev Mech Hook Vol Close		M		2 every 2 Years	N	Y	Y	N			
L6708		LT-RT	Term Dev Mech Hand Vol Open		M		2 every 2 Years	N	Y	Y	N			
L6709		LT-RT	Term Dev Mech Hand Vol Close		M		2 every 2 Years	N	Y	Y	N			
L6711			Ped Term Dev, Hook, Vol Open		$448.90	0-20	1 per Year	N	Y	Y	N	0-20		
L6712			Ped Term Dev, Hook, Vol Clos		$826.55	0-20	1 per Year	N	Y	Y	N	0-20		
L6713			Ped Term Dev, Hand, Vol Open		$1,043.16	0-20	1 per Year	N	Y	Y	N	0-20		
L6714			Ped Term Dev, Hand, Vol Clos		$883.56	0-20	1 per Year	N	Y	Y	N	0-20		
L6721			Hook/Hand, Hvy Dty, Vol Open		$1,570.46		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N			
L6722			Hook/Hand, Hvy Dty, Vol Clos		$1,353.84		< 21 1 per Year 21 & > 1 per 2 Years	N	Y	Y	N			
L6805		LT-RT	Term Dev Modifier Wrist Unit		$204.93		1 per 5 Years	N	Y	Y	N	21-124		
L6810		LT-RT	Term Dev Precision Pinch Dev		$108.94		1 per 5 Years	N	Y	Y	N	21-124		
L6881		LT-RT	Term Dev Auto Grasp Feature		$2,184.40			N	Y	Y	N			
L6883		LT-RT	Replc Sockt Below E/W Disa **(RO)**		$1,173.00		2 per 2 Years	N	Y	N	N			
L6884		LT-RT	Replc Sockt Above Elbow Disa **(RO)**		$1,525.59		2 per 2 Years	N	Y	N	N			
L6885		LT-RT	Replc Sockt Shldr Dis/Interc **(RO)**		$1,796.76		2 per 2 Years	N	Y	N	N			
L6890		LT-RT	Prefab Glove For Term Device		$106.72		2 per Year	N	Y	N	N			
L6895		LT-RT	Custom Glove For Term Device		$437.72		2 per 2 Years	N	Y	Y	N	21-124		
L6935			Below Elbow Myoelectronic Ct		$6,345.68	0-20		N	Y	Y	N	0-20		
L7186			Electron Elbow Child Switch		M	0-20		N	Y	Y	N	0-20		
L7499			Upper Extremity Prosthes NOS		M			N	Y	Y	N			
L7510			Prosthetic Device Repair Rep		$44.16		2 per Year	N	Y	N	N			
L7520			Repair Prosthesis Per 15 Min		$11.02		Up to 1 Hour Twice a Year	N	Y	N	N			
L7600			Prosthetic Donning Sleeve		$57.78		2 per 6 Months	N	N	N	N			
L8000			Mastectomy Bra		$29.37		2 per 6 Months	N	N	N	N			
L8001			Breast Prosthesis Bra & Form		$89.36			N	N	Y	N			
L8002			Brst Prsth Bra & Bilat Form		$117.54			N	N	Y	N			
L8010		LT-RT	Mastectomy Sleeve		$29.37		2 per 6 Months	N	N	N	N			
L8015			Ext Breastprosthesis Garment		$42.70	21-124	2 per 6 Months	N	N	N	N			
L8020		LT-RT	Mastectomy Form		$120.82		2 per 2 Years	N	N	N	N			
L8030		LT-RT	Breast Prosthes W/O Adhesive		$186.76		2 per 2 Years	N	N	N	N			
L8300			Truss Single W/ Standard Pad		$46.02			N	N	Y	N			
L8310			Truss Double W/ Standard Pad		$79.39			N	N	Y	N			
L8320			Truss Addition To Std Pad Wa		$32.96			N	N	Y	N			
L8330			Truss Add To Std Pad Scrotal		$26.22			Y	N	Y	N			
L8400		LT-RT	Sheath Below Knee		$8.37		6 per 6 Months	N	N	N	N			
L8410		LT-RT	Sheath Above Knee		$11.00		6 per 6 Months	N	N	N	N			
L8415		LT-RT	Sheath Upper Limb		$11.38		3 per 6 Months	N	N	N	N			
L8417		LT-RT	Pros Sheath/Sock W Gel Cushn		$49.67		6 per 6 Months	N	N	N	N			
L8420		LT-RT	Prosthetic Sock Multi Ply BK		$13.70		6 per 6 Months	N	N	N	N			
L8430		LT-RT	Prosthetic Sock Multi Ply AK		$15.67		6 per 6 Months	N	N	N	N			
L8435		LT-RT	Pros Sock Multi Ply Upper Lm		$13.64		3 per 6 Months	N	N	N	N			
L8440		LT-RT	Shrinker Below Knee		$32.31		1 per 6 Months	N	N	N	N			

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L8460		LT-RT	Shrinker Above Knee		$36.22		1 per 6 Months	N	N	N	N			
L8465		LT-RT	Shrinker Upper Limb		$32.74		1 per Year	N	N	N	N			
L8470		LT-RT	Pros Sock Single Ply BK		$3.55		6 per 6 Months	N	N	N	N			
L8480		LT-RT	Pros Sock Single Ply AK		$4.90		6 per 6 Months	N	N	N	N			
L8485		LT-RT	Pros Sock Single Ply Upper L		$8.55		3 per 6 Months	N	N	N	N			
L8499			Unlisted Misc Prosthetic Ser		M			N	N	Y	N			
L8500			Artificial Larynx		$468.82			N	N	Y	N			
L8501			Tracheostomy Speaking Valve		$64.17		2 per 2 Months	N	N	N	N			
L8509			Trach-Esoph Voice Pros Md In		$67.62		1 per Year	N	N	N	N			
L8510			Voice Amplifier		M			N	N	Y	N			
L8515			Gel Cap App Device For Trach		$44.96			N	N	Y	N			
S1040			Cranial Remolding Orthosis		$904.40		1 per 2 Years	N	Y	Y	N		754.0	
S5199			Personal Care Item Nos Each		$0.10		100 per Month	N	N	N	N			
S5498			HIT Simple Cath Care		$3.94		1 per Day	Y	N	N	Y**			
S5501			HIT Complex Cath Care		$3.94		1 per Day	Y	N	N	Y**			
S5502			HIT Interim Cath Care		$3.55		1 per Day	N	N	N	Y**			
S5520			HIT Picc Insert Kit		$110.23			N	N	Y	Y			
S5521			HIT Midline Cath Insert Kit		$110.23			N	N	Y	Y			
S8185			Flutter Device		$40.70		1 per Year	Y	N	Y	N		277.00-277.09	
S8186			Swivel Adaptor		$3.44		4 per Month	Y	N	N	N			
S8189			Trach Supply Noc		$4.37		90 per Month	Y	N	N	N			
S8210			Mucus Trap		$2.25		15 per Month	Y	N	N	N			
S8265			Haberman Feeder		$12.68	0-20	4 per Month	N	N	N	N			
S8421			Ready Gradient Sleev/Glov		$36.78		4 per 3 Months	Y	N	N	N			
S8422			Custom Grad Sleeve Med		M			N	N	Y	N			
S8423			Custom Grad Sleeve Heavy		M			N	N	Y	N			
S8424			Ready Gradient Sleeve		$38.30		4 per 3 Months	Y	N	N	N			
S8425			Custom Grad Glove Med		M			N	N	Y	N			
S8426			Custom Grad Glove Heavy		M			N	N	Y	N			
S8427			Ready Gradient Glove		$53.23		4 per 3 Months	Y	N	N	N			
S8428			Ready Gradient Gauntlet		$17.63		4 per 3 Months	Y	N	N	N			
S8999			Resuscitation Bag		$93.22		1 per 2 Years	Y	N	N	N			
S9001	RR		Home Uterine Monitor With Or		$46.84	14-45		N	N	Y	Y	14-45		
S9326			HIT Cont Pain Per Diem		$37.65	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9327			HIT Int Pain Per Diem		$13.02	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9330			HIT Cont Chem Diem		$22.04	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9330	SH		HIT Cont Chem Diem		$44.08	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9331			HIT Intermit Chemo Diem		$22.04	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9331	SH		HIT Intermit Chemo Diem		$44.08	5-124	1 per Day	Y	N	Y	Y	5-124	140.0-239.9, 516.4-516.5	
S9338			HIT Immunotherapy Diem		$22.04	5-124	Up to 8 Days per Month	Y	N	Y	Y	5-124	279.00-279.2	
S9345			HIT Anti-Hemophil Diem		$22.04	5-124	1 per Day	Y	N	Y	Y	5-124	286.0-286.2, 286.4	
S9346			HIT Alpha-1-Proteinas Diem		$22.04	5-124		Y	N	Y	Y	5-124		
S9348			HIT Sympathomim Diem		$22.04	5-124		Y	N	Y	Y	5-124		

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S9351			HIT Cont Antiemetic Diem		$22.04	5-124	Up to 210 Days per Year	Y	N	Y	Y	5-124	140.0-209.79, 230.0-239.9, 516.4-516.5, 643.00-643.23	
S9355			HIT Chelation Diem		$22.04	5-124	1 per Day	Y	N	Y	Y	5-124	275.01-275.09, 282.40–282.69, 284.01-284.9	
S9374			HIT Hydra 1 Liter Diem		$22.04	5-124	Up to 210 Days per Year	Y	N	Y	Y	5-124	275.2-275.49, 276.0-276.1, 276.7-276.8, 643.00-643.23	
S9375			HIT Hydra 2 Liter Diem		$22.04	5-124	Up to 210 Days per Year	Y	N	Y	Y	5-124	275.2-275.49, 276.0-276.1, 276.7-276.8, 643.00-643.23	
S9376			HIT Hydra 3 Liter Diem		$22.04	5-124	Up to 210 Days per Year	Y	N	Y	Y	5-124	275.2-275.49, 276.0-276.1, 276.7-276.8, 643.00-643.23	
S9377			HIT Hydra Over 3l Diem		$22.04	5-124	Up to 210 Days per Year	Y	N	Y	Y	5-124	275.2-275.49, 276.0-276.1, 276.7-276.8, 643.00-643.23	
S9379			HIT Noc Per Diem		M	5-124		Y	N	Y	Y	5-124		
S9490			HIT Corticosteroid/Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	340, 446.5, 996.80-996.99	
S9497			HIT Antibiotic Q3h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9497	SH		HIT Antibiotic Q3h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
S9497	SJ		HIT Antibiotic Q3h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9500			HIT Antibiotic Q24h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9500	SH		HIT Antibiotic Q24h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9500	SJ		HIT Antibiotic Q24h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
S9501			HIT Antibiotic Q12h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9501	SH		HIT Antibiotic Q12h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9501	SJ		HIT Antibiotic Q12h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9502			HIT Antibiotic Q8h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
S9502	SH		HIT Antibiotic Q8h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9502	SJ		HIT Antibiotic Q8h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9503			HIT Antibiotic Q6h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9503	SH		HIT Antibiotic Q6h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	

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HCPCS Code	R-Mod	I-Mod	Short Description	HCPCS Action Code	Maximum Fee	Age	Limits	NF	ABC	PA	PA MPRO	PA Age	Diagnosis	Comments
S9503	SJ		HIT Antibiotic Q6h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9504			HIT Antibiotic Q4h Diem		$22.04	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9504	SH		HIT Antibiotic Q4h Diem		$44.08	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	
S9504	SJ		HIT Antibiotic Q4h Diem		$55.10	5-124	Up to 60 Days per 4 Months	Y	N	Y	Y	5-124	036.40-036.82, 039.1-039.4, 041.12, 041.3, 042, 052.1-052.2, 053.0-053.14, 053.71-053.79, 054.40-054.44, 054.74, 078.5, 112.0-112.89, 117.3, 136.3, 277.00-227.09, 383.00-383.1, 421.0-422.93, 590.00-590.9, 681.00-682.8, 711.00-711.89, 730.00-730.19, 730.30-730.39	

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S9537			HT Hem Horm Inj Diem		$13.02	5-124	1 per Day	Y	N	Y	Y	5-124	158.8-1589, 174.0-175.9,183.0-183.9, 185, 218.0-218.9, 255.2, 256.0-256.1, 257.0, 259.1, 617.0-617.9, V10.3, V10.43, V10.46	
T4521			Adult Size Brief/Diaper Sm		$0.53	3-124	300 per Month	Y	N	N	N			
T4522			Adult Size Brief/Diaper Med		$0.53	3-124	300 per Month	Y	N	N	N			
T4523			Adult Size Brief/Diaper Lg		$0.65	3-124	300 per Month	Y	N	N	N			
T4524			Adult Size Brief/Diaper Xl		$1.05	3-124	300 per Month	Y	N	N	N			
T4525			Adult Size Pull-On Sm		$1.42	3-124	150 per Month	Y	N	N	N			
T4526			Adult Size Pull-On Med		$1.42	3-124	150 per Month	Y	N	N	N			
T4527			Adult Size Pull-On Lg		$1.42	3-124	150 per Month	Y	N	N	N			
T4528			Adult Size Pull-On Xl		$1.42	3-124	150 per Month	Y	N	N	N			
T4529			Ped Size Brief/Diaper Sm/Med		$0.52	3-12	300 per Month	Y	N	N	N			
T4530			Ped Size Brief/Diaper Lg		$0.53	3-12	300 per Month	Y	N	N	N			
T4531			Ped Size Pull-On Sm/Med		$1.15	3-124	150 per Month	Y	N	N	N			
T4532			Ped Size Pull-On Lg		$1.15	3-124	150 per Month	Y	N	N	N			
T4533			Youth Size Brief/Diaper		$0.53	3-124	300 per Month	Y	N	N	N			
T4534			Youth Size Pull-On		$1.42	3-124	150 per Month	Y	N	N	N			
T4535			Disposable Liner/Shield/Pad		$0.34	3-124	300 per Month	Y	N	N	N			
T4536			Reusable Pull-On Any Size		$1.75	3-124	10 per Month	Y	N	N	N			
T4541			Large Disposable Underpad		$0.38		180 per Month	Y	N	N	N			
T4542			Small Disposable Underpad		$0.38		180 per Month	Y	N	N	N			
T4543			Disp Bariatric Brief/Diaper		$1.72	14-124	300 per Month	Y	N	N	N			
T5001			Position Seat Spec Orth Need		M			N	N	Y	N			
V2623			Plastic eye prosth custom		$468.44			N	Y	N	N			
V2624			Polishing artifical eye		$14.90			N	Y	N	N			
V2625			Enlargement of eye prosthesis		$414.00			N	Y	Y	N			
V2626			Reduction of eye prosthesis		$414.00			N	Y	Y	N			
V2627			Scleral cover shell		$496.55			N	Y	N	N			
V2628			Fabrication and fitting of ocular conformer		$207.00			N	Y	N	N			
V2629			Prosthetic eye, other type		M			N	Y	Y	N			

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