Durable Medical Equipment and Supplies Fee Schedule
Updated 5/1/2015

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A4212		NON-CORING NEEDLE OR STYLET , W/ OR W/O CATHETER	048	N	Y	Y	$5.54	$4.61	$0.00		15/30
A4213		SYRINGE STERILE 20CC OR GREATER, EACH	048	N	Y	N	$0.99	$0.82	$0.00		100/30
A4216		STERILE WATER SALINE, AND/OR DEXTROSE, 10 ML	048	N	Y	N	$0.35	$0.29	$0.00		120/30
A4217		STERILE WATER/SALINE 500 ML	048	N	Y	Y	$2.90	$2.41	$0.00		4/30
A4220		REFILL KIT FOR IMPLANTABLE INFUSION PUMP	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A4221		SUPPLIES FOR MAINTENANCE OF DRUG INFUSION CATHETER	048	N	Y	N	$19.80	$16.48	$0.00		4/30
A4222		INFUSION SUPPLIES-EXTERNAL INFUSION PUMP, PER CASS	048	N	Y	N	$21.58	$17.97	$0.00		30/30
A4223		INFUSION SUPPLIES NOT USED W/ EXTERNAL INF PUMP,PE	048	Y	Y	N	$16.19	$13.48	$0.00		N/A
A4230		INFUSION SET/EXTERNAL INSULIN PUMP, NON-NEEDLE CAN	048	N	N	Y	$12.49	$10.40	$0.00		190/365
A4231		INFUSION SET, EXTERNAL INSULIN PUMP, NEEDLE TYPE	048	N	N	Y	$12.49	$10.40	$0.00		190/365
A4232		SYRINGE WITH NEEDLE FOR EXTERNAL INSULIN PUMP, STE	048	N	N	N	$2.38	$1.98	$0.00		30/30
A4233		REPLACEMENT BATT OTHER THAN J CELL FOR GLUE MONITO	048	N	Y	Y	$3.59	$2.99	$0.00		2/365
A4234		REPLACEMENT BATTERY, ALKALINE J CELL FOR GLUCOSE M	048	N	Y	Y	$3.59	$2.99	$0.00		2/365
A4235		REPLACEMENT BATT LITHIUM FOR USE W/GLUS MONITOR, E	048	N	Y	Y	$3.59	$2.99	$0.00		2/365
A4236		REPLACEMENT BATT, SILVER OXIDE FOR USE W/ GLUC MON	048	N	Y	Y	$3.59	$2.99	$0.00		2/365
A4265		PARAFFIN PER POUND	048	N	Y	Y	$2.95	$2.46	$0.00		6/30
A4267		CONTRACEPTIVE SUPPLY CONDOM, MALE, EACH	048	N	Y	N	$0.58	$0.48	$0.00		30/30
A4268		CONTRACEPTIVE SUPPLY, CONDOM, FEMALE-EACH	048	N	Y	N	$3.12	$2.60	$0.00		30/30
A4269		CONTRACEPTIVE SUPPLY, SPERMICID (EG FOAM, GEL) EAC	048	N	Y	N	$1.26	$1.05	$0.00		30/30
A4284		BREAST SHIELD AND SPLASH PROTECTOR FOR USE WITH P	048	N	Y	N	$3.16	$2.63	$0.00		4/30
A4310		INSERTION TRAY;W/O CATHETER,W/O BAG,SUPPLIES ONLY,	048	N	Y	Y	$7.06	$5.88	$0.00		1/30
A4311		INSERTION TRAY W/O DRAINAGE BAG,WITH FOLEY CATH-LA	048	N	Y	Y	$13.57	$11.30	$0.00		1/30
A4312		INSERTION TRAY W/OUT DRAINAGE BAG W/FOLEY CATH,ALL	048	N	Y	Y	$16.50	$13.74	$0.00		1/30
A4313		INSERTION TRAY W/OUT DRAINAGE BAG, W/ CATH, 3-WAY	048	N	Y	Y	$16.94	$14.10	$0.00		1/30
A4314		INSERTION TRAY WITH DRAINAGE BAG WITH FOLEY CATH-L	048	N	Y	Y	$23.13	$19.26	$0.00		1/30
A4315		INSERTION TRAY W/ DRAINAGE BAG AND FOLEY CATH-ALL	048	N	Y	Y	$24.14	$20.10	$0.00		1/30
A4316		INSERTION TRAY W/DRAINAGE BAG W/FOLEY CATH, CONT.	048	N	Y	Y	$25.98	$21.63	$0.00		1/30
A4320		IRRIGATION TRAY W/ BULB OR PISTON SYRINGE	048	N	Y	Y	$4.55	$3.79	$0.00		1/30
A4322		IRRIGATION SYRINGE, BULB OR PISTON, EACH	048	N	Y	Y	$2.58	$2.15	$0.00		4/30
A4326		CATH; MALE EXTERNAL, SPECIALITY, W/ COLLECT, CHAMB	048	N	Y	Y	$9.49	$7.90	$0.00		30/30
A4327		FEMALE URINARY COLLECTION DEVICE, MEATAL CUP-EACH	048	N	Y	Y	$40.81	$33.97	$0.00		1/30
A4328		FEMALE URINARY COLLECTION DEVICE, POUCH-EACH	048	N	Y	Y	$9.55	$7.95	$0.00		1/30
A4330		PERIANAL FECAL COLLECTION POUCH E/ADHES EACH	048	N	Y	N	$6.33	$5.27	$0.00		30/30
A4331		EXTENSION DRAINAGE TUBING, ANY TYPE W/CON/ADAP/, U	048	N	Y	Y	$2.90	$2.41	$0.00		1/30
A4332		LUBRICANT, INDIVIDUAL STERILE PACKET, EACH	048	N	Y	Y	$0.11	$0.09	$0.00		200/30
A4333		URINARY CATHETER ANCHORING DEVICE, ADHESIVE SKIN A	048	N	Y	Y	$2.01	$1.67	$0.00		8/30
A4334		URINARY CATHETER ANCHORING DEVICE, LEG STRAP, EACH	048	N	Y	Y	$4.50	$3.75	$0.00		2/30
A4338		INDWELLING CATHETER; FOLEY TYPE, LATEX WITH COATIN	048	N	Y	N	$10.69	$8.90	$0.00		1/30
A4340		INDWELLING CATHETER; SPECIALTY TYPE, COUDE, MUSHRO	048	N	Y	Y	$20.05	$16.69	$0.00		1/30
A4344		INDWELLING CATHETER; FOLEY TYPE, ALL SILICONE	048	N	Y	N	$12.55	$10.45	$0.00		2/30
A4349		CATHETER;MALE EXTERNAL W/WITHOUT ADHESIVE, DISPOSA	048	N	Y	Y	$1.49	$1.24	$0.00		30/30
A4351		INTERMITTANT URINARY CATH; STRAIGHT TIP ANY SIZE,	048	N	Y	N	$1.58	$1.32	$0.00		200/30
A4352		INTERMITTANT URINARY CATH; COUDE (CURVED) TIP ANY	048	N	Y	Y	$2.03	$1.69	$0.00		200/30

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**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

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A4353		INTERMITTENT URINARY CATH;ANY TYPE, WITH INSERTION	048	N	Y	Y	$6.09	$5.07	$0.00		200/30
A4355		3WAY IRR SET FOR CATHETER	048	N	Y	Y	$8.32	$6.93	$0.00		30/30
A4356		EXTERNAL URETHRAL CLAMP/COMPRESSION DEVICE-NOT CAT	048	N	Y	Y	$39.80	$33.13	$0.00		1/90
A4357		URINARY DRAINAGE BAG, WITH OR WITHOUT TUBE, EACH	048	N	Y	Y	$8.87	$7.38	$0.00		2/30
A4358		URINARY DRAINAGE BAG, LEG OR ABD, W/ OR W/O TUBES,	048	N	Y	Y	$6.06	$5.04	$0.00		2/30
A4360		DISP. EXTERNAL URETHRAL CLAMP OR COMP DEVICE WITH	048	N	Y	Y	$0.47	$0.39	$0.00		30/30
A4361		OSTOMY FACE PLATE, EACH	048	N	N	N	$16.80	$13.99	$0.00		1/60
A4362		OSTOMY SKIN BARRIER; SOLID, 4X4 OR EQUAL, EACH	048	N	N	N	$2.57	$2.14	$0.00		20/30
A4363		OSTOMY CLAMP, ANY TYPE, REPLACE ONLY, EACH	048	N	N	Y	$2.81	$2.34	$0.00		3/60
A4364		OSTOMY/CATH ADHESIVE, LIQUID/CEMENT/POWDER/PASTE,	048	N	N	N	$2.01	$1.67	$0.00		4/30
A4366		OSTOMY VENT, ANY TYPE, EACH	048	N	N	Y	$1.54	$1.28	$0.00		10/30
A4367		OSTOMY BELT, EACH	048	N	N	Y	$6.17	$5.14	$0.00		1/30
A4368		OSTOMY FILTER, ANY TYPE EACH	048	N	N	Y	$0.23	$0.19	$0.00		30/30
A4369		OSTOMY SKIN BARRIER LIQUID-SPRAY, BRUSH, ETC, PER	048	N	N	Y	$2.10	$1.75	$0.00		2/30
A4371		OSTOMY SKIN BARRIER; POWDER, PER OZ	048	N	N	Y	$3.18	$2.65	$0.00		2/30
A4372		OSTOMY SKIN BARRIER;SOLID 4X4 OR EQUAL BUILT-IN CO	048	N	N	Y	$3.64	$3.03	$0.00		20/30
A4373		OSTOMY BARRIER W/FLANGE STANDARDWEAR W/CONVEXITY A	048	N	N	Y	$5.48	$4.56	$0.00		20/30
A4375		OSTOMY POUCH;DRAINABLE WITH FACEPLATE ATTACHED,PLA	048	N	N	Y	$15.71	$13.08	$0.00		2/30
A4376		OSTOMY POUCH;DRAINABLE WITH FACEPLATE ATTACHED,RUB	048	N	N	Y	$43.52	$36.23	$0.00		1/30
A4377		OSTOMY POUCH;DRAINABLE FOR USE ON FACEPLATE, PLAST	048	N	N	Y	$3.74	$3.11	$0.00		10/30
A4378		OSTOMY POUCH;DRAINABLE FOR USE ON FACEPLATE,RUBBER	048	N	N	Y	$26.83	$22.34	$0.00		4/30
A4379		OSTOMY POUCH,URINARY;WITH FACEPLATE ATTACHED,PLAST	048	N	N	Y	$13.74	$11.44	$0.00		4/30
A4380		OSTOMY POUCH URINARY W/ FACE PLATE ATTACHED RUBBER	048	N	N	Y	$34.14	$28.42	$0.00		4/30
A4381		OSTOMY POUCH,URINARY;FOR USE ON FACEPLATE, PLASTIC	048	N	N	Y	$4.06	$3.38	$0.00		10/30
A4382		OSTOMY POUCH,URINARY;FOR USE ON FACEPLATE,HEAVY PL	048	N	N	Y	$22.52	$18.75	$0.00		4/30
A4383		OSTOMY POUCH, URINARY; FOR USE ON FACEPLATE, RUBBE	048	N	N	Y	$25.78	$21.46	$0.00		4/30
A4384		OSTOMY FACEPLATE EQUIVALENT; SILICONE RING EACH	048	N	N	Y	$8.39	$6.98	$0.00		4/30
A4385		OSTOMY BARRIER SOLID 4X4 EXTENDEDWEAR W/O CONVEXIT	048	N	N	Y	$4.44	$3.70	$0.00		20/30
A4387		OSTOMY POUCH;CLOSED W/STANDARD WEAR BARRIER W/CONV	048	N	N	Y	$3.24	$2.70	$0.00		10/30
A4388		OSTOMY POUCH DRAIN W/EXTENDWEAR BARRIER W/O CONVEX	048	N	N	Y	$3.80	$3.16	$0.00		10/30
A4389		OSTOMY POUCH DRAIN W/STANDARDWEAR BARRIER W/CONVEX	048	N	N	Y	$5.42	$4.51	$0.00		30/30
A4390		OSTOMY(1PIECE)EACH POUCH DRAIN W/EXTENDED WEAR BAR	048	N	N	Y	$8.38	$6.98	$0.00		10/30
A4391		OSTOMY POUCH,URINARY;W/EXTENDED BARRIER ATTACHED 1	048	N	N	Y	$6.16	$5.13	$0.00		8/30
A4392		OSTOMY POUCH;URINARY;W/STANDARD WEAR BARRIER W/CON	048	N	N	Y	$7.48	$6.23	$0.00		10/30
A4393		OSTOMY POUCH,URINARY;W/EXTENDEDWEAR BARRIER W/CONV	048	N	N	Y	$8.27	$6.88	$0.00		10/60
A4394		OSTOMY DEODORANT FOR POUCH, LIQUID, PER FLUID OZ	048	N	N	Y	$2.25	$1.87	$0.00		4/30
A4395		OSTOMY DEODORANT FOR POUCH,SOLID, PER TABLET	048	N	N	Y	$0.04	$0.03	$0.00		30/30
A4396		OSTOMY BELT WITH PERISTOMAL HERNIA SUPPORT	048	N	N	Y	$37.81	$31.48	$0.00		4/180
A4397		OSTOMY IRRIGATION SUPPLY; SLEEVE, EACH	048	N	N	Y	$4.38	$3.65	$0.00		4/30
A4398		OSTOMY IRRIGATION SUPPLY: BAG, EACH	048	N	N	Y	$12.04	$10.02	$0.00		1/90
A4399		OSTOMY IRRIGATION SUPPLY: CONE/CATHETER, W/WO BRUS	048	N	N	Y	$11.21	$9.33	$0.00		1/90
A4400		OSTOMY IRRIGATION SET	048	N	N	Y	$40.43	$33.66	$0.00		1/90
A4402		LUBRICANT, PER OUNCE, ANY TYPE	048	N	N	Y	$1.18	$0.98	$0.00		8/30

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A4404		OSTOMY RING, EACH	048	N	N	N	$1.47	$1.22	$0.00		10/30
A4405		OSTOMY SKIN BARRIER NON-PECTIN BASED PASTE PER OUN	048	N	N	Y	$3.10	$2.58	$0.00		4/30
A4406		OSTOMY SKIN BARRIER PECTIN BASED PER OUNCE	048	N	N	Y	$5.24	$4.36	$0.00		4/30
A4407		OT SKIN BARR W/FLANGE EX WEAR BUILT IN CONVEX 4X4	048	N	N	Y	$8.01	$6.67	$0.00		10/30
A4408		OST SKIN BARR.W/FLANG EX WEAR BUILT-IN CONVEX 4X4	048	N	N	Y	$9.02	$7.51	$0.00		10/30
A4409		OST SKIN BARR W/FLANGE EX WEAR WITH OUT CONVEX 4X4	048	N	N	Y	$5.68	$4.73	$0.00		10/30
A4410		OST SKIN BARR W/FLANGE EX WEAR WITH OUT CONVEX 4X4	048	N	N	Y	$8.26	$6.88	$0.00		10/30
A4411		OSTOMY SKIN BARRIER SOLID 4X4 OR EQUIV EXT WEAR W/	048	N	N	Y	$4.44	$3.70	$0.00		4/30
A4412		OSTOMY POUCH DRAINABLE HIGH OUTPUT USE W/2 PIECE S	048	N	N	Y	$5.03	$4.19	$0.00		20/30
A4413		OST POUCH DRAINABLE HIGH OUTPUT USE W/2 PIECE SYST	048	N	N	Y	$5.03	$4.19	$0.00		20/30
A4414		OST SKIN BARR W/FLANG WITHOUT BUILT IN CONVEX 4X4	048	N	N	Y	$4.50	$3.75	$0.00		20/30
A4415		OST SKIN BARR W/FLANGE WITHOUT BUILT IN CONVEX 4X4	048	N	N	Y	$5.49	$4.57	$0.00		20/30
A4416		OSTOMY POUCH, CLOSED, W/BARR ATTAC W/FILTER ONE PI	048	N	N	Y	$2.51	$2.09	$0.00		60/30
A4417		OSTOMY POUCH, CLO., W/BARR W/BLT IN CONVEX, W/FILT	048	N	N	Y	$3.40	$2.83	$0.00		60/30
A4418		OSTOMY POUCH, CLOSED, W/OUT BARR ATTACED, W/FILTER	048	N	N	Y	$1.65	$1.37	$0.00		60/30
A4419		OSTOMY POUCH, CLOSED, FOR USE ON BARR W/NON-LOCK F	048	N	N	Y	$1.59	$1.32	$0.00		60/30
A4420		OSTOMY POUCH, CLOSED, FOR USE ON BARR W/LOCK (2 PI	048	N	N	Y	$1.32	$1.10	$0.00		60/30
A4421		OSTOMY SUPPLIES; MISCELLANEOUS	048	Y	N	N	$0.00	$0.00	$0.00		N/A
A4422		OST ABSOR MATERIAL (SHEET/PAD/CRYSTAL PACKET) USE	048	N	N	Y	$0.11	$0.09	$0.00		30/30
A4423		OSTOMY POUCH CLOSED, USE W/BARR W/LOCK FLANG, W/FI	048	N	N	Y	$1.70	$1.42	$0.00		60/30
A4424		OSTOMY POUCH, DRAINABLE, W/BARRIER ATTACHED, W/FIL	048	N	N	Y	$4.34	$3.61	$0.00		20/30
A4425		OSTOMY POUCH, DRAINABLE, USE W/BARRIER W/NON-LOCK	048	N	N	Y	$3.27	$2.72	$0.00		20/30
A4426		OSTOMY POUCH, DRAINABLE, USE ON BARRIER W/LOCK FLA	048	N	N	Y	$2.15	$1.79	$0.00		20/30
A4427		OSTOMY POUCH, DRAINABLE, USE ON BARRIER W/LOCK FG,	048	N	N	Y	$1.96	$1.63	$0.00		20/30
A4428		OSTOMY POUCH, URINARY, W/EXT WEAR BARRIER ATTA, W/	048	N	N	Y	$5.95	$4.95	$0.00		20/30
A4429		OSTOMY POUCH, URINARY, W/ BARR ATTA W/BUILT IN CON	048	N	N	Y	$7.55	$6.29	$0.00		20/30
A4430		OSTOMY POUCH, URINARY, W/EXT WEAR BARR W/CONV/ VAL	048	N	N	Y	$7.96	$6.63	$0.00		20/30
A4431		OSTOMY POUCH, URINARY, W/BARR ATTA/VALUE	048	N	N	Y	$5.69	$4.74	$0.00		20/30
A4432		OSTOMY POUCH, URINARY, USE ON BARR W/NON-LOCK FG W	048	N	N	Y	$3.28	$2.73	$0.00		20/30
A4433		OSTOMY POUCH, URINARY, USE ON BARR W/LOCKING FLANG	048	N	N	Y	$3.05	$2.54	$0.00		20/30
A4434		OSTOMY POUCH, URINARY, USE ON BARR W/LOCK FG VALVE	048	N	N	Y	$3.43	$2.86	$0.00		20/30
A4450		TAPE,NON WATERPROOF, PER 18 SQUARE INCHES	048	N	Y	Y	$0.08	$0.07	$0.00		120/30
A4452		TAPE,WATERPROOF PER 18 SQ. INCHES	048	N	Y	Y	$0.32	$0.27	$0.00		120/30
A4455		OSTOMY ADHESIVE REMOVER OR SOLVENT PER OUNCE	048	N	N	Y	$1.10	$0.92	$0.00		8/90
A4456		ADHESIVE REMOVER, WIPES, ANY TYPE, EACH	048	N	Y	Y	$0.20	$0.17	$0.00		50/30
A4463		SURGICAL DRESSING HOLDER, REUSABLE, EACH	048	N	Y	Y	$2.86	$2.38	$0.00		12/30
A4465		NON-ELASTIC BINDER EXTREMITY	048	N	Y	Y	$0.87	$0.72	$0.00		2/30
A4466		GARMENT,BELT,SLEEVE, OR OTHER COVERING ELAS OR SIM	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
A4481		TRACH, STOMA FILTER ANY TYPE, ANY SIZE, EACH	048	N	Y	Y	$0.34	$0.28	$0.00		30/30
A4555		ELECTRODE-TRANDUCER, USE W-ELEC STIM DEVICE FOR CA	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A4556		ELECTRODES,(E.G., APNEA MONITOR) PER PAIR PT OWNED	048	N	Y	Y	$9.44	$7.86	$0.00		4/30
A4557		LEAD WIRE (EG, APNEA MONITOR) PER PAIR	048	N	Y	N	$16.40	$13.65	$0.00		2/365
A4558		CONDUCTIVE PASTE OR GEL FOR USE WITH TENS/NMES	048	N	Y	Y	$3.13	$2.61	$0.00		1/30

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A4561		PESSARY, ANY TYPE	048	N	N	Y	$30.63	$25.50	$0.00		1/365
A4565		SLINGS, ARM; ANY TYPE, EACH	048	N	Y	N	$6.95	$5.79	$0.00		1/365
A4566		SHOULDER SLING OR VEST DESIGN ABD RESTRAINER WITH/	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A4595		TENS NMES STIMULATOR SUPPLIES, 2 LEAD/MONTH PT OWN	048	N	Y	Y	$26.35	$21.94	$0.00		2/30
A4604		TUBING W/ INTEGRATED HEATING ELEMENT USE WITH CPAP	041	N	Y	Y	$55.30	$46.04	$0.00		1/180
A4605		TRACHEAL SUCTION CATHETER, CLOSED SYSTEM, EACH	048	N	Y	N	$15.96	$13.29	$0.00		30/30
A4606		OXYGEN, REPLACEMENT PROBE FOR OXIMETER DEVICE	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
A4615		CANNULA, NASAL	048	Y	Y	Y	$1.34	$1.12	$0.00		1/30
A4619		FACE TENT	048	Y	Y	Y	$1.10	$0.92	$0.00		2/30
A4623		TRACHEOSTOMY INNER CANNULA	048	N	Y	Y	$5.09	$4.24	$0.00		30/30
A4624		TRACHEAL SUCTION CATHETER, ANY TYPE,OTHER THAN CL	048	N	Y	Y	$1.95	$1.62	$0.00		300/30
A4626		TRACHEOSTOMY CLEANING BRUSH	048	N	Y	Y	$2.48	$2.06	$0.00		2/30
A4628		OROPHARYNGEAL SUCTION CATHETER, EACH	048	N	Y	Y	$1.79	$1.49	$0.00		12/365
A4629		TRACHEOSTOMY CARE KIT FOR ESTABLISHED TRACHEOSTOMY	048	N	Y	Y	$4.23	$3.52	$0.00		30/30
A4630		REPLACEMENT BATTERIES FOR MEDICALLY NECESSARY TENS	048	N	Y	Y	$4.86	$4.05	$0.00		1/30
A4635		CRUTCH-UNDERARM PAD, REPLACEMENT, EACH	048	N	Y	Y	$3.98	$3.31	$0.00		2/365
A4636		HANDGRIP-CANE CRUTCH OR WALKER, REPLACEMENT, EACH	048	N	Y	Y	$3.85	$3.21	$0.00		2/365
A4637		TIP-CANE CRUTCH OR WALKER, REPLACEMENT, EACH	048	N	Y	Y	$1.85	$1.54	$0.00		4/365
A4640		ALTERNATING PRESSURE PAD REPLACEMENT, PT OWNED	041	N	Y	Y	$33.28	$27.71	$0.00		2/365
A4649		MEDICAL SUPPLIES - NEC	048	Y	N	N	$0.00	$0.00	$0.00		N/A
A4657		SYRINGE,WITH OR WITHOUT NEEDLE,EACH	048	N	Y	Y	$0.59	$0.49	$0.00		4/30
A4660		BLOOD PRESSURE KIT W/CUFF AND STETHOSCOPE	041	N	Y	N	$26.90	$22.39	$0.00		1/365
A4663		BLOOD PRESSURE CUFF ONLY	041	N	Y	Y	$15.45	$12.86	$0.00		1/365
A4670		AUTO BLOOD PRESSURE MONITOR	041	N	Y	N	$63.37	$52.76	$0.00		1/1825
A4927		GLOVES/NON-STERILE, PER 100	048	N	Y	N	$7.78	$6.48	$0.00		2/30
A4930		GLOVES, STERILE, PER PAIR	048	N	Y	N	$0.70	$0.58	$0.00		60/30
A4931		THERMOMETER, ORAL REUSABLE ANY TYPE EACH	048	N	Y	N	$1.79	$1.49	$0.00		1/365
A4932		THERMOMETER RECTAL REUSABLE ANY TYPE EACH	048	N	Y	N	$1.79	$1.49	$0.00		1/365
A5051		OSTOMY POUCH, CLOSED; W/BARRIER ATTACHED (1 PC)	048	N	N	Y	$1.90	$1.58	$0.00		60/30
A5052		OSTOMY POUCH, CLOSED; W/O BARRIER ATTACHED (1 PC)	048	N	N	Y	$1.36	$1.13	$0.00		60/30
A5053		OSTOMY POUCH, CLOSED; FOR USE ON FACEPLATE	048	N	N	Y	$1.60	$1.33	$0.00		60/30
A5054		OSTOMY POUCH, CLOSED; FOR USE ON BARRIER W/FLANGE	048	N	N	Y	$1.63	$1.36	$0.00		60/30
A5055		OSTOMY STOMA CAP	048	N	N	Y	$1.25	$1.04	$0.00		30/30
A5056		OSTOMY POUCH DRAINABLE W/EXT WEAR BARRIER W FILTER	048	N	Y	Y	$4.58	$3.81	$0.00		20/30
A5057		OSTOMY POUCH DRAINBLE W EXT BARRIER W BLT CONVEXIT	048	N	Y	Y	$9.44	$7.86	$0.00		20/30
A5061		OSTOMY POUCH, DRAINABLE; W/BARRIER (1 PC) EACH	048	N	N	Y	$3.22	$2.68	$0.00		30/30
A5062		OSTOMY POUCH, DRAINABLE; W/O BARRIER (1 PC)	048	N	N	Y	$1.83	$1.52	$0.00		20/30
A5063		OSTOMY POUCH, DRAINABLE; FOR USE W/BARRIER W/FLANG	048	N	N	Y	$1.98	$1.65	$0.00		20/30
A5071		OSTOMY POUCH,URINARY; W/BARRIER (1 PC)	048	N	N	Y	$5.50	$4.58	$0.00		20/30
A5072		OSTOMY POUCH, URINARY; W/O BARRIER (1 PC)	048	N	N	Y	$3.13	$2.61	$0.00		20/30
A5073		OSTOMY POUCH; URINARY; FOR USE W/BARRIER W/FLANGE	048	N	N	Y	$2.77	$2.31	$0.00		20/30
A5081		STOMA PLUG OR SEAL, ANY TYPE	048	N	N	Y	$3.02	$2.51	$0.00		30/30
A5082		OSTOMY CONTINENT DEVICE, STOMA CATHETER, EACH	048	N	N	Y	$10.36	$8.62	$0.00		1/30

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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A5093		OSTOMY ACCESSORY, CONVEX INSERT, EACH	048	N	N	Y	$1.60	$1.33	$0.00		10/30
A5105		URINARY SUSPENSORY WITH LEG BAG, WITH OR WITHOUT T	048	N	Y	Y	$37.28	$31.04	$0.00		1/30
A5112		URINARY DRN BAG, LEG/ABD, LATEX, W/WO TUBE, WITH S	048	N	Y	Y	$31.66	$26.36	$0.00		1/30
A5113		LEG STRAP, LATEX, REPLACEMENT ONLY, PER SET	048	N	Y	Y	$4.30	$3.58	$0.00		1/30
A5114		LEG STRAP, FOAM OR FABRIC, REPLACEMENT ONLY, PER S	048	N	Y	Y	$6.95	$5.79	$0.00		1/30
A5120		SKIN BARRIER, WIPES OR SWABS, EAC	048	N	N	Y	$0.18	$0.15	$0.00		50/30
A5121		OSTOMY SKIN BARRIER; SOLID 6X6 OR EQUAL, EACH	048	N	N	Y	$6.46	$5.38	$0.00		20/30
A5122		OSTOMY SKIN BARRIER; SOLID, 8X8 OR EQUAL, EACH	048	N	N	Y	$11.21	$9.33	$0.00		20/30
A5126		OSTOMY ADHESIVE OR NON-ADHESIVE DISK OR FOAM PAD,	048	N	N	Y	$0.97	$0.81	$0.00		20/30
A5131		APPLIANCE CLEANER, INCONTINENCE AND OSTOMY, PER 16	048	N	N	Y	$12.64	$10.52	$0.00		1/30
A5200		PERCUTANEOUS CATHETER/TUBE ANCHORING DEVICE ADHESI	048	N	Y	Y	$10.32	$8.59	$0.00		1/30
A5500		DIABETIC ONLY-CUSTOM PREP OF OFF SHELF DEPTH INLAY	041	N	N	Y	$42.29	$35.21	$0.00		2/365
A5501		DIABETIC ONLY,CUSTOM PREP SHOE MOLDED FROM CAST, E	041	N	N	Y	$147.81	$123.05	$0.00		2/365
A5503		DIABETIC ONLY-MOD-OFF SHELF/MOLD SHOE W/ROLLER/RIG	041	N	N	Y	$24.14	$20.10	$0.00		2/365
A5504		DIABETIC ONLY-MOD-OFF SHELF/MOLD SHOE W/ WEDGES	041	N	N	Y	$24.14	$20.10	$0.00		2/365
A5505		DIABETIC ONLY, MOD OFF SHELF/MOLD SHOE W/METATARSA	041	N	N	Y	$24.14	$20.10	$0.00		2/365
A5506		DIABETIC ONLY,MOD OFF SHELF/MOLD SHOE W/OFF-SET HE	041	N	N	Y	$24.14	$20.10	$0.00		2/365
A5507		DIABETIC ONLY,NOT OTHERWISE SPECIFIED MODIFICATION	041	N	N	Y	$24.14	$20.10	$0.00		2/365
A5512		DIABETCS ONLY, MUL. INSERT MOLDED W/HEAT, INC ARCH	041	N	N	Y	$22.15	$18.44	$0.00		2/365
A5513		DIABETCS ONLY, MUL. DENT INSERT INCLUD ARCH, CUST	041	N	N	Y	$33.05	$27.51	$0.00		2/365
A6000		NON-CONTACT WOUND WARMING COVER,W/WOUND DEVICE/CAR	048	Y	N	N	$109.75	$91.37	$0.00		N/A
A6010		COLLAGEN-BASE WOUND FILLER,DRY FORM,PER GRAM COLLA	048	N	Y	Y	$28.00	$23.31	$0.00		30/30
A6011		COLLAGEN BASED WOUND FILLER GEL/PASTE PER GRAM COL	048	N	Y	Y	$2.08	$1.73	$0.00		30/30
A6021		COLLAGEN DRESSING, PAD SIZE 16SQ IN OR LESS, EACH,	048	N	Y	Y	$19.23	$16.01	$0.00		30/30
A6022		COLLAGEN DRESSING,PAD MORE THAN 16SQ IN LESS THAN	048	N	Y	Y	$19.23	$16.01	$0.00		30/30
A6023		COLLAGEN DRESSING, PAD SIZE MORE THAN 48SQ IN EACH	048	N	Y	Y	$174.05	$144.90	$0.00		30/30
A6024		COLLAGEN DRESSING WOUND FILLER PER 6 INCHES, STERI	048	N	Y	Y	$5.66	$4.71	$0.00		3/30
A6154		WOUND POUCH, EACH	048	N	Y	Y	$12.74	$10.61	$0.00		30/30
A6196		ALGINATE DRESSING,WOUND COVER,PAD SIZE 16 SQ" LESS	048	N	Y	Y	$6.72	$5.59	$0.00		30/30
A6197		ALGINATE DRESING,WOUND COVER,PAD SZE >16 SQ",<48 S	048	N	Y	Y	$15.03	$12.51	$0.00		30/30
A6198		ALGINATE DRESSING, WOUND COVER,PAD SIZE > 48 SQ",	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6199		ALGINATE DRESSING, WOUND FILLER, PER 6 INCHES, STE	048	N	Y	Y	$4.60	$3.83	$0.00		60/30
A6203		COMPOSITE DRESSING,16 SQ" OR LESS,W/ADHESIVE BORDE	048	N	Y	Y	$3.06	$2.55	$0.00		12/30
A6204		COMPOSITE DRESSING,17 TO 48 SQ" W/ADHESIVE BORDER,	048	N	Y	Y	$5.70	$4.75	$0.00		12/30
A6205		COMPOSITE DRESSING >48 SQ",ANY SIZE ADHESIVE BORDE	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6206		CONTACT LAYER, 16 SQ IN OR LESS, EACH DRESSING, ST	048	N	Y	Y	$1.93	$1.61	$0.00		4/30
A6207		CONTACT LAYER, 17 TO 48 SQ", EACH DRESSING, STERIL	048	N	Y	Y	$6.71	$5.59	$0.00		4/30
A6208		CONTACT LAYER, MORE THAN 48 SQ. IN., EACH DRESSING	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6209		FOAM DRESSING,WOUND COVER 16 SQ"OR LESS,W/O ADHESIV	048	N	Y	Y	$6.53	$5.44	$0.00		12/30
A6210		FOAM DRESSING,WOUND COVER,17-48 SQ",W/O ADHESIVE,E	048	N	Y	Y	$18.21	$15.16	$0.00		12/30
A6211		FOAM DRESSING,WOUND COVER MORE THAN 48SQ"W/O ADHES	048	N	Y	Y	$26.86	$22.36	$0.00		12/30
A6212		FOAM DRESSING,WOUND COVER,16 SQ" OR LESS,W/ADHESIV	048	N	Y	Y	$8.87	$7.38	$0.00		12/30
A6213		FOAM DRESSING,WOUND COVER,17-48 SQ" W/ADHESIVE,EA.	048	N	Y	Y	$7.09	$5.90	$0.00		12/30

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LTC Y: covered by LTC
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***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A6214		FOAM DRESSING,WOUND COVER,MORE THAN 48 SQ"W/ADHESI	048	N	Y	Y	$9.41	$7.83	$0.00		12/30
A6215		FOAM DRESSING, WOUND FILLER, PER GRAM, STERILE	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6216		GAUZE,NON-IMPREGNATED,NON-STERILE 16 SQ"OR < W/O A	048	N	Y	Y	$0.05	$0.04	$0.00		90/30
A6217		GAUZE,NON-IMPREGNATED,NON-STERILE,17-48 SQ",W/O AD	048	N	Y	Y	$0.11	$0.09	$0.00		90/30
A6218		GAUZE,NON-IMPREGNATED,NON-STERILE>48 SQ"W/O ADHESI	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6219		GAUZE,NON-IMPREGNATED,16 SQ" OR LESS, W/ ADHESIVE,	048	N	Y	Y	$0.87	$0.72	$0.00		90/30
A6220		GAUZE,NON-IMPREGNATED,17-48 SQ" W/ADHESIVE, EACH,	048	N	Y	Y	$2.25	$1.87	$0.00		90/30
A6221		GAUZE,NON-IMPREGNATED,>48 SQ" W/ADHESIVE BORDER,EA	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6222		GAUZE IMPREG.NOT H20/SALINE,16SQ"OR <W/O ADHESIVE,	048	N	Y	Y	$1.95	$1.62	$0.00		30/30
A6223		GAUZE IMPREG. NOT H20/SALINE 17-48 SQ" W/O ADHESIV	048	N	Y	Y	$2.10	$1.75	$0.00		30/30
A6224		GAUZE,IMPREG. NOT H2O/SALINE,>48 SQ" W/O ADHESIVE,	048	N	Y	Y	$3.30	$2.75	$0.00		30/30
A6228		GAUZE,IMPREGNATED,H2O/SALINE,16 SQ" OR LESS, W/O A	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
A6229		GAUZE,IMPREGNATED,H2O/SALINE,>16 SQ"</=48 SQ"W/O A	048	N	Y	N	$3.30	$2.75	$0.00		30/30
A6230		GAUZE,IMPREGNATED,H2O/SALINE,>48 SQ" W/O ADHESIVE,	048	N	Y	Y	$1.72	$1.43	$0.00		30/30
A6231		HYDROGEL, IMPREGNATED GAUZE 16SQ IN OR LESS EACH,	048	N	Y	Y	$4.26	$3.55	$0.00		30/30
A6232		HYDROGEL,IMPREGNATED GAUZE 16SQ IN UP TO 48SQ IN E	048	N	Y	Y	$6.30	$5.24	$0.00		30/30
A6234		HYDROCOLLOID DRESSING,16 SQ"OR LESS" W/O ADHESIVE,	048	N	Y	Y	$5.98	$4.98	$0.00		12/30
A6235		HYDROCOLLOID DRESSING,17-48 SQ" W/O ADHESIVE, EACH	048	N	Y	Y	$15.38	$12.80	$0.00		12/30
A6236		HYDROCOLLOID DRESSING,MORE THAN 48 SQ" W/O ADHESIV	048	N	Y	Y	$24.93	$20.75	$0.00		12/30
A6237		HYDROCOLLOID DRESSING,16 SQ" OR LESS WITH ADHESIVE	048	N	Y	Y	$7.24	$6.03	$0.00		12/30
A6238		HYDROCOLLOID DRESSING, 17-48 SQ " W/ADHESIVE, EACH	048	N	Y	Y	$20.84	$17.35	$0.00		12/30
A6239		HYDROCOLLOID DRESSING,MORE THAN 48 SQ" W/ADHESIVE,	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6240		HYDROCOLLOID DRESSING,WOUND FILLER,PASTE,PER FL. O	048	N	Y	Y	$11.20	$9.32	$0.00		12/30
A6241		HYDROCOLLOID DRESSING, WOUND FILLER,DRY FORM, PER	048	N	Y	Y	$2.24	$1.86	$0.00		12/30
A6242		HYDROGEL DRESSING, 16 SQ " OR LESS,W/O ADHESIVE,EA	048	N	Y	Y	$5.55	$4.62	$0.00		30/30
A6243		HYDROGEL DRESSING, 17-48 SQ" W/O ADHESIVE, EACH, S	048	N	Y	Y	$11.26	$9.37	$0.00		30/30
A6244		HYDROGEL DRESSING, >48SQ " W/O ADHESIVE, EACH, STE	048	N	Y	Y	$35.92	$29.90	$0.00		12/30
A6245		HYDROGEL DRESSING, 16 SQ " OR LESS W/ ADHESIVE,EAC	048	N	Y	Y	$6.65	$5.54	$0.00		12/30
A6246		HYDROGEL DRESSING, 17-48 SQ " W/ ADHESIVE, EACH, S	048	N	Y	Y	$9.07	$7.55	$0.00		12/30
A6247		HYDROGEL DRESSING, >48 SQ", WITH ADHESIVE, EACH, S	048	N	Y	Y	$21.75	$18.11	$0.00		12/30
A6248		HYDROGEL DRESSING, WOUND FILLER, GEL, PER FLUID OZ	048	N	Y	Y	$14.86	$12.37	$0.00		12/30
A6250		SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, ANY TYPE	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
A6251		SPECIAL ABSORB DRESSING 16 SQ"OR <,W/O ADHESIVE,EA	048	N	Y	Y	$1.82	$1.52	$0.00		30/30
A6252		SPECIAL ABSORB DRESSING 17-48 SQ" W/O ADHESIVE,EAC	048	N	Y	Y	$2.98	$2.48	$0.00		30/30
A6253		SPECIAL ABSORB DRESSING >48 SQ"WITHOUT ADHESIVE,EA	048	N	Y	Y	$5.80	$4.83	$0.00		30/30
A6254		SPECIAL ABSORB DRESSING 16 SQ"OR< WITH ADHESIVE,EA	048	N	Y	Y	$1.06	$0.88	$0.00		30/30
A6255		SPECIAL ABSORB DESSING 17-48 SQ" W/ADHESIVE, EACH,	048	N	Y	Y	$2.64	$2.20	$0.00		30/30
A6256		SPECIAL ABSORB DRESSING >48 SQ" WITH ADHESIVE, EAC	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6257		TRANSPARENT FILM, 16 SQ" OR LESS, EACH DRESSING, S	048	N	Y	Y	$1.40	$1.17	$0.00		12/30
A6258		TRANSPARENT FILM, 17-48 SQ" EACH, STERILE	048	N	Y	Y	$3.93	$3.27	$0.00		12/30
A6259		TRANSPARENT FILM, MORE THAN 48 SQ", EACH, STERILE	048	N	Y	Y	$10.00	$8.33	$0.00		12/30
A6260		WOUND CLEANSERS, ANY TYPE, ANY SIZE	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
A6261		WOUND FILLER, NEC, GEL/PASTE, PER FLUID OUNCE	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A

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LTC Y: covered by LTC
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***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A6262		WOUND FILLER, NEC, DRY FORM, PER GRAM	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6266		GAUZE,IMPREG OTR THN H2O/SALINE,ANY WIDTH,PER LINE	048	N	Y	Y	$1.75	$1.46	$0.00		300/30
A6402		GAUZE, NON-IMPREGNATED, 16 SQ" OR LESS, W/O ADHESI	048	N	Y	Y	$0.11	$0.09	$0.00		200/30
A6403		GAUZE NON-IMPREGNATED 17-48 SQ " W/O ADHESIVE, STE	048	N	Y	Y	$0.39	$0.32	$0.00		100/30
A6404		GAUZE, NON-IMPREGNATED, STERILE, >48 SQ". W/O ADHE	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6407		PACKING STRIPS,NON-IMPREGATED,UP TO 2IN,WIDTH,PER	048	N	Y	Y	$1.71	$1.42	$0.00		100/30
A6410		EYE PAD, STERILE, EACH	048	N	Y	Y	$0.35	$0.29	$0.00		30/30
A6411		EYE PAD, NON-STERILE EACH	048	N	Y	Y	$0.23	$0.19	$0.00		30/30
A6412		EYE PATCH, OCCLUSIVE EACH	048	N	Y	N	$1.82	$1.52	$0.00		4/30
A6441		BANDAGE PADDING, NON ELAS/WOVEN/KNITTED,WIDTH 3-5"	048	N	Y	Y	$0.60	$0.50	$0.00		90/30
A6442		CONFORMING BANDAGE, NON-ELASTIC/STERILE WIDTH <3 I	048	N	Y	Y	$0.20	$0.17	$0.00		180/30
A6443		CONFORMING BANDAGE-NON-ELASTIC, KNIT/WOVEN, 3-<5-/	048	N	Y	Y	$0.25	$0.21	$0.00		180/30
A6444		CONFORMING BANDAGE-NON-ELASTIC, KNIT/WOVEN, 5- OR	048	N	Y	Y	$0.42	$0.35	$0.00		180/30
A6445		CONFORMING BANDAGE, NON/ELAS/KNITT/WOV,STER, WIDTH	048	N	Y	Y	$0.29	$0.24	$0.00		180/30
A6446		CONFORMING BANDAGE-NON-ELASTIC, KNIT/WOVEN, STERIL	048	N	Y	Y	$0.37	$0.31	$0.00		180/30
A6447		CONFORMING BANDAGE, NON/ELAS/KNITT/WOV,STER, 5 INS	048	N	Y	Y	$0.61	$0.51	$0.00		180/30
A6448		LT COMPRESSION BANDAGE, ELAS/KNIT/WOV, <3 INS PER	048	N	Y	Y	$1.06	$0.88	$0.00		12/30
A6449		LIGHT COMPRESSION BANDAGE-ELASTIC, KNIT/WOVEN, 3-<	048	N	Y	Y	$1.60	$1.33	$0.00		12/30
A6450		LT COMPRESSION BANDAGE, ELAS/KNIT/WOV, 5 INS OR >P	048	N	Y	Y	$0.35	$0.29	$0.00		12/30
A6451		MODERATE COMPRESSION BANDAGE-ELASTIC, KNIT/WOVEN,	048	N	Y	Y	$0.35	$0.29	$0.00		12/30
A6452		HIGH COMPRESSION BANDAGE-ELASTIC, KNIT/WOVEN, 3-<5	048	N	Y	Y	$5.40	$4.50	$0.00		12/30
A6453		SELF-ADHERENT BANDAGE-ELASTIC, NON-KNIT/WOVEN, <3-	048	N	Y	Y	$0.55	$0.46	$0.00		12/30
A6454		SELF-ADHERENT BANDAGE-ELASTIC, NON-KNIT/WOVEN3-<5-	048	N	Y	Y	$0.70	$0.58	$0.00		12/30
A6455		SELF ADHERENT BANDAGE, ELAS/NON/KNIT/WOV, 5 INS OR	048	N	Y	Y	$1.26	$1.05	$0.00		12/30
A6456		ZINC PASTE IMPREG BANDAGE, NON ELAS/KNIT/WOV 3-5 I	048	N	Y	Y	$1.17	$0.97	$0.00		20/30
A6457		TUBULAR DRESSING W/WO ELASTIC, ANY WIDTH, PER LINE	048	N	Y	Y	$1.04	$0.87	$0.00		100/30
A6501		GARMENT BURN COMPRESSION BODY SUIT (HEAD TO FOOT)	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6502		GARMENT BURN COMPRESSION CHIN STRAP CUSTOM FABRICA	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6503		GARMENT BURN COMPRESSION FACIAL HOOD, CUSTOM FABRI	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6504		GARMENT BURN COMPRESSION GLOVE TO WRIST CUSTOM FAB	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6505		GARMENT BURN COMPRESSION GLOVE TO ELBOW CUSTOM FAB	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6506		GARMENT BURN COMPRESSION GLOVE TO AXILLA CUSTOM FA	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6507		GARMENT,BURN COMPRESSION FOOT TO KNEE LENGTH CUST	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6508		GARMENT BURN COMPRESSION FOOT TO THIGH LENGTH CUST	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6509		GARMENT BURN COMPRESSION UPPER TRUNK TO WAIST/ARM	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6510		GARMENT BURN COMPRESSION TRUNK/ARMS DOWN TO LEGS (	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6511		GARMENT BURN COMPRESSION-LOWER TRUNK & LEGS (PANTY	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6512		GARMENT BURN COMPRESSION NOT OTHERWISE CLASSIFIED	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
A6513		COMPRESSION BURN MASK, FACE AND/OR NECK, PLAST OR	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A6530		GRADIENT COMP STOCKING, BELOW KNEE 18-30 MMHG, EAC	041	N	Y	N	$16.83	$14.01	$0.00		4/180
A6531		GRADIENT COMP STOCKING, BELOW KNEE 30-40 MMHG EACH	041	N	Y	N	$18.50	$15.40	$0.00		4/180
A6532		GRADIENT COMP STOCKING, BELOW KNEE, 40-50 MMHG EAC	041	N	Y	N	$24.64	$20.51	$0.00		4/180
A6533		GRADIENT COMP STOCKING THIGH LENGTH 18-30 MMHG EAC	041	N	Y	N	$24.38	$20.30	$0.00		4/180

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LTC Y: covered by LTC
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A6534		GRADIENT COMP STOCKING, THIGH LENGTH, 30-40 MMHG E	041	N	Y	N	$27.26	$22.69	$0.00		4/180
A6535		GRADIENT COMP STOCKING, THIGH LENGTH 40-50 MMHG, E	041	N	Y	N	$39.43	$32.83	$0.00		4/180
A6536		GRADIENT COMP STOCK; FULL LENGTH/CHAP STYLE 18-30	041	N	Y	N	$27.04	$22.51	$0.00		4/180
A6537		GRADIENT COMP STOCK; FULL LENGTH/CHAP, STYLE30-40	041	N	Y	N	$23.88	$19.88	$0.00		4/180
A6538		GRADIENT COMP STOCKING; FULL LENGTH/CHAP, 40-50 MM	041	N	Y	N	$26.64	$22.18	$0.00		4/180
A6539		GRADIENT COMP STOCKING; WAIST LENGTH, 18-30 MMHG,	041	N	Y	N	$29.06	$24.19	$0.00		4/180
A6540		GRADIENT COMP STOCKING; WAIST LENGTH, 30-40 MMHG,	041	N	Y	N	$37.54	$31.25	$0.00		4/180
A6541		GRADIENT COMP STOCKING; WAIST LENGTH, 40-50 MMHG,	041	N	Y	N	$51.05	$42.50	$0.00		4/180
A6544		GRADIENT COMPRESSION STOCKING: GARTER BELT	041	N	Y	N	$23.33	$19.42	$0.00		1/60
A6545		GRADIENT COMPRESSION WRAP-NON-ELASTIC, BELOW KNEE,	041	N	Y	N	$81.81	$68.11	$0.00		4/365
A6549		GRADIENT COMPRESSION STOCKING/ SLEEVE, NOS	041	Y	N	N	$0.00	$0.00	$0.00		N/A
A7000		CANISTER DISPOSABLE USED WITH SUCTION PUMP, EACH P	048	N	Y	N	$7.77	$6.47	$0.00		2/30
A7002		TUBING,USED W/ SUCTION PUMP EACH PT OWNED	048	N	Y	Y	$3.34	$2.78	$0.00		2/30
A7003		ADMIN SET WITH SMALL VOLUME NONFILTER NEBULIZER DI	048	N	Y	N	$2.13	$1.77	$0.00		2/30
A7005		ADMINISTRATION SET, PERMANENT W/ SMALL VOLUME NEBU	048	N	Y	Y	$21.81	$18.16	$0.00		2/365
A7006		ADMIN. SET,FILTERED DISPOSABLE,W/SMALL VOLUME NEBU	048	N	Y	Y	$8.32	$6.93	$0.00		1/30
A7007		LARGE VOL NEBULIZER DISPOSABLE UNFILLED, USED W/AE	048	N	Y	N	$2.38	$1.98	$0.00		2/30
A7010		CORRUGATED TUBING DISPOSABLE/LARGE VOL NEBULIZER P	048	N	Y	Y	$21.57	$17.96	$0.00		1/60
A7012		WATER COLLECTION DEVICE USED WITH LARGE VOL NEB PT	048	N	Y	N	$2.93	$2.44	$0.00		4/30
A7013		FILTER,DISPOSABLE;USED W/ AEROSOL COMPRESSOR OR UL	048	N	Y	Y	$0.65	$0.54	$0.00		2/30
A7014		FILTER NON DISPOSABLE USED/AEROSOL COMPRESSOR	048	N	Y	N	$4.11	$3.42	$0.00		1/30
A7015		AEROSOL MASK, USED W/DME NEBULIZER,EACH	048	N	Y	Y	$1.50	$1.25	$0.00		1/30
A7018		SOLUTION;DISTILLED WATER;1000ML EACH USED W/LG VOL	048	N	Y	Y	$0.36	$0.30	$0.00		18/30
A7020		INTERFACE FOR COUGH STIMULATIODEVICE, INCL ALL COM	048	N	Y	Y	$14.33	$11.93	$0.00		2/365
A7025		THERAPY VEST; VEST REPLACEMENT FOR PATIENT OWNED E	041	N	Y	Y	$397.80	$331.17	$0.00		1/1095
A7026		THERAPY VEST SYSTEM REPLACEMENT HOSE FOR PATIENT O	041	N	Y	Y	$26.29	$21.89	$0.00		2/365
A7027		COMBINATION ORAL/NASAL MASK USE WITH CPAP DEVICE,	041	N	Y	Y	$170.60	$142.02	$0.00		2/365
A7028		ORAL CUSHION FOR COMBINATION ORAL/NASAL CPAP MASK	041	N	Y	Y	$45.31	$37.72	$0.00		2/365
A7029		NASAL PILLOWS FOR COMBINATION ORAL/NASAL CPAP MASK	041	N	Y	Y	$18.52	$15.42	$0.00		3/365
A7030		CPAP/BIPAP; FULL MASK; EACH	041	N	Y	Y	$172.53	$143.63	$0.00		2/365
A7031		CPAP/BIPAP;FACE MASK INTERFACE REPLACEMENT FOR FUL	041	N	Y	Y	$63.81	$53.12	$0.00		1/365
A7032		CPAP/BIPAP;REPLACEMENT CUSHION FOR NASAL DEVICE, E	041	N	Y	Y	$37.06	$30.85	$0.00		2/60
A7033		CPAP/BIPAP; REPLACEMENT PILLOWS FOR NASAL DEVICE,	041	N	Y	Y	$25.98	$21.63	$0.00		2/60
A7034		CPAP/BIPAP;NASAL DEVICE (MASK OR CANNULA) INTERFAC	041	N	Y	Y	$107.59	$89.57	$0.00		1/180
A7035		CPAP/BIPAP;HEADGEAR FOR USE WITH CPAP, EACH	041	N	Y	Y	$36.35	$30.26	$0.00		2/365
A7036		CPAP/BIPAP;CHINSTRAP FO USE WITH CPAP, EACH	041	N	Y	Y	$14.15	$11.78	$0.00		2/365
A7037		CPAP/BIPAP; TUBNG FOR USE WITH CPAP, EACH	041	N	Y	Y	$37.37	$31.11	$0.00		1/180
A7038		CPAP/BIPAP; DISPOSABLE FILTER, FOR USE WITH CPAP,	048	N	Y	Y	$4.18	$3.48	$0.00		2/30
A7039		CPAP/BIPAP; NON-DISPOSABLE FILTER, FOR USE WITH CP	041	N	Y	Y	$12.79	$10.65	$0.00		1/180
A7044		CPAP/BIPAP ORAL INTERFACE FOR USE WITH CPAP EACH	041	N	Y	Y	$110.58	$92.06	$0.00		2/365
A7046		WATER CHAMBER FOR CPAP HUMIDIFIER REPLACEMENT EACH	048	N	Y	Y	$17.84	$14.85	$0.00		1/120
A7047		ORAL INTERFACE USED W RESPIRATORY SUCTION PUMP EAC	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A7048		VACUUM DRAIN, BOTTLE TUBE KIT	048	Y	Y	Y	$87.10	$72.51	$0.00		N/A

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LTC Y: covered by LTC
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***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
A7501		TRACH TUBE;TRACHEOSTOMA VALVE INCLUDING DIAPHRAGM,	048	N	Y	Y	$96.06	$79.97	$0.00		1/120
A7507		FILTER HOLDER & FILTER W/O ADHESIVE, FOR HEAT/MOIS	048	N	Y	Y	$2.32	$1.93	$0.00		90/30
A7520		TRACH/LARY TUBE, NON CUFFED PVC, SILICONE OR EQUAL	048	N	Y	Y	$52.38	$43.61	$0.00		2/30
A7521		TRACH/LARY TUBE, CUFFED PVC, SILICONE OR EQUAL, EA	048	N	Y	Y	$52.38	$43.61	$0.00		2/30
A7522		TRACH/LARY TUBE, STAINLESS STEEL OR =, STERILIZAB	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
A7523		TRACHEOSTOMY SHOWER PROTECTOR EACH	048	N	Y	N	$10.06	$8.37	$0.00		2/365
A7524		TRACHEOSTOMY STENT/STUD/BUTTON EACH	048	N	Y	Y	$70.79	$58.93	$0.00		1/90
A7525		TRACHEOSTOMY MASK, EACH, PATIENT OWNED EQUIPMENT	048	N	Y	Y	$1.26	$1.05	$0.00		2/30
A7526		TRACHEOSTOMY TUBE COLLAR/HOLDER EACH	048	N	Y	Y	$2.60	$2.16	$0.00		30/30
A7527		TRACH/LARYN,TUBE PLUG/STOP,EACH	041	N	Y	N	$3.28	$2.73	$0.00		4/30
A8000		HELMET,PROTECTIVE,SOFT,PREFAB, INCLUDES ALL COMPO/	041	N	Y	N	$140.26	$116.77	$0.00		1/730
A8001		HELMET,PROTECTIVE,HARD,PREFAB,INCLUDES ALL COMPO/A	041	N	Y	N	$140.26	$116.77	$0.00		1/730
A8002		HELMET,PROTECTIVE,SOFT,CUSTOM FABRICATED,INCLUDES	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
A8003		HELMET,PROTECTIVE,HARD,CUSTOM FABRICATED,INCL ALL	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
A8004		SOFT INTERFACE FOR HELMET, REPLACEMENT ONLY	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
A9900		MISCELLANEOUS DME SUPPLY ACCESSORY COMPONENT OF HC	041	R	Y	N	$0.00	$0.00	$0.00		N/A
A9999		MISCELLANEOUS DME SUPPLY OR ACCESSORY, NEC	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
B4034		ENTERAL FEEDNG SUP KIT;SYRINGE FED, PER DAY INC AL	048	N	Y	Y	$5.18	$4.31	$0.00		30/30
B4035		ENTERAL FEEDNG SUPPLY KIT PUMP FED PER DAY INCL AL	048	N	Y	N	$9.87	$8.22	$0.00		30/30
B4036		ENTERAL FEEDNG SUPPLY KIT GRAVITY FED PER DAY INC	048	N	Y	N	$6.76	$5.63	$0.00		30/30
B4081		NASOGASTRIC TUBE W/ STYLET, EACH	048	N	Y	Y	$14.55	$12.11	$0.00		1/30
B4082		NASOGASTRIC TUBE W/O STYLET, EACH	048	N	Y	Y	$11.29	$9.40	$0.00		1/30
B4087		GASTROSTOMY/JEJUNOSTOMY TUBE, STANDARD, ANY MATERI	048	N	Y	Y	$30.19	$25.13	$0.00		1/30
B4088		GASTROSTOMY/JEJUNOSTOMY TUBE, LOW-PROFILE,ANY MATE	048	N	Y	Y	$125.06	$104.11	$0.00		4/365
B4100		FOOD THICKENER, ADMINISTERED ORALLY	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
B4149		ENTERAL FORM MANU/BLEND NATURAFOOD W/INTACT NUT,TH	048	Y	Y	N	$1.32	$1.10	$0.00		N/A
B4150		ENTERAL FORMULA:COMPLET W/INTACT NUTRIENTS,100 CAL	048	Y	Y	N	$0.55	$0.46	$0.00		N/A
B4152		ENTERAL FORMULA;CALORIE DENSE>/=1.5KCAL, 100 CAL=1	048	Y	Y	N	$0.47	$0.39	$0.00		N/A
B4153		ENTERAL FORMULA:HYDROLYZED PROTEIN/AMINO ACIDS,100	048	Y	Y	N	$1.59	$1.32	$0.00		N/A
B4154		ENTERAL FORMULA: SPEC.METABOLIC NONINHERIT, 100 CA	048	Y	Y	N	$1.02	$0.85	$0.00		N/A
B4155		ENTERAL FORMULA: INCOMPLETE/MODULAR 100 CAL=1 UNIT	048	Y	Y	N	$0.79	$0.66	$0.00		N/A
B4157		ENTERAL FORMULA-SPEC METABOLIC NEEDS-INHERITED,100	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
B4158		ENTERAL FORMULA-PEDS-COMPLETE NUTRITION, 100CAL=1U	048	Y	Y	N	$0.55	$0.46	$0.00		N/A
B4159		ENTERAL FORMULA-PEDS-COMP NUTRITION, SOY BASED, 10	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
B4160		ENTERAL FORMULA-PEDS-CAL DENSE, =/>0.7CAL/ML, 100C	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
B4161		ENTERAL FORMULA-PEDS-HYDRO/AMINO ACID/PEPTIDE, 100	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
B4162		ENTERAL FORMULA-PEDIATRIC-SPEC METABOLIC NEEDS, 10	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
B4224		PARENTERAL NUTRITION ADMINISTRATION KIT, PER DAY	048	N	N	Y	$20.29	$16.89	$0.00		30/30
B9000		PUMP; ENTERAL INFUSION, WITHOUT ALARM	041	B	Y	Y	$750.09	$624.45	$75.01	$62.45	N/A
B9002		PUMP; ENTERAL INFUSION, WITH ALARM	041	B	Y	Y	$750.09	$624.45	$75.01	$62.45	N/A
B9998		ENTERAL SUPPLIES NOT OTHERWISE CLASSIFIED	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
B9999		NOT OTHERWISE CLASSIFIED FOR PARENTERAL SUPPLIES	048	Y	N	N	$0.00	$0.00	$0.00		N/A
E0100		CANE, ANY MATERIAL; ADJUSTABLE OR FIXED W/ TIP, EA	041	N	Y	Y	$19.28	$16.05	$0.00		1/365

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LTC Y: covered by LTC
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E0105		CANE, ANY MATERIAL; QUAD OR THREE PRONG, ADJ/FIXED	041	N	Y	Y	$44.91	$37.39	$0.00		1/365
E0110		CRUTCHES-FOREARM; ADJUSTABLE OR FIXED, OTHER MATER	041	N	Y	Y	$64.11	$53.37	$0.00		1/365
E0111		CRUTCH-FOREARM;ADJUSTABLE OR FIXED, OTHER MATERIAL	041	N	Y	Y	$48.47	$40.35	$0.00		1/365
E0112		CRUTCHES-UNDERARM; ADJUSTABLE OR FIXED, WOOD; PAIR	041	N	Y	Y	$21.95	$18.27	$0.00		1/365
E0113		CRUTCH-UNDERARM;ADJUSTABLE OR FIXED, WOOD;EACH	041	N	Y	Y	$19.24	$16.02	$0.00		1/365
E0114		CRUTCHES-UNDERARM;ADJUSTABLE OR FIXED;OTHER MATERI	041	N	Y	Y	$34.27	$28.53	$0.00		1/365
E0116		CRUTCH-UNDERARM; ADJUST/FIXED, NON-WOOD, W/WO SHOC	041	N	Y	Y	$25.24	$21.01	$0.00		1/365
E0130		WALKER; RIGID PICKUP, ADJUSTABLE/FIXED, EACH	041	N	Y	Y	$64.24	$53.48	$0.00		1/365
E0135		WALKER; FOLDING, ADJUSTABLE OR FIXED HEIGHT	041	N	Y	Y	$76.68	$63.84	$0.00		1/365
E0140		WALKER W/TRUNK SUPPORT, ADJUS/FIXED HGT, ANY TYPE	041	N	Y	Y	$329.92	$274.66	$0.00		1/1095
E0141		WALKER; RIGID WHEELED AJUST OR FIXED HEIGHT	041	N	Y	Y	$92.98	$77.41	$0.00		1/365
E0143		WALKER; FOLDING, WHEELED, ADJUSTED OR FIXED HEIGHT	041	N	Y	Y	$109.97	$91.55	$0.00		1/365
E0144		WALKER;ENCLOSED FRAME,WHEELED,W/POSTERIOR SEAT, RI	041	N	Y	Y	$291.26	$242.47	$0.00		1/1095
E0148		WALKER; HEAVY DUTY, W/O WHEELS, RIGID/FOLDING ANY	041	N	Y	Y	$116.21	$96.74	$0.00		1/1095
E0149		WALKER; HEAVY DUTY, WHEELED RIGID/FOLDING, ANY TYP	041	N	Y	Y	$204.15	$169.95	$0.00		1/1095
E0153		CRUTCH-FOREARM PLATFORM ATTACHMENT, EACH	041	N	Y	Y	$53.67	$44.68	$0.00		2/365
E0154		WALKER-PLATFORM ATTACHMENT, EACH	041	N	Y	Y	$52.28	$43.52	$0.00		2/365
E0155		WALKER-WHEEL ATTACHMENT FOR PICKUP WALKER, PAIR	041	N	Y	Y	$23.03	$19.17	$0.00		1/365
E0156		WALKER - SEAT ATTACHMENT	041	N	Y	Y	$19.66	$16.37	$0.00		1/365
E0157		WALKER-CRUTCH ATTACHMENT EACH	041	N	Y	Y	$74.92	$62.37	$0.00		2/365
E0158		WALKER-LEG EXTENSIONS PER SET OF FOUR> 6' TALL	041	N	Y	Y	$28.06	$23.36	$0.00		1/1095
E0159		WALKER, WHEELED; BRAKE ATTACHMENT, EACH	041	N	Y	Y	$15.30	$12.74	$0.00		2/365
E0160		SITZ BATH, PORTABLE, USED W/OR W/O COMMODE	041	N	Y	Y	$30.24	$25.17	$0.00		1/365
E0161		SITZ BATH, PORTABLE, USED W/OR W/O COMMODE W/FAUCE	041	N	Y	Y	$22.87	$19.04	$0.00		1/365
E0163		COMMODE CHAIR; STATIONARY, OR MOBLE W/FIXED ARMS	041	N	Y	Y	$120.95	$100.69	$0.00		1/365
E0165		COMMODE CHAIR; STATIONARY, OR MOBLE W/DETACHABLE A	041	N	Y	Y	$129.98	$108.21	$0.00		1/1095
E0167		COMMODE ACCESSORY; PAIL OR PAN, REPLACEMENT	041	N	Y	Y	$8.25	$6.87	$0.00		1/365
E0168		COMMODE CHAIR;EXTRA WIDE AND/OR HEAVY DUTY ANY TYP	041	N	Y	Y	$126.82	$105.58	$0.00		1/1095
E0175		COMMODE ACCESSORY; FOOTREST, EACH	041	N	Y	Y	$32.56	$27.11	$0.00		2/1095
E0181		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD W/P	041	N	Y	Y	$124.08	$103.30	$0.00		1/1095
E0182		ALTERNATING PRESSURE PAD PUMP, REPLACEMENT	041	N	Y	Y	$123.11	$102.49	$0.00		1/730
E0184		MATTRESS-DRY PRESSURE	041	N	Y	Y	$144.36	$120.18	$0.00		1/730
E0185		MATTRESS PAD; GEL OR GEL-LIKE PAD, STD SIZE	041	N	Y	Y	$110.45	$91.95	$0.00		1/730
E0186		MATTRESS - AIR PRESSURE	041	N	Y	Y	$157.86	$131.42	$0.00		1/730
E0187		MATTRESS-WATER PRESSURE	041	N	Y	Y	$68.24	$56.81	$0.00		1/730
E0188		PAD-SHEEPSKIN-SYNTHETIC	041	N	Y	N	$17.42	$14.50	$0.00		1/60
E0189		PAD-SHEEPSKIN-LAMBS WOOL, ANY SIZE	041	N	Y	N	$60.44	$50.32	$0.00		1/60
E0190		POSITIONING CUSHION/PILLOW/WEDGE, ANY SHAPE OR SIZ	041	N	Y	N	$23.26	$19.36	$0.00		1/365
E0191		PROTECTOR-HEEL OR ELBOW; EACH	041	N	Y	Y	$9.13	$7.60	$0.00		4/60
E0193		BED-POWERED AIR FLOTATION (LOW AIR-LOSS THERAPY)	041	B	Y	Y	$7,306.29	$6,082.49	$730.63	$608.25	N/A
E0194		BED-AIR FLUIDIZED	041	B	Y	Y	$28,475.68	$23,706.00	$2,847.56	$2,370.59	N/A
E0196		MATTRESS-GEL PRESSURE	041	N	Y	Y	$284.26	$236.65	$0.00		1/730
E0197		PRESSURE PAD; AIR, FOR MATTRESS, STANDARD	041	N	Y	Y	$98.39	$81.91	$0.00		1/730

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E0198		PRESSURE PAD;WATER, FOR MATTRESS, STANDARD	041	Y	Y	Y	$47.20	$39.29	$0.00		N/A
E0199		PRESSURE PAD;DRY, FOR MATTRESS, STANDARD	041	N	Y	Y	$16.46	$13.70	$0.00		2/365
E0200		HEAT LAMP WITHOUT STAND	041	N	Y	Y	$32.00	$26.64	$0.00		1/1095
E0202		PHOTOTHERAPY (BILIRUBIN) LIGHT W/PHOTOMETER	041	R	Y	Y	$0.00	$0.00	$54.61	$45.46	daily
E0205		HEAT LAMP W/STAND	041	N	Y	Y	$169.29	$140.93	$0.00		1/1095
E0210		HEATING PAD - STANDARD ELECTRIC	041	N	Y	Y	$21.56	$17.95	$0.00		1/365
E0215		HEATING PAD - MOIST ELECTRIC	041	N	Y	Y	$40.28	$33.53	$0.00		1/365
E0217		WATER CIRCULATING HEAT PAD WITH PUMP	041	Y	Y	Y	$312.56	$260.21	$0.00		N/A
E0218		WATER CIRCULATING COLD PAD WITH PUMP	041	N	Y	Y	$141.44	$117.75	$0.00		1/1095
E0235		PARAFFIN BATH UNIT PORTABLE	041	Y	Y	Y	$147.24	$122.58	$0.00		N/A
E0236		PUMP FOR WATER CIRCULATING PAD	041	Y	Y	Y	$400.16	$333.13	$0.00		1/1095
E0240		BATH/SHOWER,CHAIR W/WITHOUT WHEELS, ANY SIZE	041	N	Y	N	$105.55	$87.87	$0.00		2/730
E0241		RAIL - BATH TUB WALL, EACH	041	N	Y	N	$13.91	$11.58	$0.00		2/365
E0242		RAIL - BATH TUB FLOOR BASE, EACH	041	N	Y	N	$23.80	$19.81	$0.00		1/365
E0243		RAIL - TOILET, EACH	041	N	Y	N	$28.34	$23.59	$0.00		2/365
E0244		RAISED TOILET SEAT	041	N	Y	N	$20.66	$17.20	$0.00		1/365
E0245		TUB STOOL OR BENCH	041	N	Y	N	$37.94	$31.59	$0.00		1/365
E0246		RAIL - TRANSFER TUB ATTACHMENT, EACH	041	N	Y	N	$56.69	$47.19	$0.00		1/1095
E0247		TRANSFER BENCH FOR TUB OR TOILET W/WITHOUT COMMODE	041	N	Y	N	$105.55	$87.87	$0.00		1/1095
E0248		TRANSFER BENCH, HD FOR TUB OR TOILET W/WO COMMODE	041	N	Y	N	$407.15	$338.95	$0.00		1/1095
E0249		PAD FOR WATER CIRCULATING HEAT UNIT, REPLACE ONLY	041	N	Y	Y	$21.20	$17.65	$0.00		1/365
E0250		HOSPITAL BED, FIXED HEIGHT, W/RAILS, W/MATTRESS	041	B	Y	Y	$574.50	$478.27	$57.45	$47.83	N/A
E0251		HOSPITAL BED, FIXED HEIGHT, W/RAILS, W/O MATTRESS	041	B	Y	Y	$678.58	$564.92	$67.85	$56.49	N/A
E0255		HOSPITAL BED, VARIABLE HEIGHT, W/RAILS,W/MATTRESS	041	B	Y	Y	$659.34	$548.90	$65.93	$54.89	N/A
E0256		HOSPITAL BED, VARIABLE HEIGHT, W/RAILS, W/O MATTRE	041	B	Y	Y	$565.53	$470.80	$56.55	$47.08	N/A
E0260		HOSPITAL BED, SEMI-ELECTRIC, W/RAILS, W/MATTRESS	041	B	Y	Y	$864.01	$719.29	$86.40	$71.93	N/A
E0261		HOSPITAL BED, SEMI-ELECTRIC, W/RAILS, W/O MATTRESS	041	B	Y	Y	$725.85	$604.27	$72.58	$60.42	N/A
E0265		HOSPITAL BED, TOTAL ELECTRIC, W/RAILS, W/MATTRESS	041	B	Y	Y	$1,008.53	$839.60	$100.85	$83.96	N/A
E0266		HOSPITAL BED, TOTAL ELECTRIC, W/RAILS, W/O MATTRES	041	B	Y	Y	$1,004.86	$836.55	$100.48	$83.65	N/A
E0271		MATTRESS INNERSPRING, REPLACEMENT, PT OWNED HOSP.	041	N	Y	Y	$128.91	$107.32	$0.00		1/730
E0272		MATTRESS-FOAM RUBBER	041	N	Y	Y	$93.65	$77.96	$0.00		1/730
E0275		BED PAN STANDARD METAL/PLASTIC	041	N	Y	Y	$11.90	$9.91	$0.00		1/365
E0276		BED PAN-FRACTURE- METAL/PLASTIC	041	N	Y	Y	$3.17	$2.64	$0.00		1/365
E0277		MATTRESS-POWERED PRESSURE REDUCING AIR	041	B	Y	Y	$2,903.16	$2,416.88	$290.31	$241.68	N/A
E0280		CRADLE-FOR BED-ANY TYPE	041	N	Y	Y	$33.32	$27.74	$0.00		1/365
E0300		PEDIATRIC CRIB, HOSP GRADE, FULLY ENCLOSED	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0303		HOSP. BED,X- HEAVY DUTY X-WD WT CAP 350-600 IB/RAI	041	B	Y	Y	$2,887.70	$2,404.01	$288.77	$240.40	N/A
E0304		HOSP. BED,X- HEAVY DUTY X-WD WT >600 IB/SIDE RAILS	041	B	Y	Y	$3,679.23	$3,062.96	$367.92	$306.29	N/A
E0305		RAIL-BEDSIDE-HALF LENGTH-EACH	041	N	Y	Y	$77.13	$64.21	$0.00		2/1095
E0310		RAIL-BEDSIDE-FULL LENGTH-EACH	041	N	Y	Y	$78.80	$65.60	$0.00		2/1095
E0316		SAFETY ENCLOSURE FRAME/CANOPY USE W/HOSPITAL BED,A	041	Y	Y	Y	$177.73	$147.96	$0.00		N/A
E0325		URINAL-MALE;JUG-TYPE,ANY MATERIAL	041	N	Y	Y	$7.85	$6.54	$0.00		1/180
E0326		URINAL-FEMALE; JUG-TYPE ANY MATERIAL	041	N	Y	Y	$9.28	$7.73	$0.00		1/180

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E0328		HOSP BED PEDS, MAN 360 DEGREE ENCL,TOP OF HEAD/RAI	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0329		HOSP BED PEDS ELEC/SEMI 360 DEG, TOP OF HEAD/RAIL	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0371		MATTRESS-NONPOWERED ADVANCED PRESSURE REDUCING OVE	041	B	Y	Y	$1,623.33	$1,351.42	$162.33	$135.14	N/A
E0372		MATTRESS-POWERED AIR OVERLAY FOR MATTRESS	041	B	Y	Y	$2,060.46	$1,715.33	$206.04	$171.53	N/A
E0373		MATTRESS-NONPOWERED ADVANCED PRESSURE REDUCING MAT	041	B	Y	Y	$5,620.07	$4,678.71	$562.01	$467.87	N/A
E0425	nr	OXYGEN COMPRESSED GAS-STATIONARY	041	Y	Y	Y	$115.40	$96.07	$0.00		1/1825
E0431	nr	OXYGEN-COMPRESSED GAS-PORTABLE W/HUMIDIFIER TUBING	041	R	Y	Y	$0.00	$0.00	$27.66	$23.03	1/30
E0434	nr	OXYGEN-LIQUID,PORTABLE;W/HUMIDIFIER TUBING MASK/CA	041	R	Y	Y	$0.00	$0.00	$27.66	$23.03	1/30
E0439	nr	OXYGEN-LIQUID,STATIONARY,W/HUMIDIFIER TUBING MASK/	041	R	Y	Y	$0.00	$0.00	$165.50	$137.78	1/30
E0441	nr	STATIONARY OXYGEN CONTENTS, GASEOUS, 1 MONTH SUPPL	048	Y	N	Y	$72.80	$60.61	$0.00		1/30
E0442	nr	STATIONARY OXYGEN CONTENTS, LIQUID, 1 MONTH SUPPLY	048	Y	N	Y	$72.80	$60.61	$0.00		1/30
E0443	nr	PORTABLE OXYGEN CONTENTS, GASEOUS, 1 MONTH SUPPLY=	048	Y	N	Y	$72.80	$60.61	$0.00		1/30
E0444	nr	PORTABLE OXYGEN CONTENTS, LIQUID, 1 MONTH SUPPLY=1	048	Y	N	Y	$72.80	$60.61	$0.00		1/30
E0445		OXIMETER DEVICE FOR MEASURING BLOOD OXY LEVEL NON-	041	B	Y	N	$547.90	$456.13	$54.79	$45.61	N/A
E0450		VOLUM CONTROL VENT,W/O PRESSUR SUPPORT,W/INVASIVE	041	R	Y	N	$0.00	$0.00	$832.70	$693.22	N/A
E0460		NEGATIVE PRESSURE VENTILATOR, PORT OR STAT.	041	R	Y	Y	$0.00	$0.00	$670.93	$558.55	N/A
E0461		VOL.CONTROL VENT,W/O PRESSURE,SUPPORT,NON-INVASIVE	041	R	Y	Y	$0.00	$0.00	$383.68	$319.41	N/A
E0463		PRESSURE SUPPORT VENT W/VOLUM CONTROL,W/INVASIV IN	041	R	Y	Y	$0.00	$0.00	$832.70	$693.22	N/A
E0464		PRESSUR SUPPORT VENT,W/VOLUM CONTROL W/NON-INVAS I	041	R	Y	Y	$0.00	$0.00	$832.70	$693.22	N/A
E0470		BIPAP WITHOUT BACKUP RATE, USED WITH NONINVASIVE I	041	B	Y	Y	$2,238.48	$1,863.53	$223.85	$186.36	N/A
E0471		BIPAP WITH BACKUP RATES, USED W/NONINVASIVE INTERF	041	B	Y	Y	$3,836.83	$3,194.16	$383.68	$319.41	N/A
E0472		BIPAP WITH BACKUP RATE, USED WITH INVASIVE INTERFA	041	B	Y	Y	$3,836.83	$3,194.16	$383.68	$319.41	N/A
E0480		PERCUSSOR-ELECTRIC OR PNEUMATIC	041	B	Y	Y	$384.50	$320.10	$38.45	$32.01	N/A
E0481		INTRAPULMONARY PERCUSSIVE VENTILATION SYSTEM/ACCES	041	B	Y	N	$384.50	$320.10	$38.45	$32.01	N/A
E0482		COUGH STIMULATING DEVICE,ALTERNATE POSITIVE/NEG AI	041	B	Y	Y	$3,315.50	$2,760.15	$331.55	$276.02	N/A
E0483		HIGH FREQ CHEST WALL OSCILATN AIR PLSE GENRATR SYS	041	B	N	Y	$10,790.81	$8,983.35	$719.39	$598.89	15 mos
E0484		OSCILLATORY POSITIVE EXPIR PRESSURE DEVICE, NON-EL	041	N	Y	Y	$33.76	$28.11	$0.00		1/365
E0485		ORAL DEVICE/APPL USED TO REDUCE AIRWAY COLL, PRE.	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
E0486		ORAL DEVICE/APPLIANCE USED TO REDUCE AIRWAY COLL,	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0500		IPPB MACHINE-ALL TYPES	041	B	Y	Y	$957.63	$797.23	$95.76	$79.72	N/A
E0550		HUMIDIFIER,DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMI	041	B	Y	Y	$371.69	$309.43	$37.17	$30.94	N/A
E0555		HUMIDIFIER,DURABLE;GLASS/PLASTIC BOTTLE,USE W/REGU	041	N	Y	Y	$1.71	$1.42	$0.00		1/30
E0561		HUMIDIFIER, NON HEATED, USED WITH CPAP OR BIPAP DE	041	B	Y	Y	$93.34	$77.71	$9.33	$7.77	N/A
E0562		HUMIDIFIER, HEATED, USED WITH POS AIRWAY PRESSURE	041	B	Y	Y	$260.67	$217.01	$26.07	$21.70	N/A
E0565		COMPRESSOR-AIR POWER SOURCE EQUIPMENT	041	B	Y	Y	$378.79	$315.34	$37.88	$31.54	N/A
E0570		NEBULIZER W/ COMPRESSOR	041	N	Y	Y	$94.01	$78.26	$0.00		1/1825
E0574		NEBULIZER;ULTRASONIC SMALL VOLUME	041	Y	Y	Y	$366.33	$304.97	$0.00		N/A
E0575		NEBULIZER; ULTRASONIC, LARGE VOLUME	041	B	Y	Y	$821.21	$683.66	$82.12	$68.36	N/A
E0580		NEBULIZER,DURABLE,GLASS/AUTOCLAVABLE PLAS,BOTTLE,U	041	Y	Y	Y	$122.60	$102.06	$0.00		1/365
E0600		RESPIRATORY SUCTION PUMP, HOME MODEL, PORT., STAT.	041	B	Y	Y	$296.08	$246.49	$29.61	$24.65	N/A
E0601		CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE	041	B	Y	Y	$750.57	$624.85	$75.06	$62.49	N/A
E0602		BREAST PUMP, MANUAL;COMPLETE KIT	041	N	Y	N	$20.42	$17.00	$0.00		1/365
E0603		BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE	041	N	Y	N	$116.51	$96.99	$0.00		1/1825

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E0605		VAPORIZER, ROOM TYPE	041	N	Y	Y	$24.17	$20.12	$0.00		1/365
E0606		BOARD-POSTURAL DRAINAGE	041	N	Y	Y	$251.83	$209.65	$0.00		1/1095
E0610		MONITOR-PACEMAKER;SELF-CONTAINED,W/AUDIBLE/VISIBLE	041	B	Y	Y	$163.72	$136.30	$16.37	$13.63	N/A
E0615		MONITOR-PACEMAKER;SELF-CONTAINED,W/DIGITAL/VISIBLE	041	B	Y	Y	$163.72	$136.30	$16.37	$13.63	N/A
E0617		DEFIBRILLATOR;EXTERNAL WITH INTEGRATED ELECTROCARD	041	Y	Y	Y	$2,780.90	$2,315.10	$0.00		N/A
E0619		MONITOR;APNEA WITH RECORDING FEATURE	041	B	Y	Y	$2,934.88	$2,443.29	$244.57	$203.60	12 mos
E0621		PATIENT LIFT-SLING OR SEAT, CANVAS OR NYLON	041	N	Y	Y	$51.07	$42.52	$0.00		1/365
E0627		SEAT LIFT MECHANISM INCORPORATED INTO LIFT-CHAIR	041	Y	Y	Y	$308.52	$256.84	$0.00		N/A
E0628		SEAT LIFT MECH SEPARATE-ELECTR	041	Y	Y	Y	$233.17	$194.11	$0.00		N/A
E0629		SEAT LIFT MECH SEPARATE NON-ELECTRIC	041	Y	Y	Y	$182.89	$152.26	$0.00		N/A
E0630		PATIENT LIFT:HYDRAULIC OR MECHANIC,INC SEAT,SLING,	041	B	Y	Y	$851.23	$708.65	$85.12	$70.86	N/A
E0637		COMB SIT TO STAND SYS,ANY SIZE INC PEDS W/SEAT LIF	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0638		STAND FRAME SYS, ONE POSTION, ANY SIZE, INC PEDS,W	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0641		STANDING FRAME SYSTEM, MULTIPOSITION (E.G. THREE W	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0642		STANDING FRAME SYS, MOBILE, ANY SIZE INCLUDING PED	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0650		PNEUMATIC COMPRESSOR(LYMPHEDEMA)NON-SEGMENTAL	041	B	Y	Y	$610.23	$508.02	$61.02	$50.80	N/A
E0651		PNEUMATIC COMPRESSOR(LYMPHEDEMA)SEGMENTAL WO CALIB	041	B	Y	Y	$723.31	$602.16	$72.33	$60.21	N/A
E0652		PNEUMATIC COMPRESSOR(LYMPHEDEMA)SEGMENTAL W/CALIBR	041	B	Y	Y	$1,731.68	$1,441.62	$173.16	$144.16	N/A
E0655		PNEUMATIC APPLIANCE; NON SEGMENTAL FOR COMPRESS,HA	041	N	Y	Y	$94.15	$78.38	$0.00		1/365
E0656		SEGMENTAL PNEUMATIC APPLIANCE-USE W/ COMPRESSOR, T	041	B	Y	Y	$554.80	$461.87	$55.48	$46.19	N/A
E0657		SEGMENTAL PNEUMATIC APPLIANCE-USE W/ COMPRESSOR, C	041	Y	Y	Y	$520.70	$433.48	$0.00		N/A
E0660		PNEUMATIC APPLIANCE; NON SEGMENTAL FOR COMPRESS,FU	041	N	Y	Y	$128.85	$107.27	$0.00		1/365
E0665		PNEUMATIC APPLIANCE; NON SEGMENTAL FOR COMPRESS,FU	041	N	Y	Y	$119.50	$99.48	$0.00		1/365
E0666		PNEUMATIC APPLIANCE; NON SEGMENTAL FOR COMPRESS,HA	041	N	Y	Y	$126.30	$105.14	$0.00		1/365
E0667		PNEUMATIC APPLIANCE;SEGMENTAL FOR COMPRESS.,FULL L	041	N	Y	Y	$210.36	$175.12	$0.00		1/365
E0668		PNEUMATIC APPLIANCE;SEGMENTAL FOR COMPRESS, FULL A	041	N	Y	Y	$224.34	$186.76	$0.00		1/365
E0669		PNEUMATIC APPLIANCE; SEGMENTAL FOR COMPRESS., HALF	041	N	Y	Y	$151.84	$126.41	$0.00		1/365
E0671		PNEUMATIC APPLIANCE;SEGMENTAL,GRADIENT PRESSURE,FU	041	N	Y	Y	$171.49	$142.77	$0.00		1/365
E0672		PNEUMATIC APPLIANCE;SEGMENTAL,GRADIENT PRESSURE,FU	041	N	Y	Y	$171.49	$142.77	$0.00		1/365
E0673		PNEUMATIC APPLIANCE;SEGMENTAL,GRADIENT PRESSURE,HA	041	N	Y	Y	$171.49	$142.77	$0.00		1/365
E0705		TRANSFER DEVICE, ANY TYPE, EACH	041	N	Y	Y	$40.86	$34.02	$0.00		1/365
E0710		RESTRAINTS ANY TYPE	048	N	Y	Y	$12.68	$10.56	$0.00		1/365
E0720		TENS,TWO LEAD, LOCALIZED STIMULATION	041	B	Y	Y	$123.49	$102.81	$12.35	$10.28	N/A
E0730		TENS,FOUR LEAD,LARGER AREA/MULTIPLE NERVE STIMULAT	041	B	Y	Y	$273.39	$227.60	$27.34	$22.76	N/A
E0745		NEUROMUSCULAR STIMULATOR, ELECTRONIC SHOCK UNIT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0747		OSTEOGENESIS STIMULATOR, NON INVASIVE, OTHER THAN	041	Y	N	Y	$2,742.15	$2,282.84	$0.00		N/A
E0748		OSTEOGENESIS STIMULATOR, NON-INVASIVE, SPINAL APPL	041	Y	N	Y	$3,205.15	$2,668.29	$0.00		N/A
E0760		OSTOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND N	041	Y	N	Y	$2,663.42	$2,217.30	$0.00		N/A
E0765		NERVE STIMULATOR W/REPLACEABLE BATTERIES FOR NAUSE	041	Y	Y	Y	$80.80	$67.27	$0.00		N/A
E0766		ELECTRICAL STIMULATION DEVICE FOR CA TRTMNT,W-ACCS	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E0776		IV POLE	041	B	Y	Y	$72.58	$60.42	$7.26	$6.04	N/A
E0779		INFUSION PUMP,AMBULATORY;MECHANICAL,REUSABLE,FOR 8	041	B	Y	Y	$146.43	$121.90	$14.64	$12.19	N/A
E0780		INFUSION PUMP,AMBULATORY;MECHANICAL,REUSABLE,FOR 8	041	Y	Y	Y	$9.04	$7.53	$0.00		N/A

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E0781		INFUSION PUMP,AMBULATORY;ELECTRIC OR BATTERY,WORN	041	B	Y	Y	$0.00	$0.00	$7.70	$6.41	daily
E0782		INFUSION PUMP,IMPLANTABLE,NON-PROGRAM INCLUDE ALL	041	N	Y	Y	$0.00	$0.00	$0.00		1/365
E0784		INFUSION PUMP, AMBULATORY; EXTERNAL, INSULIN	041	B	N	Y	$3,653.08	$3,041.19	$365.31	$304.12	N/A
E0791		INFUSION PUMP,STATIONARY; PARENTERAL	041	B	Y	Y	$0.00	$0.00	$8.68	$7.23	daily
E0840		TRACTION FRAME, CERVICAL; ATTACHED TO HEADBOARD	041	N	Y	Y	$54.33	$45.23	$0.00		1/1095
E0850		TRACTION STAND, CERVICAL; FREE STANDING	041	N	Y	Y	$52.36	$43.59	$0.00		1/1095
E0860		TRACTION EQUIPMENT,CERVICAL; OVER DOOR	041	N	Y	Y	$28.57	$23.78	$0.00		1/1095
E0870		TRACTION FRAME,EXTREMITY;ATTACHED TO FOOTBOARD	041	N	Y	Y	$65.45	$54.49	$0.00		1/1095
E0880		TRACTION STAND,EXTREMITY;FREE STANDING	041	N	Y	Y	$78.86	$65.65	$0.00		1/1095
E0890		TRACTION FRAME,PELVIC;ATTACHED TO FOOTBOARD	041	N	Y	Y	$105.04	$87.45	$0.00		1/1095
E0900		TRACTION STAND,PELVIC;FREE STANDING	041	N	Y	Y	$87.89	$73.17	$0.00		1/1095
E0910		TRAPEZE BARS;ATTACHED TO BED	041	B	Y	Y	$164.02	$136.55	$16.40	$13.65	N/A
E0911		TRAPEZE BAR, HEAVY DUTY, PATIENT WT > 250 LBS, ATT	041	B	Y	Y	$455.94	$379.57	$45.59	$37.95	N/A
E0912		TRAPEZE BAR, HEAVY DUTY, PATIENT WT > 250 LBS, FRE	041	B	Y	Y	$1,046.97	$871.60	$104.70	$87.16	N/A
E0920		FRACTURE FRAME;ATTACHED TO BED,INCLUDES WEIGHTS	041	B	Y	Y	$352.67	$293.60	$35.27	$29.36	N/A
E0930		FRACTURE FRAME;FREE STANDING, INCLUDES WEIGHTS	041	B	Y	Y	$365.75	$304.49	$36.58	$30.45	N/A
E0935		CONT PASSIVE MOTION DEVICE KNEE ONLY DLY UP TO 21	041	R	Y	Y	$0.00	$0.00	$8.69	$7.23	daily
E0936		CONTINUOUS PASSIVE MOTION EXC DEVICE, OTHER THAN K	041	R	Y	N	$0.00	$0.00	$65.40	$54.45	monthly
E0940		TRAPEZE BAR;FREE STANDING,COMPLETE SET	041	N	Y	Y	$148.69	$123.78	$0.00		1/1095
E0942		TRACTION ACCESSORY, CERVICAL HEAD HARNESS/HALTER	041	N	Y	Y	$14.12	$11.75	$0.00		1/365
E0944		TRACTION ACCESSORY; PELVIC BELT/HARNESS/BOOT	041	N	Y	Y	$21.78	$18.13	$0.00		1/365
E0947		FRACTURE FRAME; ATTACHMENTS FOR COMPLEX PELVIC TRA	041	B	Y	Y	$449.70	$374.38	$44.97	$37.44	N/A
E0948		FRACTURE FRAME; ATTACHMENTS FOR COMPLEX CERVICAL T	041	B	Y	Y	$434.97	$362.11	$43.50	$36.21	N/A
E0950	W	WHEELCHAIR ACCESSORY, TRAY, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0951	W	W/C ACC-HEEL LOOP/ HOLDER, W/OR WITHOUT ANKLE STRA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0952	W	WHLCHR ACC;TOE LOOP/HOLDER, ANY TYPE, EACH	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E0955	W	W/C ACCESSORY,HEADREST,CUSHION,PRE-FAB,INCLUDING H	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0956	W	W/C ACCESSORY,LAT.TRUNK OR HIP SUPPORT,PRE-FAB W/H	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0957	W	W/C ACCESSORY.MEDIAL THIGH SUPPORT PRE-FAB,INCLUDE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0958	W	WHEELCHAIR ACCES: CONVERT MANUAL W/C TO ONE ARM-DR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0959	W	WHLCHR ACC-AMPUTEE ADAPTER, EACH	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E0960	W	W/C ACCESSORY,SHOULDER HARNESS/STRAPS/CHEST STRAP,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0961	W	WHLCHR ACC-BRAKE LOCK EXTENSION, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0966	W	WHLCHR ACC-HEADREST EXTENSION	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0967	W	W/C ACC;HAND RIMS W/PROJECT, MANUAL W/C, ANY TYPE,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0969	W	NARROWING DEVICE, WHEELCHAIR	041	E	N	Y	$0.00	$0.00	$0.00		N/A
E0970	W	NO. 2 FOOTPLATES, EXCEPT FOR ELEVATING LEG REST	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0971	W	MANUAL WHEELCHAIR ACC-ANTI-TIPPING DEVICE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0973	W	WHLCHR-ADJ HGT DETACH ARMS, COMPLETE ASSEMBLY, EAC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0974	W	WHLCHR ACC-ANTI-ROLLBACK DEVICE, EACH	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E0978	W	WHLCHR ACC-SAFETY POSITIONING BELT/ PELVIC STRAP,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0980	W	WHLCHR ACC-SAFETY VEST	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0981	W	W/C ACCESS, SEAT UPHOLSTERY, REPLACEMENT ONLY, EAC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A

W - Refer to Wheelchair Fee Schedule
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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E0982	W	W/C ACCESS, BACK UPHOLSTERY, REPLACEMENT ONLY, EAC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0983	W	MANUAL W/C ACC,PWR ADD-ON TO CONVERT MANUAL TO MOT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0984	W	MANUAL W/C ACCESS, POWER ADD-ON TO CONVERT TO POWE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0985	W	W/C ACCESS, SEAT LIFT MECHANISM	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0986	W	MANUAL WHEELCHAIR ACCESSORY,PUSH RIM,ACTIVATED,PWR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0988	W	MANUAL WHEELCHAIR ACCESSORY LEVER ACTIVATED WHEEL	041	B	Y	Y	$2,940.87	$2,448.27	$294.09	$244.83	N/A
E0990	W	WHLCHR ACC-ELEV LEG REST, COMPLETE ASSE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0992	W	WHEELCHAIR ACCESSORY, SOLID SEAT INSERT, MANUAL W/	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0994	W	WHLCHR ACC-ARMREST,EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E0995	W	WHLCHR ACC-CALF REST, PAD EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1002	W	W/C ACCESS, POWER SEATING SYSTEM TILT ONLY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1003	W	W/C ACCESS, POWER SEATING SYSTEM RECLINE ONLY, W/O	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1004	W	W/C ACCESS, POWER SEATING SYSTEM RECLINE ONLY, W/M	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1005	W	W/C ACCESS, POWER SEAT/SYS, RECLINE ONLY, W/SHEAR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1006	W	W/C ACC-POWER SEAT SYS, COMB TILT/RECLINE W/O SHEA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1007	W	W/C ACCESS, POWER SEAT/SYS, COMB/TILT/RECLINE W/ME	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1008	W	W/C ACCESS, POWER SEAT/SYS, COMB/TILT/RECLINE W/PO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1009	W	W/C ACCESS, ADD TO POWER SEAT/SYS, MECH/ELR, INCLU	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1010	W	W/C ACCESS; ADDITION TO POW/SEATING SYS LEG REST,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1011	W	W/C MODIFICATION TO PEDS W/C WIDTH ADJUST PACKAGE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1014	W	W/C RECLINING BACK, ADDITION TO PEDIATRIC SIZE W/C	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1015	W	W/C SHOCK ABSORBOR FOR MANUAL W/C EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1016	W	W/C SHOCK ABSORBER FOR POWER W/C EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1017	W	W/C SHOCK ABSORBER HEAVY DUTY FOR HD AND XHD W/C M	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1018	W	W/C SHOCK ABSORBER HEAVY DUTY FOR HD AND XHD W/C P	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1020	W	RESIDUAL LIMB SUPPORT SYSTEM FOR WHEELCHAIR, ANY T	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1028	W	W/C ACC-MANUAL SWINGAWAY-RETRAC/REMOVE MOUNTING HD	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1029	W	W/C ACCESSORY,VENTILATOR TRAY, FIXED	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1030	W	W/C ACCESSORY,VENTILATOR TRAY,GIMBALED	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1037	W	W/C; TRANSPORT CHAIR, PEDIATRIC SIZE	041	B	Y	Y	$1,190.73	$991.28	$119.07	$99.13	N/A
E1161	W	W/C MANUAL ADULT SIZE W/C INCLUDES TILT-IN-SPACE	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1225	W	WHEELCHAIR ACCESSORY; SEMI-RECLINING BACK, >15DEG.	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1226	W	WHEELCHAIR ACCESSORY;MANUAL FULLY RECLINING BACK,>	041	B	Y	N	$0.00	$0.00	$0.00		N/A
E1227	W	SPECIAL HGT ARMS FOR WHEELCHR	041	E	N	Y	$0.00	$0.00	$0.00		N/A
E1228	W	SPECIAL BACK HEIGHT FOR WHEELCHAIR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E1229	W	WHEELCHAIR, PEDIATRIC NOC	041	B	Y	N	$0.00	$0.00	$0.00		N/A
E1230	W	POWER OPERATED VEHICLE; 3 OR 4 WHEEL, NON-HIGHWAY	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1231	W	W/C PEDIATRIC SIZE TILT-IN-SPACE,RIGID,ADJ SEATING	041	B	Y	N	$0.00	$0.00	$0.00		N/A
E1232	W	W/C PEDIATRIC SIZE TILT-IN-SPACE,FOLDING, ADJ SEAT	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1233	W	W/C PEDIATRIC SIZE TILT-IN-SPACE, RIGID, ADJ, W/OU	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1234	W	W/C,PEDIATRIC SIZE,TILT-IN-SPACE,FOLDING,ADJ, W/OU	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1235	W	W/C PEDIATRIC SIZE RIGID WITH SEATING SYSTEM ADJUS	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1236	W	W/C PEDIATRIC SIZE FOLDING WITH SEATING SYSTEM ADJ	041	B	Y	Y	$0.00	$0.00	$0.00		N/A

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E1237	W	W/C PEDIATRIC SIZE, ADJUSTABLE WITHOUT SEATING SYS	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1238	W	W/C PEDIATRIC SIZE ADJUSTABLE WITHOUT SEATING SYST	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
E1300		WHIRLPOOL;OVER TUB TYPE, PORTABLE	041	Y	Y	N	$153.43	$127.73	$0.00		N/A
E1352		OXYGEN ACCESORY,FLOW REGULATR CAPABLE OF POS INSPI	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
E1353		REGULATOR	041	Y	Y	Y	$80.53	$67.04	$0.00		N/A
E1372		HUMIDIFIER ACCESSORY: EXTERNAL HEATER	041	Y	Y	Y	$221.26	$184.20	$22.13	$18.42	N/A
E1390	nr	OXYGEN CONCENTRATOR,SINGL PORT,DELIVER 85% OR>OXYG	041	R	N	Y	$0.00	$0.00	$165.50	$137.78	1/30
E1399		DURABLE MEDICAL EQUIPMENT, NEC	041	B	N	N	$0.00	$0.00	$0.00		N/A
E1639		SCALE, EACH	041	Y	Y	Y	$23.34	$19.43	$0.00		N/A
E1700		JAW MOTION REHABILITATION SYSTEM	041	B	Y	Y	$331.17	$275.70	$33.12	$27.57	N/A
E1800		DYNAMIC ADJUSTABLE ELBOW EXTENSION/FLEXION DEVICE	041	B	N	Y	$1,114.86	$928.12	$111.49	$92.82	N/A
E1801		STATIC PROGRESIV STRETCH ELBO DEV EXT/FLEX W/WO RA	041	B	N	Y	$573.49	$477.43	$57.35	$47.74	N/A
E1802		DYNAMIC ADJ-FOREARM PRONATION/SUPINATION DEV W/SOF	041	B	N	Y	$2,988.98	$2,488.33	$298.90	$248.83	N/A
E1805		DYNAMIC ADJUSTABLE WRIST EXTENSION/FLEXION DEVICE	041	B	N	Y	$1,149.79	$957.20	$114.98	$95.72	N/A
E1806		STATIC PROGRESIV STRETCH WRIST DEV EXT/FLEX, W/WO	041	B	Y	Y	$320.70	$266.98	$32.07	$26.70	N/A
E1810		DYNAMIC ADJUSTABLE KNEE EXTENSION/FLEXION DEVICE	041	B	N	Y	$1,133.74	$943.84	$113.37	$94.38	N/A
E1811		STATIC PROGRESSV STRETCH KNEE DEV EXT/FLEX,W/WO RA	041	B	Y	Y	$582.44	$484.88	$58.24	$48.48	N/A
E1815		DYNAMIC ADJUSTABLE ANKLE EXTENSION/FLEXION DEVICE	041	B	N	Y	$1,149.79	$957.20	$114.98	$95.72	N/A
E1816		STATIC PROGESSV STRETCH ANKLE DEV EXT/FLEX,W/WO RA	041	B	Y	Y	$324.88	$270.46	$32.49	$27.05	N/A
E1818		STATIC PROGRESSIVE STRETCH FOREARM PRO/SUP DEVICE,	041	B	N	Y	$1,265.87	$1,053.84	$126.59	$105.39	N/A
E1825		DYNAMIC ADJUSTABLE FINGER EXTENSION/FLEXION DEVICE	041	B	N	Y	$1,149.79	$957.20	$114.98	$95.72	N/A
E1840		DYNAMIC ADJUSTABLE SHOULDER FLEXION/ABDUCTION/ROTA	041	B	N	Y	$3,483.05	$2,899.64	$348.30	$289.96	N/A
E1841		STATIC PROGRESS STRETCH SHOULDER DEVICE W/WO RANGE	041	R	N	Y	$0.00	$0.00	$435.04	$362.17	N/A
E2000		GASTRIC SUCTION PUMP,HOME-MOD,PORTABLE OR STATIONA	041	R	Y	Y	$0.00	$0.00	$27.65	$23.02	N/A
E2201	W	MANUAL W/C ACCESSORY,NON-STANDARD SEAT FRAME 20-<2	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2202	W	MANUAL W/C ACCESSORY , NON-STAND FRAME 24- 27 INCH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2203	W	MANUAL W/C ACCESSORY,NON-STAND FRAME DEPTH,20-<22	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2204	W	MANUAL W/C ACCESSORY,NON-STAND FRAME DEPTH, 22-25	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2205	W	MANUAL W/C ACCES,HANDRIM W/O PROJECTIONS,ANY TYPE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2206	W	MANUAL W/C ACCESS,WHEEL LOCK ASSEMBLY,COMPLETE,EAC	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2207	W	W/C ACCESSORY, CRUTCH AND CANE HOLDER, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2208	W	W/C ACCESSORY, CYLINDER TANK CARRIER, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2209	W	W/C ACCESSORY, ARM TROUGH, EACH, W OR W/O HAND SUP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2210	W	W/C ACCESSORY, BEARINGS, ANY TYPE, REPLACEMENT ONL	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2211	W	MANUAL W/C ACCESSORY, PNEUMATIC PROPULSION TIRE, A	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2212	W	MANUAL W/C ACCESSORY TUBE FOR PNEU PROPULSION TIRE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2213	W	MANUAL W/C ACCESSORY INSERT FOR PNEU PRO (REMO) TI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2214	W	MANUAL W/C ACCESSORY, PNEUMATIC CASTER TIRE ANY SI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2215	W	MANUAL W/C ACCESS TUBE FOR PNEU CASTER TIRE, ANY S	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2216	W	MANUAL W/C ACCESSORY, FOAM FILLED PRO-TIRE, ANY SI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2217	W	MANUAL W/C ACCESSORY, FOAM FILLED CASTER TIRE, ANY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2218	W	MANUAL W/C ACCESSORY, FOAM PRO-TIRE ANY SIZE EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2219	W	MANUAL W/C ACCESSORY, FOAMCASTER TIRE, ANY SIZE, E	041	E	Y	Y	$0.00	$0.00	$0.00		N/A

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E2220	W	MANUAL W/C ACCESS, SOLID (RUBBER/PLASTIC) PRO-TIRE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2221	W	MANUAL W/C ACCESS SOLID (RUBBER/PLASTIC) CASTOR TI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2222	W	MANUAL W/C ACCESS SOLID (RUB/PLAS) CASTOR TIRE W/I	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2224	W	MANUAL W/C ACC-PROPULSION WHEEL EXCLUDE TIRE-ANY S	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2225	W	MAN W/C ACC-CASTER WHEEL EXCLUDE TIRE-ANY SIZE-REP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2226	W	MANUAL W/C ACCES CASTER FORK ANY SIZE REPLACMENT O	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2227	W	MANUAL WHEELCHAIR ACCES, GEAR REDUCTION DRIVE WHEE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2228	W	MANUAL WHEELCHAIR ACESS,WHEEL BRAKING SYSTM/LOCK C	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2230	W	MANUAL WHEELCHAIR ACCES, MANUAL STANDING SYSTEM	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2231	W	MAN W/C ACC-SOLID SEAT SUPPORT BASE-REPLACES SLING	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2291	W	BACK,PLANAR,FOR PEDS SIZE W/C INCLUDES FIXED ATTAC	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2292	W	SEAT,PLANAR,FOR PEDS SIZE W/C INCLUDES FIXED ATTAC	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2293	W	BACK,CONTOURED,FOR PEDS W/C INCLUDES FIXED ATTACH	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2294	W	SEAT.CONTOURED,FOR PEDS W/C INCLUDES FIXED ATTACH	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2295	W	MANUAL W/C ACCES,PEDI SIZE W/C DYNA FRAME,ALLOW MU	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2300	W	WHEELCHAIR ACCESORY,POWER SEAT ELEVATION SYSTEM, A	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2310	W	POWER W/C ACCES, ELECTRONICS W/C CONTROLS ONE MOTO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2311	W	POWER W/C ACCES, ELECTRONICS W/C CONTROLS TWO MOTO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2312	W	POW W/C ACCES,HAND/CHIN CONT INTERFACE,MINI-PRO-RE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2313	W	POW W/C ACCES HARNESS FOR UPGRDE TO EXP/CONT,INCL	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2321	W	POWER W/C ACES, HAND CONTROL, INTERFACE, REMOTE JO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2322	W	POWER W/C ACCESS, HAND CONTROL INTERFACE, MULTI/ME	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2323	W	POWER W/C ACCESS, SPECIALTY JOYSTICK HAND CONTROL,	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2324	W	POWER W/C ACCESS, CHIN CP FOR CHIN CONTROL INTERFA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2325	W	POWER W/C ACCESS, SIP AND PUFF INTERFACE, COMPLETE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2326	W	POWER W/C ACCESS, BREATH TUBE KIT FOR SIP AND PUFF	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2327	W	POWER W/C ACCES, HEAD CONTROL INTERFACE, MECH, PRO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2328	W	POWER W/C ACCES, HEAD OR EXTREM CONTROL INTERFACE,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2329	W	POWER W/C ACCES, HEAD CONTROL INTERFACE, CONTACT S	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2330	W	POWER W/C ACCES, HEAD CONT/INTERFACE, SWITCH MECH,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2331	W	POWER W/C ACCES, ATTENDANT CONTROL, PROPOR, COMPLE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2340	W	POWER W/C ACCESSORY,NONSTANDARD SEAT FRAME WIDTH,2	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2341	W	POWER W/C ACCESSORY,NONSTANDARD SEAT FRAME WIDTH 2	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2342	W	POWER W/C ACCESSORY,NONSTANDARD FRAME DEPTH,20 OR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2343	W	POWER W/C ACCESSORY,NONSTANDARD FRAME DEPTH,22-25	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2351	W	PWR W/C ACC,ELEC INTRFCE TO SPEECH GNRTNG USNG PWR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2359	W	POWER WHEELCHAIR ACCESSORY GRP34 SEALED LEAD ACID	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2360	W	POWER W/C ACCES, 22 NF NON-SEALED LEAD ACID BATTER	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2361	W	POWER W/C ACCES, 22 NF SEALED LEAD ACID BATTERY, E	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2362	W	POWER W/C ACCES, GROUP 24 NON-SEALED LEAD ACID BAT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2363	W	POWER W/C ACCES, GROUP 24 SEALE LEAD ACID BATTERY,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2364	W	POWER W/C ACCES, U-1 NON-SEALED LEAD ACID BATTERY,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2365	W	POWER W/C ACCES, U-1 SEALED LEA ACID BATTERY, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A

W - Refer to Wheelchair Fee Schedule
nr - 2.7% reduction does not apply to this code

LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E2366	W	POWER W/C ACCES, BATT/CHARGER SINGLE MODE, USE W/O	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2368	W	POWER W/C COMPONENT,MOTOR REPLACEMENT ONLY	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2369	W	PWR W/C COMPONENT, DRIVE WHEEL GEAR BOX, REPLACEME	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2370	W	POWER W/C COMPONENT,MOTOR AND GEAR BOX COMBINATION	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2371	W	POWER W/C ACCES GROUP 27 SEALE LEAD ACID BATT E.G.	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2372	W	POWER W/C ACCES GROUP 27 NON-SEALED LEAD ACID BATT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2373	W	POWER W/C ACCESS,HAND OR CHIN CONTROL INTERFACE,MI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2374	W	POWER W/C ACCESS,HAND OR CHIN CONTROL STAND REMOTE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2375	W	POWER W/C ACCESS,NON EXPANDABLE CONTROLLER, ALL HA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2376	W	POWER W/C ACCESS,EXPANDABLE CONTROL,INCLUD HARDW,R	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2377	W	POWER W/C ACCESS, EXPANDABLE CONTROL, ALL HARDW, U	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2378	W	POWER WHEELCHAIR COMPONENT ACUATOR REPLACMENT ONLY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2381	W	POWER W/C ACCESS, PNEU DRIVE WHEEL TIRE, ANY SIZE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2382	W	POWER W/C ACCESS,TUBE FOR PNEU DRIVE TIRE,ANY SIZE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2383	W	POWER W/C ACCESS,INSERT FOR PNEU DRIVE TIRE ANY TY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2384	W	POWER W/C ACCESS,PNEU CASTER TIRE, ANY SIZE,REPLAC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2385	W	POWER W/C ACCESS,TUBE FOR PNEU CASTER TIRE ANY SIZ	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2386	W	POWER W/C ACCESS FOAM FILLED DRIVE WHEEL, ANY SIZE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2387	W	POWER W/C ACCESS, FOAM FILLED CASTER TIRE, ANY SIZ	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2388	W	POWER W/C ACCESS, FOAM DRIVE WHEEL TIRE, ANY SIZE,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2389	W	POWER W/C ACCESS FOAM CASTER TIRE, ANY SIZE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2390	W	POWER W/C ACCESS, SOLID (R/P) DRIVE TIRE, ANY SIZE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2391	W	POWER W/C ACCESS, SOLID (R/P) CASTER TIRE EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2392	W	POWER W/C ACCESS, SOLID (R/P) CASTER TIRE W/INTERG	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2394	W	POWER W/C ACCESS, DRIVE WHEEL EXCLUDES TIRE, ANY S	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2395	W	POWER W/C ACCESS, CASTER WHEEL EXCLUDES TIRE,ANY S	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2396	W	POWER W/C ACCESS, CASTER FORK, ANY SIZE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2397	W	POW W/C ACCES, LITHIUM-BASED BATTERY, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2402		NEG. PRESS WOUND THERAPY, PUMP ELECTRICAL, STATION	041	R	N	Y	$0.00	$0.00	$82.71	$68.86	daily
E2500		SPEECH GENERATING DEVICE, DIGIT PRE-RECOR, LESS TH	041	Y	N	Y	$357.67	$297.76	$0.00		N/A
E2502		SPEECH GENERATING DEVICE, DIGI PRE-RECOR/MESS>8 MI	041	Y	N	Y	$1,093.70	$910.51	$0.00		N/A
E2504		SPEECH GENERATING DEVICE, DIGIT PRE-RECOR/MESS >20	041	Y	N	Y	$1,442.74	$1,201.08	$0.00		N/A
E2506		SPEECH GENERATING DEVICE, DIGIT PRE-RECOR/MESS>40	041	Y	N	Y	$2,529.80	$2,106.06	$0.00		N/A
E2508		SPEECH GENERATING DEVICE, SYNTH REQUIR/MESS/FORMU/	041	Y	N	Y	$3,271.24	$2,723.31	$0.00		N/A
E2510		SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERM	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
E2511		SPEECH GENERATING SOFTWARE PROGRAM FOR PERSONAL CO	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
E2512		SPEECH GENERATING DEVICE ACCESSORY MOUNTING SYSTEM	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
E2599		SPEECH GENERATING DEVICE, ACCESSORY NOT OTHERWISE	041	Y	N	N	$0.00	$0.00	$0.00		N/A
E2601	W	GEN USE W/C SEAT CUSHION WIDTH< THAN 22 INS,ANY DE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2602	W	GEN USE W/C SEAT CUSHION WIDTH 22 INS OR >, ANY DE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2603	W	SKIN PROTEC W/C SEAT CUSHION WIDTH < THAN 22 INS,A	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2604	W	SKIN PROTEC W/C SEAT CUSHION WIDTH 22 INS OR >,ANY	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2605	W	POSITIONING W/C SEAT CUSHION WIDTH < THAN 22 INS,	041	E	Y	N	$0.00	$0.00	$0.00		N/A

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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
E2606	W	POSITIONING W/C SEAT CUSHION WIDTH 22 INS OR >,ANY	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2607	W	SKIN PROTECT/POSITION W/C SEAT CUSHION-WIDTH <22-,	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2608	W	SKIN PROTEC/POSITI W/C SEAT CUSHION,WIDTH 22 INS O	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2609	W	CUSTON FABRICATED SEAT CUSHION ANY SIZE	041	E	N	N	$0.00	$0.00	$0.00		N/A
E2611	W	GENERAL USE W/C BACK CUSHION WIDTH < THAN 22 INS A	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2612	W	GENERAL USE W/C BACK CUSHION WIDTH 22 INS OR >ANY	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2613	W	POSITIONING W/C BACK CUSH,POSTERIOR WT < THAN 22 I	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2614	W	POSITIONING W/C BACK CUSH WT 22 INS OR > ANY HT IN	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2615	W	POSITIONING W/C BACK POST/LATEWT < 22 INS,ANY HT I	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2616	W	POSITIONING W/C BACK CUSHION, POST/LAT WT 22 OR >	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2617	W	CUST FAB W/C BACK CUSHION,ANY SIZE INCLUD ANY TYPE	041	E	N	N	$0.00	$0.00	$0.00		N/A
E2619	W	REPLACEMENT COVER FOR W/C SEAT OR BACK CUSHION EAC	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2620	W	POSITIONING W/C BACK CUSH,PLANBACK W/LATE SUPP WT<	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2621	W	POSITIONING W/C BACK CUSH PLAN/LATE SUPPORT 22 OR>	041	E	Y	N	$0.00	$0.00	$0.00		N/A
E2622	W	SKIN PROTECTION W/C CUSHION ADJUST WIDTH <22 IN, A	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2623	W	SKIN PROTECTION W/C SEAT CUSH, ADJUSTABLE WT 22 OR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2624	W	SKIN PROTEC AND POST W/C SEAT CUSH,ADJ WT<22 INS A	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2625	W	SKIN PROTEC AND POSTI W/C CUSH ADJ WT 22 INS OR> A	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2626	W	W/C ACC-SHLDR/ELBOW MOBILE ARM SUPP-ATTACHED/ADJUS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2627	W	W/C ACC-SHLDR/ELBOW MOBILE ARM SUPP-ATTACHED/ADJUS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2628	W	W/C ACC-SHLDR/ELBOW MOBILE ARM SUPP-ATTACH/BALANCE	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2629	W	W/C ACESS SHOLDR/ELBOW SUPPRT ATTACH>W/C FRICTION	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2630	W	W/C ACC-SHLDR/ELBOW MOB ARM SUPP-MONOSUSPEN/SLING-	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2631	W	W/C ACC-ADDITION TO MOBILE ARM SUPP-ELEVATING PROX	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2632	W	W/C ACC-ADDITION TO MOBILE ARM SUPP-OFFSET/LATERAL	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E2633	W	WHEELCHAIR ACCESY ADD MOBLE ARM SUPPORT SUPINATOR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
E8000		GAIT TRAINER PEDS SIZE POSTERISUPPORT INC ALL ACCE	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
E8001		GAIT TRAINER,PEDS SIZE,UPRIGHTSUPPORT,INCLUDS ALL	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
E8002		GAIT TRAINER,PEDS SIZE,ANT SUPPORT, INC ALL ACCESS	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
K0001	W	WHEELCHAIR;STANDARD	041	B	Y	Y	$477.98	$397.92	$47.80	$39.79	N/A
K0002	W	WHEELCHAIR; STANDARD HEMI (LOW SEAT)	041	B	Y	Y	$673.64	$560.81	$67.36	$56.08	N/A
K0003	W	WHEELCHAIR;LIGHTWEIGHT	041	B	Y	Y	$735.58	$612.37	$73.56	$61.24	N/A
K0004	W	WHEELCHAIR; HIGH STRENGTH LIGHTWEIGHT	041	B	Y	Y	$868.20	$722.78	$86.82	$72.28	N/A
K0005	W	WHEELCHAIR; ULTRA LIGHTWEIGHT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0006	W	WHEELCHAIR; HEAVY DUTY	041	B	Y	Y	$976.48	$812.92	$97.65	$81.29	N/A
K0007	W	WHEELCHAIR;EXTRA HEAVY DUTY	041	B	Y	Y	$1,351.79	$1,125.37	$135.18	$112.54	N/A
K0008	W	CSTM MANUAL WHLCHR/BASE	041	E	N	Y	$0.00	$0.00	$0.00		N/A
K0010	W	WHEELCHAIR; STANDARD WEIGHT FRAME MOTORIZED/POWER	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
K0011	W	WHEELCHAIR;STANDARD WT MOTORIZED/POWER W/PROGRAMMA	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
K0012	W	WHEELCHAIR;LIGHTWEIGHT PORTABLE MOTORIZED/POWER	041	B	Y	Y	$0.00	$0.00	$0.00		N/A
K0013	W	CUSTOM POWER WHLCHR BASE	041	E	N	Y	$0.00	$0.00	$0.00		N/A
K0014	W	WHEELCHAIR; CUSTOM OR NON-CUSTOM, POWER, REHAB OR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0015	W	WHEELCHAIR ACCESSORY;ARMREST,DETACHABLE,NON-ADJUST	041	E	Y	Y	$0.00	$0.00	$0.00		N/A

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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
K0017	W	DETACHABLE ADJUSTABLE HEIGHT ARMREST, BASE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0018	W	DETACHABLE ADJUSTABLE HEIGHT ARMREST, UPPER PORTIO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0019	W	WHEELCHAIR ACCESSORY; ARM PAD, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0020	W	WHEELCHAIR ACCESSORY;ARMREST,FIXED, ADJUSTABLE HEI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0037	W	WHEELCHAIR ACCESSORY; HIGH MOUNT FLIP-UP FOOTREST,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0038	W	WHEELCHAIR ACCESSORY; ANKLE/LEG STRAP, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0039	W	WHEELCHAIR ACCESSORY; LEG STRAP H STYLE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0040	W	WHEELCHAIR ACCESSORY; FOOTPLATE, ADJUSTABLE ANGLE,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0041	W	WHEELCHAIR ACCESSORY;FOOTPLATE, LARGE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0042	W	WHEELCHAIR ACCESSORY;FOOTPLATE,STANDARD,EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0043	W	FOOTREST, LOWER EXTENSION TUBE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0044	W	FOOTREST, UPPER HANGER BRACKET	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0045	W	WHEELCHAIR ACCESSORY; FOOTREST, COMPLETE ASSEMBLY,	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0046	W	ELEVATING LEGREST, LOWER EXTENSION TUBE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0047	W	ELEVATING LEGREST UPPER BRACKET	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0050	W	RATCHET ASSEMBLY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0051	W	CAM RELEASE ASSEMBLY EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0052	W	WHEELCHAIR ACCESSORY; FOOTREST, SWINGAWAY, DETACHA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0053	W	WHEELCHAIR ACCESSORY: FOOTREST, ELEVATING, TELESCO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0056	W	WHEELCHAIR OPTION: SPECIAL SEAT-FLOOR HEIGHT FOR M	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0065	W	WHEELCHAIR ACCESSORY; SPOKE PROTECTORS, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0069	W	WHEELCHAIR ACCESSORY; REAR WHEEL ASSEMBLY W/SOLID	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0070	W	WHEELCHAIR ACCESSORY;REAR WHEEL ASSEMB,W/PNEUMATIC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0071	W	WHEELCHAIR ACC; FRONT CASTER ASSEMBLY W/PNEUMATIC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0072	W	W/C ACC-FRONT CASTER ASSEMBLY W/SEMI-PNEUMATIC TIR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0073	W	CASTER PIN LOCK EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0077	W	WHEELCHAIR ACCESSORY;FRONT CASTER ASSEMBLY W/SOLID	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0105	W	WHEELCHAIR ACCESSORY; IV HANGER/IV POLE, EACH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0108	W	WHEELCHAIR ACCESSORIES, NOT OTHERWISE SPECIFIED	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0552		SUPPLIES FOR EXT.INFUSION PUMP, SYRINGE TYPE CART.	048	N	Y	Y	$2.38	$1.98	$0.00		30/30
K0601		BAT;REPLACEMENT 1.5 SILVER OXIDE, INFUS/PUMP EXT/P	048	N	Y	Y	$1.00	$0.83	$0.00		9/90
K0602		BATT;REPLACEMENT 3 VOLT SILVE OXIDE, INFUS/PUMP EX	048	N	Y	Y	$5.82	$4.85	$0.00		6/90
K0603		BATT;REPLACEMENT 1.5 VOLT, ALKALINE INFUS/PUMP EXT	048	N	Y	Y	$0.53	$0.44	$0.00		9/90
K0604		BATT;REPLACEMENT 3.6 VOLT EA LITHIOUM, INFUS/PUMP	048	N	Y	Y	$5.57	$4.64	$0.00		6/90
K0605		BATT;REPLACEMENT 4.5 VOLT EA LITHIUM,INFUS/PUMP EX	048	N	Y	Y	$13.35	$11.11	$0.00		3/90
K0606		AUTO-EXTERNAL DEFIB W/INTEGRATED ECG ANALYSIS, GAR	041	B	Y	Y	$20,745.43	$17,270.57	$69.15	$57.57	daily
K0607		REPLACEMENT BATTERY FOR AUTOMATIC EXTERNAL DEFIBRI	048	N	Y	Y	$177.65	$147.89	$0.00		1/365
K0608		REPLACEMENT GARMENT FOR USE W/ AUTOMATIC EXTER/DEF	048	N	Y	Y	$110.86	$92.29	$0.00		1/365
K0609		REPLACEMENT ELECTRODES FOR USE W/ AUTOMATIC EXTER/	048	Y	Y	Y	$737.26	$613.77	$0.00		N/A
K0669	W	W/C ACC-SEAT/BACK CUSHION-DOESN-T MEET DMEPDAC COD	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0733	W	POWER W/C ACCESSORY, 12 TO 24 AMP SEALED LEAD ACID	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0738	nr	PORTABLE GAS OXYGEN SYSTEM	041	R	Y	Y	$0.00	$0.00	$48.53	$40.40	1/30
K0739	W	REPAIR OR NONROUTINE SERVICE FOR DME (LABOR 15 MIN	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A

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LTC Y: covered by LTC
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
K0800	W	POV GROUP ONE STANDARD UP TO 300 LBS	041	B	Y	Y	$1,070.11	$890.87	$107.01	$89.09	N/A
K0801	W	POV GROUP ONE HEAVY DUTY 301-450 LBS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0802	W	POV GROUP ONE VERY HEAVY DUTY 451-600 LBS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0806	W	POV GROUP TWO STANDARD UP TO 300 LBS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0807	W	POV GROUP TWO HEAVY DUTY 301-450 LBS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0808	W	POV GROUP TWO VERY HEAVY DUTY 451-600 LBS	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0812	W	POWER OPERATED VEHICLE NOC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0813	W	PWC GROUP 1 STANDARD PORTABL SEAT/BACK UP TO AND I	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0814	W	PWC GROUP ONE STANDARD PORT CAP CHAIR, WEIGHT UP T	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0815	W	PWC GROUP ONE STAND SEAT/BACK WEIGHT CAPACITY UP T	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0816	W	PWC GROUP ONE STAND CAPTAINS CHAIR WEIGHT UP TO 30	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0820	W	PWC GROUP TWO STAND PORTABLE SEAT/BACK WEIGHT UP T	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0821	W	PWC GROUP TWO PORTABLE STAND CAP CHAIR UP TO 300 L	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0822	W	PWC GROUP TWO STANDARD SEAT/BACK WEIGHT UP TO 300	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0823	W	PWC GROUP TWO STANDARD CAPTAIN CHAIR WEIGHT UP TO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0824	W	PWC GROUP TWO HEAVY DUTY SEAT/BACK WEIGHT 301 TO 4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0825	W	PWC GROUP TWO HEAVY DUTY CAP CHAIR WEIGHT 301 TO 4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0826	W	PWC GROUP TWO VERY HEAVY DUTY SEAT/BACK WEIGHT 451	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0827	W	PWC GROUP TWO VERY HEAVY DUTY CAPTAINS CHAIR WT 45	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0828	W	PWC GROUP TWO X-HEAVY DUTY SEAT/BACK WT CAPACITY 6	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0829	W	PWC GROUP TWO X-HEAVY DUTY CAPTAINS CHAIR WT 601 L	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0830	W	PWC GROUP STANDARD SEAT ELEVATOR SEAT/BACK UP TO 3	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0831	W	PWC GROUP TWO STANDARD SEAT ELEVATOR, CAP CHAIR UP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0835	W	PWC GROUP TWO SINGLE POWER OPT SEAT/BACK WT UP TO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0836	W	PWC GROUP TWO STANDARD SINGLE POWER OPTION, CAP CH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0837	W	PWC GROUP TWO HEAVY DUTY SINGL PWER OPT SEAT/BACK	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0838	W	PWC GROUP TWO HEAVY DUTY SINGL PWER OPT CAP CHAIR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0839	W	PWC GR TWO VERY HEAVY DUTY SINGLE POW OPT ST/BK 45	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0840	W	PWC GR TWO X-HEAVY DUTY SINGLE POWE OPT ST/BK WT 6	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0841	W	PWC GROUP TWO STANDARD MULTIPL POW OPT SEAT/BACK U	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0842	W	PWC GROUP TWO STANDARD MULTIPLE POW OPT CAP CHAIR	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0843	W	PWC GROUP TWO HEAVY DUTY MULT POW OPT ST/BK WT 301	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0848	W	PWC GROUP 3 STANDARD SEAT/BACK WT CAPACITY UP TO A	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0849	W	PWC GROUP 3 STANDARD, CAPTAINS CHAIR WT CAP UP TO	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0850	W	PWC GROUP 3 HEAVY DUTY SEAT/BACK WEIGHT 301-450 LB	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0851	W	PWC GROUP 3 HEAVY DUTY CAPTANS CHAIR WT CAPACITY 3	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0852	W	PWC GROUP 3 VERY HEAVY DUTY SEAT/BACK WT 451-600 L	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0853	W	PWR W/C, GROUP 3 VERY HEAVY DUTY, CAPTAIN, PT WT 4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0854	W	PWC GROUP 3 X-HEAVY DUTY SEAT/BACK WEIGHT CAP. 601	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0855	W	PWC GROUP 3 X-HEAVY DUTY CAPTN CHAIR WT CAPAC 601	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0856	W	PWC GROUP 3 STAND SINGLE POWER OPT SEAT/BACK WT CA	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0857	W	PWC GROUP 3 STAND SINGLE POWER OPT CAP/CHAIR WEIGH	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0858	W	PWC GROUP 3 HEAVY DUTY SINGLE POW OPT WEIGHT 301-4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
K0859	W	PWC GROUP 3 HEAVY DUTY SINGLE POW OPT CAP/CHAIR WT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0860	W	PWC GROUP 3 VERY HEAVY DUTY 1 POW OPT SEAT/BACK 45	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0861	W	PWC GROUP 3 STANDARD MUL OPTS SEAT/BACK WT UP TO 3	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0862	W	PWC GROUP 3 HEAVY DUTY MLT OPT SEAT/BACK WT CAPACI	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0863	W	PWC GROUP 3 VERY HEAVY DUTY MLT OPT SEAT/BACK WT 4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0864	W	PWC GROUP 3 X-HEAVY DUTY MLT OPTS SEAT/BACK WT CAP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0868	W	PWC GROUP 4 STANDARD SEAT/BACK WT CAPACITY UP TO 3	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0869	W	PWC GROUP 4 STANDARD CAPTAINS CHAIR WT CAPACITY UP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0870	W	PWC GROUP 4 HEAVY DUTY SEAT/BACK WT CAPACITY 301-4	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0871	W	PWC GROUP 4 VERY HEAVY DUTY SEAT/BACK WT CAPACITY	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0877	W	PWC GROUP 4 STANDARD SEAT/BACK SINGLE POW OPT WT U	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0878	W	PWC GROUP 4 STANDARD CAP CHAIR SINGLE POW OPT WT C	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0879	W	PWC GROUP 4 HEAVY DUTY SEAT/BACK SINGLE POW OPT WT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0880	W	PWC GROUP 4 VERY HEAVY DUTY SEAT/BACK 1 POW OPT WT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0884	W	PWC GROUP 4 STANDARD MLT POW OPTS SEAT/BACK WT UP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0885	W	PWC GROUP 4 STANDARD MLT POW OPTS CAP CHAIR WT UP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0886	W	PWC GROUP 4 HEAVY DUTY SEAT/BACK MUL POW OPTS WT 3	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0890	W	PWC GROUP 5 PEDIATRIC SINGLE POW OPT SEAT/BACK WT	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0891	W	PWC GROUP 5 PEDIATRIC MLT POW OPTS SEAT/BACK WT UP	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0898	W	POWER WHEELCHAIR NOC	041	E	Y	Y	$0.00	$0.00	$0.00		N/A
K0899	W	POWR MOBLITY DEVICE NOT CODED BY DME PDAC, NOT MEE	041	E	Y	N	$0.00	$0.00	$0.00		N/A
K0900		CUSTOMIZED DURABLE MEDICAL EQUIPMENT, OTHER THAN W	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
K0901		KO,SINGLE UPRIGHT,THIGH-CLF,ADJ FLXION-EXTJNT,MED-	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
K0902		KO,DBL UPRIGHT, THIGH-CLF,ADJ FLXION-EXTJNT,MED-LA	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L0112		CRANIAL CERV ORTH,CONG TORTICOLLIS,W/WO SFT INTRFC	041	Y	Y	Y	$1,030.56	$857.94	$0.00		N/A
L0120		CERVICAL,FLEXIBLE,NON-ADJSTABLE,PREFAB,OTS,FOAM CO	041	N	Y	N	$18.38	$15.30	$0.00		1/365
L0130		COLLAR; CERVICAL, FLEXIBLE, THERMOPLASTIC, MOLDED	041	N	N	Y	$106.14	$88.36	$0.00		1/365
L0140		COLLAR; CERVICAL, SEMI-RIGID, ADJUSTABLE PLASTIC	041	N	Y	Y	$41.62	$34.65	$0.00		1/365
L0150		COLLAR; CERVICAL, SEMI-RIGID, ADJUSTABLE MOLDED CH	041	N	Y	Y	$74.43	$61.96	$0.00		1/365
L0160		CERVICAL,SEMI-RIGID,WIRE FRAME OCCIPITAL-MANDIBULA	041	N	Y	Y	$108.68	$90.48	$0.00		1/365
L0170		CERVICAL, COLLAR, MOLDED TO PATIENT	041	Y	Y	Y	$559.09	$465.44	$0.00		N/A
L0172		CERVICAL COLLAR,SEMI-RIGID THERMOPLASTIC FOAM 2 PC	041	N	Y	Y	$98.48	$81.98	$0.00		1/365
L0174		CERVICAL COLLAR,SEMI-RIGID THERMOPLASTIC FOAM 2PC,	041	N	Y	Y	$193.64	$161.21	$0.00		1/365
L0180		COLLAR;CERVICAL,MULTI POST,OCCIP/MAND SUPPORTS,ADJ	041	N	Y	Y	$313.73	$261.18	$0.00		1/365
L0190		COLLAR;CERVICAL,MULT POST OCC/MAND SUPPORT;ADJ.CER	041	N	Y	Y	$369.98	$308.01	$0.00		1/365
L0200		COLLAR;CERVICAL,MULT POST OCC/MAN SUPPORT,ADJ BARS	041	N	Y	Y	$429.15	$357.27	$0.00		1/365
L0220		RIB BELT; THORACIC, CUSTOM FABRICATED	041	N	N	Y	$95.13	$79.20	$0.00		1/365
L0450		TLSO,FLEX,TRNK SUP,UPR THORACIC,RGD STAYS/PANL,STR	041	N	Y	N	$119.66	$99.62	$0.00		1/365
L0452		TLSO,FLEX,TRNK SUP,UPR THORACIC,RGD STAYS/PANL,STR	041	Y	N	Y	$232.88	$193.87	$0.00		N/A
L0454		TLSO FLEX,TRNK SUP,SACRO ABV T9,RGD STAYS/PANL,STR	041	N	Y	N	$255.37	$212.60	$0.00		1/365
L0455		TLSO FLEX TRNK SPT/SAC JUNCTN TO T9 INC SHLDR STRP	041	N	Y	Y	$255.37	$212.60	$0.00		1/365
L0456		TLSO,FLEX,TRNK SUP,THORACIC,RGD PST/SFT ANT,SAC-SC	041	Y	Y	Y	$732.33	$609.66	$0.00		N/A
L0457		TLSO FLEX TRNK SJ-SS PRE OTS	041	Y	Y	Y	$732.33	$609.66	$0.00		N/A

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L0458		TLSO,TRPLNR CON,MOD SEG SPNL SYS,2 RGD PLAS SHLS,P	041	Y	Y	Y	$656.69	$546.69	$0.00		N/A
L0460		TLSO,TRPLNR CON,MOD SEG SPNL SYS,2 RGD PLAS SHLS,P	041	Y	Y	Y	$739.15	$615.34	$0.00		N/A
L0462		TLSO,TRPLNR CON,MOD SEG SPNL SYS,3 RGD PLAS SHLS,P	041	Y	Y	Y	$540.08	$449.62	$0.00		N/A
L0464		TLSO,TRPLNR CON,MOD SEG SPNL SYS,4 RGD PLAS SHLS,P	041	Y	Y	Y	$1,094.50	$911.17	$0.00		N/A
L0466		TLSO,SAGITTAL CONT,RGD POST,SFT ANT,RESTR TRNK<MOT	041	N	Y	Y	$279.36	$232.57	$0.00		1/365
L0467		TLSO SAGITAL CNTRL PREFAB OTS	041	N	Y	Y	$279.36	$232.57	$0.00		1/365
L0468		TLSO,SAGITTAL-CORONAL CONT,RGD POST,FLEX ANT,RESTR	041	N	Y	Y	$350.10	$291.46	$0.00		1/365
L0469		TLSO SAGITAL-CORONAL FLEX ANT PREFAB OTS	041	N	Y	Y	$350.10	$291.46	$0.00		1/365
L0470		TLSO TRIPLANAR CONTROL RESTRIC TRNK MOTION SAGIT/C	041	N	Y	Y	$484.45	$403.30	$0.00		1/365
L0472		TLSO TRIPLANAR CONTROL HYPEREX RIGID/LATER/FRAME,	041	N	Y	Y	$298.10	$248.17	$0.00		1/365
L0480		TLSO TRIPLANER CONTROL, 1 PIECE RIGID PLAS SHELL W	041	Y	N	Y	$1,112.17	$925.88	$0.00		N/A
L0482		TLSO TRIPLANER CONTROL 1 PIECE RIGIN SHELL W/OUT L	041	Y	N	Y	$1,242.30	$1,034.21	$0.00		N/A
L0484		TLSO TRIPLANER CONTROL 2 PIECE RIGID SHELL W/OUT L	041	Y	N	Y	$1,341.66	$1,116.93	$0.00		N/A
L0486		TLSO TRIPLANER CONTROL 2 PIECE RIGID SHELL WITH LI	041	Y	N	Y	$855.53	$712.23	$0.00		N/A
L0488		TLSO,TRIPLANAR CONTROL 1 PIECE RIGID SHELL WITH LI	041	Y	Y	Y	$739.15	$615.34	$0.00		N/A
L0490		TLSO SAGITTAL-CORONAL CONDROL 1 PIECE RIGID W/OVER	041	Y	Y	Y	$950.48	$791.27	$0.00		N/A
L0491		TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEG-SPINAL	041	Y	Y	Y	$565.50	$470.78	$0.00		N/A
L0492		TLSO, SAGITAL-CORONAL CONTROL MODULAR SEG-SPINAL 3	041	N	N	Y	$368.22	$306.54	$0.00		1/365
L0621		SACROILIAC ORTH,FLEX,PROVIDE PEL-SAC SUPT,STRP-PEN	041	N	Y	N	$67.54	$56.23	$0.00		1/365
L0622		SACROILIAC ORTHOSIS FLEXIBLE PROVIDE PEL-SAC SUPP	041	N	N	Y	$209.37	$174.30	$0.00		1/365
L0623		SACROILIAC ORTH,PROVDS PEL-SAC SUPRT,RGD-SEMI PNLS	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L0624		SACROILIAC ORTHOSIS RIG/SEMI RIGID PEL-SAG SUPP CU	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L0625		LUMBAR ORTH,FLEX,POST EXTNDS L-1-L-5,STRPS,PEND AB	041	N	Y	N	$43.14	$35.91	$0.00		1/365
L0626		LUMBAR ORTH,SAGI-CNTRL,RGD POST,EXT L1 TO L5 VERT,	041	N	Y	Y	$61.06	$50.83	$0.00		1/365
L0627		LUMBAR ORTH,SAGI-CNTRL,RGD POST ANT,EXT L1 TO L5 V	041	N	Y	Y	$321.96	$268.03	$0.00		1/365
L0628		LUMBAR SACRAL ORTH,FLEX,SACRO TO T9 VERT,STRPS-STA	041	N	Y	N	$97.64	$81.29	$0.00		1/365
L0629		LUMBAR-SACRAL ORTHOSIS, FLEXIBLE SACRO JUN-T9 CUST	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L0630		LUMBAR SACRAL ORTH,SAGI-CNTRL,RGD POST EXT SACRO T	041	N	Y	Y	$126.88	$105.63	$0.00		1/365
L0631		LUMBAR-SACRAL ORTH,SAGI-CNTRL,RGD ANT-POST,SACRO T	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L0632		LSO SAIT-CORON CONTROL W/RIDIG-ANT-POST PANELS C.F	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L0633		LSO,SAGI-CNTRL,RGD POST EXT SACRO TO T9 VERT,RGD L	041	N	Y	Y	$267.93	$223.05	$0.00		1/365
L0634		LSO SAGITTAL-CORON CONT W/RIGID POSTERIOR CUSTOM P	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L0635		LSO SAGITTAL CORON CONT, LUMBAR FLEXION PREFAB INC	041	N	Y	Y	$295.90	$246.34	$0.00		1/365
L0636		LSO SAGITTAL CORON CONT LUMBAR FLEXIBLE CUSTOM FAB	041	Y	N	Y	$1,062.00	$884.12	$0.00		N/A
L0637		LSO,SAGI-CORONAL CNTROL,RGD ANT-POST EXT SACRO TO	041	N	Y	Y	$267.93	$223.05	$0.00		1/365
L0638		LSO SAGITTAL CORONAL CONT RIGID/POST FRAME/PANELS	041	Y	N	Y	$1,033.14	$860.09	$0.00		N/A
L0639		LSO,SAGI-CORONAL,CNTRL,RGD PNL,POST EXT SACRO TO T	041	Y	Y	Y	$1,014.78	$844.80	$0.00		N/A
L0640		LSO EXTEND FROM SACROCO JUNCT TO T-9 CUSTOM FAB IN	041	Y	N	Y	$819.66	$682.37	$0.00		N/A
L0641		LO SAGI-CONT RIG PNL 11-15 VERT PREFAB OTS	041	N	Y	Y	$61.06	$50.83	$0.00		1/365
L0642		LUMBAR ORT SAGI-CONT RIGID ANT POS 11 15 VERT PREFA	041	N	Y	Y	$321.96	$268.03	$0.00		1/365
L0643		LUMBAR-SACRAL SAGI CTR RIG POSSAC JNCTN T9 PEND AB	041	N	Y	Y	$126.88	$105.63	$0.00		1/365
L0648		LUMBAR-SACRAL SAGI ANT POS PANEL SAC T9 PEND AB PR	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L0649		TLSO SAGITAL-CORONAL FLEX ANT PREFAB OTS	041	N	Y	Y	$267.93	$223.05	$0.00		1/365

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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L0650		LSO SAGI-CORONAL R ANT-POS PNL SAC JNCTN T9 PND AB	041	N	Y	Y	$267.93	$223.05	$0.00		1/365
L0651		LSO SAGI-CORONAL R POS PNL POST SAC JCTN TS PNDLM	041	Y	Y	Y	$1,014.78	$844.80	$0.00		N/A
L0700		CTLSO;ANT/POST/LAT CONTROL MOLDED TO PATIENT	041	Y	N	Y	$1,384.30	$1,152.43	$0.00		N/A
L0710		CTLSO;ANT/POST/LAT CONTROL MOLDED TO PATIENT W/INT	041	Y	N	Y	$1,521.72	$1,266.83	$0.00		N/A
L0810		CERVICAL HALO PROCEDURE; INCORPORATED INTO JACKET	041	Y	N	Y	$1,858.63	$1,547.31	$0.00		N/A
L0820		CERVICAL HALO PROCEDURE;INCORPRATED INTO PLASTER B	041	Y	N	Y	$1,462.07	$1,217.17	$0.00		N/A
L0830		CERVICAL HALO PROCEDURE INCORPORATED INTO MILWAUKE	041	Y	N	Y	$2,237.20	$1,862.47	$0.00		N/A
L0859		ADDITION TO HALO PROCEDURE MRI COMPATIBLE SYS RING	041	Y	Y	Y	$792.08	$659.41	$0.00		N/A
L0861		ADDITION TO HALO PROCEDURE, REPLACEMENT LINER/INTE	041	N	N	Y	$158.71	$132.13	$0.00		1/365
L0970		TLSO; CORSET FRONT	041	N	Y	Y	$74.31	$61.86	$0.00		1/365
L0972		LSO; CORSET FRONT	041	N	Y	Y	$67.62	$56.29	$0.00		1/365
L0974		TLSO; FULL CORSET	041	N	Y	Y	$121.51	$101.16	$0.00		1/365
L0976		LSO; FULL CORSET	041	N	Y	Y	$103.96	$86.55	$0.00		1/365
L0978		CRUTCH; AXILLARY EXTENSION	041	N	Y	Y	$130.85	$108.93	$0.00		1/365
L0980		PERONEAL STRAPS,PREFABRICATED,OFF THE SHELF, PAIR	041	N	Y	Y	$11.89	$9.90	$0.00		2/365
L0982		STOCKING SUPPORTER GRIPS,PREFABRICATED,OTS,SET OF	041	N	Y	Y	$10.87	$9.05	$0.00		1/365
L0984		PROTECTIVE BODY SOCK,PREFABRICATED, OFF THE SHELF,	041	N	Y	Y	$47.07	$39.19	$0.00		2/365
L0999		SPINAL ORTHOSIS;ADDITION, NOT OTHERWISE SPECIFIED	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L1000		CTLSO; (MILWAUKEE TYPE), INCLUDES INITIAL ORTHOSIS	041	Y	N	Y	$1,410.05	$1,173.87	$0.00		N/A
L1001		CERVICAL THORACIC LUMBAR ORTHO IMMOBILIZER,INFANT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1005		TENSION BASED SCOLIOSIS ORTHOSIS&ACCESSORY PAD,FIT	041	Y	Y	N	$2,356.70	$1,961.95	$0.00		N/A
L1010		CTLSO/SCOLIOSIS ORTHOSIS;ADDITION, AXILLA SLING	041	N	N	Y	$58.18	$48.43	$0.00		1/365
L1020		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, KYPHOSIS PAD	041	N	N	Y	$74.93	$62.38	$0.00		1/365
L1025		CTLSO/SCOLIOSIS ORTHOSIS; KYPHOSIS PAD, FLOATING	041	N	N	Y	$108.09	$89.98	$0.00		1/365
L1030		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, LUMBAR BOLSTER	041	N	N	Y	$54.43	$45.31	$0.00		1/365
L1040		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, LUMBAR/LUMBAR	041	N	N	Y	$61.65	$51.32	$0.00		1/365
L1050		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, STERNAL PAD	041	N	N	Y	$69.76	$58.08	$0.00		1/365
L1060		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, THORACIC PAD	041	N	N	Y	$75.30	$62.69	$0.00		1/365
L1070		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, TRAPEZE SLING	041	N	N	Y	$78.01	$64.94	$0.00		1/365
L1080		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, OUTRIGGER	041	N	N	Y	$36.37	$30.28	$0.00		1/365
L1085		CTLSO/SCOLIOSIS ORTHOSIS;ADDTION,BILATERAL OUTRIGG	041	N	N	Y	$121.79	$101.39	$0.00		1/365
L1090		CTLSO/SCOLIOSIS ORTHOSIS; ADDITION, LUMBAR SLING	041	N	N	Y	$69.98	$58.26	$0.00		1/365
L1100		CTLSO/SCOLIOSIS ORTHOSIS; ADD. RING FLANGE, PLASTI	041	N	N	Y	$132.05	$109.93	$0.00		1/365
L1110		CTLSO/SCOLIOSIS OTHRO; ADD RING FLANGE PLASTIC/LEA	041	N	N	Y	$221.41	$184.32	$0.00		1/365
L1120		CTLSO/SCOLIOSIS ORTHOSIS;ADDITION, COVERS FOR UPRI	041	N	N	Y	$26.44	$22.01	$0.00		1/365
L1200		TLSO; INCLUSIVE OF INITIAL ORTHOSIS	041	Y	N	Y	$1,244.37	$1,035.94	$0.00		N/A
L1210		TLSO;ADDITION,LATERAL-THORACIC EXTENSION	041	N	N	Y	$170.12	$141.62	$0.00		1/365
L1220		TLSO;ADDITION,ANTERIOR THORACIC EXTENSION	041	N	N	Y	$165.59	$137.85	$0.00		1/365
L1230		TLSO;ADDITION,MILWAUKEE TYPE SUPERSTRUCTURE	041	N	N	Y	$463.90	$386.20	$0.00		1/365
L1240		TLSO;ADDITION,LUMBAR DEROTATION PAD	041	N	N	Y	$63.24	$52.65	$0.00		1/365
L1250		TLSO; ADDITION, ANTERIOR ASIS PAD	041	N	N	Y	$54.97	$45.76	$0.00		1/365
L1260		TLSO:ADDITION, ANTERIOR THORACIC DEROTATION PAD	041	N	N	Y	$65.58	$54.60	$0.00		1/365
L1270		TLSO; ADDITION, ABDOMINAL PAD	041	N	N	Y	$57.68	$48.02	$0.00		1/365

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LTC Y: covered by LTC
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L1280		TLSO; ADDITION, RIB GUSSET (ELASTIC), EACH	041	N	N	Y	$60.73	$50.56	$0.00		1/365
L1290		TLSO; ADDITION, LATERAL TROCHANTERIC PAD	041	N	N	Y	$54.02	$44.97	$0.00		1/365
L1300		SCOLIOSIS PROCEDURES; BODY JACKET MOLDED TO PATIEN	041	Y	N	Y	$1,198.45	$997.71	$0.00		N/A
L1310		SCOLIOSIS PROCEDURES; POST-OP BODY JACKET	041	Y	N	Y	$1,248.29	$1,039.20	$0.00		N/A
L1499		SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	041	Y	N	N	$0.00	$0.00	$0.00		N/A
L1600		HIP ORTH,ABD CNTRL JNTS,FLEX,FREJKA W-COVR,PREFB-C	041	N	Y	Y	$89.60	$74.59	$0.00		1/60
L1610		HIP ORTH,ABD CNTRL JNTS,FLEX,FREJKA COVR ONLY,PREF	041	N	Y	Y	$38.05	$31.68	$0.00		1/30
L1620		HIP ORTH,ABD CNTROL JNTS,FLEX,PAVLIK HRNESS,PREFB-	041	N	Y	Y	$109.26	$90.96	$0.00		1/365
L1630		HO; ABDUCTION CONTROL, SEMI-FLEXIBLE (VON ROSEN TY	041	N	N	Y	$146.90	$122.29	$0.00		1/365
L1640		HO; ABDUCTION CONTROL, STATIC, PELVIC BAND/SPREAD	041	N	N	Y	$329.16	$274.03	$0.00		1/365
L1650		HO ABDUCTION CONTROL,STATIC,ADJUSTABLE (ILFELD TYP	041	N	Y	Y	$171.48	$142.76	$0.00		1/365
L1652		HIP ORTHOSIS BILAT THIGH CUFFS ADJ ABD SPREADER BA	041	N	Y	Y	$262.47	$218.51	$0.00		1/365
L1660		HO; ABDUCTION CONTROL, STATIC, PLASTIC	041	N	Y	Y	$125.65	$104.60	$0.00		1/365
L1680		HO;ABDUCTION CONTROL,DYNAMIC,PELVIC CONTROL,ADJ.HI	041	Y	N	Y	$792.21	$659.51	$0.00		N/A
L1685		HO; ABDUCTION CONTROL, POST-OP TYPE, CUSTOM FABRIC	041	Y	N	Y	$773.39	$643.85	$0.00		N/A
L1686		HO; ABDUCTION CONTROL, POST-OP TYPE	041	Y	Y	Y	$651.58	$542.44	$0.00		N/A
L1690		COMBINATION,BILAT,LUMBO-SAC,HIP,FEMUR ORTH ROT,PRF	041	Y	N	N	$1,344.66	$1,119.43	$0.00		N/A
L1700		LEGG PERTHES ORTHOSIS; TORONTO TYPE	041	Y	N	Y	$1,081.86	$900.65	$0.00		N/A
L1710		LEGG PERTHES ORTHOSIS; NEWINGTON TYPE	041	Y	N	Y	$1,377.65	$1,146.89	$0.00		N/A
L1720		LEGG PERTHES ORTHOSIS; TRILATERAL (TACHDIJAN TYPE)	041	Y	N	Y	$1,025.79	$853.97	$0.00		N/A
L1730		LEGG PERTHES ORTHOSIS; SCOTTISH RITE TYPE	041	Y	N	Y	$865.99	$720.94	$0.00		N/A
L1755		LEGG PERTHES ORTHOSIS; PATTEN BOTTOM TYPE	041	Y	N	Y	$1,245.05	$1,036.50	$0.00		N/A
L1810		KNEE ORTH,ELASTIC W-JNTS,PREFABRICATED,CUSTOMIZED	041	N	Y	Y	$34.42	$28.65	$0.00		1/365
L1812		KNEE ORTH ELASTIC W JOINTS PREFAB OTS	041	N	Y	Y	$34.42	$28.65	$0.00		1/365
L1820		KO; ELAS W/CONDYLAR PADS AND JO, W/OUT PAT CONT. P	041	N	Y	Y	$47.24	$39.33	$0.00		1/365
L1830		KNEE ORTHOSIS,IMMOBILIZER,CANVAS LONGITUDINAL,PREF	041	N	Y	Y	$29.70	$24.73	$0.00		1/365
L1831		KO; LOCKING KNEE JOINT, POSITION ORTHOSIS, PRE-FAB	041	N	Y	Y	$216.72	$180.42	$0.00		1/365
L1832		KNEE ORTH,ADJ JNT,UNICENTRIC/POLYCENTRIC,POSITNL,P	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1833		KO ADJ JNT POS ORT RIGID SPT PREFAB OTS	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1834		KO; W/O KNEE JOINT, RIGID, MOLDED TO PATIENT	041	Y	N	Y	$504.71	$420.17	$0.00		N/A
L1836		KNEE ORTH,RGD,WTHOUT JNTS,INC SFT INTRFCE,PREFAB O	041	N	Y	Y	$98.22	$81.77	$0.00		1/365
L1840		KO; DEROTATION, MED-LAT, ANTERIOR LIGAMENT, CUSTOM	041	Y	N	Y	$653.93	$544.40	$0.00		N/A
L1843		KO,SINGLE UPRIGHT,THIGH-CLF,ADJ FLXION-EXTJNT,MED-	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1844		KO; SINGLE UPRIGHT THIGH/CALF ADJ FLEX/EXT ST. UNI	041	Y	N	Y	$1,121.30	$933.48	$0.00		N/A
L1845		KO,DBL UPRIGHT,THIGH-CLF,ADJ FLXION-EXTJNT,MED-LAT	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L1846		KO; DOUBLE UPRIGHT, MED/LAT/ROT CONTROL, CUSTOM FA	041	Y	N	Y	$779.78	$649.17	$0.00		N/A
L1847		KO,DBL UPRGHT W-ADJ JNT,W-INFLTBLE SUPP CHMBR,PREF	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1848		KO DBL UPRIGHT W-ADJ JOINT W INFLAT AIR CHMBR PREF	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1850		KNEE ORTHOSIS,SWEDISH TYPE,PREFABRICATED,OFF THE S	041	N	N	Y	$198.10	$164.92	$0.00		1/365
L1860		KO; MOD OF SUPRACONDYLAR PROSTHETIC SOCKET, MOLDED	041	Y	N	Y	$867.10	$721.86	$0.00		N/A
L1900		AFO; SPRING WIRE, DORSIFLEXION CALF BAND	041	N	N	Y	$198.38	$165.15	$0.00		1/365
L1902		ANKLE FOOT ORTHOSIS,ANKLE GAUNTLET,PREFABRICATED,O	041	N	Y	N	$36.47	$30.36	$0.00		1/365
L1904		ANKLE ORTHOSIS,ANKLE GAUNTLET,CUSTOM-FABRICATED	041	N	N	Y	$313.87	$261.30	$0.00		1/365

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L1906		ANKLE FOOT ORTHOSIS,MULTIGAMENTUS ANKLE SUPPORT,PR	041	N	Y	Y	$78.19	$65.09	$0.00		1/365
L1907		ANKLE ORTH,SUPRAMALLEOLAR W-STRAPS,W-WITHOUT INTRF	041	N	N	Y	$414.32	$344.92	$0.00		1/365
L1910		AFO; POSTERIOR, SINGLE BAR, CLASP ATTACHTO SHOE CO	041	N	Y	Y	$194.98	$162.32	$0.00		1/365
L1920		AFO; SINGLE UPRIGHT W/STATIC OR ADJUSTABLE STOP	041	N	N	Y	$285.65	$237.80	$0.00		1/365
L1930		AFO; PLASTIC OR OTHER MATERIAL, PREFABRICATED INCL	041	N	Y	Y	$60.06	$50.00	$0.00		2/365
L1932		AFO,RIGID ANTERIOR TIBIAL SECTION,TOTAL CARBON MAT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1940		ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, CU	041	N	N	Y	$338.60	$281.88	$0.00		1/365
L1945		AFO; PLASTIC, RIGID ANTERIOR TIBIAL SECTION, MOLDE	041	Y	N	Y	$780.52	$649.78	$0.00		N/A
L1950		AFO; SPIRAL, PLASTIC, CUSTOM-FABRICATED	041	Y	N	Y	$534.77	$445.20	$0.00		N/A
L1951		AFO; SPIRAL, PLASTIC OR OTHER MATERIAL PRE/FAB INC	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L1960		AFO; PLASTIC, POSTERIOR SOLID ANKLE, MOLDED TO PT	041	N	N	Y	$431.02	$358.82	$0.00		1/365
L1970		AFO; PLASTIC, W/ANKLE JOINT, MOLDED TO PT	041	N	N	Y	$481.28	$400.67	$0.00		1/365
L1971		AFO; PLASTIC OR OTHER MATERIAL W/ ANKLE JOINT, PRE	041	N	Y	Y	$345.13	$287.32	$0.00		1/365
L1980		AFO;SINGLE UPRIGHT,PLANTAR DORSEFLEX,SOLID STIRRUP	041	N	N	Y	$280.78	$233.75	$0.00		1/365
L1990		AFO;DOUBLE UPRIGHT,PLANTAR DORSEFLEX,SOLID STIRRUP	041	N	N	Y	$324.95	$270.52	$0.00		1/365
L2000		KAFO; SINGLE UPRIGHT, FREE KNEE/ANKLE, SOLID STIRR	041	Y	N	Y	$777.88	$647.59	$0.00		N/A
L2005		KAFO,SINGL/DOUBL UPRIGHT,ANY TYPE ACTIVATN;W/ANKL	041	Y	N	N	$2,650.50	$2,206.54	$0.00		N/A
L2010		KAFO; SINGLE UPRIGHT, FREE ANKLE, W/O KNEE JOINT,	041	Y	N	Y	$606.73	$505.10	$0.00		N/A
L2020		KAFO; DOUBLE UPRIGHT, FREE KNEE/ANKLE, SOLID STIRR	041	Y	N	Y	$766.30	$637.94	$0.00		N/A
L2030		KAFO; DOUBLE UPRIGHT, FREE ANKLE, W/O KNEE JOINT,	041	Y	N	Y	$753.20	$627.04	$0.00		N/A
L2034		KAFO, FULL PLASTIC, SINGLE UPRIG W/WO FREE MOTION	041	Y	N	Y	$1,636.38	$1,362.29	$0.00		N/A
L2035		KAFO; FULL PLASTIC, STATIC, PREFABRICATED (PEDIATR	041	N	Y	Y	$115.85	$96.45	$0.00		1/365
L2036		KAFO; FULL PLAS, DOUB UPRIGHT, W/WO FREE KNEE, ANK	041	Y	N	Y	$1,289.17	$1,073.23	$0.00		N/A
L2037		KAFO; FULL PLAS, SINGLE UPRIGHT, W/WO FREE KNEE,	041	Y	N	Y	$1,153.14	$959.99	$0.00		N/A
L2038		KAFO;FULL PLASTIC, W/WO KNEE JOINT,MULTI-AXIS,ANKL	041	Y	N	Y	$929.59	$773.88	$0.00		N/A
L2040		HKAFO; TORSION CONTROL, BILATERAL ROTATION STRAPS	041	N	N	Y	$140.67	$117.11	$0.00		1/365
L2050		HKAFO;TORSION CONTROL,BILAT TORSION CABLES,HIP JOI	041	N	N	Y	$338.86	$282.10	$0.00		1/365
L2060		HKAFO;TORSION CONTROL,BILAT TORSION CABLES,BALL BE	041	N	N	Y	$423.82	$352.83	$0.00		1/365
L2070		HKAFO; TORSION CONTROL, UNILATERAL ROTATION STRAPS	041	N	N	Y	$107.92	$89.84	$0.00		1/365
L2080		HKAFO; TORSION CONTROL, UNILATERAL CABLE, HIP JOIN	041	N	N	Y	$259.50	$216.03	$0.00		1/365
L2090		HKAFO; TORSION CONTROL, UNILATERAL CABLE, BALL BEA	041	N	N	Y	$345.75	$287.84	$0.00		1/365
L2106		AFO; FRACTURE ORTH, TIBIAL FRACTURE, THEROPLASTIC	041	Y	N	Y	$548.10	$456.29	$0.00		N/A
L2108		ANKLE FOOT ORTH,FRACTURE ORTH,TIBIAL FRACTURE CAST	041	Y	N	Y	$799.43	$665.53	$0.00		N/A
L2112		AFO; FRACTURE ORTH, TIBIAL FRACTURE, SOFT	041	N	Y	Y	$350.81	$292.05	$0.00		1/365
L2114		AFO; FRACTURE ORTH, TIBIAL FRACTURE, SEMI-RIGID	041	N	Y	Y	$439.40	$365.80	$0.00		1/365
L2116		AFO; FRACTURE ORTH, TIBIAL FRACTURE RIGID	041	Y	Y	Y	$535.96	$446.19	$0.00		N/A
L2126		KAFO;FRACTURE ORTH,FEMERAL FRACTURE,THERMOPLA TYPE	041	Y	N	Y	$887.92	$739.19	$0.00		N/A
L2128		KAFO, FRACTURE ORTH, FEMORAL FRAC, MOLDED TO PT	041	Y	N	Y	$1,126.05	$937.44	$0.00		N/A
L2132		KAFO; FRACTURE ORTH, FEMORAL FRAC, SOFT	041	Y	Y	Y	$676.73	$563.38	$0.00		N/A
L2134		KAFO; FRACTURE ORTH, FEMORAL FRAC, SEMI-RIGID	041	Y	Y	Y	$493.26	$410.64	$0.00		N/A
L2136		KAFO;FRACTURE ORTH,FEMERAL FRAC, RIGID	041	Y	Y	Y	$743.97	$619.36	$0.00		N/A
L2180		LEFO; ADDITION, PLASTIC, SHOE INSERT W/ANKLE JOINT	041	N	N	Y	$92.17	$76.73	$0.00		1/365
L2182		LEFO; ADDITION, DROP LOCK KNEE JOINT	041	N	Y	Y	$79.45	$66.14	$0.00		2/365

W - Refer to Wheelchair Fee Schedule
nr - 2.7% reduction does not apply to this code

LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L2184		LEFO; ADDITION, LIMITED MOTION KNEE JOINT	041	N	Y	Y	$80.54	$67.05	$0.00		2/365
L2186		LEFO; ADDITION, ADJ. MOTION KNEE JOINT, LERMAN TYP	041	N	Y	Y	$107.12	$89.18	$0.00		2/365
L2188		LEFO;ADDITION,QUADRILATERAL BRIM	041	N	Y	Y	$194.73	$162.11	$0.00		1/365
L2190		LEFO; ADDITION, WAIST BELT	041	N	Y	Y	$59.31	$49.38	$0.00		1/365
L2192		LEFO; ADDITION, HIP JOINT, PELVIC BAND/BELT, HIGH	041	N	Y	Y	$231.82	$192.99	$0.00		1/365
L2200		LE; ADDITION, LIMITED ANKLE MOTION, EACH JOINT	041	N	N	Y	$34.93	$29.08	$0.00		2/365
L2210		LE;ADDITION,DORSIFLEXION/PLANTAR FLEXION ASSIST,EA	041	N	N	Y	$43.70	$36.38	$0.00		2/365
L2220		LE;ADDITION,DORSIFLEXION/PLANTAR FLEXION ASSIST/RE	041	N	N	Y	$56.25	$46.83	$0.00		2/365
L2230		LE; ADDITION; SPLIT FLAT CALIPER STIRRUPS/PLATE AT	041	N	N	Y	$66.51	$55.37	$0.00		2/365
L2232		ADDITION TO LOWER EXT ORT ROCKER BOTTOM FOR CUS FA	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L2240		LE; ADDITION, ROUND CALIPER/PLATE ATTACHMENT	041	N	Y	Y	$66.18	$55.09	$0.00		2/365
L2250		LE; ADDITION, FOOT PLATE, MOLDED TO PT, STIRRUP AT	041	N	N	Y	$232.26	$193.36	$0.00		2/365
L2260		LE; ADDITION, REINFORCED SOLID STIRRUPS, SCOTT-CRA	041	N	N	Y	$130.33	$108.50	$0.00		2/365
L2265		LE;ADDITION, LONG TONGUE STIRRUP	041	N	Y	N	$93.45	$77.80	$0.00		1/365
L2270		LE;ADDITION,VARUS/VALGUS CORRECTION "T" STRAP,MALL	041	N	N	Y	$42.85	$35.67	$0.00		2/180
L2275		LE;ADDITION VARUS/VALGUS CORRECTION,PLASTIC MODIFI	041	N	N	Y	$64.16	$53.41	$0.00		2/365
L2280		LE; ADDITION, MOLDED INNER BOOT	041	Y	Y	Y	$392.55	$326.80	$0.00		N/A
L2300		LE; ADDITION, ABDUCTION BAR, JOINTED, ADUSTABLE	041	N	Y	Y	$175.05	$145.73	$0.00		1/365
L2310		LE; ADDITION, ABDUCTION BAR, STRAIGHT	041	N	Y	Y	$79.99	$66.59	$0.00		1/365
L2320		LE; ADDITION, NON-MOLDED LACER, CUST-FAB ONLY	041	Y	Y	Y	$134.12	$111.65	$0.00		N/A
L2330		LE; ADDITION, LACER, MOLDED TO PATIENT, CUST-FAB O	041	Y	N	Y	$255.31	$212.55	$0.00		N/A
L2335		LE;ADDITION,ANTERIOR SWING BAND	041	N	Y	Y	$195.47	$162.73	$0.00		1/365
L2340		LE; ADDITION, PRE-TIBIAL SHELL, MOLDED TO PATIENT	041	Y	N	Y	$290.59	$241.92	$0.00		N/A
L2350		LE; ADDITION, PROSTHETIC TYPE, (BK) SOCKET, MOLDED	041	Y	N	Y	$579.35	$482.31	$0.00		N/A
L2360		LE; ADDITION, EXTENDED STEEL SHANK	041	N	Y	Y	$35.86	$29.85	$0.00		1/365
L2370		LE; ADDITION, PATTEN BOTTOM	041	N	Y	Y	$222.54	$185.26	$0.00		1/365
L2375		LE; ADDITION, TORSION CONTROL, ANKLE JOINT AND HAL	041	N	Y	Y	$85.55	$71.22	$0.00		2/365
L2380		LE; ADDITION, TORSION CONTROL, STRAIGHT KNEE JOINT	041	N	Y	Y	$89.73	$74.70	$0.00		2/365
L2385		LE; ADDITION, STRAIGHT KNEE JOINT, HEAVY DUTY, EAC	041	N	N	Y	$102.17	$85.06	$0.00		2/365
L2387		ADD TO LOW EXTREM POLYCEN KNEE JOINT FOR C/F KAFO	041	N	N	Y	$158.10	$131.62	$0.00		1/365
L2390		LE; ADDITION, OFFSET KNEE JOINT, EACH JOINT	041	N	Y	Y	$71.17	$59.25	$0.00		2/365
L2395		LE; ADDITION, OFFSET KNEE JOINT, HEAVY DUTY, EACH	041	N	Y	Y	$101.72	$84.68	$0.00		2/365
L2397		LE; ADDITION, ORTHOSIS, SUSPENSION SLEEVE	041	N	Y	Y	$85.73	$71.37	$0.00		1/180
L2405		KNEE JOINT; ADDITION, DROP LOCK, EACH	041	N	Y	Y	$44.12	$36.73	$0.00		2/365
L2415		KNEE JOINT; ADDITION, CAM LOCK, EACH JOINT	041	N	N	Y	$84.48	$70.33	$0.00		2/365
L2425		KNEE JOINT;ADDITION,DISC/DIAL LOCK FOR ADJ KNEE,EA	041	N	Y	Y	$99.68	$82.98	$0.00		2/365
L2492		KNEE JOINT; ADDITION, LIFT LOOP FOR DROP LOCK RING	041	N	Y	Y	$81.95	$68.22	$0.00		2/365
L2500		LE; ADDITION, THIGH/GLUTEAL/ISCHIAL WEIGHT BEARING	041	N	Y	Y	$217.60	$181.15	$0.00		1/365
L2510		LE ADDITION,THIGH/WEIGHT BEARING QUADRILATERAL BRI	041	Y	N	Y	$560.82	$466.88	$0.00		N/A
L2520		LE; ADDITION, THIGH/WEIGHT BEARING, QUAD BRIM, CUS	041	Y	N	Y	$373.75	$311.15	$0.00		N/A
L2525		LE; ADDITION, THIGH/WT BEAR, ISCHIAL CONT MOLDED T	041	Y	N	Y	$792.58	$659.82	$0.00		N/A
L2526		LE; ADDITION, THIGH/WT BEARING, ISCHIAL CONT CUSTO	041	Y	N	Y	$445.34	$370.75	$0.00		N/A
L2530		LE; ADDITION, THIGH/WEIGHT BEARING, LACER, NON-MOL	041	N	Y	Y	$166.76	$138.83	$0.00		1/365

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LTC Y: covered by LTC
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L2540		LE; ADDITION, THIGH/WEIGHT BEARING, LACER, MOLDED	041	N	N	Y	$315.54	$262.69	$0.00		1/365
L2550		LE; ADDITION, THIGH/WEIGHT BEARING, HIGH ROLL CUFF	041	N	Y	Y	$236.59	$196.96	$0.00		1/365
L2570		LE; ADDITION, PELVIC CONTROL, HIP JOINT, CLEVIS TY	041	N	Y	Y	$309.69	$257.82	$0.00		1/365
L2580		LE; ADDITION, PELVIC CONTROL, PELVIC SLING	041	N	Y	Y	$301.76	$251.22	$0.00		1/365
L2600		LE; ADDITION, PELVIC CONTROL, HIP JOINT, CLEVIS TY	041	N	Y	Y	$148.30	$123.46	$0.00		2/365
L2610		LE; ADDITION, PELVIC CONTROL, HIP JOINT, CLEVIS/TH	041	N	Y	Y	$163.87	$136.42	$0.00		2/365
L2620		LE; ADDITION, PELVIC CONTROL, HIP JOINT, HEAVY DUT	041	N	Y	Y	$173.85	$144.73	$0.00		2/365
L2622		LE; ADDITION, PELVIC CONTROL, HIP JOINT, ADJUSTABL	041	N	Y	Y	$221.27	$184.21	$0.00		2/365
L2624		LE;ADDITION,PELVIC CONTROL,HIP JOINT,ADJ-FLEXION/E	041	N	Y	Y	$271.31	$225.87	$0.00		1/365
L2627		LE ADDITION,PELVIC CONTROL,PLASTIC RECIP HIP JOINT	041	Y	N	Y	$1,486.16	$1,237.23	$0.00		N/A
L2628		LE ADDITION,PELVIC CONTROL,METAL FRAME,RECIP HIP J	041	Y	Y	Y	$1,089.32	$906.86	$0.00		N/A
L2630		LE; ADDITION, PELVIC CONTROL, BAND/BELT, UNILATERA	041	N	Y	Y	$160.99	$134.02	$0.00		1/365
L2640		LE:ADDITION, PELVIC CONTROL, BAND/BELT, BILATERAL	041	N	Y	Y	$218.50	$181.90	$0.00		1/365
L2650		LE; ADDITION, PELVIC/THORACIC CONTROL, GLUTEAL PAD	041	N	Y	Y	$96.22	$80.10	$0.00		1/365
L2660		LE; ADDITION, THORACIC CONTROL, THORACIC BAND	041	N	Y	Y	$124.59	$103.72	$0.00		1/365
L2670		LE; ADDITION, THORACIC CONTROL, PARASPINAL UPRIGHT	041	N	Y	Y	$110.90	$92.32	$0.00		1/365
L2680		LE; ADDITION, THORACIC CONTROL, LATERAL SUPPORT UP	041	N	Y	Y	$101.75	$84.71	$0.00		1/365
L2750		LEO; ADDITION, PLATING CHROME/NICKEL, PER BAR	041	N	Y	Y	$54.34	$45.24	$0.00		2/365
L2760		LEO; ADDITION, EXTENSION, PER EXTENSION, PER BAR	041	N	Y	Y	$39.49	$32.88	$0.00		2/365
L2785		LEO; ADDITION, DROP LOCK RETAINER, EACH	041	N	Y	Y	$20.60	$17.15	$0.00		2/365
L2795		LEO; ADDITION, KNEE CONTROL, FULL KNEE CAP	041	N	Y	Y	$57.00	$47.45	$0.00		2/365
L2800		LEO; ADDITION; KNEE CONTROL, KNEE CAP, MEDIAL/LATE	041	N	Y	Y	$70.04	$58.31	$0.00		2/365
L2810		LEO; ADDITION; KNEE CONTROL, CONDYLAR PAD	041	N	Y	Y	$56.77	$47.26	$0.00		2/365
L2820		LEO; ADDITION, SOFT INTERFACE FOR MOLDED PLASTIC,	041	N	N	Y	$56.45	$46.99	$0.00		2/365
L2830		LEO; ADDITION, SOFT INTERFACE FOR MOLDED PLASTIC,	041	N	N	Y	$61.08	$50.85	$0.00		2/365
L2840		LEO; TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH	041	N	Y	Y	$29.99	$24.97	$0.00		3/180
L2850		LEO;ADDITION, FEMORAL LENGTH SOCK, FRACTURE OR EQU	041	N	Y	Y	$42.06	$35.01	$0.00		3/180
L2861		TORSION MECHANISM KNEE/ANKLE	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L2999		LEO;NOT OTHERWISE SPECIFIED	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L3000		FOOT,INSERT; REMOVABLE,"UCB"TYPE, BERKELEY SHELL,M	041	N	N	N	$110.32	$91.84	$0.00		2/365
L3001		FOOT,INSERT: REMOVABLE,SPENCO,MOLDED TO PT, EACH	041	N	N	N	$58.08	$48.35	$0.00		2/365
L3002		FOOT,INSERT;REMOVABLE,PLASTAZOTE OR EQUAL,MOLDED T	041	N	N	N	$107.24	$89.28	$0.00		2/365
L3003		FOOT,INSERT;REMOVABLE,SILICONE GEL,MOLDED TO PT,EA	041	N	N	N	$43.85	$36.51	$0.00		2/365
L3010		FOOT,INSERT;REMOVABLE,LONGITUDINAL ARCH SUPPORT,MO	041	N	N	N	$107.24	$89.28	$0.00		2/365
L3030		FOOT,INSERT;REMOVABLE,FORMED TO PATIENT FOOT, EACH	041	N	N	N	$22.09	$18.39	$0.00		2/365
L3031		FOOT, INSERT/PLATE, REMOVABLE, ADD TO LOWER EXT/OR	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3040		FOOT,ARCH SUPPORT;REMOVABLE,PREMOLDED,LONGITUDINAL	041	N	Y	N	$30.48	$25.37	$0.00		2/365
L3050		FOOT,ARCH SUPPORT;REMOVABLE,PREMOLDED,METATARSAL,E	041	N	Y	N	$16.89	$14.06	$0.00		2/365
L3060		FOOT,ARCH SUPPORT;REMOVABLE,PREMOLDED,LONG/META,EA	041	N	Y	N	$50.57	$42.10	$0.00		2/365
L3070		FOOT,ARCH SUPPORT;NON REMOVABLE,LONGITUDINAL,ATTAC	041	N	Y	Y	$21.80	$18.15	$0.00		2/365
L3080		FOOT,ARCH SUPPORT;NON REMOVABLE,METATARSAL,ATTACHE	041	N	Y	Y	$21.80	$18.15	$0.00		2/365
L3090		FOOT,ARCH SUPPORT;NON REMOVABLE,LONG/META,ATTACHED	041	N	Y	Y	$27.90	$23.23	$0.00		2/365
L3100		HALLUS-VALGUS NIGHT DYNAMIC SPLINT, PREFABRICATED,	041	N	Y	N	$14.75	$12.28	$0.00		2/365

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L3140		FOOT, ABDUCTION ROTATION BAR, INCLUDING SHOES	041	N	N	Y	$61.03	$50.81	$0.00		1/120
L3150		FOOT, ABDUCTION ROTATION BAR, W/O SHOES	041	N	Y	Y	$55.79	$46.45	$0.00		1/120
L3170		FOOT,PLASTIC, SILICONE OR EQUAL,HEEL STABILIZER,PR	041	N	Y	N	$28.35	$23.60	$0.00		2/365
L3201		ORTHOPEDIC SHOE, OXFORD W/SUPINATOR OR PRONATOR, I	041	N	N	N	$44.12	$36.73	$0.00		2/90
L3202		ORTHOPEDIC SHOE, OXFORD W/SUPINATOR OR PRONATOR, C	041	N	N	N	$54.38	$45.27	$0.00		2/150
L3203		ORTHOPEDIC SHOE; OXFORD W/SUPINATOR OR PRONATOR, J	041	N	N	N	$66.55	$55.40	$0.00		2/150
L3204		ORTHOPEDIC SHOE; HIGHTOP W/SUPINATOR OR PRONATOR,	041	N	N	N	$47.21	$39.30	$0.00		2/90
L3206		ORTHOPEDIC SHOE; HIGHTOP W/SUPINATOR OR PRONATOR,	041	N	N	N	$54.46	$45.34	$0.00		2/150
L3207		ORTHOPEDIC SHOE; HIGHTOP W/SUPINATOR OR PRONATOR,	041	N	N	N	$70.86	$58.99	$0.00		2/150
L3208		SURGICAL BOOT EACH INFANT	041	N	N	N	$25.39	$21.14	$0.00		2/150
L3209		SURGICAL BOOT EACH-CHILD	041	N	N	N	$36.58	$30.45	$0.00		2/150
L3211		SURGICAL BOOT EACH-JUNIOR	041	N	N	N	$56.71	$47.21	$0.00		2/150
L3212		BENESCH BOOT PAIR-INFANT	041	N	N	N	$62.19	$51.77	$0.00		2/150
L3213		BENESCH BOOT PAIR-CHILD	041	N	N	N	$64.94	$54.06	$0.00		2/150
L3214		BENESCH BOOT PAIR-JUNIOR	041	N	N	N	$73.17	$60.91	$0.00		2/150
L3215		ORTHOPEDIC SHOE;LADIES,OXFORD, EACH	041	N	N	N	$44.81	$37.30	$0.00		2/365
L3216		ORTHOPEDIC SHOES; LADIES DEPTH INLAY, EACH	041	N	N	N	$76.37	$63.58	$0.00		2/365
L3217		ORTHOPEDIC SHOES; LADIES, HIGH TOP, DEPTH INLAY, E	041	N	N	N	$80.03	$66.62	$0.00		2/365
L3219		ORTHOPEDIC SHOE;MENS,OXFORD, EACH	041	N	N	N	$48.93	$40.73	$0.00		2/365
L3221		ORTHOPEDIC SHOES; MENS, DEPTH INLAY EACH	041	N	N	N	$79.57	$66.24	$0.00		2/365
L3222		ORTHOPEDIC SHOES; HIGHTOP, DEPTH INLAY, EACH	041	N	N	N	$80.03	$66.62	$0.00		2/365
L3224		ORTHO FOOTWEAR, WOMAN SHOE, OXFORD, USED AS PART O	041	N	N	Y	$44.81	$37.30	$0.00		2/365
L3225		ORTHO FOOTWEAR, MAN'S SHOE, OXFORD, USED AS PART O	041	N	N	Y	$48.93	$40.73	$0.00		2/365
L3230		ORTHOPEDIC SHOES; CUSTOM, DEPTH INLAY, EACH	041	Y	N	Y	$278.96	$232.23	$0.00		N/A
L3250		ORTHOPEDIC SHOES; CUSTOM MOLDED,REMOVABLE INNER MO	041	Y	N	Y	$160.38	$133.52	$0.00		N/A
L3257		ORTHOPEDIC SHOE; SPLIT SIZE CHARGE	041	N	N	N	$31.10	$25.89	$0.00		1/365
L3260		SURGICAL BOOT/SHOE EACH	041	N	Y	N	$62.65	$52.16	$0.00		1/180
L3300		LIFT, ELEVATION: HEEL, TAPERED TO METATARSALS, PER	041	N	N	N	$35.75	$29.76	$0.00		3/365
L3310		LIFT, ELEVATION; HEEL & SOLE, NEOPRENE, PER INCH	041	N	N	N	$45.55	$37.92	$0.00		3/365
L3320		LIFT, ELEVATION; HEEL AND SOLE, CORK, PER INCH	041	N	N	N	$58.68	$48.85	$0.00		3/365
L3330		LIFT, ELEVATION; METAL EXTENSION (SKATE)	041	N	N	N	$327.89	$272.97	$0.00		1/365
L3332		LIFT, ELEVATION; INSIDE SHOE, TAPERED, UP TO 1/2 I	041	N	N	N	$24.69	$20.55	$0.00		3/365
L3334		LIFT, ELEVATION; HEEL, PER INCH	041	N	N	N	$26.14	$21.76	$0.00		3/365
L3340		WEDGE, HEEL; SACH	041	N	N	N	$43.44	$36.16	$0.00		3/365
L3350		WEDGE, HEEL	041	N	N	N	$15.69	$13.06	$0.00		3/365
L3360		WEDGE, SOLE; OUTSIDE SOLE	041	N	N	N	$24.40	$20.31	$0.00		3/365
L3370		WEDGE, SOLE; BETWEEN SOLE	041	N	N	N	$34.00	$28.31	$0.00		3/365
L3380		WEDGE, CLUBFOOT	041	N	N	Y	$34.00	$28.31	$0.00		3/365
L3390		WEDGE, OUTFLARE	041	N	N	N	$29.73	$24.75	$0.00		3/365
L3400		WEDGE, METATARSAL BAR; ROCKER	041	N	N	N	$27.90	$23.23	$0.00		3/365
L3410		WEDGE, METATARSAL BAR; BETWEEN SOLE	041	N	N	N	$50.30	$41.87	$0.00		3/365
L3420		WEDGE, HEEL/FULL SOLE; BETWEEN SOLE	041	N	N	N	$37.50	$31.22	$0.00		3/365
L3430		HEEL; COUNTER, PLASTIC REINFORCED	041	N	N	N	$73.17	$60.91	$0.00		3/365

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L3440		HEEL; COUNTER, LEATHER REINFORCED	041	N	N	N	$52.31	$43.55	$0.00		3/365
L3450		HEEL; SACH CUSHION TYPE	041	N	N	N	$43.44	$36.16	$0.00		3/365
L3455		HEEL; NEW LEATHER, STANDARD	041	N	N	Y	$23.36	$19.45	$0.00		3/365
L3460		HEEL; NEW RUBBER, STANDARD	041	N	N	Y	$18.75	$15.61	$0.00		3/365
L3465		HEEL; THOMAS WITH WEDGE	041	N	N	N	$25.15	$20.94	$0.00		3/365
L3470		HEEL; THOMAS EXTENDED TO BALL	041	N	N	N	$42.07	$35.02	$0.00		3/365
L3485		HEEL; PAD, REMOVABLE FOR SPUR	041	N	N	N	$18.58	$15.47	$0.00		3/365
L3520		ORTHO SHOE ADDITION; INSOLE, FELT COVERED W/ LEATH	041	N	N	N	$21.80	$18.15	$0.00		3/365
L3530		ORTHO SHOE ADDITION; SOLE, HALF	041	N	N	Y	$21.80	$18.15	$0.00		3/365
L3540		ORTHO SHOE ADDITION; SOLE, FULL	041	N	N	Y	$34.88	$29.04	$0.00		3/365
L3550		ORTHO SHOE ADDITION; TOE TAP STANDARD	041	N	N	N	$6.10	$5.08	$0.00		3/365
L3560		ORTHO SHOE ADDITION; TOE TAP HORSESHOE	041	N	N	N	$10.98	$9.14	$0.00		3/365
L3570		ORTHO SHOE ADDITION;SPECIAL EXT. TO INSTEP(LEATHER	041	N	N	N	$58.41	$48.63	$0.00		3/365
L3580		ORTHO SHOE ADDITION; CONVERT INSTEP-VELCRO CLOSURE	041	N	N	N	$35.81	$29.81	$0.00		2/365
L3590		ORTHO SHOE ADDITION; CONVERT FIRM COUNTER TO SOFT	041	N	N	N	$36.61	$30.48	$0.00		3/365
L3595		ORTHO SHOE ADDITION; MARCH BAR	041	N	N	N	$28.77	$23.95	$0.00		3/365
L3600		ORTHOSIS, TRANSFER; CALIPER PLATE, EXISTING	041	N	N	Y	$52.31	$43.55	$0.00		1/365
L3649		ORTHOPEDIC SHOE; MOD, ADD, TRANSFER NOT OTHERWISE	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L3650		SHOULDER ORTH,FIGURE OF 8 DSGN ABD RESTRNR,PREFB,O	041	N	Y	Y	$36.64	$30.50	$0.00		1/365
L3670		SHOULDER ORTH,ACROMIO-CLAVICULAR,CANVAS-WEBB,PREFB	041	N	Y	Y	$26.37	$21.95	$0.00		1/365
L3675		SHOULDER ORTH,VEST TYPE ABD RESTRNR,CANVAS WEBB OR	041	N	Y	Y	$117.61	$97.91	$0.00		1/365
L3677		SHOULDER ORTH,JNT DSGN,WO-JNTS,INC INTRFCE-STRAPS,	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L3678		SHOULDER ORTH W-O JNTS SOFT INTRFACE PREFAB OTS	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3710		ELBOW ORTH, ELASTIC W-METAL JOINTS, PREFABRICATED,	041	N	Y	Y	$82.69	$68.84	$0.00		1/365
L3720		EO;DOUBLE UPRIGHT W/FOREARM/ARM CUFFS, FREE MOTION	041	N	N	Y	$432.38	$359.96	$0.00		1/365
L3730		EO; DOUBLE UPRIGHT W/FOREARM/ARM CUFFS, EXTEN/FLEX	041	Y	N	Y	$573.54	$477.47	$0.00		N/A
L3740		EO; DOUBLE UPRIGHT W/FOREARM/ARM CUFF, ADJ LOCK W/	041	Y	N	Y	$679.98	$566.08	$0.00		N/A
L3760		EO;W/ADJUSTABLE LOCKING JOINTS PREFAB W/FITTING/AD	041	N	Y	N	$76.19	$63.43	$0.00		1/365
L3762		ELBOW ORTH,RGD,WO-JOINTS,INC SOFT INTERFACE,PREFAB	041	N	Y	Y	$72.05	$59.98	$0.00		1/365
L3763		EWHO, RIGID W/OUT JOINTS, MAY INC INTER-FACE/STRAP	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L3806		WRIST HAND FINGER ORTHOSIS,ONE OR MORE NONTORSION	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3807		WRIST HAND FINGER ORTH,WO JNTS,PREFAB-CUSTOMIZED	041	N	Y	Y	$110.05	$91.62	$0.00		1/365
L3808		WRIST HAND FINGER ORTHOSIS,RIG WITHOUT JTS,INCL ST	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L3809		WRIST HAND FINGER ORTH W-O JNT PREFAB OTS	041	N	Y	Y	$110.05	$91.62	$0.00		1/365
L3891		ADDN TO UPR EXTRMTY JNT,WRIST/ELBOW,CONC ADJ TORSN	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L3900		WHFO; WRIST OR FINGER DRIVEN, DYNAMIC FLEXOR HINGE	041	Y	N	Y	$1,025.17	$853.45	$0.00		N/A
L3901		WHFO; CABLE DRIVEN, DYNAMIC FLEXOR HINGE	041	Y	N	Y	$1,343.56	$1,118.51	$0.00		N/A
L3906		WHO; W/O JOINTS, INCLUDES SOFT INTERFACE, STRAPS,	041	Y	N	Y	$320.70	$266.98	$0.00		N/A
L3908		WRIST HAND ORTHOSIS,WRIST EXT CNTRL COCK-UP,NON-MO	041	N	Y	Y	$26.12	$21.74	$0.00		2/365
L3912		HAND FINGER ORTH,FLEXION GLOVE W-ELASTIC FNGR CNTR	041	N	Y	Y	$66.67	$55.50	$0.00		1/365
L3915		WHO,INC NONTORSION JNTS,ELAS BNDS-TURNBKLS-SFT INT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3916		WHO INCL 1 OR > NONTORSION JOINT ELTC BAND PREFAB	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3917		HAND ORTH,METACARPAL FRAC ORTH,PREFABRICATED-CUSTO	041	N	Y	Y	$70.76	$58.91	$0.00		1/365

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LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L3918		HAND ORTH METACARPAL FX OTS PREFAB OTS	041	N	Y	Y	$70.76	$58.91	$0.00		1/365
L3923		HFO,WITHOUT JOINTS,INC SOFT INTERFACE AND STRAPS,P	041	N	Y	N	$26.08	$21.71	$0.00		1/365
L3924		HAND FNGR ORT WO JOINT PREFAB OTS	041	N	Y	Y	$26.08	$21.71	$0.00		1/365
L3925		FINGER ORTH,PIP-DIP-NONTORSION JNT-SPRNG,EXTFLEXIO	041	N	Y	Y	$47.15	$39.25	$0.00		1/365
L3927		FINGER ORTH,PIP-DIP,WO-JNT-SPRING,EXT-FLEXION,INC	041	N	Y	Y	$25.13	$20.92	$0.00		1/365
L3929		HFO,INC NONTORSION,TRNBKLS,ELAS BNDS-SPRNGS-SFT IN	041	N	Y	Y	$65.56	$54.58	$0.00		1/365
L3930		HAND FNGR ORTHOSIS W>1 NONTRSNJNT SOFT INTERFACE P	041	N	Y	Y	$65.56	$54.58	$0.00		1/365
L3931		WRST HD/FING ORT,INC NON TOR JTS,BUCK,SPGS, ARE FA	041	N	Y	Y	$149.66	$124.59	$0.00		1/365
L3933		FINGER ORTHOSIS,WO-JOINTS,INC SOFT INTRFCE,CUSTM F	041	Y	N	Y	$107.03	$89.10	$0.00		N/A
L3960		SEWHO;ABDUCTION POSITIONING, AIRPLANE DESIGN	041	Y	Y	Y	$504.72	$420.18	$0.00		N/A
L3962		SEWHO;ABDUCTION POSITIONING, ERBS PALSEY DESIGN	041	N	Y	Y	$456.50	$380.04	$0.00		1/365
L3980		UE; FRACTURE ORTHOSIS,HUMERAL	041	N	Y	Y	$244.82	$203.81	$0.00		1/365
L3981		UPPER EXTREMITY FX,ORTHOSIS,HUMERAL,PREFAB,WITH SH	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L3982		UE; FRACTURE ORTHOSIS, RADIUS/ULNAR	041	N	Y	Y	$104.01	$86.59	$0.00		1/365
L3984		UE; FRACTURE ORTHOSIS, WRIST	041	N	Y	Y	$218.98	$182.30	$0.00		1/365
L3995		UE; ADDITION, SOCK, FRACTURE OR EQUAL, EACH	041	N	Y	Y	$25.99	$21.64	$0.00		2/180
L3999		UPPER LIMB ORTHOSIS; NOT OTHERWISE SPECIFIED	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L4000		REPLACE GIRDLE FOR SPINAL ORTHOSIS	041	Y	Y	Y	$918.87	$764.96	$0.00		N/A
L4002		REPLACEMENT STRAP,ANY ORT,INCLUDES ALL COMPONENTS	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L4010		REPLACE TRILATERAL SOCKET BRIM	041	Y	Y	Y	$558.51	$464.96	$0.00		N/A
L4030		REPLACE QUADRILATERAL SOCKET BRIM, CUSTOM FITTED	041	Y	N	Y	$426.36	$354.94	$0.00		N/A
L4040		REPLACE MOLDED THIGH LACER, CUS-FAB ONLY	041	Y	N	Y	$288.74	$240.38	$0.00		N/A
L4045		REPLACE THIGH LACER NON-MOLDED, CUST-FAB ONLY	041	N	N	Y	$213.27	$177.55	$0.00		1/365
L4050		REPLACE MOLDED CALF LACER, CUST-FAB ONLY	041	Y	N	Y	$285.95	$238.05	$0.00		N/A
L4055		REPLACE NON-MOLDED CLAF LACER, CUST-FAB, ONLY	041	N	N	Y	$173.81	$144.70	$0.00		1/365
L4060		REPLACE HIGH ROLL CUFF	041	N	Y	Y	$225.93	$188.09	$0.00		1/365
L4070		REPLACE PROXIMAL & DISTAL UPRIGHT FOR KAFO	041	N	Y	Y	$182.97	$152.32	$0.00		1/365
L4080		REPLACE METAL BANDS KAFO, PROXIMAL THIGH	041	N	Y	Y	$69.06	$57.49	$0.00		2/365
L4090		REPLACE METAL BANDS KAFO - AFO, CALF OR DISTAL THI	041	N	N	Y	$59.12	$49.22	$0.00		2/365
L4110		REPLACE LEATHER CUFF KAFO - AFO, CALF OR DISTAL TH	041	N	N	Y	$55.14	$45.90	$0.00		2/365
L4130		REPLACE PRETIBIAL SHELL	041	N	Y	Y	$333.28	$277.46	$0.00		1/365
L4210		REPAIR OF ORTHOTIC DEVICE,REPAIR OR REPLACE MINOR	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L4350		ANKLE CNTRL ORTHO,STIRUP,RIGD,INC INTRFCE-PNEUM-GE	041	N	Y	Y	$30.98	$25.79	$0.00		1/365
L4360		WALKING BOOT,PNEUM-VACUMN W-WO JNTS-PREFAB AND CUS	041	N	Y	Y	$111.80	$93.07	$0.00		1/365
L4361		WALKING BOOT PNEM AND/OR VACUUM W OR WO JOINTS PRE	041	N	Y	Y	$111.80	$93.07	$0.00		1/365
L4370		PNEUMATIC FULL LEG SPLINT, PREFABRICATED	041	N	Y	Y	$100.86	$83.97	$0.00		1/365
L4386		WALKING BOOT,NON-PNEU,W-WO JNTS/INTRFCE MAT,PREFAB	041	N	Y	Y	$116.75	$97.19	$0.00		1/365
L4387		WALKING BOOT NON-PNEU W OR WO JOINTS W OR WO INTRF	041	N	Y	Y	$116.75	$97.19	$0.00		1/365
L4396		STATIC OR DYNAMIC AFO,W/SFT INTRFCE,ADJ FIT,PREFAB	041	N	Y	Y	$123.56	$102.86	$0.00		1/365
L4397		STATIC OR DYNM AFO INCL SOFT INTRAFC ADJ PREFAB OT	041	N	Y	Y	$123.56	$102.86	$0.00		1/365
L4398		FOOT DROP SPLINT,RECUMBENT POSITIONING DEVICE PREF	041	N	Y	Y	$56.89	$47.36	$0.00		1/365
L4631		ANKL FT ORT,WALK BOOT VARUS/VALGUS CORR ROC BOT AN	041	Y	Y	Y	$816.30	$679.57	$0.00		N/A
L5000		PARTIAL FOOT, SHOE INSERT W/LONGITUDINAL ARCH, TOE	041	N	N	Y	$224.17	$186.62	$0.00		1/365

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LTC Y: covered by LTC
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***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L5010		PARTIAL FOOT, MOLDED SOCKET, ANKLE HEIGHT, W/TOE F	041	Y	N	Y	$960.35	$799.49	$0.00		N/A
L5020		PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGH	041	Y	N	Y	$1,747.93	$1,455.15	$0.00		N/A
L5050		ANKLE, SYMES, MOLDED SOCKET, SACH FOOT	041	Y	N	Y	$1,909.07	$1,589.30	$0.00		N/A
L5060		ANKLE,SYMES METAL FRAME,MOLDED,LEATHER SOCKET,ART	041	Y	N	Y	$2,353.33	$1,959.15	$0.00		N/A
L5100		BK;MOLDED SOCKET, SHIN, SACH FOOT	041	Y	N	Y	$1,900.90	$1,582.50	$0.00		N/A
L5105		BK;PLASTIC SOCKET, JOINTS/THIGH LACER,SACH FOOT	041	Y	N	Y	$2,682.58	$2,233.25	$0.00		N/A
L5150		KNEE DISARTICULATION;MOLDED SOCKET,EXTERNAL KNEE J	041	Y	N	Y	$2,982.40	$2,482.85	$0.00		N/A
L5160		KNEE DISARTICULATION; MOLDED SOCKET, BENT KNEE CON	041	Y	N	Y	$3,274.51	$2,726.03	$0.00		N/A
L5200		AK;MOLDED SOCKET, SINGLE AXIS CONSTANT FRICTION KN	041	Y	N	Y	$2,532.60	$2,108.39	$0.00		N/A
L5210		AK; SHORT PROSTH, NO KNEE/ANKLE JOINT, W/FOOT BLOC	041	Y	N	Y	$2,010.88	$1,674.06	$0.00		N/A
L5220		AK;SHORT PROTH NO KNEE JOINTS,W/ARTICULATED ANKEL/	041	Y	N	Y	$2,215.12	$1,844.09	$0.00		N/A
L5230		ABV KNEE,PROXIMLA FEMRL FOCL DEF,CON FRCTN KNEE,SH	041	Y	N	Y	$3,322.37	$2,765.87	$0.00		N/A
L5250		HIP DISARTICULATION, CANADIAN TYPE, MOLDED SOCKET,	041	Y	N	Y	$3,895.55	$3,243.05	$0.00		N/A
L5270		HIP DISARTICULATION; TILT TABLE TYPE, MOLDED SOCKE	041	Y	N	Y	$4,340.42	$3,613.40	$0.00		N/A
L5280		HEMIPELVECTOMY; CANADIAN TYPE, MOLDED SOCKET, SING	041	Y	N	Y	$4,219.02	$3,512.33	$0.00		N/A
L5301		BELOW-KNEE,MOLDED SOCKET,SHIN,EACH FOOT,ENDOSKELET	041	Y	N	Y	$1,955.07	$1,627.60	$0.00		N/A
L5312		KNEE DISARTICULTN,MLD SOCKET,SNGL AXIS,PYLON,SACH	041	Y	Y	Y	$3,583.11	$2,982.94	$0.00		N/A
L5321		ABOVE KNEE,MOLDED,ENDOSKELETAL SYSTEM, SINGLE AXIS	041	Y	N	Y	$2,607.55	$2,170.79	$0.00		N/A
L5331		HIP DISARTICULATION,CANADIAN TYPE,ENDOSKELETAL SYS	041	Y	N	Y	$3,818.35	$3,178.78	$0.00		N/A
L5341		HEMIPELVECTOMY,CANADIAN TYPE,ENDOSKELETAL SYSTEM	041	Y	Y	N	$4,103.49	$3,416.16	$0.00		N/A
L5400		EARLY FITTING; BK, INITIAL DRESSING W/ONE CAST CHA	041	Y	N	Y	$1,111.58	$925.39	$0.00		N/A
L5410		IMDT POST SURG,APP RGD DRSG,W/FIT,ALGN,SUSP,BLW KN	041	Y	N	Y	$121.64	$101.27	$0.00		N/A
L5420		EARLY FITTING;AK OR KNEE DISART,INITIAL DRESSING W	041	Y	N	Y	$1,403.89	$1,168.74	$0.00		N/A
L5450		EARLY FITTING; BK, NON-WEIGHT BEARING RIGID DRESSI	041	N	N	Y	$329.52	$274.33	$0.00		1/365
L5460		EARLY FITTING; AK, NON-WEIGHT BEARING RIGID DRESSI	041	N	N	Y	$432.18	$359.79	$0.00		1/365
L5500		BK."PTB" TYPE SOCKET;INITIA, NON ALIGNABLE SYSTEM-	041	Y	N	Y	$1,027.43	$855.34	$0.00		N/A
L5505		AK-KNEE DISARTICULATION,ISCHIAL LEVEL SOCKET, NON	041	Y	N	Y	$1,445.31	$1,203.22	$0.00		N/A
L5510		PREPARATORY;BK"PTB"TYPE SOCKET,PLASTER SOCKET, MOL	041	Y	N	Y	$1,226.94	$1,021.43	$0.00		N/A
L5520		PRP,BLW KNEE PTB SOCKT,NON-ALGN SYS,PYLN,NO CVR,SA	041	Y	N	Y	$1,099.80	$915.58	$0.00		N/A
L5530		PREP;BK-"PTB" TYPE SOCKET,THERMOPLASTIC/EQUAL,MOLD	041	Y	N	Y	$1,445.73	$1,203.57	$0.00		N/A
L5535		PREPARATORY;BK "PTB" TYPE, SOCKET, PREFABRICATED,	041	Y	N	Y	$1,347.73	$1,121.99	$0.00		N/A
L5540		ADDN,ENDO SYS,BLW KNEE,ULTRA LGT MAT/TITANIUM,CARB	041	N	N	Y	$1,427.46	$1,188.36	$0.00		1/365
L5560		PREP;AK-KNEE DISART.PLASTER SOCKET,MOLDED TO PT	041	Y	N	Y	$1,626.52	$1,354.08	$0.00		N/A
L5570		PREP;AK-KNEE DISART.THERMOPLASTIC/EQUAL,DIRECT FOR	041	Y	N	Y	$1,578.59	$1,314.18	$0.00		N/A
L5580		PREPARATORY;AK-KNEE DISART., THERMOPLASTIC/EQUAL,	041	Y	N	Y	$1,959.24	$1,631.07	$0.00		N/A
L5585		PREPARATORY; AK-KNEE DISART, PREFABRICATED ADJUSTA	041	Y	N	Y	$2,294.46	$1,910.14	$0.00		N/A
L5590		PREP,AK-KNEE DISART,ISCHI SOCKT,NONALGN,PYLN,NO CO	041	Y	N	Y	$2,042.73	$1,700.57	$0.00		N/A
L5595		PREPARATORY; HEMIPELVECTOMY -HIP DISART,THERMOPLAS	041	Y	N	Y	$3,192.25	$2,657.55	$0.00		N/A
L5600		PREPARATORY;HEMIPELVECTOMY-HIP DISART,LAMINATED,MO	041	Y	N	Y	$3,633.24	$3,024.67	$0.00		N/A
L5610		LE; ADDITION, AK, HYDRACADENCE SYSTEM	041	Y	N	Y	$1,752.29	$1,458.78	$0.00		N/A
L5611		LE; ADDITION, AK-KNEE DISART 4-BAR LINK, FRICTION	041	Y	N	Y	$1,116.06	$929.12	$0.00		N/A
L5616		LE;ADDITION, AK,UNIVERSAL MULTIPLEX SYSTEM,FRICTIO	041	Y	N	Y	$1,023.61	$852.16	$0.00		N/A
L5618		LE; ADDITION, TEST SOCKET, SYMES	041	N	N	Y	$232.78	$193.79	$0.00		1/365

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L5620		LE; ADDITION, TEST SOCKET, BK	041	N	N	Y	$206.55	$171.95	$0.00		1/365
L5622		LE; ADDITION, TEST SOCKET, KNEE DISARTICULATION	041	N	N	Y	$278.25	$231.64	$0.00		1/365
L5624		LE; ADDITION, TEST SOCKET, AK	041	N	N	Y	$278.17	$231.58	$0.00		1/365
L5626		LE; ADDITION, TEST SOCKET, HIP DISARTICULATION	041	N	N	N	$440.36	$366.60	$0.00		1/365
L5628		LE; ADDITION, TEST SOCKET, HEMIPELVECTOMY	041	N	N	Y	$445.93	$371.24	$0.00		1/365
L5629		LE; ADDITION, BK, ACRYLIC SOCKET	041	N	N	Y	$220.13	$183.26	$0.00		1/365
L5630		LE; ADDITION, SYMES TYPE, EXPANDABLE WALL SOCKET	041	N	N	Y	$382.49	$318.42	$0.00		1/365
L5631		LE; ADDITION, AK OR KNEE DISARTICULATION, ACRYLIC	041	N	N	Y	$304.35	$253.37	$0.00		1/365
L5632		LE;ADDITION, SYMES TYPE, "PTB" BRIM DESIGN SOCKET	041	N	N	Y	$187.57	$156.15	$0.00		1/365
L5634		LE;ADDITION, SYMES TYPE,POSTERIOR OPENING SOCKET,	041	N	N	Y	$234.60	$195.30	$0.00		1/365
L5636		LE;ADDITION, SYMES TYPE, MEDIAL OPENING SOCKET	041	N	N	Y	$179.30	$149.27	$0.00		1/365
L5637		LE; ADDITION, BK, TOTAL CONTACT	041	N	N	Y	$266.82	$222.13	$0.00		1/365
L5638		LE; ADDITION, BK, LEATHER SOCKET	041	N	N	Y	$449.49	$374.20	$0.00		1/365
L5639		LE; ADDITION, BK, WOOD SOCKET	041	Y	N	Y	$776.64	$646.55	$0.00		N/A
L5640		LE; ADDITION, KNEE DISARTICULATION, LEATHER SOCKET	041	Y	N	Y	$510.50	$424.99	$0.00		N/A
L5642		LE; ADDITION, AK, LEATHER SOCKET	041	N	N	Y	$473.21	$393.95	$0.00		1/365
L5643		LE;ADDITION,HIP DISARTICULATION,FLEXIBLE SOCKET,EX	041	Y	N	Y	$1,395.73	$1,161.95	$0.00		N/A
L5644		LE; ADDITION, AK, WOOD SOCKET	041	N	N	Y	$409.14	$340.61	$0.00		1/365
L5645		LE; ADDITION, BK, FLEXIBLE INNER SOCKET, EXTERNAL	041	Y	N	Y	$678.73	$565.04	$0.00		N/A
L5646		LE; ADDITION, BK, FLUID, GEL CUSHION SOCKET	041	N	N	Y	$430.12	$358.07	$0.00		1/365
L5647		LE;ADDITION, BK, SUCTION SOCKET	041	Y	N	Y	$551.01	$458.72	$0.00		N/A
L5648		LE; ADDITION, AK, AIR FLUID, GEL, CUSHION SOCKET	041	Y	N	Y	$508.23	$423.10	$0.00		N/A
L5649		LE; ADDITION, ISCHIAL CONTAINMENT/NARROW M-L SOCKE	041	Y	N	N	$1,808.28	$1,505.39	$0.00		N/A
L5650		LE; ADDITION, AK OR KNEE DISARTICULATION, TOTAL CO	041	N	N	Y	$338.16	$281.52	$0.00		1/365
L5651		LE; ADDITION, AK, FLEXIBLE INNER SOCKET, EXTERNAL	041	Y	N	Y	$990.81	$824.85	$0.00		N/A
L5652		LE; ADDITION, AK OR KNEE DISARTICULATION, SUCTION	041	N	N	Y	$302.00	$251.42	$0.00		1/365
L5653		LE; ADDITION, KNEE DISARTICULATION, EXPANDABLE WAL	041	N	N	Y	$471.18	$392.26	$0.00		1/365
L5654		LE; ADDITION, SOCKET INSERT, SYMES	041	N	N	Y	$273.14	$227.39	$0.00		1/365
L5655		LE; ADDITION, SOCKET INSERT, BK	041	N	N	Y	$197.23	$164.19	$0.00		1/365
L5656		LE; ADDITION, SOCKET INSERT, KNEE DISARTICULATION	041	N	N	Y	$299.63	$249.44	$0.00		1/365
L5658		LE; ADDITION, SOCKET INSERT, AK	041	N	N	Y	$316.27	$263.29	$0.00		1/365
L5665		LE; ADDITION, BK, MULTI-DUROMETER	041	N	N	Y	$403.43	$335.86	$0.00		1/365
L5666		LE ADDITION,BK,CUFF SUSPENSION	041	N	N	Y	$53.41	$44.46	$0.00		1/365
L5668		LE; ADDITION, BK, MOLDED DISTAL CUSHION	041	N	N	Y	$79.57	$66.24	$0.00		1/365
L5670		LE; ADDITION, BK, MOLDED SUPRACONDYLAR SUSPENSION	041	N	N	Y	$187.95	$156.47	$0.00		1/365
L5671		ADDITION/LOWER EXTREMITY,BELOW/ABOVE KNEE SUSP.LOC	041	Y	N	Y	$360.87	$300.42	$0.00		N/A
L5672		LE; ADDITION, BK, REMOVABLE MEDIAL BRIM SUSPENSION	041	N	N	Y	$248.73	$207.07	$0.00		1/365
L5673		ADD TO LOW/EXT. ABOVE/BELOW KNE CUT/FAB FROM EXI/M	041	N	N	Y	$484.06	$402.98	$0.00		1/365
L5676		LE; ADDITION, BK, KNEE JOINTS, SINGLE AXIS, PAIR	041	N	N	Y	$251.01	$208.97	$0.00		1/365
L5677		LE; ADDITION, BK, KNEE JOINTS, POLYCENTRIC, PAIR	041	N	N	Y	$384.44	$320.05	$0.00		1/365
L5678		LE; ADDITION, BK, JOINT COVERS, PAIR	041	N	N	Y	$27.50	$22.89	$0.00		1/365
L5679		ADD TO LOW/EXT, ABOVE/BELOW KNE CUS-FAB FROM EXI/M	041	Y	N	Y	$421.46	$350.87	$0.00		N/A
L5680		LE; ADDITION, BK, THIGH LACER, NON-MOLDED	041	N	N	Y	$210.83	$175.52	$0.00		1/365

W - Refer to Wheelchair Fee Schedule
nr - 2.7% reduction does not apply to this code

LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L5681		ADD TO LOW/EXT, ABOVE/BELOW KNE CUS-FAB, CONG/ATYP	041	Y	N	Y	$603.50	$502.41	$0.00		N/A
L5682		LE; ADDITION, BK, THIGH LACER, GLUTEAL/ISCHIAL, MO	041	Y	N	Y	$433.21	$360.65	$0.00		N/A
L5683		ADD TO LOW/EXT OTHER THAN CONG/ATYP, AMPUTEE, W/W	041	Y	N	Y	$613.17	$510.46	$0.00		N/A
L5684		LE; ADDITION, BK, FORK STRAP	041	N	N	Y	$33.33	$27.75	$0.00		1/365
L5685		ADDITION TO LOWER EXT.PROS.BELOW KNEE SUP/SEAL SLE	041	N	Y	N	$94.50	$78.67	$0.00		1/365
L5686		LE; ADDITION, BK,BACK CHECK (EXTENSION CONTROL)	041	N	N	Y	$40.09	$33.37	$0.00		1/365
L5688		LE; ADDITION, BK, WAIST BELT, WEBBING	041	N	N	Y	$42.58	$35.45	$0.00		1/365
L5690		LE; ADDITION, BK, WAIST BELT, PADDED AND LINED	041	N	N	Y	$86.92	$72.36	$0.00		1/365
L5692		LE; ADDITION, AK, PELVIC CONTROL BELT, LIGHT	041	N	N	Y	$92.05	$76.63	$0.00		1/365
L5694		LE; ADDITION, AK, PELVIC CONTROL BELT, PADDED AND	041	N	N	Y	$125.66	$104.61	$0.00		1/365
L5695		LE; ADDITION,AK,PELVIC CONTROL,SLEEVE SUSPENSION,N	041	N	N	Y	$112.96	$94.04	$0.00		1/365
L5696		LE; ADDITION, AK; KNEE DISARTICULATION, PELVIC JOI	041	N	N	Y	$136.46	$113.60	$0.00		1/365
L5697		LE; ADDITION, AK-KNEE DISARTICULATION, PELVIC BAND	041	N	N	Y	$64.80	$53.95	$0.00		1/365
L5698		LE; ADDITION, AK-KNEE DISARTICULATION, SILESIAN BA	041	N	N	Y	$83.12	$69.20	$0.00		1/365
L5699		LE; ALL PROSTHESES, SHOULDER HARNESS	041	N	N	Y	$142.08	$118.28	$0.00		1/365
L5700		REPLACEMENT; SOCKET, BK, MOLDED TO PATIENT	041	Y	N	Y	$2,137.10	$1,779.14	$0.00		N/A
L5701		REPLACEMENT; SOCKET, AK-KNEE DISART W/ATTACH PLATE	041	Y	N	Y	$2,651.26	$2,207.17	$0.00		N/A
L5702		REPLACEMENT, SOCKET,HIP DISART W/HIP JOINT,MOLDED	041	Y	N	Y	$3,341.51	$2,781.81	$0.00		N/A
L5704		PROTECTIVE COVER, CUSTOM SHAPED, BELOW KNEE	041	Y	N	Y	$456.39	$379.94	$0.00		N/A
L5705		PROTECTIVE COVER, CUSTOM SHAPED, ABOVE KNEE	041	Y	N	Y	$836.71	$696.56	$0.00		N/A
L5706		PROTECTIVE COVER, CUSTOM SHAPED, KNEE DISARTICULAT	041	Y	N	Y	$816.11	$679.41	$0.00		N/A
L5707		PROTECTIVE COVER, CUSTOM SHAPED,HIP DISARTICULATIO	041	Y	N	Y	$1,096.45	$912.79	$0.00		N/A
L5710		EXOSKELETAL KNEE-SHIN; ADDITION, SINGLE AXIS, MANU	041	N	N	Y	$249.14	$207.41	$0.00		1/365
L5711		EXOSKELETAL KNEE-SHIN;ADD SINGLE AXIS,MANUAL LOCK,	041	N	N	Y	$418.13	$348.09	$0.00		1/365
L5712		EXOSKELETAL KNEE-SHIN;ADD,SINGLE AXIS,FRICTION SWI	041	N	N	Y	$298.48	$248.48	$0.00		1/365
L5714		EXOSKELETAL KNEE-SHIN;ADD,SINGLE AXIS,VARIABLE FRI	041	N	N	Y	$303.70	$252.83	$0.00		1/365
L5716		EXOSKELETAL KNEE-SHIN;ADD,POLYCENTRIC,MECHANICAL S	041	Y	N	Y	$600.54	$499.95	$0.00		N/A
L5718		EXOSKELETAL KNEE-SHIN;ADD,POLYCENTRIC,FRICTION SWI	041	Y	N	Y	$642.17	$534.61	$0.00		N/A
L5722		EXOSKELETAL KNEE-SHIN; ADD, PNEUMATIC SWING, FRICT	041	Y	N	Y	$780.91	$650.11	$0.00		N/A
L5724		EXOSKELETAL KNEE-SHIN; ADD, SINGLE AXIS, FLUID SWI	041	Y	N	Y	$1,203.65	$1,002.04	$0.00		N/A
L5726		EXOSKELETAL KNEE-SHIN;ADD,SINGLE AXIS,EXTERNAL JOI	041	Y	N	Y	$1,433.00	$1,192.97	$0.00		N/A
L5780		EXOSKELETAL KNEE-SHIN; ADD, SINGLE AXIS, PNEUMATIC	041	Y	N	Y	$924.59	$769.72	$0.00		N/A
L5785		EXOSKELETAL BK;ADD, ULTRA-LIGHT MATERIAL	041	N	N	Y	$359.89	$299.61	$0.00		1/365
L5790		EXOSKELETAL AK;ADD,ULTA-LIGHT MATERIAL	041	Y	N	Y	$519.43	$432.43	$0.00		N/A
L5795		EXOSKELETAL HIP DISARTICULATION;ADD,ULTRA-LIGHT MA	041	Y	N	Y	$743.74	$619.16	$0.00		N/A
L5810		ENDOSKELETAL KNEE-SHIN; ADD, SINGLE AXIS, MANUAL L	041	N	N	Y	$396.27	$329.89	$0.00		1/365
L5811		ENDOSKELETAL KNEE-SHIN;ADD,SINGLE AXIS,MANUAL LOCK	041	Y	N	Y	$546.85	$455.25	$0.00		N/A
L5812		ENDOSKELETAL KNEE-SHIN; ADD, SINGLE AXIS, FRICTION	041	N	N	Y	$411.50	$342.57	$0.00		1/365
L5816		ENDOSKELETAL KNEE-SHIN; ADD, POLYCENTRIC, MECHANIC	041	Y	N	Y	$589.10	$490.43	$0.00		N/A
L5818		ENDOSKELETAL KNEE-SHIN;ADD,POLYCENTRIC,FRICTION SW	041	Y	N	Y	$665.22	$553.80	$0.00		N/A
L5822		ENDOSKELETAL KNEE-SHIN;ADD,SINGLE AXIS,PNEUMATIC S	041	Y	N	Y	$1,220.32	$1,015.92	$0.00		N/A
L5824		ENDOSKELETAL KNEE-SHIN;ADD, SINGLE AXIS,FLUID SWIN	041	Y	N	Y	$1,153.56	$960.34	$0.00		N/A
L5828		ENDOSKELETAL KNEE SHIN; ADD, SINGLE AXIS, FLUID SW	041	Y	N	Y	$2,053.05	$1,709.16	$0.00		N/A

W - Refer to Wheelchair Fee Schedule
nr - 2.7% reduction does not apply to this code

LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L5830		ENDOSKELETAL KNEE-SHIN; ADD, SINGLE AXIS, PNEUMATI	041	Y	N	Y	$1,384.30	$1,152.43	$0.00		N/A
L5840		ENDOSKELETAL KNEE-SHIN;ADD,MULTIAXIAL,PNEUMATIC CO	041	Y	N	Y	$2,717.03	$2,261.93	$0.00		N/A
L5850		ENDOSKELETAL AK-KNEE DISART; ADD, KNEE EXTENSION A	041	N	N	Y	$88.61	$73.77	$0.00		1/365
L5855		ENDOSKELETAL HIP DISART; ADD, MECHANICAL HIP EXTEN	041	N	N	Y	$213.92	$178.09	$0.00		1/365
L5910		ENDOSKELETAL BK; ADD, ALIGNABLE SYSTEM	041	N	N	Y	$250.88	$208.86	$0.00		1/365
L5920		ENDOSKELETAL AK-HIP DISART; ADD, ALIGNABLE SYSTEM	041	N	N	Y	$367.53	$305.97	$0.00		1/365
L5925		ENDOSKELETAL AK, KNEE/HIP DISART; ADD, MANUAL LOCK	041	N	N	Y	$232.75	$193.76	$0.00		1/365
L5940		ADDN,ENDO SYS,BLW KNEE,ULTRA LGT MAT/TITANIUM,CARB	041	N	N	Y	$347.46	$289.26	$0.00		1/365
L5950		ADDN,ENDO SYS,ABV KNEE,ULTRA LGT MAT/TITANIUM,CARB	041	Y	N	Y	$538.93	$448.66	$0.00		N/A
L5960		ENDOSKELETAL HIP DISART;ADD,ULTRA-LIGHT MATERIAL	041	Y	N	Y	$805.82	$670.85	$0.00		N/A
L5961		ADDITION ENDOSKEL SYS POLY HIP JT PNEU OR HYD CONT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L5962		ADDITION ENDOSKELETAL, BELOW K NEE, FLEX PROTECT.	041	N	N	Y	$426.45	$355.02	$0.00		1/365
L5966		ADDITION ENDOSKEL HIP DISARTIC ULATION, FLEX PROTE	041	Y	N	Y	$1,053.74	$877.24	$0.00		N/A
L5969		ADDL ENDOSKETAL AK-FT W-MOTOR	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L5970		LE PROSTHESIS; FOOT, EXTERNAL KEEL, SACH FOOT	041	N	N	Y	$151.35	$126.00	$0.00		1/365
L5972		LE PROTHESIS;FLEXIBLE KEEL FOOT	041	N	N	Y	$275.68	$229.50	$0.00		1/365
L5974		LE PROSTHESIS; FOOT, SINGLE AXIS ANKLE/FOOT	041	N	N	Y	$161.42	$134.38	$0.00		1/365
L5976		LE PROSTHESIS; ENERGY STORING FOOT	041	N	N	Y	$409.44	$340.86	$0.00		1/365
L5978		LE PROSTHESIS; FOOT, MULTIAXIAL ANKLE/FOOT	041	N	N	Y	$216.97	$180.63	$0.00		1/365
L5981		PROSTHESIS; FLEX WALK SYSTEM OR EQUAL	041	Y	N	Y	$2,377.37	$1,979.16	$0.00		N/A
L5982		LE PROTHESIS; EXOSKELETAL, AXIAL ROTATION UNIT	041	N	N	Y	$446.60	$371.79	$0.00		1/365
L5984		LE PROSETHESIS;ENDOSKELETAL, AXIAL ROTATION UNIT	041	N	N	Y	$447.99	$372.95	$0.00		1/365
L5986		LE PROSTHESIS; MULTI-AXIAL ROTATION UNIT	041	Y	N	Y	$540.38	$449.87	$0.00		N/A
L5999		LE PROSTHESIS; NOT OTHERWISE SPECIFIED	041	Y	N	N	$0.00	$0.00	$0.00		N/A
L6000		PARTIAL HAND, THUMB REMAINING	041	Y	N	Y	$1,227.18	$1,021.63	$0.00		N/A
L6010		PARTIAL HAND, LITTLE AND/OR RING FINGER REMAINING	041	Y	N	Y	$1,365.65	$1,136.90	$0.00		N/A
L6020		PARTIAL HAND; NO FINGER REMAINING	041	Y	N	Y	$1,273.25	$1,059.98	$0.00		N/A
L6050		WRIST DISART;MOLDED SOCKET,FLEXIBLE ELBOW HINGES,T	041	Y	N	Y	$1,731.87	$1,441.78	$0.00		N/A
L6055		WRIST DISART;MOLDED SOCKET W/EXPANDABLE INTERFACE,	041	Y	N	Y	$2,209.09	$1,839.07	$0.00		N/A
L6100		BELOW ELBOW;MOLDED SOCKET,FLEXIBLE ELBOW HINGES,TR	041	Y	N	Y	$1,752.60	$1,459.04	$0.00		N/A
L6110		BELOW ELBOW; MOLDED SOCKET	041	Y	N	Y	$1,854.12	$1,543.55	$0.00		N/A
L6120		BELOW ELBOW;MOLDED DOUBLE WALL SPLIT SOCKET,STEP U	041	Y	N	Y	$2,097.03	$1,745.78	$0.00		N/A
L6130		BELOW ELBOW;MOLDED DOUBLE WALL SPLIT SOCKET,STUMP	041	Y	N	Y	$2,212.43	$1,841.85	$0.00		N/A
L6200		ELBOW DISART; MOLDED SOCKET, OUTSIDE LOCKING HINGE	041	Y	N	Y	$2,279.05	$1,897.31	$0.00		N/A
L6205		ELBOW DISART; MOLDED SOCKET W/EXPANDABLE INTERFACE	041	Y	N	Y	$3,143.92	$2,617.31	$0.00		N/A
L6250		ABOVE ELBOW;MOLDED DOUBLE WALL SOCKET;INTERNAL LOC	041	Y	N	Y	$2,242.19	$1,866.62	$0.00		N/A
L6300		SHOULDER DISART; MOLDED SOCKET, SHOULDER BULKHEAD,	041	Y	N	Y	$3,092.60	$2,574.59	$0.00		N/A
L6310		SHOULDER DISART;PASSIVE RESTORATION (COMPLETE PROS	041	Y	N	Y	$2,802.76	$2,333.30	$0.00		N/A
L6320		SHOULDER DISART; PASSIVE RESTORATION(SHOULDER CAP	041	Y	N	Y	$1,460.73	$1,216.06	$0.00		N/A
L6350		INTERSCAPULAR THORACIC; MOLDED SOCKET, SHOULDER BU	041	Y	N	Y	$3,388.52	$2,820.94	$0.00		N/A
L6360		INTERSCAPULAR THORACIC;PASSIVE RESTORATION (COMP P	041	Y	N	Y	$2,941.84	$2,449.08	$0.00		N/A
L6370		INTERSCAPULAR THORACIC;PASSIVE RESTORATION(SHOULDE	041	Y	N	Y	$1,706.07	$1,420.30	$0.00		N/A
L6380		IMD PST SURG/FIT,APP RGD DRSNG,ALIGN/SUS,CAST,WRST	041	Y	N	Y	$986.72	$821.44	$0.00		N/A

W - Refer to Wheelchair Fee Schedule
nr - 2.7% reduction does not apply to this code

LTC Y: covered by LTC
**not covered by Medicare; bill HFS within 180 days
***Effective 5/ 1/15 - 6/30/15; PA099-002

HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L6382		IMD PST SURG/FIT,APP RGD DRSNG,ALIGN/SUS,CAST,ELB	041	Y	N	Y	$1,174.66	$977.90	$0.00		N/A
L6384		IMD PST SURG/FIT,APP RGD DRSNG,ALIGN/SUS,CAST,SHLD	041	Y	N	Y	$1,486.00	$1,237.10	$0.00		N/A
L6388		IMMEDIATE POST SURGICAL;APPL OF RIGID DRESSING ONL	041	N	N	Y	$358.72	$298.63	$0.00		1/365
L6400		BELOW ELBOW;MOLDED SOCKET,ENDOSKELETAL SYSTEM W/TI	041	Y	N	Y	$1,895.87	$1,578.31	$0.00		N/A
L6450		ELBOW DISART; MOLDED SOCKET, ENDOSKELETAL SYSTEM	041	Y	N	Y	$2,477.83	$2,062.79	$0.00		N/A
L6500		ABOVE ELBOW; MOLDED SOCKET, ENDOSKELETAL SYSTEM	041	Y	N	Y	$2,433.16	$2,025.61	$0.00		N/A
L6550		SHOULDER DISART; MOLDED SOCKET, ENDOSKELETAL SYSTE	041	Y	N	Y	$3,151.44	$2,623.57	$0.00		N/A
L6570		INTERSCAPULAR THORACIC;MOLDED SOCKET, ENDOSKELETAL	041	Y	N	Y	$3,518.17	$2,928.88	$0.00		N/A
L6582		PREPARATORY;WRIST DISART/BELOW ELBOW,FLEXIBLE ELBO	041	Y	N	Y	$1,181.40	$983.52	$0.00		N/A
L6586		PREP,EB DIS/ABV EB,SGL WALL SOC,FRIC WRST,LCK EB,F	041	Y	N	Y	$1,558.76	$1,297.67	$0.00		N/A
L6590		PREPARATORY; SHOULDER DISART/INTERSCAPULAR THORACI	041	Y	N	Y	$2,163.61	$1,801.21	$0.00		N/A
L6600		UE;ADDITION,POLYCENTRIC HINGE,PAIR	041	N	N	Y	$158.04	$131.57	$0.00		1/365
L6605		UE;ADDITION,SINGLE PIVOT HINGE,PAIR	041	N	N	Y	$162.66	$135.41	$0.00		1/365
L6610		UE;ADDITION,FLEXIBLE METAL HINGE,PAIR	041	N	N	Y	$153.76	$128.01	$0.00		1/365
L6615		UE;ADDITION,DISCONNECT LOCKING WRIST UNIT	041	N	N	Y	$149.25	$124.25	$0.00		1/365
L6616		UE;ADDITION,ADD DISCONNECT INSERTFOR LOCKING WRIST	041	N	N	Y	$44.92	$37.40	$0.00		1/365
L6620		UPPER EXTREMITY ADDN,FLEXION/EXT WRIST UNIT W/WO F	041	N	N	Y	$260.94	$217.23	$0.00		1/365
L6623		UPPER EXTREMITY ADDN,SPRING ASSISTD ROTATN WRIST W	041	Y	N	Y	$497.09	$413.83	$0.00		N/A
L6625		UE;ADDITION,ROTATION WRIST UNIT W/ CABLE LOCK3	041	N	N	Y	$368.42	$306.71	$0.00		1/365
L6628		UE; ADDITN, QUICK DISCONNECT HOOK ADAPTER	041	N	N	Y	$396.55	$330.13	$0.00		1/365
L6629		UE; ADDITN, QUICK DISCONNECT LAMINATION COLLAR	041	N	N	Y	$135.12	$112.49	$0.00		1/365
L6630		UE; ADDITN, STAINLESS STEEL, ANY WRIST	041	N	N	Y	$199.06	$165.72	$0.00		1/365
L6632		UE; ADDITN, LATEX SUSPENSION SLEEVE, EACH	041	N	N	Y	$45.08	$37.53	$0.00		1/180
L6635		UE; ADDITN, LIFT ASSIST FOR ELBOW	041	N	N	Y	$143.88	$119.78	$0.00		1/365
L6637		UE; ADDITN, NUDGE CONTROL ELBOW LOCK	041	N	N	Y	$281.67	$234.49	$0.00		1/365
L6640		UE; ADDITN, SHOULDER ABDUCTION JOINT, PAIR	041	N	N	Y	$234.58	$195.29	$0.00		1/365
L6641		UE; ADDITION, EXCURSION AMPLIFIER, PULLEY TYPE	041	N	N	Y	$136.59	$113.71	$0.00		1/365
L6642		UE; ADDITN, EXCURSION AMPLIFIER, LEVER TYPE	041	N	N	Y	$200.83	$167.19	$0.00		1/365
L6645		UE; ADDITN, SHOULDER FLEXION-ABDUCTION JOINT, EACH	041	N	N	Y	$253.68	$211.19	$0.00		1/365
L6650		UE; ADDITN, SHOULDER UNIVERSAL JOINT, EACH	041	N	N	Y	$275.14	$229.05	$0.00		1/365
L6655		UE; ADDITN, STANDARD CONTROL CABLE, EXTRA	041	N	N	Y	$53.35	$44.41	$0.00		1/365
L6665		UE; ADDITN, TEFLON OR EQUAL, CABLE LINING	041	N	N	Y	$31.89	$26.55	$0.00		1/365
L6670		UE; ADDITN, HOOK TO HAND, CABLE ADAPTOR	041	N	N	Y	$33.22	$27.66	$0.00		1/365
L6672		UE; ADDITN, HARNESS, CHEST OR SHOULDER, SADDLE TYP	041	N	N	Y	$152.45	$126.91	$0.00		1/365
L6675		UE; ADDITN, HARNESS, FIGURE "8", SINGLE CABLE DESI	041	N	N	Y	$83.18	$69.25	$0.00		1/365
L6676		UE; ADDITN, HARNESS, FIGURE "8" DUAL CABLE DESIGN	041	N	N	Y	$87.02	$72.44	$0.00		1/365
L6680		UE; ADDITN, TEST SOCKET, WRIST DISART OR BELOW ELB	041	N	N	Y	$214.28	$178.39	$0.00		1/365
L6682		UE; ADDITN, TEST SOCKET, ELBOW DISART OR ABOVE ELB	041	N	N	Y	$236.91	$197.23	$0.00		1/365
L6684		UE; ADDITN, TEST SOCKET, SHOULDER DISART/INTERSCAP	041	N	N	Y	$321.94	$268.02	$0.00		1/365
L6686		UE; ADDITN, SUCTION SOCKET	041	N	N	Y	$477.71	$397.69	$0.00		1/365
L6687		UE; ADDITN, FRAME TYPE SOCKET, BELOW ELBOW/WRIST D	041	N	N	Y	$399.55	$332.63	$0.00		1/365
L6688		UE; ADDITN, FRAME TYPE SOCKET, SHOULDER DESART	041	N	N	Y	$442.20	$368.13	$0.00		1/365
L6690		UE; ADDITN, FRAME TYPE SOCKET, INTERSCAPULAR-THORA	041	Y	N	Y	$620.50	$516.57	$0.00		N/A

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L6691		UE; ADDITN, REMOVABLE INSERT, EACH	041	N	N	Y	$244.91	$203.89	$0.00		1/365
L6692		UE; ADDITN, SILICONE GEL INSERT OR EQUAL, EACH	041	N	N	Y	$445.59	$370.95	$0.00		1/365
L6694		ADD TO UPPER EXT PROS BELOW/ABOVE ELBOW CUS FAB W/	041	Y	Y	Y	$652.15	$542.91	$0.00		N/A
L6695		ADD TO UPPER EXT PROS BELOW/ABOVE ELBOW CUS FAB W/	041	Y	Y	Y	$543.47	$452.44	$0.00		N/A
L6696		ADD TO UPPER EXT PROS W/WO LOCKING MECH INITIAL ON	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L6697		ADD TO UPPER EXT OTHER THAN CONG ORATYP,CUSTOM,INT	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L6698		ADD TO UPPER EXT PROS BELOW / ABOVE ELBOW LOCK MEC	041	N	Y	Y	$410.35	$341.62	$0.00		1/365
L6706		TERMINAL DEVICE,HOOK,MECHAICAL VOLUNTARY OPENING,A	041	N	Y	Y	$347.66	$289.43	$0.00		1/365
L6707		TERMINAL DEVICE,HOOK,MECANICAL VOLUNTARY CLOSING,A	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6708		TERMINAL DEVICE,HAND,MECHANICAL VOLUNTARY OPENING,	041	Y	Y	Y	$812.96	$676.79	$0.00		N/A
L6709		TERMINAL DEVICE,HAND,MECHANIC VOLUNTARY CLOSING, A	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6711		TERMINAL DEVICE HOOK,MECH,VOL OPEN,ANY MATERAL, AN	041	Y	Y	Y	$557.85	$464.41	$0.00		N/A
L6712		TERMINAL DEVICE,HOOK,MECH. VOLCLOS, ANY MAT LINER/	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6713		TERMINAL DEVICE,HAND, MECH. VOL. OPENING ANY MATER	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6714		TERMINAL DEVICE,HAND,MECH VOL CLOSING ANY MATERIAL	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
L6721		TERMINAL DEVICE HOOK OR HAND HD,MECH,VOL OPEN ANY	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6722		TERMINAL DEVICE,HOOK OR HAND HD, MECH VOL CLOSING	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L6805		TERMINAL DEVICE; MODIFIER WRIST FLEXION UNIT	041	N	N	Y	$267.21	$222.45	$0.00		1/365
L6810		TERMINAL DEVICE; PRECISION PINCH DEVICE	041	N	N	Y	$142.05	$118.26	$0.00		1/365
L6890		TERMINAL DEVICE; GLOVE FOR ABOVE HANDS, ANY TYPE,	041	N	N	Y	$139.15	$115.84	$0.00		1/365
L6895		CUSTOM GLOVE FOR TERMINAL DEVICE, ANY MATERIAL	041	Y	N	Y	$465.27	$387.34	$0.00		N/A
L6900		HAND RESTORATION PARTIAL HAND;W/GLOVE,THUMB/FINGER	041	Y	N	Y	$1,351.17	$1,124.85	$0.00		N/A
L6905		HAND RESTORATION PARTIAL HAND; W/GLOVE, MULTIPLE F	041	Y	N	Y	$1,337.27	$1,113.28	$0.00		N/A
L6910		HAND RESTORATION PARTIAL HAND; W/GLOVE, NO FINGERS	041	Y	N	Y	$1,314.62	$1,094.42	$0.00		N/A
L6915		HAND RESTORATION; REPLACEMENT GLOVE FOR ABOVE HAND	041	Y	N	Y	$564.85	$470.24	$0.00		N/A
L7259		ELECTRONIC WRIST ROTATOR ANY TYPE	041	Y	Y	Y	$782.00	$651.02	$0.00		N/A
L7499		UE PROSTHESIS; NOT OTHERWISE SPECIFIED	041	Y	N	N	$0.00	$0.00	$0.00		N/A
L7510		REPAIR OF PROSTHEHC DEVICE REPAIR OR REPLACE MINOR	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L8000		BREAST PROSTHESIS;MASTECTOMY BRA	041	N	N	Y	$29.50	$24.56	$0.00		3/180
L8001		BREAST PROSTHE,MASTECTOMY BRA,W/PROSTHE FORM,UNILA	041	N	N	Y	$91.54	$76.21	$0.00		2/365
L8002		BREAST PROSTHE,MASTECTOMY BRA,W/PROSTHESIS FORM,BI	041	N	N	Y	$120.39	$100.22	$0.00		2/365
L8010		BREAST PROSTHESIS;MASTECTOMY SLEEVE	041	N	N	N	$42.01	$34.97	$0.00		1/180
L8015		BREAST PROSTHESIS;EXTERNAL GARMENT W/MASTECTOMY FO	041	N	N	Y	$25.00	$20.81	$0.00		2/180
L8020		BREAST PROSTHESIS;MASTECTOMY FORM	041	N	N	Y	$157.53	$131.14	$0.00		2/365
L8030		BREAST PROSTHESIS;SILICONE OR EQUAL WITHOUT INT AD	041	N	N	Y	$243.52	$202.73	$0.00		1/730
L8031		BREAST PROSTHESIS, SILI OR EQUAL WITH INTEGRAL ADH	041	N	N	Y	$290.02	$241.44	$0.00		1/730
L8039		BREAST PROSTHESIS;NOT OTHERWISE SPECIFIED	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L8040		NASAL PROSTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$2,057.12	$1,712.55	$0.00		N/A
L8041		MIDFACIAL PROSTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$2,479.28	$2,064.00	$0.00		N/A
L8042		ORBITAL PROTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$2,785.70	$2,319.10	$0.00		N/A
L8043		UPPER FACIAL PROTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$3,120.00	$2,597.40	$0.00		N/A
L8044		HEMI-FACIAL PROTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$3,454.30	$2,875.70	$0.00		N/A
L8045		AURICULAR PROTHESIS, BY NONPHYSICIAN	041	Y	N	Y	$2,704.94	$2,251.86	$0.00		N/A

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
L8046		PARTIAL FACIAL PROTHESIS BY NONPHYSICIAN	041	Y	N	Y	$2,228.58	$1,855.29	$0.00		N/A
L8047		NASAL SEPTAL PROTHESIS BY NONPHYSICIAN	041	Y	N	Y	$1,142.15	$950.84	$0.00		N/A
L8048		UNSPECIFIED MAXILLOFACIAL PROTHESIS,VIA REPORT BY	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L8049		REPAIR/MOD OF MAXILLOFACIAL PROSTHESIS, LABOR IS M	041	Y	N	Y	$0.00	$0.00	$0.00		N/A
L8300		TRUSS; SINGLE W/ STANDARD PAD	041	N	Y	Y	$58.42	$48.63	$0.00		1/180
L8310		TRUSS; DOUBLE W/STANDARD PAD	041	N	Y	Y	$103.52	$86.18	$0.00		1/180
L8320		TRUSS; ADDITION TO STANDARD PAD, WATER PAD	041	N	Y	Y	$42.96	$35.76	$0.00		1/180
L8330		TRUSS; ADDITION TO STANDARD PAD, SCROTAL PAD	041	N	Y	Y	$34.19	$28.46	$0.00		1/180
L8400		PROSTHETIC SHEATH; BK, EACH	041	N	N	Y	$10.90	$9.07	$0.00		6/180
L8410		PROSTHETIC SHEATH; AK, EACH	041	N	N	Y	$14.34	$11.94	$0.00		6/180
L8415		PROSTHETIC SHEATH; UPPER LIMB, EACH	041	N	N	Y	$14.85	$12.36	$0.00		6/180
L8420		PROSTHETIC SOCK; MULTIPLE PLY, BK, EACH	041	N	N	Y	$14.54	$12.10	$0.00		6/180
L8430		PROSTHETIC SOCK; MULTIPLE PLY, AK, EACH	041	N	N	Y	$16.44	$13.69	$0.00		6/180
L8435		PROSTHETIC SOCK; MULTIPLE PLY, UPPER LIMB, EACH	041	N	N	Y	$15.63	$13.01	$0.00		6/180
L8440		PROSTHETIC SHRINKER; BK, EACH	041	N	N	Y	$32.47	$27.03	$0.00		2/180
L8460		PROSTHETIC SHRINKER; AK, EACH	041	N	N	Y	$46.17	$38.44	$0.00		2/180
L8465		PROSTHETIC SHRINKER; UPPER LIMB	041	N	N	Y	$42.68	$35.53	$0.00		2/180
L8470		PROSTHETIC SOCK; SINGLE PLY, FITTING, BK, EACH	041	N	N	Y	$4.62	$3.85	$0.00		6/180
L8480		PROSTHETIC SOCK; SINGLE PLY, FITTING, AK, EACH	041	N	N	Y	$6.37	$5.30	$0.00		6/180
L8485		PROSTHETIC SOCK; SINGLE PLY, FITTING, UPPER LIMB,	041	N	N	Y	$8.57	$7.13	$0.00		6/180
L8499		PROSTHETIC SERVICES; UNLISTED PROCEDURE FOR MISC.	041	Y	N	N	$0.00	$0.00	$0.00		N/A
L8500		ARTIFICIAL LARYNX; ANY TYPE	041	N	N	Y	$458.48	$381.68	$0.00		1/365
L8501		TRACHEOSTOMY SPEAKING VALVE	041	N	N	Y	$77.85	$64.81	$0.00		1/120
L8505		ARTIFICIAL LARYNX REPLACE BATTERY/ACCESSORY,ANY TY	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
L8507		TRACHEO-ESOPHAGEAL VOICE PROSTHESIS,PATIENT INSERT	041	N	Y	Y	$30.90	$25.72	$0.00		1/30
L8509		TRACHEO-ESOPHAGEAL VOICE PROSTHE,INSERT BY PROVIDE	041	N	Y	Y	$80.56	$67.07	$0.00		1/90
L8615		HEADSET/HEADPIECE FOR USE WITH COCHLEAR IMPL DEVIC	041	N	Y	N	$332.74	$277.01	$0.00		1/120
L8616		MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE RE	041	N	Y	N	$77.50	$64.52	$0.00		1/120
L8617		TRANSMITTING COIL FOR USE WITH COCHLEAR IMPLANT DE	041	N	Y	N	$67.69	$56.35	$0.00		1/120
L8618		TRANSMITTING CABLE FOR USE WITH COCHLEAR IMPLANT D	041	N	Y	N	$19.34	$16.10	$0.00		2/30
L8619		COCHLEAR IMPLANT EXTERNAL SPEECH PROCESSOR & CONTR	041	Y	N	Y	$6,974.55	$5,806.31	$0.00		N/A
L8621		ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEV	048	N	Y	N	$0.46	$0.38	$0.00		60/30
L8622		ALKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEV	048	N	Y	N	$0.24	$0.20	$0.00		60/30
L8623		LITHIUM ION BATT FOR USE W/CID (OTHER THAN EAR LEV	048	N	Y	Y	$47.73	$39.74	$0.00		4/180
L8624		LITHIUM ION BATT FOR USE W/CID (EAR LEVEL REPACMEN	048	N	Y	Y	$118.98	$99.05	$0.00		4/180
L8627		COCHLEAR IMPLANT, EX. SPEECH PRO COMPONENT, REPLAC	041	Y	Y	Y	$5,919.85	$4,928.28	$0.00		N/A
L8628		COCHLEAR IMPLANT, EXT. CONTROLLER, REPLACEMENT	041	Y	Y	Y	$1,054.69	$878.03	$0.00		N/A
L8629		TRANSMITTING COIL AND CABLE INTEGRATED FOR USE W/	041	N	Y	Y	$148.58	$123.69	$0.00		1/120
L8684		RADIOFREQ TRANS EXTRNL USE W/IMP SAC RT NEUROSM RE	041	Y	Y	Y	$623.84	$519.35	$0.00		N/A
L8689		EXTRNL RECHARGNG SYS FOR INTRNALIMPLNTBLE NEUROSTI	041	Y	Y	Y	$1,431.30	$1,191.56	$0.00		N/A
L8691		AUDITORY OSSEOINTEGRATED DEVICE EXTERNAL SOUNDS PR	041	Y	Y	Y	$2,212.62	$1,842.01	$0.00		N/A
L8692		AUDITORY OSSEOINTEGRATED DEVICE,EXT,SOUND PROCES B	041	Y	Y	Y	$2,212.62	$1,842.01	$0.00		N/A
L8695		EXTERNAL RECHARGING SYS. FOR EXTERNAL IMPLA NEUROS	041	N	Y	Y	$13.84	$11.52	$0.00		1/365

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L8696		ANTENNA,EXTERNAL FOR USE WITH,IMPLANTABLE STIMULAT	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
L9900		ORTHOTIC AND PROSTHETIC SUPPLY, ACCESSORY OR COMPO	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
Q0478		POWER ADAPTER FOR USE WITH ELEC/ELEC/PNEUMATIC VAD	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
Q0479		POWER MODULE FOR USE WITH ELEC/ELEC/PNEU VAD REPLA	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
Q0480		DRIVER FOR USE/W PNEUMATIC ASSIST DEVICE REPLACEME	041	Y	Y	Y	$74,732.86	$62,215.11	$0.00		N/A
Q0481		MICROPROCESSOR CONTROL UNIT USE WITH ELEC. VAD DEV	041	Y	Y	Y	$12,057.29	$10,037.69	$0.00		N/A
Q0482		MICROPROCESSOR CONTROL UNIT FOR USE W ELEC/PNEU VA	041	Y	Y	Y	$3,776.55	$3,143.98	$0.00		N/A
Q0483		MONITOR/DISPLAY MODULE FOR USE WITH ELEC VAD REPLA	041	Y	Y	Y	$15,557.75	$12,951.83	$0.00		N/A
Q0484		MONITOR/DISPLAY MODULE FOR USE WITH ELEC/PNEU VAD	041	Y	Y	Y	$3,021.26	$2,515.20	$0.00		N/A
Q0485		MONITOR CONTROL CABLE FOR USE WITH ELEC VAD REPLAC	041	N	Y	Y	$291.72	$242.86	$0.00		1/365
Q0486		MONITOR CONTROL CABLE FOR USE W ELEC/PNEU VAD REPL	041	N	Y	Y	$242.77	$202.11	$0.00		1/365
Q0487		LEADS (PNEU/ELEC) FOR USE WITH ANY TYPE ELEC/PNEU	041	N	Y	Y	$283.24	$235.80	$0.00		1/365
Q0488		POWER PACK BASE FOR USE WITH ELECTRIC VAD REPLACEM	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
Q0489		POWER PACK BASE FOR USE WITH ELEC/PNEU VAD REPLACE	041	Y	Y	Y	$13,487.73	$11,228.54	$0.00		N/A
Q0490		EMERGENCY POWER SOURCE FOR USE WITH ELEC VAD REPLA	041	Y	Y	Y	$583.42	$485.70	$0.00		N/A
Q0491		EMERGENCY POWER SOURCE FOR USE WITH ELEC/PNEU VAD	041	Y	Y	Y	$917.18	$763.55	$0.00		N/A
Q0492		EMERGENCY POW/SUPPLY CABLE FOR USE WITH ELEC VAD R	041	N	Y	Y	$73.90	$61.52	$0.00		1/365
Q0493		EMERGENCY POWER SUPPLY CABLE FOR USE W ELEC/PNEU V	041	N	Y	Y	$210.64	$175.36	$0.00		1/365
Q0494		EMERGENCY HAND PUMP FOR USE WITH ELECTRIC/PNEU VAD	041	N	Y	Y	$178.02	$148.20	$0.00		1/365
Q0495		BATTERY/POWER PACK CHARGER FOR USE W ELEC OR ELEC/	041	Y	Y	Y	$3,465.99	$2,885.44	$0.00		N/A
Q0496		BATTERY FOR USE WITH ELEC OR ELEC/PNEU VAD, NOT LI	041	Y	Y	Y	$1,244.02	$1,035.65	$0.00		N/A
Q0497		BATTERY CLIPS FOR USE W ELEC OR ELEC/PNEU VAD REPL	041	N	Y	Y	$388.45	$323.38	$0.00		1/365
Q0498		HOLSTER FOR USE WITH ELEC OR ELEC/PNEU VAD REPLAC	041	N	Y	Y	$426.21	$354.82	$0.00		1/365
Q0499		BELT/VEST/BAG FOR USE W/ ELEC OR ELEC/PNEU VAD REP	041	N	Y	Y	$138.48	$115.28	$0.00		1/365
Q0500		FILTERS FOR USE WITH ELEC OR ELEC/PNEU VAD REPLAC	041	N	Y	Y	$25.34	$21.10	$0.00		1/365
Q0501		SHOWER COVER FOR USE WITH ELEC OR ELEC/PNEU VAD RE	041	N	Y	Y	$423.74	$352.76	$0.00		1/365
Q0502		MOBILITY CART FOR PNEUMATIC VAD REPLACEMENT ONLY	041	Y	Y	Y	$539.52	$449.15	$0.00		N/A
Q0503		BATTERY FOR PNEUMATIC VAD REPLACEMENT ONLY EACH	041	Y	Y	Y	$1,079.01	$898.28	$0.00		N/A
Q0504		POWER ADAPTER FOR PNEUMATIC VAD REPLACEMENT ONLY V	041	Y	Y	Y	$569.37	$474.00	$0.00		N/A
Q0506		BATTERY,LITHIUM-ION FOR USE WITH ELEC/PNEU VAD REP	048	Y	Y	Y	$0.00	$0.00	$0.00		N/A
Q0508		MISCELLANEOUS SUPPLY OR ACCESSORY FOR USE WITH IMP	041	Y	Y	Y	$0.00	$0.00	$0.00		N/A
S1040		HELMET CRANIAL REMOLDING ORTHOSIS INCLUDES FITTING	041	Y	Y	N	$1,366.06	$1,137.24	$0.00		N/A
S5498		HOME INFUSION THERAPY,CATH CARE/ADMN SVS/PROF PHAR	048	N	Y	N	$11.57	$9.63	$0.00		10/30
S5501		HOME INFUSION THERAPY,CATH CARE/COMP>1 LUMEN,W/ADM	048	N	Y	N	$38.82	$32.32	$0.00		4/30
S8185		FLUTTER DEVICE	041	N	Y	N	$46.03	$38.32	$0.00		1/180
S8189		TRACHEOSTOMY SUPPLY, NOT OTHERWISE CLASSIFIED	048	Y	Y	N	$0.00	$0.00	$0.00		N/A
S8210		MUCUS TRAP-SUCTION FILTER EACH PT OWNED	048	N	Y	N	$4.88	$4.06	$0.00		2/30
S8270		ENURESIS ALARM USING AUD. BUZZER OR VIBRATION DEVI	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
S8420		GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINATIO	041	Y	N	N	$0.00	$0.00	$0.00		N/A
S8421		GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINAT)	041	N	Y	N	$66.80	$55.61	$0.00		2/180
S8422		GRADIENT PRESSURE AID (SLEEVE) CUSTOM MADE, MEDIUM	041	Y	N	N	$0.00	$0.00	$0.00		N/A
S8423		GRADIENT PRESSURE AID (SLEEVE) CUSTOM MADE, HEAVY	041	Y	N	N	$0.00	$0.00	$0.00		N/A
S8424		GRADIENT PRESSURE AID (SLEEVE) READY MADE	041	N	Y	N	$44.63	$37.15	$0.00		2/180

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HCPCS	Note	Description	COS	PA Req	LTC*	Medicare Covered**	Purch Price	Reduced Purch Price***	Rent	Reduced Rent Price***	Max Qty/ Days
S8425		GRADIENT PRESSURE AID (GLOVE) MEDIUM WEIGHT, CUSTO	041	Y	N	N	$0.00	$0.00	$0.00		N/A
S8426		GRADIENT PRESSURE AID (GLOVE) HEAVY WEIGHT, CUSTOM	041	Y	N	N	$0.00	$0.00	$0.00		N/A
S8427		GRADIENT PRESSURE AID (GLOVE) READY MADE	041	N	Y	N	$28.52	$23.74	$0.00		2/180
S8428		GRADIENT PRESSURE AID GAUNTLET READY MADE	041	N	Y	N	$44.47	$37.02	$0.00		2/180
S8999		RESUCITATION BAG USE FOR VENT PATIENTS DURING CAST	041	Y	Y	N	$152.15	$126.66	$0.00		N/A
S9001		HOME UTERINE MONITORING, DAILY RENTAL AMOUNT	041	R	Y	Y	$0.00	$0.00	$0.00		30/30
S9211		HOME MGT GESTATNL HYPERTSN W/ADMN,PROF PHARM,SUPPL	041	R	N	N	$0.00	$0.00	$0.00		30/30
S9500		HOME INF THRPY,ANTI-BIOTIC-VIRAL-FUNGAL,ADMN/PROF	048	N	Y	N	$8.91	$7.42	$0.00		30/30
T4521		ADULT SIZED DISP INCONT PRODT, BRIEF/DIAPER,SMALL,	048	N	Y	N	$0.48	$0.40	$0.00		200/30
T4522		ADULT SIZED DISP INCONT PRODT, BRIEF/DIAPER MEDIUM	048	N	Y	N	$0.58	$0.48	$0.00		200/30
T4523		ADULT SIZED DISP INCONT PRODT BRIEF/DIAPER, LARGE,	048	N	Y	N	$0.65	$0.54	$0.00		200/30
T4524		ADULT SIZED DISP INCONT PRODT, BRIEF/DIAPER,EXTRA	048	N	Y	N	$0.86	$0.72	$0.00		200/30
T4525		ADULT SIZED DISP INCONT PRODT, PROTEC UNDER/PULL-O	048	N	Y	N	$0.61	$0.51	$0.00		200/30
T4526		ADULT SIZED DISP INCONT PRODT PROTEC UNDER/PULL-ON	048	N	Y	N	$0.76	$0.63	$0.00		200/30
T4527		ADULT SIZED DISP INCONT PRODT, PROTEC UNDER/PULL-O	048	N	Y	N	$0.76	$0.63	$0.00		200/30
T4528		ADULT SIZED DISP INCONT PRODT,PROTEC UNDER/PULL-ON	048	N	Y	N	$0.94	$0.78	$0.00		200/30
T4529		PEDS SIZED DISP INCONT PRODT BRIEF/DIAPER SM/MED S	048	N	Y	N	$0.53	$0.44	$0.00		200/30
T4530		PEDS SIZED DISP INCONT PRODT,BRIEF/DIAPER,LARGE SI	048	N	Y	N	$0.65	$0.54	$0.00		200/30
T4531		PEDS SIZED DISP INCONT PRODT,PROTEC UNDER/PULL-ON	048	N	Y	N	$0.54	$0.45	$0.00		200/30
T4532		PEDS SIZED DISP INCONT PRODT,PROTEC UNDER/PULL-ON,	048	N	Y	N	$0.54	$0.45	$0.00		200/30
T4533		YOUTH SIZED DISP INCONT PRODT, BRIEF/DIAPER,EACH	048	N	Y	N	$0.48	$0.40	$0.00		200/30
T4534		YOUTH SIZED DISP INCONT PRODT, PROTEC UNDER/PULL-O	048	N	Y	N	$0.54	$0.45	$0.00		200/30
T4535		DISP LINER/SHIELD/GUARD/PAD/UNDERGARMENT,FOR INCON	048	N	Y	N	$0.42	$0.35	$0.00		120/30
T4541		INCONTINENCE PRODUCT,DISPOSABLE UNDERPAD,LARGE SIZ	048	N	Y	N	$0.48	$0.40	$0.00		150/30
T4543		ADULT SIZED DISP INCONT PRODT,PROTEC BRIEF-DIAPER	048	N	Y	N	$1.46	$1.22	$0.00		200/30
T4544		ADULT SIZED DISP INCONTINCENCE PRODUCT,PULL-ON,ABO	041	N	Y	N	$1.46	$1.22	$0.00		200/30
V5014		HEARING AID; REPAIR/MODIFICATION OF A HEARING AID	041	N	N	N	$731.70	$609.14	$0.00		2/365
V5030	nr	HEARING AID MON, BODY WORN, AIR COND	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5040	nr	HEARING AID,MON,BODY WORN BONE COND	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5050	nr	HEARING AID,MON IN THE EAR	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5060	nr	HEARING AID,MON,BEHIND THE EAR	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5095	nr	SEMI-IMPLANTABLE MIDDLE EAR HEARING PROSTHESIS	041	Y	N	N	$0.00	$0.00	$0.00		N/A
V5120	nr	BINAURAL, BODY	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5130	nr	BINAURAL, IN THE EAR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5140	nr	BINAURAL, BEHIND THE EAR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5160		DISPENSING FEE, BINAURAL	041	N	N	N	$340.24	$283.25	$0.00		1/1095
V5170	nr	HEARING AID,CROS,IN THE EAR	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5180	nr	HEARING AID,CROS,BEHIND THE EAR	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5190	nr	HEARING AID,CROS,GLASSES	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5200		DISPENSING FEE CROS	041	N	N	N	$340.24	$283.25	$0.00		1/1095
V5210	nr	HEARING AID,BICROS,IN EAR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5220	nr	HEARING AID,BICROS,BEHIND EAR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5230	nr	HEARING AID,BICROS,GLASSES	041	N	N	N	$752.00	$626.04	$0.00		1/1095

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V5240		DISPENSING FEE BICROS	041	N	N	N	$340.24	$283.25	$0.00		1/1095
V5241		HEARING AID; DISPENSING FEE, MON HEARING AID ANY T	041	N	N	N	$211.28	$175.89	$0.00		1/1095
V5242	nr	HEARING AID, ANALOG, MON, COMPLETELY IN THE EAR CA	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5243	nr	HEARING AID, ANALOG, MON, IN THE EAR CANAL	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5244	nr	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONA,	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5245	nr	HEARING AID DIGITALLY PROGRAMMABLE, ANTALOG, MON,	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5246	nr	HEARING AID DIGITALLY PROGRAMMABLE ANALOG, MONA, I	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5247	nr	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MON, B	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5248	nr	HEARING AID, ANALOG, BINAURAL, CIC	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5249	nr	HEARING AID, ANALOG, BINAURAL, ITC	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5250	nr	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAUR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5251	nr	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAUR	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5252	nr	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, ITE	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5253	nr	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, BTE	041	N	N	N	$725.00	$603.56	$0.00		1/1095
V5254	nr	HEARING AID DIGITAL, MONAURAL, CIC	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5255	nr	HEARING AID DIGITALLY, MON, ITC	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5256	nr	HEARING AID, DIGITAL, MON, ITE	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5257	nr	HEARING AID DIGITAL, MON, BTE	041	N	N	N	$376.00	$313.02	$0.00		1/1095
V5258	nr	HEARING AID, DIGITAL, CIC	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5259	nr	HEARING AID, DIGITAL, BINAURAL, ITC	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5260	nr	HEARING AID, DIGITAL, BINAURAL, ITE	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5261	nr	HEARING AID, DIGITAL, BINAURAL, BTE	041	N	N	N	$752.00	$626.04	$0.00		1/1095
V5264		HEARING AID; EAR MOLD/INSERT, NOT DISPOSABLE, ANY	041	N	N	N	$36.25	$30.18	$0.00		2/365
V5266		HEARING AID; BATTERY FOR USE IN HEARING DEVICE	048	N	Y	N	$1.52	$1.27	$0.00		16/60
V5267		HEARING AID, SUPPLIES/ACCESSORIES	041	Y	N	N	$0.00	$0.00	$0.00		N/A
V5281		AST LISTENING DVC PRSL FMDM MONO 1 RCVR TRNSMTTR M	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5282		AST LISTENING DVC PRSL FMDM BI2 RECVR TRANSMITTR M	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5283		AST LISTENING DVC PRSL FMDM NECK LOOP INDUCTION RE	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5284		AST LISTENING DVC PRSL FMDM EAR LEVEL RECEIVER	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5285		AST LISTENING DVC PRSL FMDM DIRECT AUDIO INPUT REC	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5286		AST LISTENING DVC PRSL BLUE TOOTH FMDM RECEIVER	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5287		AST LISTENING DVC PRSL FMDM RECEIVER NOS	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5288		AST LISTENING DVC PRSL FMDM TRANSMITTER ASSTV LIST	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5289		AST LISTENING DVC PRSL FMDM ADPT BOOT COUPLNG DEVC	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5290		AST LISTENING DVC TRANSMITTER MIC ANY TYPE	041	Y	Y	N	$0.00	$0.00	$0.00		N/A
V5336		REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE	041	Y	N	N	$0.00	$0.00	$0.00		N/A

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