

PT12-2K Medical Care Policy Administration 1-800-685-5861

Maryland Department of Health and Mental Hygiene 201 W. Preston Street • Baltimore, Maryland 21201 Parris N. Glendening, Governor - Georges C. Benjamin, M.D., Secretary

December 21, 1999

#### Maryland Medical Assistance Program Medical Supply and Equipment Transmittal No. <u>48</u>

TO:	Disposable Medical Supplies/Durable Medical Equipment Providers
FROM:	Joseph M. Millstone, Director Medical Care Policy Administration
<u>NOTE</u> :	Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

**RE:** Up-Date of the Approved List of Items

STATE OF MARYLAND

The Maryland Medical Assistance Program has updated the Disposable Medical Supplies/Durable Medical Equipment Approved List of Items, effective January 1, 2000.

COMAR 10.09.12.07F (Payment Procedures) states that the Department shall reimburse providers for the purchase of covered services, except for prosthetic devices, at the lowest of:

- (1) The manufacturer's suggested price less 25 percent;
- (2) The wholesale cost to the provider plus 25 percent for durable medical equipment and the wholesale cost plus 50 percent for disposable medical supplies;
- (3) The State's current contract bid price to any agency of the State as the result of a procurement process;
- (4) The reimbursement amount allowed by any other covered service of the program; or
- (5) The provider's charge.

To comply with the above regulations, the Program has reviewed the Maryland Department of General Services's (DGS) current contract prices for wheelchairs with prices on Medicaid's current approved list of items. Based on the comparison, the Program has incorporated the DGS contract prices for wheelchairs into the attached list of approved items. Therefore, effective January 1, 2000, the Program will decrease reimbursement amounts for certain wheelchairs.

Any questions regarding this transmittal should be directed to the Staff Specialist for Disposable Medical Supplies and Durable Medical Equipment at (410) 767-1474 or 1-800-685-5861 extension 1474.

### Attachment

# MARYLAND MEDICAL ASSISTANCE PROGRAM

**DISPOSABLE MEDICAL SUPPLIES** 

AND

DURABLE MEDICAL EQUIPMENT

**APPROVED LIST OF ITEMS** 

**EFFECTIVE JANUARY 1, 2000** 

# MARYLAND MEDICAL ASSISTANCE PROGRAM

## DISPOSABLE MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT

# APPROVED LIST OF ITEMS Procedure Codes and Maximum Allowable Prices

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#### General Notes Pertaining to DMS/DME

For certain categories of Disposable Medical Supplies and Durable Medical Equipment which are unlisted and/or priced by individual consideration (I/C), the word <u>"specify</u>" is shown, indicating that additional information is needed to process preauthorization requests and/or claim forms.

This information usually consists of the following:

- 1. Manufacturer's name;
- 2. Manufacturer's product number;
- 3. Number of individual items per packaging unit (for supplies and accessories);
- 4. Provider's usual and customary charge;

If this information cannot be provided, please attach a product sheet identifying each item, manufacturer, distributor, or supplier; or submit other appropriate information which describes the item(s) and identifies a contact source. In all these instances, please include addresses and telephone numbers as well.

Your cooperation in supplying this information initially will reduce the time to process your request or claim.

# MARYLAND MEDICAL ASSISTANCE PROGRAM DISPOSABLE MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT

# **APPROVED LIST OF ITEMS**

<u>Key</u>

- $\overline{I/C}$  Individual Consideration
- NC Not Covered
- UC Usual and Customary
- AN As Needed

#### Part 1: DISPOSABLE MEDICAL SUPPLIES

### ADMINISTRATION SUPPLIES FOR INTRAVENOUS MEDICATION AND PARENTAL NUTRITION

Procedure Code	Item Description	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum Units per Service
X1030	Injection cap, needleless	\$ 5.00	each	90
X1000	Administration Set for intravenous medication (with filter)	10.70	each	90
X1001	Administration Set for intravenous medication (without filter)	4.55	each	90
X1047	Administration set for ambulatory infusion pump	33.00	each	30
X1049	Central line tray	10.00	each	10
X1002	Filter for intravenous medication administration (when sold separately)	2.45	each	90
X1043	IV extension set	10.50	each	30
X1051	Sharps disposable container, 1 quat capacity	4.28	each	6
X1052	Sharps disposable container, 5 quart capacity	5.93	each	6
X1053	Sharps disposable container, 8 quart capacity	8.99	each	6
X1044	Infusion Bag, disposable, for mechanica driver	l <b>5.93</b>	each	90
X1045	Infusion Bag, multi-use for mechanical driver	7.45	each	90
X1054	Syringe only, 0.5ml or 1ml	.20	each	100
X1055	Syringe with needle, 0.5ml or 1ml	.31	each	100
X1056	Syringe only, 3ml	.16	each	100

Procedure Code	Item Description	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum Units per Service
X1057	Syringe with needle, 3ml	<b>\$</b> .23	each	100
X1058	Syringe only, 5ml	.26	each	100
X1059	Syringe with needle 5ml	.39	each	100
X1060	Syringe only, 6ml	.29	each	100
X1061	Syringe with needle, 6ml	.44	each	100
X1062	Syringe only, 10ml	.28	each	100
X1063	Syringe with needle, 10ml	.41	each	100
X1064	Syringe only, 12ml	.31	each	100
X1065	Syringe with needle, 12ml	.46	each	100
X1066	Syringe, 20ml	.76	each	100
X1067	Syringe, 30ml - 35ml	1.15	each	25
X1079	Unlisted Administration Supplies for intravenous medication	I/C		
X1003	Administration Set for parenteral feeding (with filter)	1.90	each	90
X1004	Administration Set for parenteral feeding (without filter)	; <b>8.8</b> 5	each	90
X1005	Filter for parenteral feeding (when sold separately)	3.15	each	90
X1006	Dravon Clamp for use with parenteral feeding	8.00	each	2
X1007	Injection Caps for use with parenteral feeding	2.50	each	30
X1019	Unlisted Administration supplies for parenteral nutrition (specify)	I/C		

# ADMINISTRATION SUPPLIES FOR ENTERAL NUTRITION ONLY

X1011	Adapters for enteral feeding	1.10	each	100
X1012	Syringe for enteral feeding - 50-60ml	2.50	each	100
X1014	Syringe for enteral feeding - 20ml	.67	each	100
X1015	Syringe for enteral feeding - 10ml	.26	each	100
X1016	Syringe for enteral feeding - 5ml	.26	each	100
X1017	Syringe for enteral feeding - 3ml	.16	each	100
X1069	Syringe for enteral feeding - 0.5 or 1ml	.20	each	100
X1070	Syringe for enteral feeding - 6ml	.29	each	100
X1071	Syringe for enteral feeding - 12ml	.31	each	100
X1072	Syringe for enteral feeding - 30ml - 35ml	<b>1</b> .15	each	25

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Procedure		Price	·	Maximum
Code	Item Description	Per	Pricing	Units per
<u></u>	<u>Rem Description</u>	<u>Unit</u>	<u>Unit</u>	Service
X1018		\$ 3.00	each	90
X1020	Tubing for enteral feeding adult	6.30	each	90
B4081	Nasogastric tubing	46.50	each bx/50	15
X1021	Administration Set for enteral feeding	5.30	each	<b>9</b> 0
X1022	Administration Set for enteral feeding with 500/600ml. bag or container	7.85	each	90
X1023	Administration Set for enteral feeding with 1000ml. bag or container	.20	each	30
X1024	Administration Set for enteral feeding with 1200ml. bag or container	11.45	each	30
X1025	Administration Set for enteral feeding with 1400ml. (and above) bag or container	11. <b>80</b>	each	30
X1026	Container or Bag for enteral feeding - 500/600ml.	5.75	each	90
X1027	Container or Bag for enteral feeding 1000/1200ml	6.25	each	<del>9</del> 0
X1028	Container or Bag for enteral feeding - 1400ml and above	7.25	each	90
X1046	Adapter, pediatric	5.00	each	90
X1031	Administration Set, with filter - pediatric	14.00	each	90
X1032	Administration Set for ambulatory infusion pump	33.00	each	50
X1034	Extension Set, standard	2.09	each	90
X1035	Extension Set, with port(s)	5.40	each	90
X1036	Extension Set or bolus feeding replacement, "MIC-Key" type	11.50	each	50
X1038	Gastrostomy Feeding Tube, 5cc and 20cc balloon, "MIC-Key" type, all sizes	44.78	each	6
X1037	Gastrostomy Feeding Kit, Skin Level, "MIC-Key" type, all sizes	132.00	each	4
X1040	Gastrostomy Feeding Device System, "Button" type, sterile, complete	194.00	each	
X1042	Feeding Tube for Gastrostomy Device "Button" type, replacement, all sizes	10.50	each	90
X1041	Decompression Tube for Gastrostomy Devices "Button" type, replacement, all sizes	13.13	each	60

Procedure <u>Code</u>	Item Description	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum Units per Service	С
X1796	Sharps Disposable Container, 1 quart capacity	\$ 4.28	each	6	
X1797	Sharps Disposable Container, 5 quart capacity	5.93	each	6	
X1 <b>798</b>	Sharps Disposable Container, 8 quart capacity	8.99	each	6	
X1029	Unlisted administration supplies for enteral nutrition (specify)	I/C			

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(<u>NOTE</u>: Covered I.V. and Nutrition Infusion Pumps are listed under Durable Medical Equipment)

#### DIABETIC MONITORING SUPPLIES

#### URINE GLUCOSE MONITORING SUPPLIES

X1210	Reagent Tablets	<b>4.</b> 74	36's	4
X1211	Reagent Tablets	10.88	100's	<b>2</b> .
X1212	Reagent Strips	<b>6.6</b> 0	50's	4
X1213	Reagent Strips	<b>9</b> .60	100's	2
X1214	Reagent Tape	<b>9.</b> 67	100 tests	2
X1299	Unlisted Urine Glucose Reagent Strips, Tablets or Tape (specify)	I/C		

# URINE KETONE MONITORING SUPPLIES

X1320	Reagent Strips	<b>8</b> .26	50's	4
X1321	Reagent Strips	13.62	100's	2
X1399	Unlisted Urine Ketone Reagent Strips or Tablets (specify)	I/C		

# URINE GLUCOSE AND KETONE MONITORING SUPPLIES

Procedure Code	Item Description	Price Per <u>Unit</u>	Pricing Unit	Maximum Units per <u>Service</u>
		200		Service
X1420	Reagent Strips	\$ 9.76	50's	5
X1421	Reagent Strips	17.09	100's	4
X1499	Unlisted Urine Glucose and Ketone Reagent Strips (specify)	I/C		
	BLOOD GLUCOSE MONITORING	SUPPLIES		
X1510	Reagent or Test Strips	23.81	25's	2
X1511	Reagent or Test Strips	44.39	50's	4
X1512	Reagent or Test Strips	76.40	100's	2
X1599	Unlisted Blood Glucose and Ketone Reagent Strips (specify)	I/C		

(NOTE: Home Blood Glucose Monitor is listed under Durable Medical Equipment)

# FINGER STICKING AIDS

X1610 X1611	Device Lancets	19.41	each	1
X1612	Lancets Lancets	10.51 13.55	100's 200's	2
X1613	Platforms	22.47	200's	1

X1699 Unlisted Finger Sticking Aids (specify) I/C

		Price		Maximum
Procedure		Per	Pricing	Units per
<u>Code</u>	Item Description	<u>Unit</u>	<u>Unit</u>	Service
A4364	Adhesive for Ostomy or Catheter, Liquid, Cement, Powder or Paste, any composition	\$ 4.00	per ounce	10
X4666	Adhesive Paste, with skin barrier, 2oz	6.72	per ounce	10
A5126	Adhesive, Disc or Foam Pad	7.18	Pkg of 10	4
A4455	Adhesive Remover or Solvent	2.00	per ounce	10
X4600	Ostomy Adhesive Remover, wipes	12.50	box of 50	2
X4601	External Catheter	1.64	each	100
X4602	External Catheter, male, reusable	6.76	each	30
A4347	Male External Catheter, with or without adhesive with or without anti-reflux device	19.68	dozen	8
X4603	Foley Catheter, 2-way, latex	4.34	each	36
X4604	Foley Catheter, 2-way, silicone-coated	6.25	each	36
A4338	Indwelling Catheter, Foley type, 2-way latex with coating (Teflon, silicone, elastomer, etc.)	8.85	each	30
A4345	Indwelling Catheter, Foley type, 2-way, all silicone	.30	each	30
X4605	Foley Catheter, 2 way, silicone with elastomer coating	12.05	each	30
A4346	Indwelling Catheter, Foley type, 3-way, for continuous irritation	18.44	each	30
X4606	Intermittent Catheter, male/female	1.92	each	100
X4607	Catheter, red rubber	1. <b>9</b> 1	each	60
X4608	Catheter, red rubber, Tieman type	4.68	each	.36
X4609	Self-Catheter, female	.65	each	100
X4610	Self-Catheter, long, male/female	1.20	each	100
X4611	Self-Catheter, pediatric/adolescent	.90	each	100
X4612	Urethral Catheter, all purpose, rubber, disposable	.83	each	100
X4613	Urethral Catheter, plastic	1.82	each	100
X4614	Utility Catheter, Robinson/Nelaton type	1.46	each	100
X4615	Catheter Care Tray	5.81	each	90
X4616	Catheter Clamp	1.00	each	5
X4617	Connective Tubing, external catheter	2.19	each	30
X4618	Catheter Extension Tubing	1.46	each	20

# OSTOMY AND PERMANENT URINARY INCONTINENCE SUPPLIES

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Procedure Code	Item Description	Price Per <u>Unit</u>	Pricing Unit	Maximum Units per Service
X4619	Drain/Tube Attachment Device	\$ 7.30	each	10
X4620	Ileal Bladder Appliance	42.45	each	
X4663	"Duoderm" Dressing (4 x 4s), ostomy only	37.15	box of 5	5
X4621	Mounting Ring for ileostomy appliance, white vinyl flexible	13.73	each	15
X4622	Incontinency Pants, disposable (requires preauth)	.76	each	400
X4623	Incontinency Pants, incontinency supply service (requires preauth)	.59	each	400
A4354	Insertion Tray with Drainage Bag without catheter	7.74	each	30
X4624	Insertion Tray with Drainage with catheter	9.04	each	30
A4399	Ostomy Irrigation Supply, Cone/Cathete including brush	er, 1.25	each	30
X4625	Irrigation Drain with flange, 2-piece ostomy system	4.04	each	4
A4400	Ostomy Irrigation Set	60.00	each	5
A4397	Irrigation Supply, Sleeve	5.00	each	40
A4322	Irrigation Syringe, bulb or piston	1.40	each	25
A4320	Irrigation Tray for bladder irrigation with bulb/piston syringe	4.81	each	15
A4355	Irrigation Tubing Set, for continuous bladder irrigation through a 3-way indwelling Foley catheter	4.84	each	30
A4367	Ostomy Belt	9.50	each	2
A5093	Ostomy Accessory, Convex Insert	2.25	each	20
A4626	Ostomy Drainable Pouch Clamp	1.68	each	20
A4361	Ostomy Face Plate	19.25	each	5
X4627	Ostomy Gasket	8.85	pkg of 10	10
A4404	Ostomy Ring	2.25	each	30
X4628	Ostomy Tape, 1" roll	1.73	each	5
X4629	Ostomy Tape 2" roll	4.50	each	5
A4454	Tape, all types, all sizes (Ostomy other than above) (specify)	1/C		-
X4664	Ostomy Wafer with flange	34.90	box of 5	5
A5051	Pouch, Closed, with barrier (1 piece)	3.00	each	30
A5052	Pouch, Closed, without barrier attached (1 piece) (disposable)	2.09	each	100
A5054	Pouch, Closed (2 piece)	.60	each	100

Procedure		Price	<b>D</b> · ·	Maximum
<u> </u>	Item Description	Per	Pricing	Units per
	Rem Description	<u>Unit</u>	<u>Unit</u>	Service
A5073		\$ 3.40	each	100
X4667	Pouch, mini (2 piece)	1.50	each	100
A5062	Pouch, Drainable, without barrier attached (1 piece) (reusable)	2.76	each	100
X4665	Pouch, Drainable system, with barrier (1 piece)	462	each	100
A5063	Pouch, Drainable for use on barrier with flange (2 piece system)	2.50	each	100
A5071	Pouch, urinary with barrier (1 piece)	5.00	each	100
X4631	Protective Dressing, spray-on	1.88	per ounce	10
X4632	Protective Dressing, wipes	10.00	box of 50	2
X4633	Protective Powder, loz	8.50	each	15
X4634	Karaya Powder, 1oz.	3.50	ounce	4
X4635	Karaya Gum Powder, 12 oz.	11.10	each	3
A4363	Skin Barrier, Liquid (spray, brush, etc.)	6.00	per ounce	10
A4362	Skin Barrier, Solid, 4 x 4 or equivalent	3.75	each	60
A5121	Skin Barrier, Solid, 6 x 6 or equivalent	8.25	each	60
A5122	Skin Barrier, 8 x 8 or equivalent	15.00	each	36
A5123	Skin Barrier with flange (solid flexible or accordion), any size	7.00	each	100
A5055	Stoma Cap	2.75	each	100
X4636	Stoma Mini Pouch, closed	.98	each	100
X4637	Tincture of Benzoin, spray	1.95	each	10
X4638	Extension/Connective Tul.ing - to connect leg bag to external or Foley catheter, plastic, sterile	5.77	each	15
X4639	Extension/Connective Tubing - to connect bag to McGuire urinal series, latex, non-sterile	7.78	each	15
A4554	Underpads disposable, all sizes (requires preauth)	.40	each	300
X4640	Urinary Diversion Pouch, with anti- reflux valve and night drain adapter	6.50	each	20
A4357	Bedside Drainage Bag, day or night, with or without anti-reflux device, with or without tube (urinary)	10.00	each	36
A4358	Urinary Leg Bag, vinyl, with or without tube	5.25	each	36

Procedure Code	Item Description	Price Per <u>Unit</u>	Pricing Unit	Maximum Units per <u>Service</u>
X4641	Leg Bag Extension Tube \$	2.44	each	36
X4642	Leg Bag Straps	4.58	each	15
X4643	Urostomy Appliance System, all sizes	31.15	each	2
X4644	Urostomy Drain Tube	4.23	each	100
X4645	Urostomy Pouch	4.00	each	100
A4335	Incontinence Supply, Miscellaneous (specify)	I/C	Cach	100
A4421	Ostomy Supply, Miscellaneous (specify)	I/C		
X5799	Unlisted catheters/accessories (specify)	I/C		

(NOTE: Reuseable incontinence pads and pants are listed under miscellaneous DME)

# SPINAL CORD DYSFUNCTION CARE SUPPLY KITS

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Procedure <u>Code</u>	Item Description	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum Units per Service
X1100	Skin Care Kit I-A 4" x 4" sterile \$ 8-ply gauze pads - 4 dozen Sterile cotton tipped applicators - 8 dozen packages of 2 each 1" porous surgical tape - 4 rolls	\$ 17.70	1 kit every 2 weeks	6
X1101	Skin Care Kit I-B 4" x 4" sterile 8-ply - gauze pads - 2½ dozen Sterile elastic 2-ply gauze bandages -2½ dozen 4" rubber elastic bandages - 1 Sterile tongue blades - 2½ dozen	49.90	l kit every 2 weeks	6
X1102	Urinary Incontinence Kit II-A Condoms 3 dozen 1" elastic adhesive bandages 3 rolls Liquid skin cement - 1 can (4 5/16" unsterile latex tubing, - 8 feet	-	1 kit every month	3
X1103	Urinary Incontinence Kit II-B 1" elastic adhesive bandages - 3 rolls Liquid sk cement 1 can (4 oz.) Unsterile cathet extension tubing with connector - 4	in	l kit every month	3
X1104	Urinary Incontinence Kit II-C Alcohol wipes 3 boxes of 100 each pH testing paper - 1 roll of 15 feet 1" clear hypo allergenic tape - 3 rolls	*	1 kit every month	3
X1105	Bowel Incontinence Kit III-A Bisocodyl suppositories 10mg 1 box of 50 Disposable exam gloves - 1 box of 100 Lubricating jelly (5 oz.)	15.60	1 kit every 3 months	
X1106	Bowel Incontinence Kit III-B Disposable exam gloves - 1 box of 100 lubricating jelly (5 oz.)	9.90	1 kit every 3 months	1

# **BURN GARMENTS**

		Price		Maximum
Procedure		Per	Pricing	Units per
Code	Item Description	<u>Unit</u>	<u>Unit</u>	Service
X1950	Interdigital Web Space to be worn over glove	\$ 44.75	each	4
X1951	Mitten	41.00	each	4
X1952	Gauntlet metacarpals to wrist	17.75	each	4
X1953	Glove to Wrist	58.75	each	4
X1954	Glove to Elbow	62.50	each	4
X1955	Forearm Sleeve wrist to elbow	33.50	each	4
X1956	Forearm Sleeve & Gauntlet metacarpals to elbow	46.75	each	4
X1957	Arm Sleeve wrist to axilla	37.75	each	4
X1958	Arm Sleeve & Gauntlet metacarpals to axilla	52.50	each	4
X1959	Arm Sleeve & Shoulder Flap	49.25	each	4
X1960	Arm Sleeve, Gauntlet & Shoulder Flap	62.75	each	4
X1961	Stump Sleeve closed end to axilla	55.00	each	4
X1962	Stump Sleeve & Shoulder Flap	55.00	each	4
X1963	Face Mask	88.00	each	2
X1964	Face Mask, Open Face	88.00	each	2
X1965	Modified Chin Strap	54.50	each	2
X1966	Chin Strap	45.25	each	2
X1967	Chin Extension Collar	45.25	each	2
X1968	Sleeveless Vest	118.50	each	2
X1969	Vest with Sleeves	145.75	each	2
X1970	Sleeveless Body Brief	134.50	each	2
X1971	Body Brief with Sleeves	200.00	each	2
X1972	Sleeveless Body Suit (to distal measurement (above knee)	184.00	each	2
X1973	Body Suit with Sleeves	221.75	each	2
X1974	Panty Girdle, closed pubis	76.50	each	2
X1975	Panty Girdle, open pubis	76.50	each	2
X1977	Foot Glove	77.50	each	2
X1978	Foot Glove to Knee	103.75	each	2
X1979	Anklet	34.50	each	2
X1980	Knee Length	39.75	each	2 2
X1981	Thigh Length	49.25	each	2
X1982	Waist Height, Two Legs, closed pubis	138.50	each	2

NOTE: Charges for burn garments shall include all fitting, dispensing, and follow-up care.

Procedure		Price	<b>D</b> · · ·	Maximum
		Per	Pricing	Units per
<u>Code</u>	Item Description	<u>Unit</u>	<u>Unit</u>	Service
X1983	Waist Height, Two Legs, open pubis	\$ 138.50	each	2
X1984	Waist Height, One Leg open pubis	110.25	each	2
X1985	Waist Height, One Leg, panty, open pubis	125.00	each	2
X1986	Waist Height, One Leg, panty, closed pubis	125.00		
X1987	Waist Height, One Leg, brief	125.00	each	2
X1988	Pregnancy, Two Legs	138.50	each	2
X1989	Stump Support above knee	74.50	each	2
X1990	Stump Support below knee	62.50	each	2
X1991	Waist Height, One Leg, plus stump	138.50	each	2
X1992	Waist Height, One Leg, plus stump, open pubis	138.50	each	2
X1993	Waist Height, One Stump	110.25	each	2
X1994	Waist Height, Two Stumps	138.50	each	2
X1995	Chap Style, One Leg	126.00	each	2
X1996	Chap Style, Two Legs	155.00	each	2
X1998	Fitting Fee	17.75	one time	1
			per year	-
X1999	Unlisted Burn Garment: , Accessories, Modifications (specify)	I/C		

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# SUPPORT STOCKINGS, INDIVIDUALLY FORM-FITTED

<u>NOTE:</u> Charges for individually form-fitted support stockings shall include all fitting, dispensing, and follow-up care.

		Price		Maximum
Procedure		Per	Pricing	Units per
<u>Code</u>	Item Description	<u>Unit</u>	Unit	Service
X1901	Mitten	\$ 52.00	each	4
X1902	Gauntlet metacarpals to wrist	34.00	each	4
X1903	Glove to Wrist	78.50	each	4
X1904	Glove to Elbow	111.50	each	4
X1905	Forearm Sleeve wrist to elbow	40.50	each	4
X1906	Forearm Sleeve & Gauntlet	56.25	each	4
	metacarpals to elbow			
X1907	Arm Sleeve wrist to axilla	45.75	each	4
X1908	Arm Sleeve & Gauntlet	80.00	each	4
	metacarpals to axilla			
X1909	Arm Sleeve & Shoulder Flap	60.75	each	4
X1910	Arm Sleeve, Gauntlet & Shoulder	77.25	each	4
	Flap			
X1911	Stump Sleeve closed end to axilla	57.00	each	4
X1912	Stump Sleeve & Shoulder Flap	<b>64</b> .25	each	4
X1913	Foot Glove	107.50	each	4
X1929	Foot Glove to Knee	135.50	each	4
X1914	Anklet	41.25	each	4
X1915	Knee Length	<b>48.00</b>	each	4
X1916	Thigh Length	59.50	each	4
X1917	Waist Height, Two Legs, closed pubis	171.75	each	2
X1918	Waist Height, Two Legs, open pubis	171.75	each	2
X1919	Waist Height, One Leg, open pubis	136.00	each	2
X1920	Waist Height, One Leg, panty, open	<b>153</b> .75	each	2
	pubis			
X1921	Waist Height, One Leg panty, closed	153.75	each	2
	pubis			
X1930	Waist Height, One Leg, brief	153.75	each	2
X1922	Maternity, Two Legs	171.75	each	2
X1923	Stump Support above knee	104.75	each	4
X1924	Stump Support below knew	<b>9</b> 1.75	each	4
X1925	Waist Height, One Leg, plus stump	171.75	each	2
X1926	Waist Height, One Leg, plus stump,	171.75	each	?
	open pubis			
X1927	Waist Height, One Stump	132.50	each	2

Procedure <u>Code</u>	Item Description	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum Units per <u>Service</u>	С
X1928 X1931 X1932 X1938	Waist Height, Two Stumps Chap Style, Two Legs Chap Style, One Leg Fitting Fee	\$ 176.00 182.25 147.50 17.75	each each each one time	2 2 2	
X1939	Accessories/Modifications for leg or arm (specify)	I/C	per year		

# **OSTEOGENESIS STIMULATOR**

<u>NOTE:</u>	Charges for the osteogenesis stimulator s repairs and replacement parts (with pre-a	shall include both required	all follow-up i)	care, batteries,
E0747	Osteogenesis Stimulator - Initial	686.66	each	
X1801	Osteogenesis Stimulator - First Evaluation (after six weeks)	686.66		
X1802	Osteogenesis Stimulator - Second Evaluation (after three weeks)	686.66	each	
	SUCTION SUPP	LIES		
X9150	Suction collection container, disposable standard	7.50	each	10
X9149	Suction collection container, disposable large capacity	12.00	each	10
X9055	Suction catheter	2.00	each	100
<b>X9</b> 151	Suction connecting tubing 6 feet	2.50	each	10
X9153	Suction connecting tubing 9 feet	2.60	each	10
X9155	Suction connecting tubing 12 feet	4.45	each	
X9158	Suction connecting tubing 100 feet, roll	45.50	roll	10 6

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# Part II, DURABLE MEDICAL EQUIPMENT

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximum Rental <u>Charge</u>	Maximum Units per <u>Service</u>
Apnea Monitors and Accesso	ories				
Standard Monitor, electric/ battery (AC/DC): daily rental infant	NC	\$NC	X8361 \$	7.45/day	29
Standard Monitor, electric/ battery (AC/DC): monthly rental	NC	٦٢C	X8362	224.00/mo.	1
Monitor with memory daily rental	NC	NC	X8354	12.00/day	29
Monitor with memory month rental	ly NC	NC	X8364	350.00/mo.	1
Recorder, daily rental	N	NC	X8351	17.70/day	29
Accessories:					
Belt	X9352	10.80		NC	4
Belt Kit I (with cable)	X9358	72.80		NC	1
Belt Kit II (without cable)	X9359	52.00		NC	1
Disposable Red Dot Electrodes, 25/bag (or equivalent)	X9354	17.50		NC	6
Lead Wires - Straight End	X9355	9.25		NC	2
Lead Wires - Clip End	X9356	12.50		NC	3
Patient Cable	X9357	44.10		NC	1
Patient Cables for portable infant monitor	X9363	ï/C		NC	
Cardio-Trace Electrodes, 30/package (or equivalent)	X9364 )	7.50		NC	4
Unlisted Apnea Monitors/ Accessories (specify)	X9369	I/C		X8369	I/C

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximur Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
Beds Hospital					
Hospital Bed, fixed height, witho mattress, without side rails	ut X9100	\$ 502.00	X8100	\$ 38.61	10 years
Hospital Bed, fixed height, with mattress, without side rails	E0252	577.00	X8101	44.38	10 years
Hospital Bed, fixed height, with side rails, with mattress	E0250	748.00	<b>X808</b> 1	57.54	10 years
Hospital Bed, fixed height, with side rails, without mattress	E0251	673.00	X8082	51.77	10 years
Hospital Bed, variable height, hi-lo, without mattress, without side rails	X9102	800.00	X8102	61.54	10 years
Hospital Bed, variable height, hi-lo, with mattress, without side rails	X9103	940.00	X8103	72.30	10 years
Hospital Bed, variable height, hi-lo, with side rails, with mattress	E0255	1,257.00	X8083	96.69	10 years
Hospital Bed, variable height, hi- lo, with side rails, without mattress	X9104	1,117.00	X8104	86.00	10 years
Hospital Bed, semi-electric (head and foot adjustments), without mattress, without side rails	X9105	,409.00	X8105	108.38	10 years
Hospital Bed, semi-electric (head and foot adjustments), with mattress, without side rails	X9106	1,549.00	X8106	19.15	10 years
Hospital Bed, semi-electric (head and foot adjustments), with mattress, with side rails,	E0260	1699.00	X8079	130.70	10 years
Hospital Bed, semi-electric (head and foot adjustments), with side rails, without mattress	X9107	,559.00	X8107	119.92	10 years
Hospital Bed, total electric (head, foot and height adjustments), without mattress, without side rails	X9108	,830.00	X8108	140.77	10 years
Hospital Bed, total electric (head, foot and, height adjustments), with mattress, without side rails		1,970.00	X8109	151.53	10 years

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximur Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
Hospital Bed, total electric (head, foot and height adjustments), with mattress, with side rails	E0265	\$2,190.00	X8080	\$168.46	10 years
·	E0266	2,050.00	X8084	157. <del>69</del>	10 years
Accessories					
Mattress, innerspring	E0271	194.00	X8085	14.92	2 years
Mattress, foam rubber	E0272	127.00	X8403	9.76	2 years
Mattress, eggcrate type	X9230	27.00	NC	NC	2 years
Mattress, water, for home or hospital bed	X9231	65.00	NC	NC	2 years
Bed Side Rails, half length	E0305	158.00	X8404	12.15	10 years
Bed Side Rails, full length	E0310	184.00	X8405	14.15	10 years
Unlisted Hospital Beds/ Accessories (specify)	X9119	I/C	X8119		
Blood Glucose Monitoring Equi	pment				
Home Blood Glucose Monitor	E0607	125.00	NC	NC	3 years
Home Blood Glucose Monitor	E0609	I/C	NC	NC	3 years
with special features	2000	ИС	ne	ne	J years
Battery, Replacement	X9301	3.25	NC	NC	AN
Braces & Supports					
Support, back, lumbo-sacral	X9330	110.00	NC	NC	l year
Support, back, lumbo-sacral, heat molded	X9370	135.00	NC	NC	l year
Support, dorsal lumbar	X9331	150.00	NC	NC	l year
Support, Bennett, full	X9335	630.00	NC	NC	3 years
Support, Bennett, modified	X9336	300.00	NC	NC	3 years
Support, chair back/Knight spinal (including molded type)	<b>X933</b> 3	250.00	NC	NC	3 years
Support, hyperextension, Jewett	X9332	225.00	NC	NC	l year
Support, neck brace, 2-poster	X9337	220.00	NC	NC	l year
Support, neck brace, 4-poster	X9320	230.00	NC	NC	1 year

	rocedure		Procedure	Maximu Monthly	
Itom Description	Code	Purchase	Code	Rental	Life
Item Description	Purchase	Price	<u>Rental</u>	<u>Charge</u>	Expectency
Support, Taylor-Knight	<b>X93</b> 34	\$ 295.00	NC	NC	l year
Wilmington brace, without mold	X9329	495.00	NC	NC	l year
Wilmington brace, with mold	X9343	650.00	NC	NC	l year
Milwaukee brace, unlined	X9344	895.00	NC	NC	l year
Milwaukee brace, lined	X9345	955.00	NC	NC	l year
Boston brace, unlined	X9346	625.00	NC	NC	1 year
New Boston brace, lined	X9347	800.00	NC	NC	l year
New Boston brace, lined with	X9348	875.00	NC	NC	l year
thoracicand lumbar control/ pads				ne	. you
New Boston brace, lined with	X9375	900.00	NC	NC	l year
welded struts, front and back					
Boston jacket with "cow horns"	X9371	995.00	NC	NC	1 year
TLSO body jacket, lined	X9349	780.00	NC	NC	1 year
TLSO body jacket, lined with controls/pads	X9350	875.00	NC	NC	l year
TLSO split body jacket "clamshell"/"bi-valve")	X9372	900.00	NC	NC	year
Rainey flexion jacket	X9373	725.00	NC	NC	l year
Hoke corset, rigid, with pads	<b>X9</b> 374	140.00	NC	NC	l year
Unlisted Braces/Supports (specify)	X9379	I/C	NC	NC	I/C
Canes and Crutches					
Cane of all materials, adjustable or fixed, with tip	E0100	18.00	NC	NC	year
Cane, quad or three prong; includes canes of all materials,	E0105	45.00	NC	NC	l year
adjustable or fixed, with tips					
Cane-Walker	X9120	67.00	NC	NC	l year
Unlisted cane (specify)	X9122	I/C	NC	NC	NC
Crutch, underarm, wood, adjustable or fixed, with pads, tips, handgrips, each	E0113	20.00	NC	NC	6 months
Crutch, underarm, wood, adjustable or fixed, with pads, tips, handgrips, pair	E0112	39.00	NC	NC	6 months

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Item Description	rocedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximu Monthly Rental <u>Charge</u>	
Crutch, underarm, other than wood, adjustable or fixed, with pad, tip and handgrip, each	E0116	\$ 29.00	NC	\$ NC	6 months
Crutches, underarm, other than wood adjustable or fixed, with pads, tips and handgrips, pair	E0114	58.00	NC	NC	6 months
Crutch, forearm, of various materials, adjustable or fixed, with tip and handgrips (Canadian or Lofstrand), each	E0111	40.00	NC	NC	6 months
Crutch, forearm, of various materials, adjustable or fixed, with tips and handgrips (Canadian or Lofstrand), pair	E0110	80.00	NC	NC	6 months
Crutches, platform, pair	X9229	155.00	X8229	1.92	6 months
Crutch, platform, single	X9201	80.00	NC	NC	6 months
Unlisted crutches (specify)	X9202	I/C	X8202	I/C	I/C
Commodes					
Commode Chair, stationary, with fixed arms	E0163	85.00	NC	NC	2 years
Commode Chair, stationary, with detachable arms	E0165	167.00	X8228	12.85	2 years
Commode Chair, adjustable, with fixed arms	X9111	90.00	NC	NC	2 years
Commode Chair, adjustable, with detachable arms	X9112	170.00	X8112	13.07	2 years
Commode Chair, adjustable, with attachment for pail or pan	X9113	164.00	X8113	12.62	2 years
Commode Chair, mobile, with fixed arms	E0164	147.00	X8116	.31	2 years
Commode Chair, mobile, with detachable arms	E0166	225.00	X8117	17.31	2 years
Commode Chair, drop arms	X9225	167.00	X8225	12.85	2 years
Commode Chair, drop arms, with	X9114		X8114	15.38	2 years 2 years
soft seat, and pail or pan				19.90	2 30013

Item Description	Procedure Code <u>Purchase</u>		Maximum Purchase Price	Procedure Code <u>Rental</u>	M R	laximur lonthly ental <u>harge</u>	n Life <u>Expectency</u>
Commode Chair, large/extra wide/heavy duty	<b>X9</b> 115	\$	1 <b>87.0</b> 0	X8115	\$	14.38	2 years
Pail or Pan for use with commode chair	E0167		20.00	NC		NC	l year
Unlisted commode chair (specify)	X9117		I/C	X8727		I/C	I/C
Enteral and Parenteral Nutrition	Equipmen	<u>it</u>					
Enteral Nutrition Infusion Pump, with alarm	B9002		750.00	X8005		57.69	10 years
Enteral Nutrition Infusion Pump, pediatric	X9110		,050.00	X8110		80.76	10 years
Parenteral Nutrition Infusion Pump, stationary (specify)	B9006		,752.00	X8001	1	34.77	10 years
Parenteral Nutrition Infusion Pump, portable	B9004	3	,790.00	X8015	2	91.53	10 years
Battery Pack, Replacement IV Pole	X9631 E0776		100.00 105.00	NC X8002	٤	NC 3.00	AN 10 years
Unlisted Nutrition Equipment (specify)	X9139		I/C	X8139		I/C	I/C
Intravenous Medication Equipm	ent						
Ambulatory Infusion Pump with administrative equipment, worn by patient (Preauth required)	E0781	3	,790.00	<b>X802</b> 1	2	91.54	10 years
Battery Pack for Ambulatory Infusion Pump	<b>X9118</b>		100.00	NC		NC	AN
Nebulizers and Accessories							
Aerosol compressor, complete system compressor unit, medication cup, connector fitting,tubing,handheld nebulize and mouth piece, face mask, or trachestomy collar or T-tube	X9016 r,		130.00	X8016		10.00	2 years

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	Procedure Code	Maximum Purchase	Procedure Code	Maximur Monthly Rental	n Life
Item Description	Purchase	Price	Rental	Charge	Expectency
Aerosol compressor, ultrasonic complete system with ultrasoni aerosol chamber with blower, medication cup, connector fitting, corrugated tubing, and mouth piece, face mask, or tracheostomy collar or T-tube	<b>X9017</b> c	\$ 165.00	X8017	\$ 12.69	2 years
Compressor System pneumatic stationary (pulmo-aide, type)	X9725	180.00	X8725	14.00	2 years
Same, portable with battery adapter charge, power cord	X9726	420.00	X8726	33.00	2 years
Nebulizer Replacement kit	X9707	2.25	NC	NC	5 /month
Nebulizer Mask Kit	X9722	4.05	NC	NC	2/month
Administrative Set used with nebulizer	K0171	3.75	NC	NC	5/month
Aerosol Mask used with nebulizer	K0180	6.25	NC	NC	2/ year
Filter, disposable used with nebulizer	K0178	2.00	NC	NC	2/month
Filter, non-disposable used with nebulizer	K01 <b>79</b>	2.00	NC	NC	1/month
Unlisted nebulizers/accessories (specify)	X9729	I/C	X8729	I/C	I/C

# **Prosthetic Devices**

NOTE:Charges for prosthetic devices shall include the cost of the device as well as<br/>necessary stump covers or hamesses, power sources, and all fitting, dispensing,<br/>and follow-up care.<br/>Does not require preauthorization

Artificial Eye:

Prosthetic, eye, glass, stock	V2620	U/C	NC	NC
Prosthetic, eye, plastic, stock	V2621	U/C	NC	NC
Prosthetic, eye, glass, custom	V2622	U/C	NC	NC
Prosthetic, eye, plastic, custom	V2623	U/C	NC	NC
Prosthetic eye, not otherwise	V2629	U/C	NC	NC
classified	. 202)	0/0	NC	NC

Procedure Maximum Procedure Monthly

Item Description	Code <u>Purchase</u>	Purchase Price	Code <u>Rental</u>	Rental <u>Charge</u>	Life <u>Expectency</u>	С
Breast Prosthesis (including mastectomy form and 2 mastectomy bras):						
Unilateral Bilateral	X3100 X3101	\$ U/C U/C	NC NC	NC NC		
Lower Limb - Partial Foot	X3200	U/C	NC	NC		
Lower Limb - Ankle	X3201	U/C	NC	NC		
Lower Limb - Below Knee	X3202	U/C	NC	NC		
Lower Limb - Knee Disarticulation	X3203	U/C	NC	NC		
Lower Limb - Above Knee	X3204	U/C	NC	NC		
Lower Limb - Hip Disarticulation	X3205	U/C	NC	NC		
Lower Limb - Hemipelvectomy	<b>X</b> 3206	U/C	NC	NC		
Lower Limb - Endoskeletal - Below Knee	X3207	U/C	NC	NC		
Lower Limb - Endoskeletal - Knee Disarticulation	<b>X</b> 3 <b>208</b>	U/C	NC	NC		
Lower Limb - Endoskeletal - Above Knee	X32C9	U/C	NC	NC		
Lower Limb - Endoskeletal - Hip Disarticulation	X3210	U/C	NC	NC		
Lower Limb - Endoskeletal Hemipelvectomy Disarticulation	X321	U/C	NC	NC		
Upper Limb - Partial Hand	X3 <b>212</b>	U/C	NC	NC		
Upper Limb - Wrist Disarticulation	X3213	U/C	NC	NC		
Upper Limb - Below Elbow	X3214	U/C	NC	NC		
Upper Limb - Elbow Disarticulation	X3215	U/C	NC	NC		
Upper Limb - Above Elbow	X3216	U/C	NC	NC		
Upper Limb - Shoulder Disarticulation	X3217	U/C	NC	NC		
Upper Limb - Interscapular Thoracic	X3218	U/C	NC	NC		
Upper Limb - Endoskeletal - Below Elbow	X3219	U/C	NC	NC		
Upper Limb - Endoskeletal - Elbow Disarticultion	<b>X</b> 3220	U/C	NC	NC		

Maximum

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price	Procedure Code <u>Rental</u>	Monthly Rental	Life
<u></u>	<u>r archase</u>	<u>rnce</u>	Kentai	<u>Charge</u>	Expectency
Upper Limb - Endoskeletal Above Elbow	X3221	\$ U/C	NC		
Upper Limb - Endoskeletal - Shoulder Disarticulation	X3222	U/C	NC	NC	
Upper Limb - Endoskeletal - Interscapular Thoracic	X3273	U/C	NC		
Repair of Prosthetic Device, hourly rate (specify repair and rate)	L7500	I/C	NC		
Repair Prosthetic Device, Repair Replace Minor Parts (specify)	L7510	I/C	NC	NC	
Unlisted Prosthetic Devices/ Accessories (specify)	X3299	U/C	NC	NC	
Suction Equipment and Accesse	ories				
Suction Machine, Stationary	X9050	234.00	X8050	18.00	10 years
Suction Machine, AC/DC (electric/battery)	<b>X</b> 9152	780.00	X8152	60.00	10 years
Suction Pump, home model, portable	E0600	600.00	X8153	46.15	10 years
Suction Machine, thermal drainage Intermittent	e X9154	,500.00	X8154	115.38	10 years
Transformer/Rectifier for portable suction machine, home model	X9156	155.00	X8156	11.92	10 years
Suction Device, Yankauer type	X9157	6.32	NC	NC	2/month
Suction Device for airway mucus clearance ("flutter" type)	X9670	140.00	NC	NC	l year
Unlisted Suction Equipment/ Accessories (specify)	X9159	I/C	X8159	I/C	I/C
TENS (Transcutaneous Electrica	<u>ll Nerve Sti</u>	mulator)			
TENS, two lead, localized stimulation	E0720	515.00	X8310	39.62	year
TENS, four lead, larger area/ multiple nerve stimulation	E0730	<b>593.00</b>	X831	45.62	l year

Maximum

Item Description	'rocedure Code Purchase	Maximun Purchase Price	Procedure Code <u>Rental</u>	Monthly Rental <u>Charge</u>	Life <u>Expectency</u>
Accessories	<u></u>		1.0114	Charge	Expectency
110003301103					
Battery	X9312	\$ 4.15	NC S	NC	AN
Battery Pack	X9318	60.00	NC	NC	AN
Gel, tube	X9313	3.10	NC	NC	AN
Tape Patches, pack of 100	X9314	10.40	NC	NC	
(or equivalent)					
Lead Wires, set	<b>X9</b> 315	16.00	NC	NC	AN
Electrode, disposable, each	X9316	2.00	NC	NC	AN
Electrode, reusable, each	<b>X93</b> 17	5.00	NC	NC	AN
Unlisted TENS Equipment/ Accessories (specify)	X9319	I/C	X8319	I/C	AN
Traction Equipment					
Traction, Frame, attached to headboard, simple cervical traction	E0840	30.00	NC	NC	l year
Traction, complete, Buck	X9325	62.50	X8325	5.00	l year
Traction, pelvic, complete	X9323	90.00	NC	NC	l year
Traction Stand, Buck	X9324	40.00	X8324	3.00	l year
Traction Stand for hospital bed	X9129	43.00	X8129	3.30	l year
Traction weight, first pound only	X9326	5.00	NC	NC	l year
Traction weight, each additional pound	X9327	.75	NC	NC	l year
Weight Bag, water or cloth	X9328	6.00	NC	NC	6 months
Fracture Frame, Bed (specify)	X9123	I/C	X8123	I/C	I/C
Unlisted traction equipment (specify)	X9380	I/C	X8380	I/C	I/C
Walkers					
Walker, rigid (pick up), adjustable or fixed height	E01 <b>30</b>	60.00	X8223	4.62	2 years
Walker, folding (pick up), adjustable or fixed height	E0135	79.00	<b>X8</b> 227	6.00	2 years
Walker, wheeled, without seat	E0141	103.00	X8226	7.92	2 years

Maximum

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Monthly Rental <u>Charge</u>	Life Expectency
Walker, standard, without wheels, with wrist platform	X9224	\$ 152.00	X8224	<b>\$</b> 11.69	2 years
Walker, platform attachment for	X9236	84.00	X8236	6.46	2 years
Walker, adjustable height, with wheels	X9218	132.00	X8218	10.15	2 years
Walker, adjustable height and width, with wheels	X9219	185.00	X8219	14.23	2 years
Walker, folding, pediatric	X9690	100.00	NC	NC	2 years
Walker, wheeled, with seat	X9691	100.00	NC	NC	2 years
Walker, wheeled with brakes	X <mark>9</mark> 692	110.00	NC	NC	2 years
Walker, wheeled with seat and brakes	X9693	150.00	NC	NC	2 years
Walker, large/extra wide/heavy duty	X9694	225.00	NC	NC	2 years
Walker, pediatric, standard	X <mark>9</mark> 237	83.00	X8237	6.38	2 years
Walker, pediatric, with wheels	X <mark>9</mark> 238	140.00	X8238	10.76	2 years
Walker, pediatric, posture control with wheels	X9220	211.00	X8220	16.23	2 years
Walker, pediatric, adjustable height and width, with wheels	X9222	275.00	X8222	21.15	2 years
Walkcane or hemi-walker	X9239	67.00	X8239	5.15	2 years
Walker Accessories					
Wheeled foot piece, pair	X9695	33.10	NC	NC	<b>6</b> months
Wheeled foot piece, swivel, pair	X9696	44.00	NC	NC	6 months
Platform attachment, pediatric only	X9697	106.00	NC	NC	6 months
Seat	X9698	50.00	NC	NC	6 months
Leg Extensions for walker	E0158	36.00	X8240	2.76	6 months
Unlisted walker/accessories (specify)	X9689	I/C	NC	NC	I/C

Item Description	rocedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximu Monthly Rental <u>Charge</u>	m Life <u>Expectency</u>
Wheelchairs					
Standard Wheelchair, fixed full length arms, fixed or swing away detachable footrests	E1130	\$ 591.00	X8204	\$ 45.46	5 years
Standard Wheelchair, detachable arms (desk or full length) swing away detachable footrests	E1140 g	792.00	X8244	60.92	5 years
Standard Wheelchair, fixed full length arms, elevating legrests	E1160	673.00	X8242	51.77	5 years
Standard Wheelchair, detachable arms (desk )or full length, elevating legrests	E1150	875.00	X8203	<b>67.3</b> 1	5 years
Fully-Reclining Wheelchair, detahable arms (desk or full- length) swing-away detachable elevating legrests	E1060	972.00	X8255	74.77	5 years
Fully-Reclining Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1070	926.00	X8254	71.23	5 years
Lightweight Wheelchair, detachable arms (desk or full length), swing-away detachable elevating legrests	E1240	880.00	<b>X8</b> 257	67.69	5 years
Lightweight Wheelchair, fixed full length arms, swing-away detachable footrests	E1250	752.00	X8407	57 <b>.8</b> 5	5 years
ightweight Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1260	879.00	X8256	67.62	5 years
ightweight Wheelchair, fixed full length arms, swing-away detachable elevating legrests	E1 <b>270</b>	937.00	X8408	72.00	5 years
ligh Strength Lightweight Wheelchair, detachable arms (desk or full length), swing away detachable elevating legre	E1088 sts	1,038.00	X8060	79.85	5 years

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximur Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
High Strength Lightweight Wheelchair, detachable arms (desk or full length), swing away detachable footrest	E1090	991.00	X8062	76.23	5 years
Wide Heavy Duty Wheelchair, detachable arms (desk or full	E1280	809.00	X8075	62.23	2 years
length), elevating legrests Wide Heavy Duty Wheelchair, fixed full length arms, swing away detachable footrest	E1285	706.00	X8076	54.31	2 years
Wide Heavy Duty Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1290	858.00	X8077	66.00	5 years
Wide Heavy Duty Wheelchair, fixed full length arms, elevating legrests	E1295	765.00	X8078	58.85	5 years
Wheelchair, narrow adult: Same as Standard Wheelchairs					
Wheelchair, junior adult: Same as Standard Wheelchairs					
Wheelchair, child's, with adjustable height, removable full or desk length arms, swing-away detachable footrests	X9246	799.00	X8246	61.46	2 years
Wheelchair, child's, with, adjustable height, removable full or desk length arms, swing-away detachable elevating legrests	X9247	852.00	X8247	65.54	2 years
Wheelchair, child's, reclining, with adjustable height, removable fu or desk length arms, swing-awa detachable footrests	1	,089.00	X8248	83.77	2 years

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximur Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
Wheelchair, child's reclining, with adjustable height, removable full or desk length arms, swing-away detachable elevating legrests	X9249	\$1,143.00	X8249 S	\$ 87.92	2 years
Wheelchair, growing: Same as Standard Wheelchairs					
Hemi-Wheelchair, fixed full length arms, swing-away detachable elevating legrests	E1083	839.00	X8410	64.54	5 years
Hemi-Wheelchair, detachable arms (desk or fullength), swing-away detachable elevating legrests	E1084	920.00	X8253	70.77	5 years
Hemi-Wheelchair, fixed full length arms, swing-away detachable footrests	E1085	569.00	X8406	43.31	5 years
Hemi-Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1086	890.00	X8252	68.46	5 years
Amputee Wheelchair, fixed full length arms, swing-away detachable elevating legrests	E1170	673.00	<b>X8</b> 414	51.77	5 years
Amputee Wheelchair, fixed full length arms, without footrests or legrests	E1171	573.00	X8068	44.08	5 years
Amputee Wheelchair, detachable arms (desk or full length), without footrests or legrests	E11 <b>72</b>	600.00	X8069	46.15	5 years
Amputee Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1180	792.00	X8070	60.92	5 years

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Item Description	<pre>'rocedure Code Purchase</pre>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Monthly Rental <u>Charge</u>	Life Expectency
Amputee Wheelchair, detachable arms (desk or full length), swing-away detachable elevating legrests	E1190	\$ 906.00	X8071	\$ 69.69	5 years
Amputee Wheelchair, fixed full length arms, swing-away detachable footrests	E1200	890.00	X8415	68.46	5 years
Motorized Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	E1213	2,976.00	X8265	228.92	5 years
Motorized Wheelchair, detachable arms (desk or full length), swing-away elevating legrests	E1211	3,165.00	<b>X826</b> 7	243.46	5 years
Motorized Wheelchair, detachable adjustable height arms, swing- away detachable footrests with heel loops	X9266	6,489.00	X8266	499.15	5 years
Motorized Wheelchair, detachable adjustable height arms, swing- away detachable elevating legrests	X9268	6,695.00	X8268	515.00	5 years
Wheelchair, specially sized or constructed (Indicate brand name, model number, and justification)	E1220	νc	X8299	I/C	I/C
Wheelchair, Repairs (parts and labor) or Non- or routine service, requiring the skill of a technician	E1350	I/C	NC	NC	AN
Wheelchair, not otherwise classified (specify manufacturer, model and justification) (requires preauth)	X92१0	I/C	X8280	I/C	AN
Power-Operated Vehicle, 3 or 4 wheel, non-highway (Indicate brand name and model number)	E1230	1,899.00	X8074	146.00	5 years

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price	Procedure Code <u>Rental</u>	Maximu Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
Power-Operated Vehicle, 3 or 4 wheel, non highway, other (specify on preauth)	X9291	\$ I/C	X8291	\$ I/C	I/C
Pediatric Transporter (stroller, buggy etc.) (Indicate brand name and model number)	X9289	420.00	X8289	32.30	2 years
Wheelchair Accessories					
Amputee Adapter (device used to compensate for transfer of weight due to lost limbs to maintain proper balance)	E0959	93.00	NC	NC	AN
Anti-Tipping Device (pair)	E0971	52.00	NC	NC	AN
Adjustable Height Detachable Arms, desk or full length (pair)	E0973	85.00	NC	NC	AN
Attachment to convert any wheelchair to one-arm drive (specify)	E0958	I/C	NC	NC	AN
Replacement Batteries for medically necessary electric wheelchair owned by patient (specify)	E1065	I/C	NC	NC	AN
Battery, each (specify)	E1068	I/C	NC	NC	AN
Deep Cycle Battery (specify)	E1069	I/C	NC	NC	AN
Belt, Safety, with airplane buckle		42.00	NC	NC	AN
Belt, Safety, with Velcro closure	E0979	30.00	NC	NC	AN
Toggle Brakes	X9264	21.00	NC	NC	AN
Brake Extensions (pair)	E0961	31.00	NC	NC	AN
Cushion, Gel	X9240	195.00	NC	NC	AN
Cushion, Foam	X9258	47.00	NC	NC	AN
Cushion, Jay/Roho type (or equivalent)	X9259	340.00	NC	NC	AN
Footrests, extra large (pair)	X9221	68.00	NC	NC	AN
No. 2 Foot plates, except for elevating legrests (pair)	E0970	58.00	NC	NC	AN
"Grade-Aid" (device to prevent rolling back on an incline)	E0974	70.00	NC	NC	AN
Hand Rims with 8 vertical rubber- tipped projections, pair	E0967	420.00	NC	NC	AN

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	rocedure	Maximum	Procedure	Maximu Monthly	n
	Code	Purchase	Code	Rental	Life
Item Description	Purchase_	Price	<u>Rental</u>	<u>Charge</u>	Expectency
Hook-on Head Rest Extension	E0966	\$158.00	NC	S NC	AN
Loop, Heel, each	E0951	15.00	NC	NC	AN
Loop, Toe, each	E0952	18.00	NC	NC	AN
Narrowing Device	E0969	94.00	NC	NC	AN
Solid Back Insert	X9262	110.00	NC	NC	AN
Sold Seat Insert	E0992	108.00	NC	NC	AN
Pneumatic Tire, each	E0953	38.00	NC	NC	AN
Pneumatic Tire with wheel, each	E0999	76.00	NC	NC	AN
Power Attachment (to convert any wheelchair to motorized wheelchair) (specify)	E1065	I/C	NC	NC	AN
Tire, Pneumatic, Caster, each	E1000	8.50	NC	NC	<b>6</b> months
Semi-Pneumatic, Caster, each	E0954	27.30	NC	NC	6 months
Tray	E0950	168.00	NC	NC	5 years
Legrest, elevating, each	E0990	128.00	NC	NC	5 years
Unlisted Wheelchair Accessories (specify)	X9269	I/C	NC	NC	I/C
Wheelchair Modifications					
Reinforced Seat Upholstery	E0975	38.50	NC	NC	l year
Reinforced Back Upholstery	E0976	42.00	NC	NC	l year
Semi-Reclining Back	X9271	286.00	NC	NC	l year
Full Reclining Back	X9272	338.00	NC	NC	l year
Special Back Height	X9274	187.00	NC	NC	l year
Special Seat Height from floor	E1296	312.00	NC	NC	l year
Special Seat Depth, by upholstery	E1297	104.00	NC	NC	l year
Special Seat Depth and/or Width, by construction (specify)	E1298	I/C	NC	NC	l year
Special Seat Width, by upholstery for customized wheelchair	X9275	104.00	NC	NC	1 year
Unlisted Wheelchair Modifications (specify)	SX9279	I/C	NC	NC	I/C

Item Description	Procedure Code Purchase	Maximum Purchase Price	Procedure Code Rental	Maximur Monthly Rental <u>Charge</u>	n Life <u>Expectency</u>
			1.011001	<u>Uniai su</u>	<u>Expectency</u>
Pediatric Adaptive/Positioning Ad (For transporters or wheelchair					
Abductor, stationary	X9160	\$ 174.00	NC	NC	1 year
Abductor, removable with adjustable hardware	X9161	284.00	NC	NC	1 year
Cushions, small	X9162	20.00	NC	NC	l year
Cushions, medium	X9163	30.00	NC	NC	l year
Cushions, large	X9164	40.00	NC	NC	l year
Foot Rest Blocks, added to footre	stX9165	40.00	NC	NC	1 year
Foot Rest Blocks, padded	X9166	50.00	NC	NC	l year
Foot Rest addition	X9167	135.00	NC	NC	l year
Foot Straps	X9168	25.00	NC	NC	l year
Headrest, fixed	X9169	70.00	NC	NC	l year
Headrest, removable, with				110	i your
hardware	X9170	130.00	NC	NC	l year
Insert, back and seat, hinged	X9171	135.00	NC	NC	l year
Insert, hinged, with leg extension	s X9172	195.00	NC	NC	l year
Lateral Supports, small	X9173	134.00	NC	NC	AN
Lateral Supports, medium	X9174	139.00	NC	NC	AN
Lateral Supports, large	X9175	144.00	NC	NC	AN
Pelvic Straps	X9176	60.00	NC	NC	AN
Pouch/Bag, carry-all	<b>X9</b> 177	38.00	NC	NC	AN
Rolls/Bolsters, small	X9178	17.00	NC	NC	AN
Rolls/Bolsters, medium	X9179	29.00	NC	NC	AN
Rolls/Bolsters, large	X9180	40.00	NC	NC	AN
Tray	X9181	160.00	NC	NC	AN
Tray, with hardware	X9182	185.00	NC	NC	AN
Vest Support, small	X9183	40.00	NC	NC	AN
Vest Support, medium	X9184	46.00	NC	NC	AN
Vest Support, large	X9185	52.00	NC	NC	AN
Wedge Support, small	<b>X9186</b>	25.00	NC	NC	AN
Wedge Support, medium	<b>X918</b> 7	40.00	NC	NC	AN
Wedge Support, large	X9188	60.00	NC	NC	AN
Seating System		I/C	NC	NC	AN
Unlisted Pediatric Adaptive/ Positioning Accessories (specify)	X9189	I/C	NC	NC	AN

	rocedure		Procedure	Μ	laximun Ionthly	
Item Description	Code <u>Purchase</u>	Purchase Price	Code Rental		ental harge	Life Expectency
Miscellaneous Equipment						
Bed Pan, standard, metal or plastic		\$ 3.25	NC	\$	NC	2 years
Bed Pan, fracture, metal or plastic	E0276	3.25	NC		NC	2 years
Collar, rigid, cervical	X9340	18.00	NC		NC	6 months
Collar, rigid, Philadelphia	X9341	36.50	NC		NC	6 months
Drug Delivery System, spacer, bag	; A4627	36.75	NC		NC	6 months
or resevoir with or without						
mask, for metered dose inhaler						
Incontinence pants, reuseable, pair	X9650	10.40 ead	ch NC		NC	
Incontinence pads, for reuseable	X1793	11.70	NC		NC	
pants, regular absorbency		11.70	pack of	20	-	
Incontinence pads, extra absorbent	X1794	8.91	NC	20	NC	
pack of 12						
Incontinence pads, extra absorbent pack of 20 or 25	X1 <b>795</b>	13.74	NC		NC	
Patient Lift, hydraulic, with seat or sling	E0630	718.00	X8124		55.23	5 years
Sling or Seat, patient lift canvas	F0(2)	74.00	NG			
or nylon	E0621	74.00	NC		NC	1 year
Pressure Pad, Alternating, with	E0180	177.00	X8140		13.61	3 years
pump						
Pad Only	X9141	23.00	NC		NC	3 years
	X9339	13.00	NC		NC	6 months
	X9338	65.00	NC		NC	6 months
	X9342	65.00	NC		NC	6 months
Trapeze Bar (a/k/a Patient Helper), attached to bed,	E0910	129.00	X8121		9.93	2 years
with grab bar						
	E0940	279.00	X8400		21.46	5 years
complete with grab bar		~ /	10400	4	51. <del>4</del> 0	Jycais
	X9321	46.00	NC		NC	l year
	E0605	15.00	NC		NC	2 years
					110	2 Juli 3

(NOTE: Osteogenesis Stimulator, Burn Garments, and Individually Form-Fitted Support Stockings are listed under Disposable Medical Supplies)

Item Description	Procedure Code <u>Purchase</u>	Pu	aximum Irchase ice	Procedure Code <u>Rental</u>	Mo Rei	ximu onthly ntal arge		(
Durable Medical Equipment, not otherwise classified (specify)	E1399	\$	I/C	X8999	\$	I/C	I/C	
Repairs to Durable Medical Equipr	nent							
Repairs to purchased items of durable medical equipment in custody of a recipient on which repairs are made at the Program expense (specify) (under \$500.)	X6999 's		I/C	NC				
Repairs to purchased items of durable medical equipment in custody of a recipient on which repairs are made at the Program' expense (specify) (over \$500.)	X6998 s		I/C	NC				

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#### PEDIATRIC MEDICAL EQUIPMENT AND SUPPLIES (UNDER AGE 21)

# Durable Medical Equipment and Accessories-Purchase

# NOTE: See separate list for Equipment Rentals

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price
Activity Chair, adaptive		
low-back	X9544	\$ 419.00
High-back	X9545	494.00
Augmentative Communication Equipment	X9559	I/C
Augumentative Communication Accessories		
(provided after initial purchase)	X9558	I/C
Bath Chair - adjustable, adaptive		
small	X9534	294.00
medium	X9503	319.00
large	X9504	344.00
extra large	X9542	357.00
Bath Seat - tilting, adaptive		
medium	X9523	289.00
adolescent	X9524	325.50
adolescent, large	X9525	335.00
Extension Legs or		220.00
Head Pad/Support, each	X9526	103.00
Beds		
crib	X9133	2,888.00
mattress	X9134	62.50
bumper pads	X9135	112.50
top cover	<b>X9136</b>	344.00
youth bed	X9130	3,738.00
mattress	X9132	269.00
Blood Pressure Equipment		
economy kit	X9527	25.00
cuff with bladder	X9528	15.00

	Procedure	Maximum
Item Description	Code <u>Purchase</u>	Purchase Price
	ruchase	rnce
Bolster Chair-adaptive, including		
adjustable/swing-away armrests		
small	X9561	\$ 425.00
medium	X9562	432.00
Adolescent/large	X9563	438.00
complete including		
3 bolsters, 2 pr. sandals	X9564	619.00
Chair - Multi-Purpose, adaptive	X9505	65.00
Commode Chair/Potty Chair, adaptive		
small	X9142	332.00
large	X9143	369.00
adolescent	X9144	432.00
Commode Chair/Rolling		
Shower Chair, adaptive		
with large rear wheels	X9565	999.00
with swivel rear casters	X9566	9999.00 940.00
Corner Chair - adjustable, adaptive	X9567	413.00
Feeder Seat, adaptive		
small	X9530	120.00
medium	X9530 X9531	128.00
adolescent		170.00
Wedge to convert feeder	X9532	247.00
seat to floor sitter	X9533	
Floor Sitter, adaptive		
small	X9508	09.00
medium	X9508 X9509	<b>98</b> .00
large	X9509 X9510	110.00 125.00
with adjustable angle	X9568	125.00
Footwear, Orthopedic/Corrective		
Open toe shoes, straight or	X9570	
reverse last, pair	A7J/V	
small	X9571	
large	X9571 X9572	55.95
Dennis Brown Bar		58.95
	<b>X9573</b>	20.95

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	Procedure Code	Maximum Purchase
Item Description	Purchase	Price
Fillauer Bar	X9574	\$ 44.95
Depth Inlay Shoe (aka extra depth), pair	X9575	110.00
Orthotic Inserts, custom-molded (flexible		
semi-rigid, rigid), pair	X9576	
Custom molded shoes, pair	X9579	350.00
Lift on shoe, each,		
each 1/4 inch	X9577	10.00
each 1 inch	X9578	45.00
Freedom Stander-adjustable, adaptiv		
small	X9580	357.00
large	X9581	557.00
Gait Trainer-adjustable, adaptive		
small	X9582	688.00
medium	X9583	782.00
adolescent	X9584	875.00
large adolescent/intermediate	X9585	969.00
Head Support-Hensinger type		
unmounted, extra small	X9586	80.00
small	X9511	90.00
medium	X9512	100.00
large	X9587	110.00
mounted, extra small	X9588	105.00
small	X9513	115.00
medium	X9514	125.00
large	X9590	135.00
Heat Therapy		
control module	<b>X959</b> 1	765.00
disposable pad with click connector	X9592	15.00
reusable pad	X9593	155.00
Heel or Elbow Protector, each	E0191	
Helmet-protective		
soft shell	X9540	65.00
hard shell	X9541	90.00
with face bar	X9623	128.00
with face guard	X9624	175.00
super small/super large	X9625	190.00

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price
	<u>r urchasc</u>	<u>rnce</u>
chin guard	X9626	<b>\$</b> 36.00
face guard replacement (with hardware)	X9627	100.50
chin strap replacement	X9628	6.50
face bar replacement	X9630	65.50
Mobile Stander-adaptive, with body support system,		
small	X9594	994.00
medium	X9595	
adolescent	X9596	1,119.00
adolescent, large	X9597	1,744.00
•	<b>N939</b> 7	2,063.00
Orthoses - Custom		
Ankle-foot, solid/rigid, each foot each foot	X2001	450.00
articulated	X2002	675.00
floor reaction	X2003	660.00
Knee-Ankle-Foot, each leg	X2004	1,450.00
Peak Flowmeter	X9634	24.50
Pressure Pad - bedpad or mattress, reusable		
standard	X9501	20.00
heavy duty	X9502	32.00
Prone Board/Adaptive Stander, adjustable		
small	Voria	
medium	X9516	619.00
adolescent	X9635	669.00
adolescent, large	X9636	1,081.00
	X9637	1,194.00
Ratemeter - Digital readout of heart and respiratory rates	<b>X95</b> 17	1,087.00
respiratory rates		
Scales		
Baby-Portable home care 20 kg. x 50 grams or 36 lbs. x 1/4 lbs.	X9518	65.00
Balance beam, 16 kg. x 10 grams or 36 lbs. x 1/8 oz.	X9519	270.00
Mechanical, 15 kg. x 5 grams or 31 lbs. x 1/4 oz.	X9520	224.00

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>
Balance beam, 130 lbs. x 1 oz. or 65 kg.	1/0/00	• • • • • • •
x 20 grams with tray only	X9638	\$ 296.00
with seat only	X9640	354.00
Beam, dual reading 40 lbs. x ½ oz. and	X9641	310.00
17.5 kg. x .01 kg.		
Diaper, bowl type (aka 'Pee Wee')	X9543	197.50
Shower Chair - adjustable, adaptive		
small	X9642	413.00
medium	X9643	438.00
adolescent	X9644	463.00
adolescent/large	X9645	475.00
Side-Lying Board-adjustable		
small	X9535	232.00
trunk support block	X9536	46.90
medium	X9537	257.00
trunk support block	X9538	55.65
adolescent	X9646	344.00
trunk support block	X9647	71.90
Standing Frame - adjustable	X9648	707.00
Stethoscope	X9084	15.00
Supine Board-adjustable		
child	<b>X967</b> 1	1,232.00
adolescent	X9672	1,375.00
Thermometer-standard		
rectal or oral	X9673	2.50
digital	X9674	6.95
ear (instant)	X9675	80.00
Toddler Chair, adaptive		
small	X9676	129.00
medium	X9677	140.00
large	X9678	152.00

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>
Toddler Chair, adaptive with		
adjustable back		
small	X9680	<b>\$</b> 142.00
medium	X9681	153.00
large	X9682	164.00
Transfer Bench, padded	X9683	169.00
with commode seat, padded	X9684	206.00
Urinometer	X9522	8.00
Vest/Trunk Support		
(Whitworth type)		
Extra support, naugahyde		
small/medium	X9546	91.00
large	X9547	98.00
Lightweight, nylon cotton weave		
small/medium	X9548	84.00
large	X9549	89.00
Walkers		
Standard	X9237	83.00
folding	X9690	100.00
with wheels	X9238	140.00
adustable, with wheels and seat	X9222	275.00
wheeled, with seat	X9691	275.00
wheeled, with brakes	X9692	100.00
wheeled, with seat and brakes	X9692 X9693	110.00
large/extra wide/heavy duty	X9694	150.00
walker, posture control with wheels	X9220	225.00 211.00
Walker Accessories		
leg extensions (set of 4)	E0158	36.00
wheeled footpiece, pair	X9695	33.00
wheeled footpiece, swivel, pair	X9696	44.00
platform attachment, pediatric only	X9697	106.00
seat	X9698	50.00
Walker, unlisted (specify)	X9689	I/C

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price
Wedge, adaptive (by elevation) small base		
4 inch	X9550	\$ 91.50
6 inch	X9551	102.00
8 inch	X9552	113.40
10 inch	X9553	123.75
large base		
6 inch	X9554	143.50
8 inch	X9555	155.00
10 inch	X9556	169.50
12 inch	X9557	189.00
Wedge, abductor	X9560	46.80

#### <u>Rentals</u>

Item Description	Procedure Code <u>Purchase</u>	Maximum Rental <u>Price</u>
Beds		
Crib X8133	\$ 22.00	
Mattress	NC	NC
Bumper Pads	X8135	10.00
Top Cover	X8136	26.50
Youth Bed	X8130	287.50
Mattress	X8132	21.00
Breast Pump, electric with accessories	X8125	I/C
Feeder Seat, adaptive adolescent	X8532	19.00
Heat Therapy Control Module	X8591	59.00
Reusable Pad	X8593	12.00

NOTE: Suction Equipment, Catheters, and Accessories are listed as Durable Medical Equipment in the basic Approved List of Items.

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#### <u>Supplies</u>

Item Description	Procedure <u>Code</u>	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum <u>Units</u>
Gloves, Non-Sterile all sizes	X4646	\$ 12.81	box of 100	5
Gloves, Sterile all sizes	X4547	\$ 38.07	box of 100	5
Pressure Pad, water-filled	X1770	\$168.25	box of 10	1
Tubing	X1771	93.55	box of 2	1
Sodium Chloride 0.9% Solution				
500 ml. bottle	X1805	6.70	each	12
1000 ml. bottle	X1806	7. <b>8</b> 7	each	12
Solution normal saline or 0.9% sodium chlorid, 100 doses				
3 ml.	X9712	25.00	each	
5 ml.	<b>X9713</b>	32.50	each	1
Suction Catheter and Glove Set	X1774	2.10	each	100
Urine Reagent Test Strips, for up to 10 conditions ('Multistix' type)	X1807	84.38	pack of 100	4

## **Respiratory Medical Equipment and Accessories**

\* Note: These codes can also be used to bill for adults

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximum Monthly Rental <u>Charge</u>	Life <u>Expectency</u>
BiPap Ventilator Support System With Mask With Headgear	NC NC	NC NC	X8718 X8719	\$461.00 468.00	
BiPap Ventilator Accessories					

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Maximum Monthly Rental <u>Charge</u>	Life <u>Expectency</u>
Mask, replace- ment Headgear, re-	X9718	51.35	NC	NC	
placement	X9719	35.35	NC	NC	
Cannula, Nasal	A4615	.45	NC	NC	
Cannula, tubing 7 feet	g, X9702	.60	NC	NC	
Humidification Heater System (Cascade type) Humidification Ki	X9720 t,	780.00	X8720	\$60.00	
(aka Trach Vent or Heat/Mois- ture exchange	X9703	4.75	NC	NC	
Humidification Filter, each	X9704	2.30	NC	NC	
Manometer	X9721	42.00	NC	NC	
Oxygen Analyzer	X9708	240.00	X8708	\$ 18.50	
Pulse Oximeter With Recorder	NC	NC	X8709	500.00 16.00 daily rate	
Multi-use probe (aka Sensor, Transducer)	NC	NC	X8728	13.00	

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	Procedure Code <u>Rental</u>	Monthly Rental <u>Charge</u>	Life <u>Expectency</u>
Respirator Support	t				
System - Ventilator with accessory	NC	NC	X8094	520.00	
power source an Humidity system appropriate circuits (includi tubing, connec- tors, adaptors, thermal indicato and secondary la pressure alarm	n, ng pr)				
Respirometer	NC	NC	X8096	35.00	
Resusciator, manua	I NC	NC	X8711	13.50	

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## Supplies - Model Waiver Recipients

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		Price		
	Procedure	Per	Pricing	Maximum
Item Description	<u>Co'le</u>	<u>Unit</u>	<u>Unit</u>	<u>Units</u>
Alcohol Wipes/Prep Pads	4245	<b>\$</b> 2.48	box of 200	24
Bandages-2ply, 131" x 3" width				
non-sterile	X1711	10.88	pack of 12	24
sterile	X1712	16.73	pack of 12	24
Bentadine or Iodine Swabs/Wipes	<b>\4246</b>	4.27	pint	24
Bentadine or Iodine Swabs/Wipes	A4247	6.00	box of 25	24
Cotton-Tipped Wooden Applicators Sterile	s, X1748	7.13	box of 100	24
Disinfectant-"Control III"				
8 ounces	X1725	10.00	each	24
16 ounces	X1726	15.00	each	24
gallon	X1727	31.00	each	24
Dressing, Change Kit for central venous catheter with	X1728	4.63	each	90
transparent dressing	X1729	6.44	each	90
Dressing, Control Gel Formula- Sterile ('DuoDerm' type)				
4" x 4"	X1713	7.65	each	60
6" x 6"	X1714	14. <b>63</b>	each	60
Extra thin 4" x 4"	X1715	5.30	each	60
Dressing, Fleible, 'Hydro-active' sterile ('DuoDerm' type)				
4" x 4"	X1716	7.65	each	60
8" x 8"	X1717	24.50	each	60
Dressing, Surgical 3" x 8", 3 strips per envelope	X1718	97.43	each	15
3" x 6", 1 strip per envelope	X1720	84.75	each	1
Dressing, transparent				
2" x 3" (approx. size)	X1722	.92	each	100
4" x 5" (approx. size)	X1723	2.93	each	100
5" x 7"	X1724	5.80	each	100

		Price		
Item Description	Procedure <u>Code</u>	Per Unit	Pricing	Maximum
	0000	<u>Unit</u>	<u>Unit</u>	<u>Units</u>
6" x 8"	X1721	<b>\$</b> 7.46	each	100
Foam Pads, Self-adhering				
7/16" x 7 7/8" x 11 3/4"	X1730	40.50	pack of 10	2
1" x 7 7/8" x 11 3/4"	X1731	29.00	pack of 5	3 3
Germicide - "Solution II"				
8 ounces	X1735	7.64	each	
16 ounces	X1736	1.29	each	24 24
Gloves, Non-sterile				
Copolymer, all sizes	X1740	12.00	1 0.000	
Latex, all sizes	X1740 X1741	12.00	box of 100	10
Vinyl, all sizes	X1741 X1742	16.00	box of 100	10
• • •	A1/ <del>7</del> 2	10.43	box of 100	10
Gloves, Sterile				
Vinyl, all sizes	X1743	32.63	box of 100	10
Latex, all sizes	X1744	43.50	box of 100	10 10
				10
Lemon Glycerin Swabs	X1737	6.00	box of 25	24
Lubricating Jelly 4.25-ounce	X1738	0.16		
	A1750	2.15	each	12
Pads, Gauze-Sterile, 12 ply				
2" x 2"	X1732	16.32	peak of 100	10
3" x 3"	X1733	19.49	pack of 100 pack of 100	12
4" x 4"	X1734	32.16	pack of 100	12 12
			pack of 100	12
Skin Creams				
up to 2 ounces	X1762	7. <del>9</del> 4	each	12
up to 5 ounces	X1763	10.88	each	12
up to 9 ounces	X1764	13. <b>49</b>	each	12
Skin Paste				
2.5 ounce tube	X1765	10.79	1	
6 ounce	X1766	17.55	each each	12
		17.00	each	12
Sponges-Drain and I.V.,				
Sterile, fenestrated				
2" x 2", 6 pły	X1758	15. <b>68</b>	pack of 70	3
4" x 4", 6 ply	X1750	19.43	pack of 70	3

Item Description	Procedure <u>Code</u>	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum <u>Units</u>
Sponges-Dressing, Sterile				
4" x 3"	X1756	\$ 5.93	pack of 50	2
4" x 4"	X1757	6.89	pack of 50	3
		0.07	pack of 50	3
Sponges-Dressing, Sterile, 2's, 4" x 4" 6 ply	X1751	3.43	pack of 50	3
Sponges-Gauze covered, non- sterile				
3" x 3"	X1753	6.14	pack of 100	3
4" x 4"	X1754	10.94	pack of 100	3
				-
Sponges-Gauze, Sterile, 2's				
2" x 2" 8-ply	X1759	5.54	pack of 100	12
3" x 3" 12-ply	X1760	6.89	pack of 80	12
4" x 4" 12-ply	X1761	6.41	pack of 50	12
4" x 4" 8 ply	X1752	9.74	pack of 100	3
Sponges-Soft net facing, non- sterile 4" x 4"	X1755	9.89	box of 100	
Sterile Water				
250-500 ml. bottle	X1745	6.42	each	12
1000 ml. bottle	X1746	7.49	each	12
1500 ml. bottle	X1747	10.27	each	12
			ULUM	14
Tape-Paper				
1/2" width x 10 yards	X1783	.50	each	12
1" width x 10 yards	X1784	1.00	each	12
2" width x 10 yards	X1785	2.00	each	12
Tape-Plastic, clear, perforated				
1/2" width x 10 yards	X1780	1.11	each	12
2" width x 10 yards	X1781	2.21	each	12
3" width x 10 yards	X1788	4.42	each	12
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4.97

each

each

each

12

12

12

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X1786

X1787

X1788

Tape-Multi-Purpose, silk 1" width x 10 yards 2" width x 10 yards 3" width x 10 yards

Item Description	Procedure <u>Code</u>	Price Per <u>Unit</u>	Pricing <u>Unit</u>	Maximum <u>Units</u>
Tape-Elastic				
1" x 10 yards	<b>X</b> 1777	\$ 1.75	each	12
2" x 10 yards	X1778	3.49	each	12
Tooth Cleaning Applicators, disposable	X1710	4.58	pack of 20	24
Wrap-Elastic, non-adhesive, self-				
adherent, 5 yards				
1 inch	X1790	1.77	each	12
2 inches	X1791	3.14	each	12
3 inch	X1792	3.98	each	12

## USED MEDICAL EQUIPMENT

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>
Beds, Hospital		
Hospital Bed, fixed height, without	X7100	\$376.50
mattress, without side rails Hospital Bed, fixed height, with	X7101	432.75
mattress without side rails Hospital Bed, fixed height, with side	X7102	561.00
rails, with mattress Hospital Bed, fixed height, with side rails without mattress	X7103	504.75
Hospital Bed, variable height, hi-lo	X7104	600.00
without mattress, without side rails Hospital Bed, variable height, hi-lo with mattress, without side rails	X7105	705.00
Hospital Bed, variable height, hi-lo with side rails, with mattress	X7106	942.75
Hospital Bed, variable height, hi-lo, with with side rails, without mattress	X7107	837.75
Hospital Bed, semi-electric (head and foot adjustments), without mattress, without side rails	X7108	,056.75
Hospital Bed, semi-electric (head and foot adjustments), with mattress, without side rails	X7109	,161.75
Hospital Bed, semi-electric (head and foot adjustments), with mattress, with side rails	X7110	1,274.25
Hospital Bed, semi-electric (head and foot adjustments), with side rails, without mattress	<b>X7</b> 1	1,169.25
Hospital Bed, total electric (head, foot and height adjustments), without mattress, without side rails	X7112	,372.50
Hospital Bed, total electric (head, foot and height adjustments), with mattress, without side rails	X7113	1,477.50
Hospital Bed, total electric (head, foot and height adjustments), with mattress, with side rails	X7114	1,642.50
Hospital Bed, total electric (head, foot and height adjustments), without mattress, with side rails	X7115	1,537.50
Unlisted Hospital Beds	X7116	I/C

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~	Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price
	Commodes		
	Commode Chair, stationary, with fixed arms	X7117	<b>\$</b> 63.75
	Commode Chair, stationary, with detachable arms	X7118	125.25
	Commode Chair, adjustable, with fixed arms	X7119	67.50
	Commode Chair, adjustable, with detachable arms	X7120	127.50
	Commode Chair, adjustable with attachment for pail or pan	X7121	123.00
	Commode Chair, mobile, with fixed arms	X7122	110.25
	Commode Chair, mobile, with detachable arms	X7123	168.75
	Commode Chair, drop arms	X7124	125.25
	Commode Chair, drop arms, with soft seat, and pail or pan	X7125	150.00
	Commode Chair, large/extra wide/heavy duty	X7126	140.25
	Unlisted Commode Chair	X7276	I/C
	Enteral and Parenteral Nutrition Equipment		
	Enteral Nutrition Infusion Pump, without alarm	X7127	526.50
	Enteral Nutrition Infusion Pump, with alarm	X7128	562.50
	Enteral Nutrition Infusion Pump, pediatric	<b>X7130</b>	787.50
	Parenteral Nutrition Infusion Pump, portable	<b>X7</b> 131	1,314.00
	Unlisted Nutrition Equipment (specify)	X7129	I/C
	Intravenous Medication Equipment		
	IV Pole	X7132	78.75
	Ambulatory Infusion Pump with administrative	X7133	2,842.50
	equipment, worn by patient (preauth required)		2,072.50
	Suction Equipment and Accessories		
	Suction Machine Stationary	X7134	175 50
	Suction Machine AC/DC (electric/battery)	X7134 X7135	175.50 <b>780.00</b>
	Suction Pump, home model, portable	X7136	
	Suction Machine, thermal drainage, intermittent	X7130 X7137	450.00 1,125.00
	Transformer/Rectifier for portable suction machine, home model	X7138	116.25
	Unlisted Suction Equipment/Accessories (specify)	X7139	I/C

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase Price	C
Traction Equipment			
Traction Frame, attached to headboard, simple cervical traction	X7274	\$ 22.50	
Traction, complete, Buck	X7140	46.88	
Traction, plevic, complete	X7144	67.50	
Traction Stand, Buck	X7145	30.00	
Traction Stand for hospital bed	X7146	32.25	
Unlisted traction equipment (specify)	X7149	I/C	
Walkers			
Walker, rigid (pick up), adjustable or fixed height	¥7147		
Walker, folding (pick up), adjustable or fixed	X7147	46.88	
height	X7148	67.50	
Walker, wheeled, without seat	X7150	77.25	
Walker, standard, without wheels, with wrist platform	X7151	114.00	
Walker, platform attachment for	X7152	63.00	
Walker, adjustable height, with wheels	X7153	99.00	
Walker, adjustable height and width, with wheels	X7154	138.75	
Walker, folding, pediatric	X7155	75.00	
Walker, wheeled, with seat	X7156	75.00 <sup>-</sup>	
Walker, wheeled with brakes	X7157	82.50	
Walker, wheeled with seat and brakes	X7158	112.50	
Walker, large/extra wide/heavy duty	X7160	168.75	
Walker, pediatric, standard	X7161	62.25	
Walker, pediatric, with wheels	X7162	105.00	
Walker, pediatric, posture control with wheels	X7163	158.25	
Walker, pediatric, adjustable height and width with wheels	X7164	206.25	
Walkane or hemi-walker	X7165	50.25	
Unlisted walker (specify)	X7159	I/C	
Wheelchairs			
Standard Wheelchair, fixed full length arms, fixed or swing-away detachable footrests	X7166	443.00	

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>
Standard Wheelchair, detachable arms (desk or full length) swing-away detachable footrests	X7167	\$594.00
Standard Wheelchair, fixed full length arms, elevating legrests	X7168	504.75
Standard Wheelchair, detachable arms (desk or full length), elevating legrests	X7170	656.25
Fully-Reclining Wheelchair - detachable arms (desk or full-length) swing-away detachable elevating legrests	<b>X717</b> 1	729.00
Full-Reclining Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7172	
Lightweight Wheelchair, detachable arms (desk or full length), swing-away detachable elevating legrests	X7173	660.00
Lightweight Wheelchair, fixed full length arms, swing away detachable footrests	X7174	564.00
Lightweight Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7175	
Lightweight Wheelchair, fixed full length arms, swing-away detachable elevating legrests	X7176	702.75
High Strength Lightweight Wheelchair, detachable arms (desk or full length), swing-away detachable elevating legrests	<b>X</b> 7177	778.50
High Strength Lightweight Wheelchair, detachable arms (desk or full length), swing-away detachable footrest	X7178	743.35
Wide Heavy Duty Wheelchair, detachable anns (desk or full length), elevating legrests	X7180	606.75
Wide Heavy Duty Wheelchair, fixed full length arms, swing-away detachable footrest	X7181	529.50
Wide Heavy Duty Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7182	643.50
Wide Heavy Duty Wheelchair, fixed full length arms, elevating legs	X7183	573.75
Wheelchair child's with adjustable height, removable full or desk length arms, swing-away detachable footrests	X7184	

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Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>	C
Wheelchair, child's with adjustable height, removable full or desk length arms, swing-away detachable elevating legrests	X7185	\$599.25	
Wheelchair, child's reclining, with adjustable height, removable full or desk length arms, swing-away detachable footrests	X7186	816.75	
Wheelchair, child's reclining, with adjustable height, removable full or desk length arms, swing-away detachable elevating legrests	X7187	857.25	
Hemi-Wheelchair, fixed full length arms, swing- away detachable elevating legrests	X7188	629.25	
Hemi-Wheelchair, detachable arms (desk or full length), swing-away detachable elevating legrests	X7190	690.00	
Hemi-Wheelchair, fixed full length arms, swing- away detachable footrests	X7191	422.25	
Hemi-Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7192	667.50	
Amputee Wheelchair, fixed full length arms, swing-away detachable elevating legrests	X7193	504.75	~
Amputee Wheelchair, fixed full length arms, without footrests or legrests	X7194	429.75	
Amputee Wheelchair, detachable arms (desk or full length), without footrests or legrests	X7195	450.00	
Amputee Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7196	594.25	
Amputee Wheelchair, detahable arms (desk or full length), swing-away detachable elevating legrests	X7197	866.25	
Amputee Wheelchair, fixed full length arms, swing- away detachable footrests	X7198	667.50	
Motorized Wheelchair, detachable arms (desk or full length), swing-away detachable footrests	X7200	2,232.00	
Motorized Wheelchair, detachable arms (desk or full length), swing-away elevating legrests	X7201	2,373.75	
Motorized Wheelchair, detachable adjustable height arms, swing-away detachable footrests with heel loops	X7202	4,866.75	
Motorized Wheelchair, detachable adjustable height arms, swing-away, detachable elevating legrests	X7203	5,021.25	

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	Procedure	Maximum		
Item Description	Code	Purchase		
Item Description	Purchase	Price		
Power-Operated Vehicle, 3 or 4 wheel, non-highway (indicate brand name and model number)	X7204	\$1,424.25		
Power-Operated Vehicle, 3 or 4 wheel, non-high vay, other (specify on preauth)	X7179	I/C		
Pediatric Transporter (stroller, buggy, etc.) (Indicate brand name and model number)	X7205	315.00		
Pediatric Transporter, etc., other (specify on preauth)	X7189	I/C		
Miscellaneous				
Patient Lift, hydraulic, with seat or sling	X7209	538.50		
Sling or Seat, patient lift canvas or nylon	X7206	55.50		
Trapeze Bar (a/k/a Patient Helper), attached to bed, with grab bar	X7207	129.00		
Trapeze Bar, free stading, complete with grab bar	X7208	209.25		
Durable Medical Equipment, not otherwise classified (specify)	X7199	I/C		

# **USED MEDICAL EQUIPMENT - PEDIATRIC**

#### (UNDER AGE 21)

## **Durable Medical Equipment**

Item Description	Procedure Code <u>Purchase</u>	Maximum Purchase <u>Price</u>
Activity Chair, adaptive		
low-back	X7230	\$314.25
Activity Chair, adaptive		
high-back	X7231	370.50
Beds		
crib	X7232	2,166.00
youth bed	X7233	2,803.50
Bolster Chair-adaptive, including		
adjustable/swing-away armrests		
small	X7234	318.75
medium A delessant ()	X7235	324.00
Adolescent/large	X7236	328.00
complete including		
3 bolsters, 2 pr sandals	X7237	464.25
Commode Chair/Potty Chair, adaptive		
small	X7238	249.00
large	X7239	276.75
adolescent	X7240	324.00
Commode Chair/Rolling		
Shower Chair, adaptive		
with large rear wheels	X7241	749.25
with swivel rear casters	X7242	705.00
Corner Chair - adjustable, adaptive	X7243	309.75
Freedom Stander-adjustable, adaptive		
small	X7244	267.75
large	X7275	417.75

	Procedure Code	Maximum Purchase
Item Description	Purchase	Price
Gait Trainer-adjustable, adaptive		
small	X7245	\$516.00
medium	X7246	586.50
adolescent	X7247	656.25
large adolescent/intermediate	X7248	726.75
Mobile Stander-adaptive, with body support syst	tem.	
small	X7249	745.50
medium	X7250	839.25
adolescent	X7251	1,308.00
adolescent, large	X7252	1,547.25
Prone Board/Adaptive Stander, adjustable		
small	X7253	464.25
medium	X7254	501.75
	A14J7	501.75
adolescent	X7255	810.75
adolescent, large	X7256	895.50
Shower Chair - adjustable, adaptive		
small	X7257	309.75
medium	X7258	328.50
adolescent	X7259	347.25
adolescent/large	X7360	
•	A/300	356.25
Standing Frame - adjustable	X7261	530.25
Supine Board - adjustable		
child	X7262	924.00
adolescent	X7263	1,031.25
Walkers		
Standard	X7264	62.25
folding	X7265	75.00
with wheels	X7266	105.00
adjustable, with wheels and seat	X7267	206.25
wheeled, with seat	X7268	75.00
wheeled, with brakes	X7270	82.50
wheeled, with seat and brakes	X7271	112.50
large/extra wide/heavy duty	X7272	168.75
walker, posture control with wheels	X7273	158.25
Walker, unlisted (specify)	X7269	I/C