

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
A4206		Syringe With Needle, Sterile 1cc Or Less, Each	\$ 0.27
A4207		Syringe With Needle, Sterile 2cc, Each	\$ 0.31
A4208		Syringe With Needle, Sterile 3cc, Each	\$ 0.30
A4209		Syringe With Needle, Sterile 5cc Or Greater, Each	\$ 0.30
A4213		Syringe, Sterile, 20 cc Or Greater, Each	\$ 4.32
A4215		Needle, Sterile, Any Size Each	\$ 0.24
A4216		Sterile Water, Saline And/Or Dextrose Diluent/Flush, 10 MI	\$ 0.38
A4217		Sterile Water/Saline, 500 MI	\$ 2.82
A4221		Supplies For Maintenance Of Drug Infusion Catheter, Per Week (L	\$ 15.77
A4222		Infusion Supplies For External Drug Infusion Pump, Per Cassette C	\$ 29.90
A4223		Infusion Supplies Not Used With External Infusion Pump, Per Cass	\$ 21.51
A4224		Supply insulin inf cath/wk	\$ 15.77
A4225		Sup/ext insulin inf pump syr	\$ 2.11
A4230		Infusion Set For External Insulin Pump, Non Needle Cannula Type	\$ 14.00
A4231		Infusion Set For External Insulin Pump, Needle Type	\$ 14.00
A4232		Syringe With Needle For External Insulin Pump, Sterile, 3cc	\$ 2.62
A4233		Replacement Battery, Alkaline 9 (Other Than T Cell) For Use With	\$ 0.41
A4234		Replacement Battery, Alkaline, J Cell, For Use With Medically Nec	\$ 1.89
A4235		Replacement Battery, Lithium, For Use With Medically Necessary	\$ 0.80
A4236		Replacement Battery, Silver Oxide, For Use With Medically Neces	\$ 0.93
A4244		Alcohol Or Peroxide, Per Pint	\$ 0.94
A4245		Alcohol Wipes, Per Box	\$ 1.00
A4246		Betadine Or Phisohex Solution, Per Pint	\$ 11.43
A4247		Betadine Or Iodine Swabs/Wipes, Per Box	\$ 11.00
A4310		Insertion Tray Without Drainage Bag And Without Catheter (Acces	\$ 6.95
A4311		Insertion Tray Without Drainage Bag With Indwelling Catheter, Fo	\$ 13.34
A4312		Insertion Tray Without Drainage Bag With Indwelling Catheter, Fo	\$ 16.24
A4313		Insertion Tray Without Drainage Bag With Indwelling Catheter, Fo	\$ 16.68
A4314		Insertion Tray With Drainage Bag With Indwelling Catheter, Foley	\$ 22.77
A4315		Insertion Tray With Drainage Bag With Indwelling Catheter, Foley	\$ 23.75
A4316		Insertion Tray With Drainage Bag With Indwelling Catheter, Foley	\$ 25.57
A4320		Irrigation Tray With Bulb Or Piston Syringe, Any Purpose	\$ 4.29
A4322		Irrigation Syringe, Bulb Or Piston, Each	\$ 2.62
A4326		Male External Catheter With Integral Collection Chamber, Any Ty	\$ 9.34
A4327		Female External Urinary Collection Device; Meatal Cup, Each	\$ 38.06
A4328		Female External Urinary Collection Device; Pouch, Each	\$ 9.12
A4330		Perianal Fecal Collection Pouch With Adhesive, Each	\$ 5.48
A4331		Extension Drainage Tubing, Any Type, Any Length, With Connect	\$ 2.86
A4332		Lubricant, Individual Sterile Packet, Each	\$ 0.10
A4333		Urinary Catheter Anchoring Device, Adhesive Skin Attachment, Ea	\$ 1.99
A4334		Urinary Catheter Anchoring Device, Leg Strap, Each	\$ 4.43
A4338		Indwelling Catheter; Foley Type, Two-Way Latex With Coating (T	\$ 11.04

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A4340		Indwelling Catheter; Specialty Type, Eg; Coude, Mushroom, Wing,	\$ 24.30
A4344		Indwelling Catheter, Foley Type, Two-Way, All Silicone, Each	\$ 14.42
A4346		Indwelling Catheter; Foley Type, Three Way For Continuous Irriga	\$ 17.63
A4349		Male External Catheter, With Or Without Adhesive, Disposable, Ea	\$ 1.82
A4351		Intermittent Urinary Catheter; Straight Tip, With Or Without Coati	\$ 1.54
A4352		Intermittent Urinary Catheter; Coude (Curved) Tip, With Or Witho	\$ 4.92
A4353		Intermittent Urinary Catheter, With Insertion Supplies	\$ 6.30
A4354		Insertion Tray With Drainage Bag But Without Catheter	\$ 10.62
A4355		Irrigation Tubing Set For Continuous Bladder Irrigation Through A	\$ 7.91
A4356		External Urethral Clamp Or Compression Device (Not To Be Used	\$ 41.08
A4357		Bedside Drainage Bag, Day Or Night, With Or Without Anti-Reflu	\$ 8.74
A4358		Urinary Drainage Bag, Leg Or Abdomen, Vinyl, With Or Without T	\$ 5.97
A4361		Ostomy Faceplate, Each	\$ 16.54
A4362		Skin Barrier; Solid, 4 X 4 Or Equivalent; Each	\$ 3.06
A4363		Ostomy Clamp, Replacement	\$ 2.14
A4364		Adhesive, Liquid Or Equal, Any Type, Per Oz	\$ 2.25
A4366		Ostomy Vent, Any Type, Each	\$ 1.17
A4367		Ostomy Belt, Each	\$ 6.62
A4368		Ostomy Filter, Any Type, Each	\$ 0.22
A4369		Ostomy Skin Barrier, Liquid (Spray, Brush, Etc), Per Oz	\$ 2.18
A4371		Ostomy Skin Barrier, Powder, Per Oz	\$ 3.28
A4372		Ostomy Skin Barrier, Solid 4 X 4 Or Equivalent, Standard Wear, W	\$ 3.78
A4373		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion),	\$ 5.65
A4375		Ostomy Pouch, Drainable, With Faceplate Attached, Plastic, Each	\$ 15.46
A4376		Ostomy Pouch, Drainable, With Faceplate Attached, Rubber, Each	\$ 42.85
A4377		Ostomy Pouch, Drainable, For Use On Faceplate, Plastic, Each	\$ 3.86
A4378		Ostomy Pouch, Drainable, For Use On Faceplate, Rubber, Each	\$ 27.68
A4379		Ostomy Pouch, Urinary, With Faceplate Attached, Plastic, Each	\$ 13.52
A4380		Ostomy Pouch, Urinary, With Faceplate Attached, Rubber, Each	\$ 33.61
A4381		Ostomy Pouch, Urinary, For Use On Faceplate, Plastic, Each	\$ 4.17
A4382		Ostomy Pouch, Urinary, For Use On Faceplate, Heavy Plastic, Eac	\$ 22.16
A4383		Ostomy Pouch, Urinary, For Use On Faceplate, Rubber, Each	\$ 25.38
A4384		Ostomy Faceplate Equivalent, Silicone Ring, Each	\$ 8.66
A4385		Ostomy Skin Barrier, Solid 4X4 Or Equivalent, Extended Wear, W	\$ 4.59
A4387		Ostomy Pouch, Closed, With Barrier Attached, With Built-In Conv	\$ 2.02
A4388		Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, (\$ 3.93
A4389		Ostomy Pouch, Drainable, With Barrier Attached, With Built-In Co	\$ 5.60
A4390		Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, V	\$ 8.65
A4391		Ostomy Pouch, Urinary, With Extended Wear Barrier Attached (1 I	\$ 6.37
A4392		Ostomy Pouch, Urinary, With Standard Wear Barrier Attached, Wit	\$ 7.36
A4393		Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, Wit	\$ 8.14
A4394		Ostomy Deodorant For Use In Ostomy Pouch, Liquid, Per Fluid Ou	\$ 2.33

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A4395		Ostomy Deodorant For Use In Ostomy Pouch, Solid, Per Tablet	\$ 0.04
A4396		Ostomy Belt With Peristomal Hernia Support	\$ 36.45
A4397		Irrigation Supply; Sleeve, Each	\$ 4.31
A4398		Ostomy Irrigation Supply; Bag, Each	\$ 12.45
A4399		Ostomy Irrigation Supply; Cone/Catheter, Including Brush	\$ 9.38
A4400		Ostomy Irrigation Set	\$ 44.00
A4402		Lubricant, Per Ounce	\$ 1.44
A4404		Ostomy Ring, Each	\$ 1.39
A4405		Ostomy Skin Barrier, Non-Pectin Based, Paste, Per Ounce	\$ 3.07
A4406		Ostomy Skin Barrier, Pectin-Based, Paste, Per Ounce	\$ 5.15
A4407		Ostomy Skin Barrier, With Flange (Solid, Flexible, Or Accordion),	\$ 7.89
A4408		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion),	\$ 8.89
A4409		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion),	\$ 5.60
A4410		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion),	\$ 8.14
A4411		Ostomy Skin Barrier, Solid 4 X 4 Or Equivalent, Extended Wear, V	\$ 4.59
A4412		Ostomy Pouch, Drainable, High Output, For Use On A Barrier With	\$ 2.43
A4413		Ostomy Pouch, Drainable, High Output, For Use On A Barrier With	\$ 4.96
A4414		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), V	\$ 4.43
A4415		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion),	\$ 5.39
A4416		Ostomy Pouch, Closed, With Barrier Attached, With Filter (1 Piece	\$ 2.48
A4417		Ostomy Pouch, Closed, With Barrier Attached, With Built-In Conv	\$ 3.35
A4418		Ostomy Pouch, Closed; Without Barrier Attached, With Filter (1 Pi	\$ 1.63
A4419		Ostomy Pouch, Closed; For Use On Barrier With Non-Locking Fla	\$ 1.56
A4422		Ostomy Absorbent Material (Sheet/Pad/Crystal Packet) For Use In	\$ 0.10
A4423		Ostomy Pouch, Closed; For Use On Barrier With Locking Flange, V	\$ 1.67
A4424		Ostomy Pouch, Drainable, With Barrier Attached, With Filter (1 Pi	\$ 4.29
A4425		Ostomy Pouch, Drainable; For Use On Barrier With Non-Locking I	\$ 3.22
A4426		Ostomy Pouch, Drainable; For Use On Barrier With Locking Flang	\$ 2.46
A4427		Ostomy Pouch, Drainable; For Use On Barrier With Locking Flang	\$ 2.50
A4428		Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, W	\$ 5.86
A4429		Ostomy Pouch, Urinary, With Barrier Attached, With Built-In Conv	\$ 7.42
A4430		Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, W	\$ 7.66
A4431		Ostomy Pouch, Urinary; With Barrier Attached, With Faucet-Type	\$ 5.60
A4432		Ostomy Pouch, Urinary; For Use On Barrier With Non-Locking Fla	\$ 3.23
A4433		Ostomy Pouch, Urinary; For Use On Barrier With Locking Flange (\$ 3.02
A4434		Ostomy Pouch, Urinary; For Use On Barrier With Locking Flange,	\$ 3.38
A4435		1Pc Ost Pch Drain Hgh Output	\$ 5.19
A4450		Tape, Non-Waterproof, Per 18 Square Inches	\$ 0.07
A4452		Tape, Waterproof, Per 18 Square Inches	\$ 0.32
A4455		Adhesive Remover Or Solvent (For Tape, Cement Or Other Adhesi	\$ 1.29
A4456		Adhesive remover, wipes	\$ 0.22
A4461		Surgical Dressing Holder, Non-Reusable, Each	\$ 2.97

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HCPCS	Mod	Description	WV Medicaid
A4463		Surgical Dressing Holder, Reusable, Each	\$ 11.98
A4481		Tracheostoma Filter, Any Type, Any Size, Each	\$ 0.33
A4490		Surgical Stockings Above Knee Length, Each	\$ 29.70
A4495		Surgical Stockings Thigh Length, Each	\$ 29.70
A4500		Surgical Stockings Below Knee Length, Each	\$ 31.50
A4510		Surgical Stockings Full Length, Each	\$ 84.15
A4520		Incontinence Garment, Any Type, (E.G. Brief, Diaper), Each	\$ 0.75
A4550		Surgical Tray	\$ 8.00
A4554		Disposable Underpads, All Sizes, (E.G., Chux'S)	\$ 0.31
A4556		Electrodes, (E.G., Apnea Monitor), Per Pair	\$ 9.30
A4557		Lead Wires, (E.G., Apnea Monitor), Per Pair	\$ 8.78
A4561		Pessary, Rubber, Any Type	\$ 17.96
A4562		Pessary, Non Rubber, Any Type	\$ 44.73
A4565		Slings	\$ 6.93
A4570		Splint	\$ 67.50
A4595		Electrical Stimulator Supplies, 2 Lead, Per Month, (E.G. Tens, Nm	\$ 8.77
A4601		Lithium Ion Battery For Non-Prosthetic Use, Replacement	\$ 26.00
A4604		Tubing With Integrated Hearing Element For Use With Positive Ai	\$ 34.43
A4605		Tracheal Suction Catheter, Closed System, Each	\$ 14.77
A4606		Oxygen Probe For Use With Oximeter Device, Replacement	\$ 100.00
A4614		Peak Expiratory Flow Rate Meter, Hand Held	\$ 21.41
A4619		Face Tent	\$ 1.56
A4623		Tracheostomy, Inner Cannula	\$ 5.01
A4624		Tracheal Suction Catheter, Any Type Other Than Closed System, E	\$ 2.37
A4625		Tracheostomy Care Kit For New Tracheostomy	\$ 6.23
A4627		Spacer, Bag Or Reservoir, With Or Without Mask, For Use With M	\$ 20.61
A4628		Oropharyngeal Suction Catheter, Each	\$ 3.37
A4629		Tracheostomy Care Kit For Established Tracheostomy	\$ 4.18
A4635		Underarm Pad, Crutch, Replacement, Each	\$ 4.61
A4636		Replacement, Handgrip, Cane, Crutch, Or Walker, Each	\$ 2.41
A4637		Replacement, Tip, Cane, Crutch, Walker, Each.	\$ 1.34
A4640		Replacement Pad For Use With Medically Necessary Alternating P	\$ 45.27
A4927		Gloves, Non-Sterile, Per 100	\$ 42.71
A5051		Ostomy Pouch, Closed; With Barrier Attached (1Piece), Each	\$ 1.86
A5052		Ostomy Pouch, Closed; Without Barrier Attached (1 Piece), Each	\$ 1.34
A5053		Ostomy Pouch, Closed; For Use On Faceplate, Each	\$ 1.56
A5054		Ostomy Pouch, Closed; For Use On Barrier With Flange (2 Piece),	\$ 1.62
A5055		Stoma Cap	\$ 1.19
A5056		1 Pc Ost Pouch W Filter	\$ 4.21
A5057		1 Pc Ost Pou W Built-In Conv	\$ 8.65
A5061		Ostomy Pouch, Drainable; With Barrier Attached, (1 Piece), Each	\$ 3.18
A5062		Ostomy Pouch, Drainable; Without Barrier Attached (1 Piece), Eac	\$ 1.88

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HCPCS	Mod	Description	WV Medicaid
A5063		Ostomy Pouch, Drainable; For Use On Barrier With Flange (2 Piece)	\$ 2.43
A5071		Ostomy Pouch, Urinary; With Barrier Attached (1 Piece), Each	\$ 5.41
A5072		Ostomy Pouch, Urinary; Without Barrier Attached (1 Piece), Each	\$ 3.18
A5073		Ostomy Pouch, Urinary; For Use On Barrier With Flange (2 Piece),	\$ 2.82
A5081		Continent Device; Plug For Continent Stoma	\$ 2.98
A5082		Continent Device; Catheter For Continent Stoma	\$ 10.71
A5083		Continent Device, Stoma Absorptive Cover For Continent Stoma	\$ 0.58
A5093		Ostomy Accessory; Convex Insert	\$ 1.50
A5102		Bedside Drainage Bottle With Or Without Tubing, Rigid Or Expan	\$ 20.18
A5105		Urinary Suspensory With Leg Bag, With Or Without Tube, Each	\$ 36.71
A5112		Urinary Leg Bag; Latex	\$ 28.37
A5113		Leg Strap; Latex, Replacement Only, Per Set	\$ 3.61
A5114		Leg Strap; Foam Or Fabric, Replacement Only, Per Set	\$ 6.86
A5120		Skin Barrier, Wipes Or Swabs, Each	\$ 0.20
A5121		Skin Barrier; Solid, 6 X 6 Or Equivalent, Each	\$ 6.43
A5122		Skin Barrier; Solid, 8 X 8 Or Equivalent, Each	\$ 11.57
A5126		Adhesive Or Non-Adhesive; Disk Or Foam Pad	\$ 1.01
A5131		Appliance Cleaner, Incontinence And Ostomy Appliances, Per 16 C	\$ 12.13
A5500		For Diabetics Only, Fitting (Including Follow Up), Custom Prepara	\$ 57.25
A5501		For Diabetics Only, Fitting (Including Follow Up), Custom Prepara	\$ 171.72
A5503		For Diabetics Only, Modification (Including Fitting) Of Off-The-Sl	\$ 28.22
A5504		For Diabetics Only, Modification (Including Fitting) Of Off-The-Sl	\$ 28.22
A5505		For Diabetics Only, Modification (Including Fitting) Of Off-The-Sl	\$ 28.22
A5506		For Diabetics Only, Modification (Including Fitting) Of Off-The-Sl	\$ 28.22
A5507		For Diabetics Only, Not Otherwise Specified Modification (Includi	\$ 28.22
A5512		For Diabetics Only, Multiple Density Insert, DirectForm, Molded T	\$ 23.35
A5513		For Diabetics Only, Multiple Density Insert, Custom Molded From	\$ 34.85
A6154		Wound Pouch, Each	\$ 12.55
A6196		Alginate Or Other Fiber Gelling Dressing, Wound Cover, Pad Size	\$ 6.62
A6197		Alginate Or Other Fiber Gelling Dressing, Wound Cover, Pad Size	\$ 14.80
A6198		Alginate Or Other Fiber Gelling Dressing, Wound Cover, Pad Size	\$ 14.12
A6199		Alginate Or Other Fiber Gelling Dressing, Wound Filler, Per 6 Inch	\$ 4.76
A6203		Composite Dressing, Pad Size 16 Sq. In. Or Less, With Any Size A	\$ 3.03
A6204		Composite Dressing, Pad Size More Than 16 Sq. In. But Less Than	\$ 5.61
A6205		Composite Dressing, Pad Size More Than 48 Sq. In., With Any Siz	\$ 5.35
A6206		Contact Layer, 16 Sq. In. Or Less, Each Dressing	\$ 5.35
A6207		Contact Layer, More Than 16 Sq. In. But Less Than Or Equal To 48	\$ 6.61
A6208		Contact Layer, More Than 48 Sq. In., Each Dressing	\$ 6.30
A6209		Foam Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, Withou	\$ 6.73
A6210		Foam Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But L	\$ 17.94
A6211		Foam Dressing, Wound Cover, Pad Size More Than 48 Sq. In., With	\$ 26.45
A6212		Foam Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, With A	\$ 8.74

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HCPCS	Mod	Description	WV Medicaid
A6213		Foam Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 8.34
A6214		Foam Dressing, Wound Cover, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 9.26
A6216		Gauze, Non-Impregnated, Non-Sterile, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 0.04
A6217		Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 0.32
A6218		Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 0.54
A6219		Gauze, Non-Impregnated, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 0.86
A6220		Gauze, Non-Impregnated, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 2.33
A6221		Gauze, Non-Impregnated, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 1.93
A6222		Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 1.92
A6223		Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 2.18
A6224		Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 3.25
A6231		Gauze, Impregnated, Hydrogel, For Direct Wound Contact, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 4.21
A6232		Gauze, Impregnated, Hydrogel, For Direct Wound Contact, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 6.18
A6233		Gauze, Impregnated, Hydrogel For Direct Wound Contact, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 17.26
A6234		Hydrocolloid Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 5.89
A6235		Hydrocolloid Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 15.14
A6236		Hydrocolloid Dressing, Wound Cover, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 24.54
A6237		Hydrocolloid Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, Without Adhesive	\$ 7.13
A6238		Hydrocolloid Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., Without Adhesive	\$ 20.53
A6239		Hydrocolloid Dressing, Wound Cover, Pad Size More Than 48 Sq. In., Without Adhesive	\$ 15.84
A6240		Hydrocolloid Dressing, Wound Filler, Paste, Per Fluid Ounce	\$ 11.02
A6241		Hydrocolloid Dressing, Wound Filler, Dry Form, Per Gram	\$ 2.31
A6242		Hydrogel Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 5.46
A6243		Hydrogel Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 11.10
A6244		Hydrogel Dressing, Wound Cover, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 35.37
A6245		Hydrogel Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, Without Adhesive	\$ 6.54
A6246		Hydrogel Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., Without Adhesive	\$ 8.94
A6247		Hydrogel Dressing, Wound Cover, Pad Size More Than 48 Sq. In., Without Adhesive	\$ 21.41
A6248		Hydrogel Dressing, Wound Filler, Gel, Per Fluid Ounce	\$ 14.63
A6250		Skin Sealants, Protectants, Moisturizers, Ointments, Any Type, Any Size	\$ 15.00
A6251		Specialty Absorptive Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 1.79
A6252		Specialty Absorptive Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., With Any Type Of Adhesive	\$ 2.94
A6253		Specialty Absorptive Dressing, Wound Cover, Pad Size More Than 48 Sq. In., With Any Type Of Adhesive	\$ 5.70
A6254		Specialty Absorptive Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less, Without Adhesive	\$ 1.08
A6255		Specialty Absorptive Dressing, Wound Cover, Pad Size More Than 16 Sq. In. But Less Than 48 Sq. In., Without Adhesive	\$ 2.74
A6256		Specialty Absorptive Dressing, Wound Cover, Pad Size More Than 48 Sq. In., Without Adhesive	\$ 2.61
A6257		Transparent Film, 16 Sq. In. Or Less, Each Dressing	\$ 1.38
A6258		Transparent Film, More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Each Dressing	\$ 3.88
A6259		Transparent Film, More Than 48 Sq. In., Each Dressing	\$ 9.85
A6260		Wound Cleansers, Any Type, Any Size	\$ 18.00
A6266		Gauze, Impregnated, Other Than Water, Normal Saline, Or Zinc Paste, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 1.73
A6402		Gauze, Non-Impregnated, Sterile, Pad Size 16 Sq. In. Or Less, With Any Type Of Adhesive	\$ 0.10

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A6403		Gauze, Non-Impregnated, Sterile, Pad Size More Than 16 Sq. In. L	\$ 0.38
A6404		Gauze, Non-Impregnated, Sterile, Pad Size More Than 48 Sq. In., V	\$ 2.16
A6407		Packing Strips, Non-Impregnated, Up To 2 Inches In Width, Per Li	\$ 1.69
A6441		Padding Bandage, Non-Elastic, Non-Woven/Non- Knitted, Width C	\$ 0.62
A6442		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, W	\$ 0.14
A6443		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, W	\$ 0.25
A6444		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, W	\$ 0.50
A6445		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width	\$ 0.29
A6446		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width	\$ 0.36
A6447		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width	\$ 0.62
A6448		Light Compression Bandage, Elastic, Knitted/Woven, Width Less 7	\$ 1.04
A6449		Light Compression Bandage, Elastic, Knitted/Woven, Width Great	\$ 1.58
A6450		Light Compression Bandage, Elastic, Knitted/Woven, Width Great	\$ 1.58
A6451		Moderate Compression Bandage, Elastic, Knitted/Woven, Load Res	\$ 1.58
A6452		High Compression Bandage, Elastic, Knitted/Woven, Load Resista	\$ 5.32
A6453		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven, Width	\$ 0.56
A6454		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven, Width	\$ 0.70
A6455		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven, Width	\$ 1.26
A6456		Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Wi	\$ 1.14
A6530		Gradient Compression Stocking, Below Knee, 18-30 Mm Hg, Each	\$ 25.20
A6531		Gradient Compression Stocking, Below Knee, 30-40 Mm Hg, Each	\$ 38.95
A6532		Gradient Compression Stocking, Below Knee, 40-50 Mm Hg, Each	\$ 54.89
A6533		Gradient Compression Stocking, Thigh Length, 18-30 MmHg, Each	\$ 29.70
A6534		Gradient Compression Stocking, Thigh Length, 30-40 Mm Hg, Eac	\$ 29.70
A6535		Gradient Compression Stocking, Thigh Length, 40-50 Mm Hg, Eac	\$ 29.70
A6536		Gradient Compression Stocking, Full Length/Chap Style,18-30 Mn	\$ 29.70
A6537		Gradient Compression Stocking Full Length/Chap Style,30-40 Mm	\$ 29.70
A6539		Gradient Compression Stocking, Waist Length,18-30 Mm Hg, Each	\$ 84.15
A6544		Gradient Compression Stocking, Garter Belt	\$ 13.50
A6550		Wound Care Set, For Negative Pressure Wound Therapy Electrical	\$ 21.30
A7000		Canister, Disposable, Used With Suction Pump, Each	\$ 6.59
A7002		Tubing, Used With Suction Pump, Each	\$ 3.45
A7003		Administration Set, With Small Volume Nonfiltered Pneumatic Ne	\$ 1.30
A7004		Small Volume Nonfiltered Pneumatic Nebulizer, Disposable	\$ 1.08
A7005		Administration Set, With Small Volume Nonfiltered Pneumatic Ne	\$ 10.19
A7006		Administration Set, With Small Volume Filtered Pneumatic Nebuli	\$ 6.20
A7010		Disposable Corrugated Tubing	\$ 13.21
A7012		Nebulizer Water Collec Devic	\$ 2.42
A7013		Filter, Disposable, Used With Aerosol Compressor	\$ 0.48
A7015		Aerosol Mask, Used With Dme Nebulizer	\$ 1.09
A7020		Interface, Cough Stim Device	\$ 13.04
A7030		Full Face Mask Used With Positive Airway Pressure Device, Each	\$ 76.87

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
A7031		Face Mask Interface, Replacement For Full Face Mask, Each	\$ 29.23
A7032		Cushion For Use On Nasal Mask Interface, Replacement Only, Each	\$ 16.34
A7033		Pillow For Use On Nasal Cannula Type Interface, Replacement Only	\$ 13.41
A7034		Nasal Interface (Mask Or Cannula Type) Used With Positive Airway Pressure Device	\$ 48.10
A7035		Headgear Used With Positive Airway Pressure Device	\$ 15.90
A7036		Chinstrap Used With Positive Airway Pressure Device	\$ 9.14
A7037		Tubing Used With Positive Airway Pressure Device	\$ 10.28
A7038		Filter, Disposable, Used With Positive Airway Pressure Device	\$ 1.81
A7039		Filter, Non Disposable, Used With Positive Airway Pressure Device	\$ 5.23
A7045		Exhalation Port With Or Without Swivel Used With Accessories For Positive Airway Pressure Device	\$ 10.42
A7046		Water Chamber For Humidifier, Used With Positive Airway Pressure Device	\$ 11.50
A7507		Filter Holder And Integrated Filter Without Adhesive, For Use In A Tracheostomy Housing	\$ 2.24
A7508		Housing And Integrated Adhesive, For Use In A Tracheostomy Housing	\$ 2.58
A7509		Filter Holder And Integrated Filter Housing, And Adhesive, For Use In A Tracheostomy Housing	\$ 1.27
A7520		Tracheostomy/Laryngectomy Tube, Non-Cuffed, Polyvinylchloride (Pvc)	\$ 42.75
A7521		Tracheostomy/Laryngectomy Tube, Cuffed, Polyvinylchloride (Pvc)	\$ 42.35
A7522		Tracheostomy/Laryngectomy Tube, Stainless Steel Or Equal (Sterilized)	\$ 40.66
A7524		Tracheostoma Stent/Stud/Button, Each	\$ 69.70
A7525		Tracheostomy Mask, Each	\$ 1.86
A7526		Tracheostomy Tube Collar/Holder, Each	\$ 3.05
A7527		Tracheostomy/Laryngectomy Tube Plug/Stop, Each	\$ 3.22
A8000		Helmet, Protective, Soft Prefabricated, Includes All Components And Accessories	\$ 138.09
A8001		Helmet, Protective, Hard, Prefabricated, Includes All Components And Accessories	\$ 138.09
A8002		Helmet, Protective, Soft, Custom Fabricated, Includes All Components And Accessories	\$ 375.35
A8003		Helmet, Protective, Hard, Custom Fabricated, Includes All Components And Accessories	\$ 375.35
B4034		Enteral Feeding Supply Kit; Syringe Fed, Per Day	\$ 2.68
B4035		Enteral Feeding Supply Kit; Pump Fed, Per Day	\$ 4.63
B4036		Enteral Feeding Supply Kit; Gravity Fed, Per Day	\$ 3.66
B4081		Nasogastric Tubing With Stylet	\$ 13.45
B4082		Nasogastric Tubing Without Stylet	\$ 9.63
B4083		Stomach Tube - Levine Type	\$ 1.44
B4087		Gastrostomy/Jejunostomy Tube, Standard, Any Material Any Type	\$ 23.51
B4088		Gastrostomy/Jejunostomy Tube, Low-Profile, Any Material, Any Type	\$ 27.51
B4164		Parenteral Nutrition Solution: Carbohydrates (Dextrose), 50% Or Less	\$ 15.89
B4168		Parenteral Nutrition Solution; Amino Acid, 3.5%, (500 Ml = 1 Unit)	\$ 23.17
B4172		Parenteral Nutrition Solution; Amino Acid, 5.5% Through 7%, (500 Ml = 1 Unit)	\$ 30.50
B4176		Parenteral Nutrition Solution; Amino Acid, 7% Through 8.5%, (500 Ml = 1 Unit)	\$ 44.82
B4178		Parenteral Nutrition Solution: Amino Acid, Greater Than 8.5% (500 Ml = 1 Unit)	\$ 53.79
B4180		Parenteral Nutrition Solution; Carbohydrates (Dextrose), Greater Than 50%	\$ 22.81
B4185		Parenteral Nutrition Solution, Per 10 Grams Lipids	\$ 10.50
B4189		Parenteral Nutrition Solution; Compounded Amino Acid And Carbohydrates	\$ 166.20
B4193		Parenteral Nutrition Solution; Compounded Amino Acid And Carbohydrates	\$ 214.75

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
B4197		Parenteral Nutrition Solution; Compounded Amino Acid And Carbo	\$ 261.46
B4199		Parenteral Nutrition Solution; Compounded Amino Acid And Carbo	\$ 298.75
B4216		Parenteral Nutrition; Additives (Vitamins, Trace Elements, Heparin	\$ 7.22
B4220		Parenteral Nutrition Supply Kit; Premix, Per Day	\$ 7.48
B4222		Parenteral Nutrition Supply Kit; Home Mix, Per Day	\$ 9.23
B4224		Parenteral Nutrition Administration Kit, Per Day	\$ 23.38
B5000		Parenteral Nutrition Solution: Compounded Amino Acid And Carb	\$ 11.12
B5100		Parenteral Nutrition Solution: Compounded Amino Acid And Carb	\$ 4.34
B5200		Parenteral Nutrition Solution: Compounded Amino Acid And Carb	\$ 4.94
B9002	RR	Enteral Nutrition Infusion Pump - With Alarm	\$ 54.19
B9004	RR	Parenteral Nutrition Infusion Pump, Portable	\$ 373.46
B9006	RR	Parenteral Nutrition Infusion Pump, Stationary	\$ 373.46
E0100		Cane, Includes Canes Of All Materials, Adjustable Or Fixed, With	\$ 17.58
E0105		Cane, Quad Or Three Prong, Includes Canes Of All Materials, Adj	\$ 40.89
E0110		Crutches, Forearm, Includes Crutches Of Various Materials, Adjust	\$ 59.38
E0111		Crutch Forearm, Includes Crutches Of Various Materials, Adjustab	\$ 43.59
E0112		Crutches Underarm, Wood, Adjustable Or Fixed, Pair, With Pads, 7	\$ 30.21
E0113		Crutch Underarm, Wood, Adjustable Or Fixed, Each, With Pad, Ti	\$ 16.18
E0114		Crutches Underarm, Other Than Wood, Adjustable Or Fixed, Pair,	\$ 36.12
E0116		Crutch, Underarm, Other Than Wood, Adjustable Or Fixed, Each, V	\$ 21.24
E0130		Walker, Rigid (Pickup), Adjustable Or Fixed Height	\$ 38.79
E0135		Walker, Folding (Pickup), Adjustable Or Fixed Height	\$ 38.86
E0140		Walker, With Trunk Support, Adjustable Or Fixed Height, Any Typ	\$ 239.10
E0141		Walker, Rigid, Wheeled, Adjustable Or Fixed Height	\$ 40.49
E0143		Walker, Folding, Wheeled, Adjustable Or Fixed Height	\$ 40.49
E0147		Walker, Heavy Duty, Multiple Braking System, Variable Wheel Re	\$ 338.22
E0148		Walker, Heavy Duty, Without Wheels, Rigid Or Folding, Any Type	\$ 70.54
E0149		Walker, Heavy Duty, Wheeled, Rigid Or Folding, Any Type	\$ 100.00
E0153		Platform Attachment, Forearm Crutch, Each	\$ 53.11
E0154		Platform Attachment, Walker, Each	\$ 41.77
E0155		Wheel Attachment, Rigid Pick-Up Walker, Per Pair	\$ 17.82
E0156		Seat Attachment, Walker	\$ 13.42
E0157		Crutch Attachment, Walker, Each	\$ 47.82
E0158		Leg Extensions For Walker, Per Set Of Four (4)	\$ 18.44
E0159		Brake Attachment For Wheeled Walker, Replacement, Each	\$ 12.51
E0160		Sitz Type Bath Or Equipment, Portable, Used With Or Without Co	\$ 24.64
E0161		Sitz Type Bath Or Equipment, Portable, Used With Or Without Co	\$ 21.10
E0162		Sitz Bath Chair	\$ 125.96
E0163		Commode Chair, Mobile Or Stationary, With Fixed Arms	\$ 45.04
E0165		Commode Chair, Mobile Or Stationary, With Detachable Arms	\$ 104.48
E0167		Pail Or Pan For Use With Commode Chair, Replacement Only	\$ 9.25
E0168		Commode Chair, Extra Wide And/OR Heavy Duty, Stationary Or M	\$ 99.87

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E0181		Powered Pressure Reducing Mattress Overlay/Pad, Alternating, Wi	\$ 132.72
E0182		Pump For Alternating Pressure Pad, For Replacement Only	\$ 177.68
E0184		Dry Pressure Mattress	\$ 137.30
E0185		Gel Or Gel-Like Pressure Pad For Mattress, Standard Mattress Len	\$ 144.62
E0186		Air Pressure Mattress	\$ 159.60
E0187		Water Pressure Mattress	\$ 181.60
E0188		Synthetic Sheepskin Pad	\$ 21.03
E0189		Lambswool Sheepskin Pad, Any Size	\$ 42.46
E0190		Positioning Cushion/Pillow/Wedge, Any Shape Or Size, Includes A	\$ 14.18
E0191		Heel Or Elbow Protector, Each	\$ 8.95
E0196		Gel Pressure Mattress	\$ 270.40
E0197		Air Pressure Pad For Mattress, Standard Mattress Length And Wid	\$ 154.80
E0198		Water Pressure Pad For Mattress, Standard Mattress Length And W	\$ 199.52
E0199		Dry Pressure Pad For Mattress, Standard Mattress Length And Wid	\$ 24.54
E0202	RR	Phototherapy (Bilirubin) Light With Photometer	\$ 56.38
E0241		Bath Tub Wall Rail, Each	\$ 63.00
E0243		Toilet Rail, Each	\$ 28.35
E0244		Raised Toilet Seat	\$ 81.00
E0245		Tub Stool Or Bench	\$ 141.75
E0250		Hospital Bed, Fixed Height, With Any Type Side Rails, With Matt	\$ 51.90
E0255		Hospital Bed, Variable Height, Hi-Lo, With Any Type Side Rails, V	\$ 52.28
E0260		Hospital Bed, Semi-Electric (Head And Foot Adjustment), With Ai	\$ 52.32
E0261		Hosp bed semi-electr w/o mat	\$ 52.26
E0271		Mattress, Innerspring	\$ 105.54
E0272		Mattress, Foam Rubber	\$ 119.73
E0275		Bed Pan, Standard, Metal Or Plastic	\$ 11.91
E0276		Bed Pan, Fracture, Metal Or Plastic	\$ 10.24
E0277		Powered Pressure-Reducing Air Mattress	\$ 164.33
E0300		Pediatric Crib, Hospital Grade, Fully Enclosed	\$ 194.22
E0303		Hospital Bed, Heavy Duty, Extra Wide, With Weight Capacity Gre	\$ 139.23
E0304		Hospital Bed, Extra Heavy Duty, Extra Wide, With Weight Capacit	\$ 412.62
E0305		Bed Side Rails, Half Length	\$ 91.92
E0310		Bed Side Rails, Full Length	\$ 95.46
E0325		Urinal; Male, Jug-Type, Any Material	\$ 7.74
E0326		Urinal; Female, Jug-Type, Any Material	\$ 8.34
E0371		Nonpowered Advanced Pressure Reducing Overlay For Mattress, S	\$ 164.14
E0424	RR	Stationary Compressed Gaseous Oxygen System, Rental; Includes C	\$ 60.99
E0431	RR	Portable Gaseous Oxygen System, Rental; Includes Portable Contai	\$ 15.22
E0434	RR	Portable Liquid Oxygen System, Rental; Includes Portable Contain	\$ 15.22
E0439	RR	Stationary Liquid Oxygen System, Rental; Includes Container, Con	\$ 60.99
E0441		Oxygen Contents, Gaseous (For Use With Owned Gaseous Stationa	\$ 46.38
E0443		Portable Oxygen Contents, Gaseous (For Use Only With Portable C	\$ 42.09

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E0445		Oximeter Device For Measuring Blood Oxygen Levels Non-Invasiv	\$ 250.00
E0465	RR	Home vent invasive interface	\$ 859.45
E0466	RR	Home vent non-invasive inter	\$ 859.45
E0470	RR	Respiratory Assist Device, Bi-Level Pressure Capability, Without E	\$ 92.30
E0471	RR	Respiratory Assist Device, Bi-Level Pressure Capability, With Bac	\$ 229.57
E0472	RR	Respiratory Assist Device, Bi-Level Pressure Capability, With Bac	\$ 344.47
E0480		Percussor, Electric Or Pneumatic, Home Model	\$ 36.29
E0482		Cough Stimulating Device, Alternating Positive And Negative Airv	\$ 374.10
E0483		High Frequency Chest Wall Oscillation Air-Pulse Generator System	\$ 957.24
E0484		Oscillatory Positive Expiratory Pressure Device, Non-Electric, Any	\$ 33.26
E0555		Humidifier, durable, glass or autoclavable plastic bottle type, for us	\$ 7.38
E0561		Humidifier, Non-Heated, Used With Positive Airway Pressure Dev	\$ 61.99
E0562		Humidifier, Heated, Used With Positive Airway Pressure Device	\$ 118.14
E0565		Compressor, Air Power Source For Equipment Which Is Not Self-	\$ 36.08
E0570		Nebulizer, With Compressor	\$ 49.44
E0600		Respiratory Suction Pump, Home Model, Portable Or Stationary, E	\$ 412.24
E0601		Continuous Airway Pressure (Cpap) Device	\$ 35.16
E0602		Breast Pump, Manual, Any Type	\$ 26.58
E0603		Breast Pump, Electric (Ac And/Or Dc), Any Type	\$ 55.00
E0605		Vaporizer, Room Type	\$ 22.54
E0606		Postural Drainage Board	\$ 206.72
E0619		Apnea Monitor, With Recording Feature	\$ 323.00
E0621		Sling Or Seat, Patient Lift, Canvas Or Nylon	\$ 71.40
E0630		Patient Lift, Hydraulic Or Mechanical, Includes Any Seat, Sling, St	\$ 50.18
E0650		Pneumatic Compressor, Non-Segmental Home Model	\$ 80.02
E0651		Pneumatic Compressor, Segmental Home Model Without Calibrate	\$ 71.81
E0652		Pneumatic Compressor, Segmental Home Model With Calibrated C	\$ 471.74
E0655		Non-Segmental Pneumatic Appliance For Use With Pneumatic Cor	\$ 97.18
E0660		Non-Segmental Pneumatic Appliance For Use With Pneumatic Cor	\$ 143.84
E0665		Non-Segmental Pneumatic Appliance For Use With Pneumatic Cor	\$ 104.85
E0666		Non-Segmental Pneumatic Appliance For Use With Pneumatic Cor	\$ 124.34
E0667		Segmental Pneumatic Appliance For Use With Pneumatic Compres	\$ 291.51
E0668		Segmental Pneumatic Appliance For Use With Pneumatic Compres	\$ 338.18
E0669		Segmental Pneumatic Appliance For Use With Pneumatic Compres	\$ 156.71
E0671		Segmental Gradient Pressure Pneumatic Appliance, Full Leg	\$ 373.98
E0672		Segmental Gradient Pressure Pneumatic Appliance, Full Arm	\$ 290.58
E0673		Segmental Gradient Pressure Pneumatic Appliance, Half Leg	\$ 241.46
E0705		Transfer Device, Any Type, Each	\$ 39.46
E0720		Transcutaneous Electrical Nerve Stimulation (Tens) Device, Two I	\$ 57.09
E0730		Transcutaneous Electrical Nerve Stimulation (Tens) Device, Four C	\$ 57.69
E0747		Osteogenesis Stimulator, Electrical, Non- Invasive, Other Than Spi	\$ 3,526.01
E0748		Osteogenesis Stimulator, Electrical, Non- Invasive, Spinal Applicat	\$ 3,503.17

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E0760		Osteogenesis Stimulator, Low Intensity Ultrasound, Non-Invasive	\$ 2,911.07
E0766		Elec stim cancer treatment	\$ 340.44
E0781		Ambulatory Infusion Pump, Single Or Multiple Channels, Electric	\$ 188.53
E0784		External Ambulatory Infusion Pump, Insulin	\$ 339.94
E0860		Traction Equipment, Overdoor, Cervical	\$ 33.50
E0910		Trapeze Bars, A/K/A Patient Helper, Attached To Bed, With Grab	\$ 94.64
E0911		Trapeze Bar, Heavy Duty, For Patient Weight Capacity Greater Than	\$ 359.20
E0912		Trapeze Bar, Heavy Duty, For Patient Weight Capacity Greater Than	\$ 696.96
E0935	RR	Continuous Passive Motion Exercise Device For Use On Knee Only	\$ 20.48
E0940		Trapeze Bar, Free Standing, Complete With Grab Bar	\$ 179.52
E0942		Cervical Head Harness/Halter	\$ 15.90
E0950		Wheelchair Accessory, Tray, Each	\$ 64.00
E0951		Heel Loop/Holder, Any Type, With Or Without Ankle Strap, Each	\$ 11.03
E0952		Toe Loop/Holder, Any Type, Each	\$ 12.42
E0953		Wheelchair accessory, lateral thigh or knee support, any type includ	\$ 64.26
E0954		Wheelchair accessory, foot box, any type, includes attachment and	\$ 40.54
E0955		Wheelchair Accessory, Headrest, Cushioned, Any Type, Including	\$ 121.80
E0956		Wheelchair Accessory, Lateral Trunk Or Hip Support, Any Type, In	\$ 64.26
E0957		Wheelchair Accessory, Medial Thigh Support, Any Type, Including	\$ 101.09
E0958		Manual Wheelchair Accessory, One-Arm Drive Attachment, Each	\$ 349.00
E0959		Manual Wheelchair Accessory, Adapter For Amputee, Each	\$ 33.83
E0960		Wheelchair Accessory, Shoulder Harness/Straps Or Chest Strap, In	\$ 60.93
E0961		Manual Wheelchair Accessory, Wheel Lock Brake Extension (Hand	\$ 17.21
E0966		Manual Wheelchair Accessory, Headrest Extension, Each	\$ 55.77
E0967		Manual Wheelchair Accessory, Hand Rim With Projections, Any T	\$ 59.14
E0968		Commode Seat, Wheelchair	\$ 161.40
E0969		Narrowing Device, Wheelchair	\$ 133.86
E0971		Manual Wheelchair Accessory, Anti-Tipping Device Each	\$ 25.41
E0973		Wheelchair Accessory, Adjustable Height, Detachable Armrest, Co	\$ 44.89
E0974		Manual Wheelchair Accessory, Anti-Rollback Device, Each	\$ 61.70
E0978		Wheelchair Accessory, Positioning Belt/Safety Belt/Pelvic Strap, E	\$ 20.56
E0980		Safety Vest, Wheelchair	\$ 28.78
E0981		Wheelchair Accessory, Seat Upholstery, Replacement Only, Each	\$ 31.10
E0982		Wheelchair Accessory, Back Upholstery, Replacement Only, Each	\$ 33.99
E0983		Manual Wheelchair Accessory, Power Add-On To Convert Manual	\$ 2,178.88
E0984		Manual Wheelchair Accessory, Power Add-On To Convert Manual	\$ 1,522.88
E0988		Lever-Activated Wheel Drive	\$ 2,695.36
E0990		Wheelchair Accessory, Elevating Leg Rest, Complete Assembly, E	\$ 59.01
E0992		Manual Wheelchair Accessory, Solid Seat Insert	\$ 67.23
E1002		Wheelchair Accessory, Power Seating System, Tilt Only	\$ 2,813.60
E1003		Wheelchair Accessory, Power Seating System, Recline Only, With	\$ 3,293.28
E1004		Wheelchair Accessory, Power Seating System, Recline Only, With	\$ 3,619.76

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E1005		Wheelchair Accessory, Power Seating System, Recline Only, With I	\$ 3,959.76
E1006		Wheelchair Accessory, Power Seating System, Combination Tilt A	\$ 4,882.24
E1007		Wheelchair Accessory, Power Seating System, Combination Tilt A	\$ 6,060.32
E1008		Wheelchair Accessory, Power Seating System, Combination Tilt A	\$ 6,216.16
E1010		Wheelchair Accessory, Addition To Power Seating System, Power	\$ 844.70
E1012		Ctr mount pwr elev leg rest	\$ 844.70
E1014		Reclining Back, Addition To Pediatric Size Wheelchair	\$ 328.90
E1015		Shock Absorber For Manual Wheelchair, Each	\$ 100.08
E1016		Shock Absorber For Power Wheelchair, Each	\$ 93.94
E1020		Residual Limb Support System For Wheelchair	\$ 150.90
E1028		Wheelchair Accessory, Manual Swingaway, Retractable Or Remov	\$ 113.10
E1029		Wheelchair Accessory, Ventilator Tray, Fixed	\$ 284.60
E1030		Wheelchair Accessory, Ventilator Tray, Gimbale	\$ 889.00
E1031		Rollabout Chair, Any And All Types With Castors5" Or Greater	\$ 35.98
E1161		Manual Adult Size Wheelchair, Includes Tilt In Space	\$ 2,130.40
E1225		Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Gre	\$ 317.10
E1226		Wheelchair Accessory, Manual Fully Reclining Back, (Recline Gre	\$ 318.32
E1231		Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With	\$ 1,710.73
E1232		Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Wit	\$ 1,925.52
E1233		Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Witho	\$ 1,994.96
E1234		Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Wit	\$ 1,736.88
E1235		Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System	\$ 1,672.56
E1236		Wheelchair, Pediatric Size, Folding, Adjustable, With Seating Syst	\$ 1,475.52
E1237		Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating Sys	\$ 1,488.40
E1238		Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating S	\$ 1,475.52
E1372		Immersion External Heater For Nebulizer	\$ 105.57
E1390	RR	Oxygen Concentrator, Single Delivery Port, Capable Of Delivering	\$ 60.99
E2100		Blood Glucose Monitor With Integrated Voice Synthesizer	\$ 579.12
E2201		Manual Wheelchair Accessory, Nonstandard Seat Frame, Width Gre	\$ 257.41
E2202		Manual Wheelchair Accessory, Nonstandard Seat Frame Width, 24	\$ 375.03
E2203		Manual Wheelchair Accessory, Nonstandard Seat Frame Depth, 20	\$ 350.80
E2204		Manual Wheelchair Accessory, Nonstandard Seat Frame Depth, 22	\$ 613.92
E2205		Manual Wheelchair Accessory, Handrim Without Projections (Inclu	\$ 29.02
E2206		Manual Wheelchair Accessory, Wheel Lock Assembly, Complete, I	\$ 31.82
E2207		Wheelchair Accessory, Crutch And Cane Holder, Each	\$ 38.08
E2208		Wheelchair Accessory, Cylinder Tank Carrier, Each	\$ 63.93
E2209		Accessory, Arm Tough, With Or Without Handsupport, Each	\$ 69.75
E2210		Wheelchair Accessory, Bearngs, Any Type, Replacement Only, Eac	\$ 4.46
E2211		Manual Wheelchair Accessory, Pneumatic Propulsion Tire, Any Siz	\$ 28.38
E2212		Manual Wheelchair Accessory, Tube For Pneumatic Propulsion Tir	\$ 5.20
E2213		Manual Wheelchair Accessory, Insert For Pneumatic Propulsion Ti	\$ 24.80
E2214		Manual Wheelchair Accessory, Pneumatic Caster Tire, Any Size, E	\$ 27.29

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
E2215		Manual Wheelchair Accessory, Tube For Pneumatic Caster Tire, A	\$ 8.57
E2219		Manual Wheelchair Accessory, Foam Caster Tire, Any Size, Each	\$ 33.78
E2220		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Propulsion Ti	\$ 23.19
E2221		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire W	\$ 22.18
E2222		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire V	\$ 18.53
E2224		Manual Wheelchair Accessory, Propulsion Wheel Excludes Tire, A	\$ 75.05
E2225		Manual Wheelchair Accessory, Caster Wheel Excludes Tire, Any S	\$ 15.62
E2226		Manual Wheelchair Accessory, Caster Fork, Any Size, Replacemen	\$ 32.77
E2227	RR	Manual Wheelchair Accessory, Gear Reduction Drive Wheel, Each	\$ 1,684.50
E2228		Manual Wheelchair Accessory, Wheel Braking System And Lock,C	\$ 793.40
E2231		Solid Seat Support Base	\$ 115.91
E2310		Power Wheelchair Accessory, Electronic Connection Between Whe	\$ 823.84
E2311		Power Wheelchair Accessory, Electronic Connection Between Whe	\$ 1,662.56
E2312		Power Wheelchair Accessory, Hand Or Chin Control Interface, Mir	\$ 1,815.76
E2313		Power Wheelchair Accessory, Harness For Upgrade To Expandable	\$ 288.56
E2321		Power Wheelchair Accessory, Hand Control Interface, Remote Joys	\$ 1,119.44
E2322		Power Wheelchair Accessory, Hand Control Interface, Multiple Me	\$ 1,057.60
E2323		Power Wheelchair Accessory, Specialty Joystick Handle For Hand	\$ 51.55
E2324		Power Wheelchair Accessory, Chin Cup For Chin Control Interface	\$ 34.01
E2325		Power Wheelchair Accessory, Sip And Puff Interface, Nonproportio	\$ 1,010.80
E2326		Power Wheelchair Accessory, Breath Tube Kit For Sip And Puff In	\$ 265.10
E2327		Power Wheelchair Accessory, Head Control Interface, Mechanical,	\$ 1,977.28
E2328		Power Wheelchair Accessory, Head Control Or Extremity Control	\$ 3,732.00
E2329		Power Wheelchair Accessory, Head Control Interface, Contact Swi	\$ 1,347.68
E2330		Power Wheelchair Accessory, Head Control Interface, Proximity S	\$ 2,587.52
E2340		Power Wheelchair Accessory, Nonstandard Seat Frame Width, 20-2	\$ 322.66
E2341		Power Wheelchair Accessory, Nonstandard Seat Frame Width, 24-2	\$ 484.03
E2342		Power Wheelchair Accessory, Nonstandard Seat Frame Depth, 20 C	\$ 403.37
E2343		Power Wheelchair Accessory, Nonstandard Seat Frame Depth, 22-2	\$ 645.39
E2351		Power Wheelchair Accessory, Electronic Interface To Operate Spee	\$ 536.02
E2359		Gr34 sealed leadacid battery	\$ 139.63
E2360		Power Wheelchair Accessory, 22 Nf Non-Sealed Lead Acid Battery	\$ 88.30
E2361		Power Wheelchair Accessory, 22Nf Sealed Lead Acid Battery, Eac	\$ 96.30
E2362		Power Wheelchair Accessory, Group 24 Non- Sealed Lead Acid Ba	\$ 80.35
E2363		Power Wheelchair Accessory, Group 24 Sealed Lead Acid Battery,	\$ 121.73
E2364		Power Wheelchair Accessory, U-1 Non-Sealed Lead Acid Battery,	\$ 85.14
E2365		Power Wheelchair Accessory, U-1 Sealed Lead Acid Battery, Each	\$ 64.18
E2366		Power Wheelchair Accessory, Battery Charger, Single Mode, For U	\$ 130.94
E2368		Power Wheelchair Component, Motor, Replacement Only	\$ 341.80
E2369		Power Wheelchair Component, Gear Box, Replacement Only	\$ 323.80
E2370		Power Wheelchair Component, Motor And Gear Box Combination	\$ 443.40
E2371		Power Wheelchair Accessory, Group 27 Sealed Lead Acid Battery,	\$ 116.85

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E2373		Power Wheelchair Accessory, Hand Or ChinControl Interface, Com	\$ 600.16
E2374		Power Wheelchair Accessory, Hand Or Chin Control Interface, Sta	\$ 379.60
E2375		Power Wheelchair Accessory, Non-Expandable Controller, Includi	\$ 564.90
E2376		Power Wheelchair Accessory, Expandable Controller, Including Al	\$ 943.12
E2377		Power Wheelchair Accessory, ExpandableController, Including All F	\$ 349.36
E2378		Pw Actuator Replacement	\$ 458.88
E2381		Power Wheelchair Accessory, Pneumatic Drive Wheel Tire, Any Si	\$ 50.91
E2382		Power Wheelchair Accessory, Tube For Pneumatic Drive Wheel Ti	\$ 13.84
E2383		Power Wheelchair Accessory, Insert For Pneumatic Drive Wheel T	\$ 106.83
E2384		Power Wheelchair Accessory, Pneumatic Caster Tire, Any Size, Re	\$ 51.34
E2385		Power Wheelchair Accessory, Tube ForPneumatic Caster Tire, Any	\$ 33.21
E2386		Power Wheelchair Accessory, Foam Filled Drive Wheel Tire, Any	\$ 85.66
E2387		Power Wheelchair Accessory, Foam Filled Caster Tire, Any Size, F	\$ 41.11
E2388		Power Wheelchair Accessory, Foam Drive Wheel Tire, Any Size, F	\$ 36.14
E2389		Power Wheelchair Accessory, Foam Caster Tire, Any Size, Replac	\$ 20.20
E2390		Power Wheelchair Accessory, Solid (Rubber/Plastic) Drive Wheel	\$ 31.27
E2391		Power Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire (F	\$ 14.75
E2392		Power Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire W	\$ 35.28
E2394		Power Wheelchair Accessory, Drive Wheel Excludes Tire, Any Siz	\$ 48.65
E2395		Power Wheelchair Accessory, Caster Wheel Excludes Tire, Any Si	\$ 36.43
E2396		Power Wheelchair Accessory, Caster Fork, Any Size, Replacement	\$ 43.81
E2397		Power Wheelchair Accessory, Lithium-Based Battery, Each	\$ 371.98
E2402		Negative Pressure Wound Therapy Electrical Pump, Stationary Or	\$ 562.53
E2500		Sgd Digitized Pre-Rec <=8Min	\$ 352.10
E2502		Sgd Prerec Msg >8Min <=20Min	\$ 1,076.68
E2504		Sgd Prerec Msg>20Min <=40Min	\$ 1,420.30
E2506		Sgd Prerec Msg > 40 Min	\$ 2,082.58
E2508		Sgd Spelling Phys Contact	\$ 3,220.35
E2510		Sgd W Multi Methods Msg/Accs	\$ 6,094.09
E2601		General Use Wheelchair Seat Cushion, Width Less Than 22 Inches	\$ 32.58
E2602		General Use Wheelchair Seat Cushion, Width 22Inches Or Greater,	\$ 70.23
E2603		Skin Protection Wheelchair Seat Cushion, Width Less Than 22 Incl	\$ 86.09
E2604		Skin Protection Wheelchair Seat Cushion, Width22 Inches Or Gre	\$ 121.90
E2605		Positioning Wheelchair Seat Cushion, Width Less Than 22 Inches,	\$ 175.67
E2606		Positioning Wheelchair Seat Cushion, Width 22Inches Or Greater,	\$ 281.68
E2607		Skin Protection And Positioning Wheelchair Seat Cushion, Width	\$ 170.09
E2608		Skin Protection And Positioning Wheelchair Seat Cushion, Width 2	\$ 214.28
E2611		General Use Wheelchair Back Cushion, Width Less Than 22 Inches	\$ 130.90
E2612		General Use Wheelchair Back Cushion, Width 22Inches Or Greater	\$ 255.49
E2613		Positioning Wheelchair Back Cushion, Posterior, Width Less Than	\$ 258.54
E2614		Positioning Wheelchair Back Cushion, Posterior, Width 22 Inches	\$ 381.47
E2615		Positioning Wheelchair Back Cushion, Posterior- Lateral, Width Le	\$ 294.93

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
E2616		Positioning Wheelchair Back Cushion, Posterior- Lateral, Width 22	\$ 397.22
E2619		Replacement Cover For Wheelchair Seat Cushion Or Back Cushion	\$ 37.21
E2620		Positioning Wheelchair Back Cushion, Planar Back With Lateral St	\$ 316.11
E2621		Positioning Wheelchair Back Cushion, Planar Back With Lateral St	\$ 374.43
E2622		Adj Skin Pro W/C Cus Wd<22In	\$ 236.02
E2623		Adj Skin Pro Wc Cus Wd>=22In	\$ 298.46
E2624		Adj Skin Pro/Pos Cus<22In	\$ 239.83
E2625		Adj Skin Pro/Pos Wc Cus>=22	\$ 296.82
E2626		Seo Mobile Arm Sup Att To Wc	\$ 539.60
E2627		Arm Supp Att To Wc Rancho Ty	\$ 758.54
E2628		Mobile Arm Supports Reclinin	\$ 571.44
E2629		Friction Dampening Arm Supp	\$ 812.63
E2630		Monosuspension Arm/Hand Supp	\$ 505.69
E2631		Elevat Proximal Arm Support	\$ 202.28
E2632		Offset/Lat Rocker Arm W/Ela	\$ 128.62
E2633		Mobile Arm Support Supinator	\$ 109.10
K0001		Standard Wheelchair	\$ 19.60
K0002		Standard Hemi (Low Seat) Wheelchair	\$ 33.82
K0003		Lightweight Wheelchair	\$ 29.38
K0004		High Strength, Lightweight Wheelchair	\$ 36.20
K0005		Ultralightweight Wheelchair	\$ 166.44
K0006		Heavy Duty Wheelchair	\$ 53.73
K0007		Extra Heavy Duty Wheelchair	\$ 75.46
K0009		Other Manual Wheelchair/Base	\$ 66.95
K0015		Detachable, Non-Adjustable Height Armrest, Each	\$ 118.90
K0017		Detachable, Adjustable Height Armrest, Base, Each	\$ 35.82
K0018		Detachable, Adjustable Height Armrest, Upper Portion, Each	\$ 20.25
K0019		Arm Pad, Each	\$ 11.14
K0020		Fixed, Adjustable Height Armrest, Pair	\$ 35.10
K0037		High Mount Flip-Up Footrest, Each	\$ 31.77
K0038		Leg Strap, Each	\$ 17.90
K0039		Leg Strap, H Style, Each	\$ 38.44
K0040		Adjustable Angle Footplate, Each	\$ 43.92
K0041		Large Size Footplate, Each	\$ 36.74
K0042		Standard Size Footplate, Each	\$ 23.59
K0043		Footrest, Lower Extension Tube, Each	\$ 14.56
K0044		Footrest, Upper Hanger Bracket, Each	\$ 12.67
K0045		Footrest, Complete Assembly	\$ 41.68
K0046		Elevating Legrest, Lower Extension Tube, Each	\$ 14.66
K0047		Elevating Legrest, Upper Hanger Bracket, Each	\$ 51.81
K0050		Ratchet Assembly	\$ 24.03
K0051		Cam Release Assembly, Footrest Or Legrest, Each	\$ 38.02

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
K0052		Swingaway, Detachable Footrests, Each	\$ 59.46
K0053		Elevating Footrests, Articulating (Telescoping), Each	\$ 70.79
K0056		Seat Height Less Than 17" Or Equal To Or Greater Than 21" For A	\$ 78.91
K0065		Spoke Protectors, Each	\$ 39.26
K0069		Rear Wheel Assembly, Complete, With Solid Tire, Spokes Or Mole	\$ 79.31
K0070		Rear Wheel Assembly, Complete, With Pneumatic Tire, Spokes Or	\$ 132.80
K0071		Front Caster Assembly, Complete, With Pneumatic Tire, Each	\$ 91.47
K0072		Front Caster Assembly, Complete, With Semi- Pneumatic Tire, Eac	\$ 56.84
K0073		Caster Pin Lock,Each	\$ 29.76
K0077		Front Caster Assembly, Complete, With Solid Tire, Each	\$ 44.98
K0098		Drive Belt For Power Wheelchair	\$ 20.14
K0105		Iv Hanger, Each	\$ 83.45
K0195		Elevating Leg Rests, Pair (For Use With Capped Rental Wheelchai	\$ 91.50
K0606		Automatic External Defibrillator, With Integrated Electrocardiogra	\$ 2,267.45
K0730		Controlled Dose Inhalation Drug Delivery System	\$ 1,552.20
K0733		12-24Hr Sealed Lead Acid	\$ 23.44
K0739		Repair Of Nonroutine Service For Dme Other Than Oxygen Equipm	\$ 12.21
K0740		Repair Of Nonroutine Service For Oxygen Equipment Requiring TI	\$ 6.30
K0800		Power Operated Vehicle, Group 1 Standard, Patient Weight Capacit	\$ 70.63
K0801		Power Operated Vehicle, Group 1 Heavy Duty, Patient Weight Cap	\$ 129.16
K0802		Power Operated Vehicle, Group 1 Very Heavy Duty, Patient Weigh	\$ 172.12
K0806		Power Operated Vehicle, Group 2 Standard, Patient Weight Capacit	\$ 106.18
K0807		Power Operated Vehicle, Group 2 Heavy Duty, Patient Weight Cap	\$ 164.54
K0808		Power Operated Vehicle, Group 2 Very Heavy Duty, Patient Weigh	\$ 254.36
K0813		Power Wheelchair, Group 1 Standard, Portable, Sling/Solid Seat A	\$ 222.23
K0814		Power Wheelchair, Group 1 Standard, Portable, Captains Chair, Pa	\$ 229.85
K0815		Power Wheelchair, Group 1 Standard, Sling/Solid Seat And Back, I	\$ 253.62
K0816		Power Wheelchair, Group 1 Standard, Captains Chair, Patient Weig	\$ 235.18
K0820		Power Wheelchair, Group 2 Standard, Portable, Sling/Solid Seat/Ba	\$ 228.30
K0821		Power Wheelchair, Group 2 Standard, Portable, Captains Chair, Pa	\$ 235.59
K0822		Power Wheelchair, Group 2 Standard, Sling/Solid Seat/Back, Patie	\$ 253.35
K0823		Power Wheelchair, Group 2 Standard, Captains Chair, Patient Weig	\$ 235.77
K0824		Power Wheelchair, Group 2 Heavy Duty, Sling/Solid Seat/Back, Pa	\$ 363.38
K0825		Power Wheelchair, Group 2 Heavy Duty, Captains Chair, Patient W	\$ 336.68
K0826		Power Wheelchair, Group 2 Very Heavy Duty, Sling/Solid Seat/Bac	\$ 615.23
K0827		Power Wheelchair, Group 2 Very Heavy Duty, Captains Chair, Patie	\$ 537.56
K0828		Power Wheelchair, Group 2 Extra Heavy Duty, Sling/Solid Seat/Ba	\$ 762.48
K0829		Power Wheelchair, Group 2 Extra Heavy Duty, Captains Chair, Pati	\$ 738.47
K0830		Power Wheelchair, Group 2 Standard, Seat Elevator, Sling/Solid Se	\$ 354.07
K0831		Power Wheelchair, Group 2 Standard, Seat Elevator, Captains Chai	\$ 354.07
K0835		Power Wheelchair, Group 2 Standard, Single Power Option, Sling/	\$ 272.81
K0836		Power Wheelchair, Group 2 Standard, Single Power Option, Captai	\$ 282.96

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
K0837		Power Wheelchair, Group 2 Heavy Duty, Single Power Option, Slin	\$ 349.90
K0838		Power Wheelchair, Group 2 Heavy Duty, Single Power Option, Cap	\$ 310.14
K0839		Power Wheelchair, Group 2 Very Heavy Duty, Single Power Optio	\$ 464.79
K0840		Power Wheelchair, Group 2 Extra Heavy Duty, Single Power Optic	\$ 713.62
K0841		Power Wheelchair, Group 2 Standard, Multiple Power Option, Slin	\$ 307.43
K0842		Power Wheelchair, Group 2 Standard, Multiple Power Option, Cap	\$ 306.98
K0843		Power Wheelchair, Group 2 Heavy Duty, Multiple Power Option, S	\$ 364.43
K0848		Power Wheelchair, Group 3 Standard, Sling/Solid Seat/Back, Patie	\$ 615.15
K0849		Power Wheelchair, Group 3 Standard, Captains Chair, Patient Weig	\$ 591.42
K0850		Power Wheelchair, Group 3 Heavy Duty, Sling/Solid Seat/Back, Pa	\$ 713.54
K0851		Power Wheelchair, Group 3 Heavy Duty, Captains Chair, Patient W	\$ 686.08
K0852		Power Wheelchair, Group 3 Very Heavy Duty, Sling/Solid Seat/Bac	\$ 824.46
K0853		Power Wheelchair, Group 3 Very Heavy Duty, Captains Chair, Patie	\$ 846.93
K0854		Power Wheelchair, Group 3 Extra Heavy Duty, Sling/Solid Seat/Ba	\$ 1,121.99
K0855		Power Wheelchair, Group 3 Extra Heavy Duty, Captains Chair, Pati	\$ 1,059.89
K0856		Power Wheelchair, Group 3 Standard, Single Power Option, Sling/	\$ 660.29
K0857		Power Wheelchair, Group 3 Standard, Single Power Option, Captai	\$ 673.53
K0858		Power Wheelchair, Group 3 Heavy Duty, Single Power Option, Slin	\$ 819.23
K0859		Power Wheelchair, Group 3 Heavy Duty, Single Power Option, Cap	\$ 781.30
K0860		Power Wheelchair, Group 3 Very Heavy Duty, Single Power Optio	\$ 1,170.38
K0861		Power Wheelchair, Group 3 Standard, Multiple Power Option, Slin	\$ 661.34
K0862		Power Wheelchair, Group 3 Heavy Duty, Multiple Power Option, S	\$ 819.23
K0863		Power Wheelchair, Group 3 Very Heavy Duty, Multiple Power Opt	\$ 1,170.38
K0864		Power Wheelchair, Group 3 Extra Heavy Duty, Multiple Power Op	\$ 1,392.75
L0112		Cranial Cervical Orthosis, Congenital Torticollis Type With Or Wi	\$ 1,060.69
L0113		Cranial Cervical Torticollis	\$ 216.11
L0120		Cervical, Flexible; Non-Adjustable (Foam Collar)	\$ 20.30
L0130		Cervical, Flexible, Thermoplastic Collar, Molded To Patient	\$ 143.50
L0140		Cervical, Semi-Rigid; Adjustable (Plastic Collar)	\$ 47.46
L0150		Cervical, Semi-Rigid, Adjustable Molded Chin Cup(Plastic Collar)	\$ 87.06
L0160		Cervical, Semi-Rigid, Wire Frame Occipital/Mandibular Support	\$ 113.70
L0170		Cervical Collar; Molded To Patient Model	\$ 468.22
L0172		Cervical, Collar, Semi-Rigid, Thermoplastic Foam, Two Piece	\$ 101.52
L0174		Cervical, Collar, Semi-Rigid, Thermoplastic Foam, Two Piece Wit	\$ 199.44
L0180		Cervical, Multiple Post Collar, Occipital/Mandibular Supports; Adj	\$ 276.56
L0190		Cervical, Multiple Post Collar, Occipital/Mandibular Supports, Adj	\$ 359.63
L0200		Cervical, Multiple Post Collar, Occipital/Mandibular Supports, Adj	\$ 374.91
L0220		Thoracic, Rib Belt, Custom Fabricated	\$ 102.39
L0450		Tlso, Flexible, Provides Trunk Support, Upper Thoracic Region, Pr	\$ 128.55
L0452		Tlfo, Flexible, Provides Trunk Support, Upper Thoracic Region, Pr	\$ 198.51
L0454		Tlso Flexible, Provides Trunk Support, Extends From Sacrococcyg	\$ 262.83
L0456		Tlso, Flexible Provides Trunk Support, Thoracic Region, Rigid Pos	\$ 753.73

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L0466		Tlso, Sagittal Control, Rigid Posterior Frame And Flexible Soft An	\$ 273.79
L0468		Tlso, Sagittal-Coronal Control, Rigid Posterior Frame And Flexible	\$ 362.73
L0470		Tlso, Triplanar Control, Rigid Posterior Frame And Flexible Soft A	\$ 462.86
L0472		Tlso, Triplanar Control, Hyperextension, Rigid Anterior And Later	\$ 293.56
L0480		Tlso, Triplanar Control, One Piece Rigid Plastic Shell Without Inte	\$ 1,033.79
L0482		Tlso, Triplanar Control, One Piece Rigid Plastic Shell With Interfa	\$ 1,200.79
L0484		Tslo, Triplanar Control, Two Piece Rigid Plastic Shell Without Inte	\$ 1,290.22
L0486		Tlfo, Triplanar Control, Two Piece Rigid Plastic Shell With Interfa	\$ 1,368.85
L0488		Tlso, Triplanar Control, One Piece Rigid Plastic Shell With Interfa	\$ 760.73
L0490		Tlso, Sagittal-Coronal Control, One Piece Rigid Plastic Shell, With	\$ 214.39
L0491		Tlso, Sagittal-Coronal Control, Modular Segmented Spinal System.	\$ 582.02
L0492		Tlso, Sagittal-Coronal Control, Modular Segmented Spinal System.	\$ 382.78
L0621		Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support, Redu	\$ 66.95
L0622		Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support, Redu	\$ 219.27
L0623		Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With Rigid Or	\$ 336.26
L0625		Lumbar Orthosis, Flexible, Provides Lumbar Support, Posterior Ex	\$ 41.74
L0626		Lumbar Orthosis, Sagittal Control, With Rigid Posterior Panel(S), I	\$ 59.06
L0627		Lumbar Orthosis, Sagittal Control, With Rigid Anterior And Poster	\$ 311.52
L0628		Lso, Flexible, Provides Lumbo-Sacral Support, Posterior Extends F	\$ 63.58
L0629		Lso, Flexible, Provides Lumbo-Sacral Support, Posterior Extends F	\$ 164.18
L0630		Lso, Sagittal Control, With Rigid Posterior Panel(S), Posterior Ext	\$ 122.74
L0631		Lso, Sagittal Control, With Rigid Anterior And Posterior Panels, Po	\$ 777.98
L0633		Lso, Sagittal-Coronal Control, With Rigid Posterior Frame/Panel(S)	\$ 217.32
L0635		Lso, Sagittal-Coronal Control, Lumbar Flexion, Rigid Posterior Fra	\$ 694.93
L0636		Lso, Sagittal-Coronal Control, Lumbar Flexion Rigid Posterior Fra	\$ 1,028.75
L0637		Lso, Sagittal-Coronal Control, With Rigid Anterior And Posterior F	\$ 814.13
L0638		Lso, Sagittal-Coronal Control, With Rigid Anterior And Posterior F	\$ 999.51
L0639		Lso, Sagittal-Coronal Control, Rigid Shell (S)/Panel(S), Posterior I	\$ 814.13
L0640		Lso, Sagittal-Coronal Control, Rigid Shell(S)/Panel(S), Posterior E	\$ 793.02
L0700		Ctlso, Anterior-Posterior-Lateral Control, Molded To Patient Mode	\$ 1,484.18
L0710		Ctlso, Anterior-Posterior-Lateral Control, Molded To Patient Mode	\$ 1,516.27
L0810		Halo Procedure, Cervical Halo Incorporated Into Jacket Vest	\$ 1,896.29
L0820		Halo Procedure, Cervical Halo Incorporated Into Plaster Body Jack	\$ 1,702.05
L0830		Halo Procedure, Cervical Halo Incorporated IntoMilwaukee Type C	\$ 2,398.67
L0859		Addition To Halo Procedure, Magnetic Resonance Image Compatib	\$ 999.63
L0861		Additional To Halo Procedure, Replacement Liner/Interface Materi	\$ 163.34
L0970		Tlso, Corset Front	\$ 97.62
L0972		Lso, Corset Front	\$ 87.68
L0974		Tlso, Full Corset	\$ 130.21
L0976		Lso, Full Corset	\$ 116.09
L0978		Axillary Crutch Extension	\$ 153.23
L0980		Peroneal Straps, Pair	\$ 16.73

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L0982		Stocking Supporter Grips, Set Of Four (4)	\$ 11.82
L0984		Protective Body Sock, Each	\$ 49.08
L1000		Cervical-Thoracic-Lumbar-Sacral Orthosis (Ctlso) (Milwaukee), In	\$ 1,489.07
L1010		Additions To Cervical-Thoracic-Lumbar-Sacral Orthosis(Ctlso) Or	\$ 48.73
L1020		Addition To Ctlso Or Scoliosis, Kyphosis Pad	\$ 62.75
L1025		Addition To Ctlso Or Scoliosis Orthosis, Kyphosis Pad, Floating	\$ 119.78
L1030		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Bolster Pad	\$ 46.18
L1040		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Or Lumbar Rib P	\$ 60.43
L1050		Addition To Ctlso Or Scoliosis Orthosis, Sternal Pad	\$ 72.86
L1060		Addition To Ctlso Or Scoliosis Orthosis, Thoracic Pad	\$ 87.38
L1070		Addition To Ctlso Or Scoliosis Orthosis, Trapezius Sling	\$ 85.33
L1080		Addition To Ctlso Or Scoliosis Orthosis, Outrigger	\$ 48.00
L1085		Addition To Ctlso Or Scoliosis Orthosis. Outrigger, Bilateral With	\$ 129.86
L1090		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Sling	\$ 85.90
L1100		Addition To Ctlso Or Scoliosis Orthosis, Ring Flange, Plastic Or L	\$ 137.18
L1110		Addition To Ctlso Or Scoliosis Orthosis. Ring Flange, Plastic Or L	\$ 185.42
L1120		Addition To Ctlso Or Scoliosis Orthosis Covers For Upright, Each	\$ 31.36
L1200		Thoracic-Lumbar-Sacral-Orthosis (Tlso), Inclusive Of Furnishing I	\$ 1,137.53
L1210		Addition To Tlso, (Low Profile); Lateral Thoracic Extension	\$ 189.97
L1220		Addition To Tlso, (Low Profile), Anterior Thoracic Extension	\$ 181.47
L1230		Addition To Tlso, (Low Profile), Milwaukee Type Superstructure	\$ 465.18
L1240		Addition To Tlso, (Low Profile), Lumbar Derotation Pad	\$ 62.89
L1250		Addition To Tlso, (Low Profile), Anterior Axis Pad	\$ 62.89
L1260		Addition To Tlso, (Low Profile), Anterior Thoracic Derotation Pad	\$ 64.20
L1270		Addition To Tlso, (Low Profile), Abdominal Pad	\$ 65.22
L1280		Addition To Tlso, (Low Profile), Rib Gusset (Elastic), Each	\$ 75.02
L1290		Addition To Tlso, (Low Profile), Lateral Trochanteric Pad	\$ 59.39
L1300		Other Scoliosis Procedure, Body Jacket Molded To Patient Model	\$ 1,337.26
L1310		Other Scoliosis Procedure, Post Operative Body Jacket	\$ 1,374.05
L1600		Hip Orthosis, Ho), Abduction Control Of Hip Joints, Flexible, Frej	\$ 93.55
L1610		Ho, Abduction Control Of Hip Joints; Flexible, (Frejka Cover Only	\$ 41.28
L1620		Ho, Abduction Control Of Hip Joints; Flexible, (Pavlik Harness), P	\$ 116.93
L1630		Ho, Abduction Control Of Hip Joints; Semi-Flexible(Von Rosen Ty	\$ 123.02
L1640		Ho, Abduction Control Of Hip Joints; Static, Pelvic Band Or Sprea	\$ 374.48
L1650		Ho, Abduction Control Of Hip Joints; Static, Adjustable, (Ilfled Ty	\$ 189.50
L1660		Ho, Abduction Control Of Hip Joints; Static, Plastic, Prefabricated,	\$ 124.25
L1680		Ho, Abduction Control Of Hip Joints; Dynamic, Pelvic Control, Ac	\$ 884.58
L1685		Ho, Abduction Control Of Hip Joints; Postoperative Hip Abductor	\$ 902.77
L1686		Ho, Abduction Control Of Hip Joints; Postoperative Hip Abductor	\$ 833.58
L1690		Combination, Bilateral, Lumbo-Sacral, Hip, Femur Orthosis Provid	\$ 1,465.46
L1700		Legg Perthes Orthosis, (Toronto Type), Custom Fabricated	\$ 1,108.70
L1710		Legg Perthes Orthosis, (Newington Type), Custom Fabricated	\$ 1,297.85

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L1720		Legg Perthes Orthosis, Trilateral, (Tachdijan Type), Custom Fabric	\$ 956.67
L1730		Legg Perthes Orthosis, (Scottish Rite Type), Custom Fabricated	\$ 821.69
L1755		Legg Perthes Orthosis, (Pattern Bottom Type), Custom Fabricated	\$ 1,303.97
L1810		Ko, Elastic With Joints, Prefabricated, Includes Fitting And Adjust	\$ 71.50
L1820		Ko, Elastic With Condylar Pads And Joints, With Or Without Patel	\$ 110.78
L1830		Ko, Immobilizer, Canvas Longitudinal, Prefabricated, Includes Fitt	\$ 67.36
L1831		Ko, Locking Knee Joint(S), Positional Orthosis, Prefabricated, Incl	\$ 223.04
L1832		Knee Orthosis, Adjustable Knee Joints (Unicentric Or Polycentric),	\$ 513.46
L1834		Ko, Without Knee Joint, Rigid, Custom Fabricated	\$ 563.58
L1836		Ko, Rigid, Without Joint(S), Includes Soft Interface Material, Prefa	\$ 101.13
L1840		Ko, Derotation, Medial-Lateral, Anterior Cruciate Ligament, Custo	\$ 750.70
L1843		Knee Orthosis, Single Upright, Thigh And Calf, With Adjustable F	\$ 679.98
L1844		Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable I	\$ 1,178.62
L1845		Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable I	\$ 705.63
L1846		Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable I	\$ 865.17
L1847		Ko, Double Upright With Adjustable Joint, With Inflatable Air Sup	\$ 435.89
L1850		Ko, Swedish Type, Prefabricated, Includes Fitting And Adjustment	\$ 220.69
L1860		Ko, Modification Of Supracondylar Prosthetic Socket, Custom Fab	\$ 779.05
L1900		Ankle-Foot Orthosis (Afo), Spring Wire, Dorsiflexion Assist Calf F	\$ 195.86
L1902		Afo, Ankle Gauntlet, Prefabricated, Includes Fitting And Adjustme	\$ 67.68
L1904		Afo, Molded Ankle Gauntlet, Custom Fabricated	\$ 407.00
L1906		Afo, Multiligamentous Ankle Support, Prefabricated, Includes Fitti	\$ 87.31
L1907		Afo, Supramalleolar With Straps, With Or Without Interface/Pads,	\$ 426.42
L1910		Afo, Posterior, Single Bar, Clasp Attachment To Shoe Counter, Pre	\$ 198.29
L1920		Afo, Single Upright With Static Or Adjustable Stop(Phelps Or Perl	\$ 253.82
L1930		Afo, Plastic Or Other Material, Prefabricated, Includes Fitting And	\$ 171.74
L1932		Afo, Rigid Anterior Tibial Section, Total Carbon Fiber Or Equal M	\$ 676.26
L1940		Afo, Plastic Or Other Material, Custom Fabricated	\$ 359.05
L1945		Afo, Molded To Patient Model, Plastic, Rigid Anterior Tibial Sect	\$ 858.41
L1950		Afo, Spiral (Institute Of Rehabilitative Medicine Type), Plastic, Cu	\$ 569.17
L1951		Afo, Spiral, (Institute Of Rehabilitative Medicine Type)Plastic Or C	\$ 636.46
L1960		Afo, Posterior Solid Ankle, Plastic, Custom Fabricated	\$ 429.28
L1970		Afo, Plastic With Ankle Joint, Custom Fabricated	\$ 516.60
L1971		Afo, Plastic Or Other Material With Ankle Joint, Prefabricated, Inc	\$ 355.22
L1980		Afo, Single Upright Free Plantar Dorsiflexion, Solid Stirrup, Calf E	\$ 266.45
L1990		Afo, Double Upright Free Plantar Dorsiflexion, Solid Stirrup, Calf	\$ 323.62
L2000		Knee-Ankle-Foot-Orthosis (Kafo); Single Upright, Free Knee, Free	\$ 766.71
L2005		Kafo, Any Material, Single Or Double Upright, Stance Control, Au	\$ 3,105.41
L2010		Kafo, Single Upright, Free Ankle, Solid Stirrup, Thigh And Calf Ba	\$ 715.22
L2020		Kafo, Double Upright, Free Ankle, Solid Stirrup, Thigh And Calf E	\$ 900.57
L2030		Kafo Double Upright, Free Ankle, Solid Stirrup, Thigh And Calf E	\$ 817.51
L2034		Kafo, Full Plastic, Single Upright, With Or Without Free Motion K	\$ 1,544.10

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L2035		Kafo, Full Plastic, Static (Pediatric Size), Prefabricated, Includes Fi	\$ 132.61
L2036		Kafo, Full Plastic, Double Upright, With Or Without Free Motion I	\$ 1,395.86
L2037		Knee Ankle Foot Orthosis, Full Plastic, Single Upright, With Or W	\$ 1,302.26
L2038		Knee Ankle Foot Orthosis, Full Plastic, With Or Without Free Mo	\$ 1,322.90
L2040		Hip-Knee-Ankle-Foot Orthosis (Hkafo), Torsion Control, Bilateral	\$ 160.44
L2050		Hkafo, Torsion Control, Bilateral Torsion Cables, Hip Joint, Pelvic	\$ 345.84
L2060		Hkafo, Torsion Control, Bilateral Torsion Cables, Ball Bearing Hip	\$ 421.52
L2070		Hkafo, Torsion Control, Unilateral Rotation Straps, Pelvic Band/Be	\$ 108.23
L2080		Hkafo, Torsion Control, Unilateral Torsion Cable, Hip Joint, Pelvic	\$ 261.13
L2090		Hkafo, Torsion Control, Unilateral Torsion Cable, Ball Bearing Hip	\$ 318.34
L2106		Ankle-Foot-Orthosis (Afo), Fracture Orthosis, Tibial Fracture Cast	\$ 493.62
L2108		Afo, Fracture Orthosis, Tibial Fracture Cast Orthosis, Custom Fabr	\$ 859.50
L2112		Afo, Fracture Orthosis, Tibial Fracture Soft, Prefabricated, Include	\$ 395.32
L2114		Afo, Fracture Orthosis, Tibial Fracture Semi-Rigid, Prefabricated	\$ 495.84
L2116		Afo, Fracture Orthosis, Tibial Fracture Rigid, Prefabricated, Includ	\$ 570.51
L2126		Knee-Ankle-Foot-Orthosis (Kafo), Fracture Orthosis, Femoral Frac	\$ 954.37
L2128		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Custom F	\$ 1,351.45
L2132		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Soft, Pref	\$ 732.70
L2134		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Semi-Rig	\$ 781.85
L2136		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Rigid, Pre	\$ 933.19
L2180		Addition To Lower Extremity Fracture Orthosis, Plastic Shoe Inser	\$ 87.10
L2182		Addition To Lower Extremity Fracture Orthosis, Drop Lock Knee J	\$ 72.16
L2184		Addition To Lower Extremity Fracture Orthosis, Limited Motion K	\$ 98.64
L2186		Addition To Lower Extremity Fracture Orthosis, Adjustable Motio	\$ 136.83
L2188		Addition To Lower Extremity Fracture Orthosis, Quadrilateral Brin	\$ 262.02
L2190		Addition To Lower Extremity Fracture Orthosis, Waist Belt	\$ 67.70
L2192		Addition To Lower Extremity Fracture Orthosis, Hip Joint, Pelvic I	\$ 297.29
L2200		Addition To Lower Extremity, Limited Ankle Motion, Each Joint	\$ 34.52
L2210		Addition To Lower Extremity, Dorsiflexion Assist(Plantar Flexion	\$ 49.96
L2220		Addition To Lower Extremity, Dorsiflexion And Plantar Flexion A	\$ 59.46
L2230		Addition To Lower Extremity, Split Flat Caliper Stirrups And Plate	\$ 55.70
L2232		Addition To Lower Extremity, Rocker Bottom For Total Contact A	\$ 75.42
L2240		Addition To Lower Extremity, Round Caliper And Plate Attachme	\$ 68.95
L2250		Addition To Lower Extremity, Foot Plate, Molded To Patient Mode	\$ 279.54
L2260		Addition To Lower Extremity, Reinforced Solid Stirrup(Scott-Craig	\$ 145.54
L2265		Addition To Lower Extremity, Long Tongue Stirrup	\$ 85.50
L2270		Addition To Lower Extremity, Varus/Valgus Correction, ("T") Stra	\$ 40.09
L2275		Addition To Lower Extremity, Varus/Valgus Correction, Plastic M	\$ 94.51
L2280		Addition To Lower Extremity, Molded Inner Boot	\$ 330.50
L2300		Addition To Lower Extremity, Abduction Bar (Bilateral Hip Involv	\$ 207.23
L2310		Addition To Lower Extremity, Abduction Bar-Straight	\$ 103.78
L2320		Addition To Lower Extremity, Non-Molded Lacer , For Custom Fa	\$ 149.38

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L2330		Addition To Lower Extremity, Lacer Molded To Patient Model, Fo	\$ 312.69
L2335		Addition To Lower Extremity, Anterior Swing Band	\$ 193.06
L2340		Addition To Lower Extremity, Pretibial Shell, Molded To Patient	\$ 417.93
L2350		Addition To Lower Extremity, Prosthetic Type, (Bk) Socket, Mold	\$ 721.82
L2360		Addition To Lower Extremity, Extended Steel Shank	\$ 37.56
L2370		Addition To Lower Extremity, Patten Bottom	\$ 243.41
L2375		Addition To Lower Extremity, Torsion Control, Ankle Joint And H	\$ 102.81
L2380		Addition To Lower Extremity, Torsion Control, Straight Knee Join	\$ 89.38
L2385		Addition To Lower Extremity, Straight Knee Joint, Heavy Duty, Ea	\$ 97.24
L2387		Addition To Lower Extremity, Polycentric Knee Joint, For Custom	\$ 140.10
L2390		Addition To Lower Extremity, Offset Knee Joint, Each Joint	\$ 81.42
L2395		Addition To Lower Extremity, Offset Knee Joint, Heavy Duty, Eac	\$ 113.59
L2397		Addition To Lower Extremity Orthosis, Suspension Sleeve	\$ 88.50
L2405		Addition To Knee Joint, Drop Lock, Each	\$ 66.06
L2415		Addition To Knee Lock With Integrated Release Mechanism (Bail,	\$ 92.04
L2425		Addition To Knee Joint, Disc Or Dial Lock For Adjustable Knee Fl	\$ 108.63
L2430		Addition To Knee Joint, Ratchet Lock For Active And Progressive	\$ 108.63
L2492		Addition To Knee Joint, Life Lock For Drop Lock Ring	\$ 98.62
L2500		Addition To Lower Extremity, Thigh/Weight Bearing, Gluteal/Isch	\$ 235.95
L2510		Addition To Lower Extremity, Thigh/Weight Bearing, Quadrilatera	\$ 529.39
L2520		Addition To Lower Extremity, Thigh/Weight Bearing, Quadrilatera	\$ 349.22
L2525		Addition To Lower Extremity, Thigh/Weight Bearing, Ischial Cont	\$ 942.18
L2526		Addition To Lower Extremity, Thigh/Weight Bearing, Ischial Cont	\$ 537.66
L2530		Addition To Lower Extremity, Thigh/Weight Bearing Lacer, Non-N	\$ 170.58
L2540		Addition To Lower Extremity, Thigh/Weight Bearing, Lacer, Mold	\$ 306.94
L2550		Addition To Lower Extremity, Thigh/Weight Bearing, High Roll C	\$ 208.51
L2570		Addition To Lower Extremity, Pelvic Control, Hip Joint, Clevis Ty	\$ 345.81
L2580		Addition To Lower Extremity, Pelvic Control, Pelvic Sling	\$ 336.94
L2600		Addition To Lower Extremity, Pelvic Control, Hip Joint, Clevis Ty	\$ 184.51
L2610		Addition To Lower Extremity, Pelvic Control, Hip Joint, Clevis Or	\$ 195.43
L2620		Addition To Lower Extremity, Pelvic Control, Hip Joint;Heavy Dut	\$ 219.74
L2622		Addition To Lower Extremity, Pelvic Control, Adjustable Flexion,	\$ 249.13
L2624		Addition To Lower Extremity, Pelvic Control, Adjustable Flexion,	\$ 240.42
L2627		Addition To Lower Extremity, Pelvic Control, Plastic, Molded To I	\$ 1,311.86
L2628		Addition To Lower Extremity, Pelvic Control, Metal Frame, Reci	\$ 1,290.42
L2630		Addition To Lower Extremity, Pelvic Control, Band And Belt, Uni	\$ 179.78
L2640		Addition To Lower Extremity, Pelvic Control, Band And Belt, Bila	\$ 243.98
L2650		Addition To Lower Extremity, Pelvic And Thoracic Control, Glute	\$ 103.87
L2660		Addition To Lower Extremity, Thoracic Control, Band	\$ 135.31
L2670		Addition To Lower Extremity, Thoracic Control, Paraspinal Uprigh	\$ 131.22
L2680		Addition To Lower Extremity, Thoracic Control, Lateral Support U	\$ 121.55
L2750		Addition To Lower Extremity Orthosis, Plating Chrome Or Nickel,	\$ 60.68

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
L2755		Addition To Lower Extremity Orthosis, High Strength, Lightweight	\$ 99.00
L2760		Addition To Lower Extremity Orthosis, Extension, Per Extension,	\$ 44.11
L2780		Addition To Lower Extremity Orthosis, Non-Corrosive Finish, Per	\$ 49.14
L2785		Addition To Lower Extremity Orthosis, Drop Lock Retainer, Each	\$ 23.10
L2795		Addition To Lower Extremity Orthosis, Knee Control, Full Kneeca	\$ 62.66
L2800		Addition To Lower Extremity Orthosis, Knee Control, Knee Cap, N	\$ 96.31
L2810		Addition To Lower Extremity Orthosis, Knee Control, Condylar Pa	\$ 75.61
L2820		Addition To Lower Extremity Orthosis, Soft Interface For Molded	\$ 63.05
L2830		Addition To Lower Extremity Orthosis, Soft Interface For Molded	\$ 68.21
L2840		Addition To Lower Extremity Orthosis, Tibial Length Sock, Fractu	\$ 40.32
L2850		Addition To Lower Extremity Orthosis, Femoral Length Sock, Frac	\$ 44.95
L3000		Foot, Insert, Removable, Molded To Patient Model, "Ucb" Type, B	\$ 238.06
L3001		Foot, Insert, Removable, Molded To Patient Model, Spenco, Each	\$ 100.24
L3002		Foot, Insert, Removable, Molded To Patient Model, Plastazote Or F	\$ 122.39
L3003		Foot, Insert, Removable, Molded To Patient Model, Silicone Gel, E	\$ 132.07
L3010		Foot, Insert, Removable, Molded To Patient Model, Longitudinal A	\$ 132.07
L3020		Foot, Insert, Removable, Molded To Patient Model, Longitudinal/M	\$ 150.35
L3030		Foot, Insert, Removable, Formed To Patient Foot Each	\$ 57.84
L3031		Foot, Insert/Plate, Removable, Addition To Lower Extremity Ortho	\$ 92.82
L3040		Foot, Arch Support, Removable, Premolded, Longitudinal, Each	\$ 35.66
L3050		Foot, Arch Support, Removable, Premolded, Metatarsal, Each	\$ 35.66
L3060		Foot, Arch Support, Removable, Premolded, Longitudinal/Metatars	\$ 55.89
L3070		Foot, Arch Support, Non-Removable Attached To Shoe, Longitudi	\$ 24.07
L3080		Foot, Arch Support, Non-Removable Attached To Shoe, Metatarsal	\$ 24.07
L3090		Foot, Arch Support, Non-Removable Attached To Shoe, Longitudi	\$ 30.85
L3100		Hallus-Valgus Night Dynamic Splint	\$ 32.77
L3140		Foot, Abduction Rotation Bar, Including Shoes	\$ 67.48
L3150		Foot, Abduction Rotation Bars, Without Shoes	\$ 61.69
L3170		Foot, Plastic, Silicone Or Equal, Heel Stabilizer	\$ 38.57
L3201		Orthopedic Shoe, Oxford With Supinator Or Pronator, Infant	\$ 36.00
L3202		Orthopedic Shoe, Oxford With Supinator Or Pronator Child	\$ 36.00
L3203		Orthopedic Shoe, Oxford With Supinator Or Pronator Junior	\$ 37.80
L3204		Orthopedic Shoe, Hightop With Supinator Or Pronator, Infant	\$ 36.00
L3206		Orthopedic Shoe, Hightop With Supinator Or Pronator, Child	\$ 36.00
L3207		Orthopedic Shoe, Hightop With Supinator Or Pronator, Junior	\$ 37.80
L3208		Surgical Boot, Each, Infant	\$ 17.10
L3209		Surgical Boot, Each, Child	\$ 17.10
L3211		Surgical Boot, Each, Junior	\$ 27.00
L3212		Benesch Boot, Pair; Infant	\$ 41.40
L3213		Benesch Boot, Pair, Child	\$ 54.00
L3214		Benesch Boot, Pair, Junior	\$ 63.90
L3215		Orthopedic Footwear, Ladies Shoes, Oxford, Each	\$ 80.38

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L3216		Orthopedic Footwear, Ladies Shoes, Depth Inlay, Each	\$ 123.93
L3217		Orthopedic Footwear, Ladies Shoes, Hightop, Depth Inlay, Each	\$ 164.43
L3219		Orthopedic Footwear, Men'S Shoes, Oxford, Each	\$ 82.52
L3221		Orthopedic Footwear, Men'S Shoes, Depth Inlay, Each	\$ 143.37
L3222		Orthopedic Footwear, Men'S Shoes, Shoes, Hightop, Depth Inlay, J	\$ 162.00
L3224		Orthopedic Footwear, Woman'S Shoe, Oxford, Used As An Integra	\$ 48.30
L3225		Orthopedic Footwear, Man'S Shoe, Oxford, Used As An Integral Pa	\$ 49.59
L3230		Orthopedic Footwear, Custom Shoes, Depth Inlay, Each	\$ 392.04
L3250		Orthopedic Footwear, Custom Molded Shoe, Removable Inner Mol	\$ 277.83
L3252		Foot, Shoe Molded To Patient Model, Plastazote (Or Similar), Cus	\$ 81.00
L3253		Foot, Molded Shoe Plastazote (Or Similar) Custom Fitted, Each	\$ 55.89
L3254		Non-Standard Size Or Width	\$ 12.96
L3255		Non-Standard Size Or Length	\$ 12.96
L3257		Orthopedic Footwear, Additional Charge For Split Size	\$ 27.00
L3260		Surgical Boot/Shoe, Each	\$ 84.24
L3265		Plastazote Sandal, Each	\$ 40.50
L3300		Lift, Elevation, Heel, Tapered To Metatarsal, Per Inch	\$ 39.51
L3310		Lift, Elevation, Heel And Sole, Neoprene, Per Inch	\$ 61.69
L3320		Lift, Elevation, Heel And Sole, Cork, Per Inch	\$ 103.68
L3330		Lift, Elevation, Metal Extension (Skate)	\$ 428.90
L3332		Lift, Elevation, Inside Shoe, Tapered, Up To One-Half Inch	\$ 55.89
L3334		Lift, Elevation, Heel, Per Inch	\$ 28.93
L3340		Heel Wedge, Sach	\$ 64.60
L3350		Heel Wedge	\$ 17.37
L3360		Sole Wedge, Outside Sole	\$ 26.98
L3370		Sole Wedge, Between Sole	\$ 37.56
L3380		Clubfoot Wedge	\$ 37.56
L3390		Outflare Wedge	\$ 37.56
L3400		Metatarsal Bar Wedge, Rocker	\$ 30.85
L3410		Metatarsal Bar Wedge, Between Sole	\$ 70.35
L3420		Full Sole And Heel Wedge; Between Sole	\$ 41.46
L3430		Heel, Counter, Plastic Reinforced	\$ 121.44
L3440		Heel, Counter, Leather Reinforced	\$ 57.84
L3450		Heel, Sach Cushion Type	\$ 80.01
L3455		Heel, New Leather, Standard	\$ 30.85
L3460		Heel, New Rubber, Standard	\$ 26.00
L3465		Heel, Thomas With Wedge	\$ 44.34
L3470		Heel, Thomas Extended To Ball	\$ 47.22
L3480		Heel, Pad And Depression For Spur	\$ 47.22
L3485		Heel, Pad, Removal For Spur	\$ 13.77
L3500		Orthopedic Shoe Addition, Insole, Leather	\$ 22.16
L3510		Orthopedic Shoe Addition Insole, Rubber	\$ 22.16

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
L3520		Orthopedic Shoe Addition Insole, Felt Covered With Leather	\$ 24.07
L3530		Orthopedic Shoe Addition Sole, Half	\$ 24.07
L3540		Orthopedic Shoe Addition Sole, Full	\$ 38.57
L3550		Orthopedic Shoe Addition Toe Tap, Standard)	\$ 6.73
L3560		Orthopedic Shoe Addition Toe Tap, Horseshoe	\$ 17.37
L3570		Orthopedic Shoe Addition, Special Extension To Instep(Leather Wi	\$ 64.60
L3580		Orthopedic Shoe Addition, Convert Instep To Velcro Closure	\$ 49.15
L3590		Orthopedic Shoe Addition, Convert Firm Shoe Counter To Soft Co	\$ 40.48
L3595		Orthopedic Shoe Addition, March Bar	\$ 31.79
L3600		Transfer Of An Orthosis From One Shoe To Another, Caliper Plate	\$ 57.84
L3610		Transfer Of An Orthosis From One Shoe To Another, Caliper Plate	\$ 76.14
L3620		Transfer Of An Orthosis From One Shoe To Another, Solid Stirrup	\$ 57.84
L3630		Transfer Of An Orthosis From One Shoe To Another, Solid Stirrup	\$ 76.14
L3640		Transfer Of An Orthosis From One Shoe To Another, Dennis Brow	\$ 32.77
L3650		Shoulder Orthosis, (So); Figure Of Eight Design Abduction Restrai	\$ 48.27
L3660		Shoulder Orthosis, Figure Of Eight Design Abduction Restrainer, C	\$ 73.02
L3670		Shoulder Orthosis, Acromio/Clavicular (Canvas And Webbing Ty	\$ 96.50
L3671		Shoulder Orthosis, Shoulder Cap Design, Without Joints, May Incl	\$ 621.48
L3674		So Airplane W/Wo Joint Cf	\$ 815.26
L3702		Elbow Orthosis, Without Joints, May Include Soft Interface, Straps	\$ 199.15
L3710		Elbow Orthosis (Eo), Elastic With Metal Joints, Prefabricated ,Incl	\$ 111.02
L3720		Elbow Orthosis (Eo), Double Upright With Forearm/Arm Cuffs, Fr	\$ 495.37
L3730		Elbow Orthosis (Eo), Double Upright With Fore/Arm Cuffs, Exten	\$ 640.42
L3740		Elbow Orthosis (Eo), Double Upright With Forearm/Arm Cuffs, Ac	\$ 759.27
L3760		Eo withjoint, prefabricated	\$ 344.90
L3761		Eo, adj lock joint prefab ot	\$ 344.90
L3762		Eo rigid w/o joints pre ots	\$ 74.16
L3763		Ewho, Rigid, Without Joints, May Includes Soft Interface, Straps, C	\$ 484.13
L3764		Ewho, Includes One Or More Nontorsion Joints, Elastic Bands, Tu	\$ 631.90
L3765		Ewhfo, Rigid, Without Joints, May Include Soft Interface, Straps, C	\$ 884.36
L3766		Ewhfo, Includes One Or More Nontorsion Joints, Elastic Bands, Tu	\$ 936.47
L3806		Wrist-Hand-Finger Orthosis, Includes One Or More Nontorsion Joi	\$ 313.30
L3807		Wrist-Hand-Finger-Orthosis (Whfo), Without Joint(S), Prefabricate	\$ 172.46
L3808		Wrist-Hand-Finger Orthosis, Rigid Without Joints, May Include So	\$ 257.91
L3900		Wrist-Hand-Finger Orthosis, Dynamic Flexor Hinge, Reciprocal W	\$ 1,005.66
L3901		Wrist-Hand-Finger Orthosis, Dynamic Flexor Hinge, Reciprocal W	\$ 1,142.05
L3904		Wrist-Hand-Finger Orthosis, External Powered, Electric, Custom F	\$ 2,080.47
L3905		Wrist-Hand Orthosis, Includes One Or More Nontorsion Joints, Ela	\$ 683.98
L3906		Wrist-Hand Orthosis, Without Joints, May Include Soft Interface, S	\$ 303.69
L3908		Wrist-Hand Orthosis (Who), Wrist Extension Control Cock-Up, Pr	\$ 47.79
L3912		Hand-Finger Orthosis, Flexion Glove With Elastic Finger Control,	\$ 82.79
L3913		Hand-Finger Orthosis, Without Joints, May Include Soft Interface,	\$ 186.80

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L3915		Wrist-Hand-Finger Orthosis, Includes One Or More Nontorsion Joi	\$ 366.62
L3917		Hand Orthosis, Metacarpal Fracture Orthosis, Prefabricated, Includ	\$ 72.88
L3919		Hand Orthosis, Without Joints, May Include Soft Interface, Straps,	\$ 186.80
L3921		Hand-Finger Orthosis, Includes One Or More Nontorsion Joints, El	\$ 221.54
L3923		Hfo, Without Joints, May Include Soft Interface, Straps, Prefabricat	\$ 66.57
L3925		Finger Orthosis Proximal Interphalangeal (Pip)/Distal Interphalange	\$ 35.70
L3927		Finger Orthosis, Proximal Interphalangeal (Pip)/DistalInterphalange	\$ 24.11
L3929		Hand Finger Orthosis, Includes One Or More Nontorsion Joint(S) T	\$ 63.26
L3931		Wrist Hand Finger Orthosis, Includes One Or More Nontorsion Joi	\$ 129.54
L3933		Finger Orthosis, Without Joints, May Include Soft Interface, Custor	\$ 147.14
L3935		Finger Orthosis, Nontorsion Joint, May Include Soft Interface, Cust	\$ 152.36
L3960		Shoulder-Elbow-Wrist-Hand Orthosis (Sewho); Abduction Position	\$ 522.59
L3961		Shoulder-Elbow-Wrist-Hand Orthosis, Shoulder Cap Design, With	\$ 1,158.78
L3962		Shoulder-Elbow-Wrist-Hand Orthosis, Abduction Positioning, Erbs	\$ 509.74
L3967		Sewho, Abduction Positioning (Airplane Design), Thoracic Compo	\$ 1,368.12
L3971		Sewho, Shoulder Cap Design, Includes One Or More Nontorsion Jo	\$ 1,298.67
L3973		Sewho, Abduction Positioning (Airplane Design), Thoracic Compo	\$ 1,368.12
L3975		Sewhfo, Shoulder Cap Design, Without Joints, May Include Soft In	\$ 1,158.78
L3976		Sewhfo, Abduction Positioning (Airplane Design), Thoracic Compo	\$ 1,158.78
L3977		Sewhfo, Shoulder Cap Design, Includes One Or More Nontorsion J	\$ 1,298.67
L3978		Sewhfo, Abduction Positioning (Airplane Design), Thoracic Compo	\$ 1,368.12
L3980		Upper Extremity Fracture Orthosis, Humeral, Prefabricated, Includ	\$ 227.49
L3981		Ue fx orth shoul cap forearm	\$ 694.23
L3982		Upper Extremity Fracture Orthosis, Radius/Ulnar, Prefabricated, Ir	\$ 265.22
L3984		Upper Extremity Fracture Orthosis, Wrist, Prefabricated, Includes	\$ 244.52
L3995		Addition To Upper Extremity Orthosis, Sock, Fracture Or Equal, E	\$ 25.34
L4000		Replace Girdle For Spinal Orthosis (Ctlso Or So)	\$ 999.42
L4002		Replacement Strap, Any Orthosis, Includes All Components, Any I	\$ 11.52
L4010		Replace trilateral socket br	\$ 487.24
L4020		Replace Quadrilateral Socket Brim, Molded To Patient Model	\$ 681.42
L4030		Replace Quadrilateral Socket Brim, Custom Fitted	\$ 366.55
L4040		Replace Molded Thigh Lacer, For Custom Fabricated Orthosis Only	\$ 299.11
L4045		Replace Non-Molded Thigh Lacer, For Custom Fabricated Orthosis	\$ 238.15
L4050		Replace Molded Calf Lacer, For Custom Fabricated Orthosis Only	\$ 299.73
L4055		Replace Non-Molded Calf Lacer, For Custom Fabricated Orthosis C	\$ 194.08
L4060		Replace High Roll Cuff	\$ 230.73
L4070		Replace Proximal And Distal Upright For Kafo	\$ 204.32
L4080		Replace Metal Bands Kafo, Proximal Thigh	\$ 83.81
L4090		Replace Metal Bands Kafo-Afo, Calf Or Distal Thigh	\$ 66.13
L4100		Replace Leather Cuff Kafo, Proximal Thigh	\$ 86.83
L4110		Replace Leather Cuff Kafo-Afo, Calf Or Distal Thigh	\$ 65.42
L4130		Replace Pretibial Shell	\$ 366.82

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L4205		Repair Of Orthotic Device, Labor Component, Per 15 Minutes	\$ 18.17
L4350		Ankle Control Orthosis, Stirrup Style, Rigid, IncludesAny Type Inte	\$ 72.66
L4360		Walking Boot, Pneumatic, With Or Without Joints, With Or Witho	\$ 223.40
L4370		Pneumatic Full Leg Splint, Prefabricated, Includes Fitting And Adj	\$ 147.74
L4386		Walking Boot, Non-Pneumatic, With Or Without Joints, With Or V	\$ 120.15
L4392		Replacement, Soft Interface Material; Static Afo	\$ 17.82
L4394		Replace Soft Interface Material, Foot Drop Splint	\$ 13.01
L4396		Static Ankle Foot Orthosis, Including Soft Interface Material, Adju	\$ 127.16
L4398		Foot Drop Splint, Recumbent Positioning Device, Prefabricated, In	\$ 58.55
L4631		Afo, Walk Boot Type, Cus Fab	\$ 1,208.39
L5000		Partial Foot, Shoe Insert With Longitudinal Arch, Toe Filter	\$ 431.10
L5010		Partial Foot, Molded Socket, Ankle Height, With Toe Filler	\$ 941.66
L5020		Partial Foot, Molded Socket, Tibial Tubercle Height, With Toe Fill	\$ 1,532.83
L5050		Ankle, Symes, Molded Socket Sach Foot	\$ 1,775.09
L5060		Ankle, Symes, Metal Frame, Molded Leather Socket, Articulated A	\$ 2,136.34
L5100		Below Knee, Molded, Socket, Shin, Sach Foot	\$ 1,849.17
L5105		Below Knee, Plastic Socket, Joints And Thigh Lacer, Sach Foot	\$ 2,935.02
L5150		Knee Disarticulation (Or Through Knee), Molded Socket, External	\$ 2,716.19
L5160		Knee Disarticulation (Or Through Knee), Molded Socket Bent Kne	\$ 2,954.34
L5200		Above Knee, Molded Socket, Single Axis Constant Friction Knee,	\$ 2,573.49
L5210		Above Knee, Short Prosthesis, No Knee Joint("Stubbies"), With Fo	\$ 1,876.90
L5220		Above Knee, Short Prosthesis, No Knee Joint ("Stubbies"), With A	\$ 2,133.43
L5230		Above Knee, For Proximal Femoral Focal Deficiency, Constant Fri	\$ 2,942.42
L5250		Hip Disarticulation, Canadian Type, Molded Socket, Hip Joint, Sin	\$ 4,013.20
L5270		Hip Disarticulation, Tilt Table Type; Molded Socket, Locking Hip	\$ 3,978.04
L5280		Hemipelvectomy, Canadian Type; Molded Socket, Hip Joint, Singl	\$ 3,938.26
L5301		Below Knee, Molded Socket, Shin, Sach Foot, Endoskeletal System	\$ 1,775.91
L5312		Knee Disarticulation (Or Through Knee), Molded Socket, External	\$ 2,551.30
L5321		Above Knee, Molded Socket, Open End, Sach Foot, Endoskeletal S	\$ 2,542.18
L5331		Hip Disarticulation, Canadian Type, Molded Socket, Endoskeletal S	\$ 3,597.27
L5341		Hemipelvectomy, Canadian Type, Molded Socket, Endoskeletal Sy	\$ 3,909.10
L5400		Immediate Post Surgical Or Early Fitting; Application Of Initial Ri	\$ 930.90
L5410		Immediate Post Surgical Or Early Fitting; Application Of Initial Ri	\$ 407.86
L5420		Immediate Post Surgical Or Early Fitting; Application Of Initial Ri	\$ 1,175.69
L5430		Immediate Post Surgical Or Early Fitting; Application Of Initial Ri	\$ 518.96
L5450		Immediate Post Surgical Or Early Fitting; Application Of Non-We	\$ 331.99
L5460		Immediate Post Surgical Or Early Fitting; Application Of Non-Wei	\$ 489.33
L5500		Initial, Below Knee "Ptb" Type Socket, Non-Alignable System, Pyl	\$ 993.39
L5505		Initial, Above Knee - Knee Disarticulation, Ischial Level Socket No	\$ 1,345.31
L5510		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignable Syste	\$ 1,126.07
L5520		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignable Syste	\$ 1,112.30
L5530		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignable Syste	\$ 1,407.94

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L5535		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignable Syste	\$ 1,387.51
L5540		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignable Syste	\$ 1,465.15
L5560		Preparatory, Above Knee - Knee Disarticulation, Ischial Level Sock	\$ 1,503.30
L5570		Preparatory, Above Knee - Knee Disarticulation, Ischial Level Sock	\$ 1,562.90
L5580		Preparatory, Above Knee - Knee Disarticulation, Ischial Level Sock	\$ 1,824.58
L5585		Preparatory, Above Knee - Knee Disarticulation, Ischial Level Sock	\$ 1,978.98
L5590		Preparatory, Above Knee - Knee Disarticulation, Ischial Level Sock	\$ 1,859.38
L5595		Preparatory, Hip Disarticulation-Hemipelvectomy, Pylon, No Cove	\$ 3,268.29
L5600		Preparatory, Hip Disarticulation – Hemipelvectomy, Pylon, No Cov	\$ 3,564.79
L5610		Addition To Lower Extremity, Endoskeletal System;Above Knee, F	\$ 1,601.38
L5611		Addition To Lower Extremity, Endoskeletal System; Above Knee,	\$ 1,246.20
L5613		Addition To Lower Extremity, Endoskeletal System; Above Knee -	\$ 1,895.54
L5614		Addition To Lower Extremity, Endoskeletal Above Knee- Knee Dis	\$ 1,281.31
L5616		Addition To Lower Extremity, Endoskeletal Above Knee- Universa	\$ 1,050.50
L5617		Addition To Lower Extremity, Quick Change Self- Aligning Unit,	\$ 424.84
L5618		Addition To Lower Extremity, Test Socket, Symes	\$ 244.74
L5620		Addition To Lower Extremity, Test Socket, Below Knee	\$ 215.04
L5622		Addition To Lower Extremity, Test Socket, Knee Disarticulation	\$ 328.41
L5624		Addition To Lower Extremity, Test Socket, Above Knee	\$ 313.33
L5626		Addition To Lower Extremity, Test Socket, Hip Disarticulation	\$ 440.43
L5628		Addition To Lower Extremity, Test Socket, Hemipelvectomy	\$ 417.15
L5629		Addition To Lower Extremity, Below Knee, Acrylic Socket	\$ 318.55
L5630		Addition To Lower Extremity, Symes Type, Expandable Wall Sock	\$ 347.13
L5631		Addition To Lower Extremity, Above Knee Or Knee Disarticulatio	\$ 415.11
L5632		Addition To Lower Extremity, Symes Type; "Ptb" Brim Design Sock	\$ 171.74
L5634		Addition To Lower Extremity, Symes Type; Posterior Opening (Ca	\$ 235.28
L5636		Addition To Lower Extremity, Symes Type; Medial Opening Sock	\$ 197.08
L5637		Addition To Lower Extremity, Below Knee; Total Contact	\$ 263.26
L5638		Addition To Lower Extremity, Below Knee Leather Socket	\$ 376.42
L5639		Addition To Lower Extremity, Below Knee Wood Socket	\$ 883.06
L5640		Addition To Lower Extremity, Knee Disarticulation, Leather Socke	\$ 537.63
L5642		Addition To Lower Extremity, Above Knee, Leather Socket	\$ 481.33
L5643		Addition To Lower Extremity, Hip Disarticulation, Flexible Inner S	\$ 1,203.86
L5644		Addition To Lower Extremity, Above Knee, Wood Socket	\$ 456.85
L5645		Addition To Lower Extremity, Below Knee, Flexible Inner Socket,	\$ 617.15
L5646		Addition To Lower Extremity, Below Knee, Air Cushion Socket	\$ 423.79
L5647		Addition To Lower Extremity, Below Knee, Suction Socket	\$ 615.26
L5648		Addition To Lower Extremity, Above Knee, Air Cushion Socket	\$ 509.23
L5649		Addition To Lower Extremity, Ischial Containment/Narrow M-L Sc	\$ 1,545.97
L5650		Addition To Lower Extremity, Total Contact, Above Knee Or Knee	\$ 377.60
L5651		Addition To Lower Extremity, Above Knee, Flexible Inner Socket,	\$ 928.88
L5652		Addition To Lower Extremity, Suction Suspension, Above Knee O	\$ 337.22

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L5653		Addition To Lower Extremity, Knee Disarticulation, Expandable W	\$ 450.16
L5654		Addition To Lower Extremity, Socket Insert; Symes, (Kemblo, Peli	\$ 256.52
L5655		Addition To Lower Extremity, Socket Insert Below Knee (Kemblo	\$ 217.19
L5656		Addition To Lower Extremity, Socket Insert, Knee Disarticulation,	\$ 305.94
L5658		Addition To Lower Extremity, Socket Insert, Above Knee(Kemblo,	\$ 297.94
L5661		Addition To Lower Extremity, Socket Insert ,Multi-Durometer Syn	\$ 517.77
L5665		Addition To Lower Extremity, Socket Insert Multi-Durometer, Bel	\$ 396.04
L5666		Addition To Lower Extremity; Below Knee, Cuff Suspension	\$ 58.85
L5668		Addition To Lower Extremity; Below Knee, Molded Distal Cushio	\$ 78.58
L5670		Addition To Lower Extremity; Below Knee, Molded Supracondyla	\$ 239.20
L5671		Addition To Lower Extremity; Below Knee/Above Knee Suspensio	\$ 384.74
L5672		Additional To Lower Extremity Below Knee, Removable Medial B	\$ 292.28
L5673		Additional To Lower Extremity Below Knee/Above Knee, Custom	\$ 543.42
L5676		Additional To Lower Extremity Below Knee, Knee Joints, Single A	\$ 280.28
L5677		Additional To Lower Extremity Below Knee, Knee Joints, Polycen	\$ 381.37
L5678		Additional To Lower Extremity Below Knee, Joint Covers, Pair	\$ 30.71
L5679		Additional To Lower Extremity, Below Knee/Above Knee, Custom	\$ 452.83
L5680		Additional To Lower Extremity Below Knee, Thigh Lacer, Non-Mc	\$ 267.89
L5681		Additional To Lower Extremity, Below Knee/AboveKnee, Custom	\$ 998.79
L5682		Additional To Lower Extremity Below Knee, Thigh Lacer, Gluteal/	\$ 483.72
L5683		Addition To Lower Extremity, Below Knee/Above Knee, Custom F	\$ 998.79
L5684		Addition To Lower Extremity, Below Knee, Fork Strap	\$ 37.22
L5685		Addition To Lower Extremity Prosthesis, Below Knee, Suspension	\$ 97.26
L5686		Addition To Lower Extremity, Below Knee, Back Check(Extension	\$ 50.21
L5688		Addition To Lower Extremity, Below Knee, Waist Belt, Webbing	\$ 47.25
L5690		Addition To Lower Extremity, Below Knee, Waist Belt, Padded Ar	\$ 91.49
L5692		Addition To Lower Extremity, Above Knee; Pelvic Control Belt, L	\$ 106.19
L5694		Addition To Lower Extremity, Pelvic Control Belt, Padded And Li	\$ 140.32
L5695		Addition To Lower Extremity, Pelvic Control, Sleeve Suspension,	\$ 147.20
L5696		Addition To Lower Extremity, Above Knee Or Knee Disarticulatio	\$ 160.86
L5697		Addition To Lower Extremity, Pelvic Band	\$ 65.34
L5698		Addition To Lower Extremity, Silesian Bandage	\$ 81.26
L5699		All Lower Extremity Prostheses, Shoulder Harness	\$ 144.22
L5700		Replacement, Socket; Below Knee, Molded To Patient Model	\$ 2,228.31
L5701		Replacement, Socket; Above Knee/Knee Disarticulation, Including	\$ 2,764.42
L5702		Replacement, Socket; Hip Disarticulation, Including Hip Joint, Mo	\$ 3,484.14
L5703		Ankle, Symes, Molded To Patient Model, Socket Without Solid Ar	\$ 1,618.00
L5704		Custom Shaped Protective Cover, Below Knee	\$ 454.34
L5705		Custom Shaped Protective Cover, Above Knee	\$ 832.99
L5706		Custom Shaped Protective Cover, Knee Disarticulation	\$ 812.47
L5707		Custom Shaped Protective Cover, Hip Disarticulation	\$ 1,091.55
L5710		Addition, Exoskeletal Knee-Shin System, Single Axis;Manual Lock	\$ 278.18

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L5711		Addition, Exoskeletal Knee-Shin System, Single Axis;Manual Lock	\$ 422.00
L5712		Addition, Exoskeletal Knee-Shin System, Single Axis;Friction Swi	\$ 333.29
L5714		Addition, Exoskeletal Knee-Shin System, Single Axis;Variable Fric	\$ 343.70
L5716		Addition, Exoskeletal Knee-Shin System, Polycentric;Mechanical S	\$ 563.74
L5718		Addition, Exoskeletal Knee-Shin System, Single Axis;Friction Swi	\$ 704.61
L5722		Addition, Exoskeletal Knee-Shin System, Single Axis;Pneumatic S	\$ 735.29
L5724		Addition, Exoskeletal Knee-Shin System, Single Axis;Fluid Swing	\$ 1,167.49
L5726		Addition, Exoskeletal Knee-Shin System, Single Axis;External Joi	\$ 1,533.04
L5728		Addition, Exoskeletal Knee-Shin System, Single Axis;Fluid Swing	\$ 1,909.97
L5780		Addition, Exoskeletal Knee-Shin System, Single Axis;Pneumatic/H	\$ 920.89
L5785		Addition, Exoskeletal System, Below Knee, Ultra-Light Material (T	\$ 401.86
L5790		Addition, Exoskeletal System, Above Knee, Ultra-Light Material (T	\$ 556.14
L5795		Addition, Exoskeletal System, Hip Disarticulation, Ultra-Light Mat	\$ 830.46
L5810		Addition, Endoskeletal Knee-Shin System, Single Axis;Manual Lock	\$ 386.34
L5811		Addition, Endoskeletal Knee-Shin System, Single Axis;Manual Lock	\$ 564.10
L5812		Addition, Endoskeletal Knee-Shin System, Single Axis;Friction Sw	\$ 437.24
L5814		Addition, Endoskeletal Knee-Shin System, Polycentric; Hydraulic S	\$ 2,819.98
L5816		Addition, Endoskeletal Knee-Shin System, Polycentric;Mechanical	\$ 657.80
L5818		Addition, Endoskeletal Knee-Shin System, Polycentric;Friction Sw	\$ 742.78
L5822		Addition, Endoskeletal Knee-Shin System, Single Axis;Pneumatic	\$ 1,441.06
L5824		Addition, Endoskeletal Knee-Shin System, Single Axis Fluid Swing	\$ 1,186.17
L5826		Addition, Endoskeletal Knee-Shin System, Single Axis Hydraulic S	\$ 2,394.98
L5828		Addition, Endoskeletal Knee-Shin System, Single Axis Fluid Swing	\$ 2,261.09
L5830		Addition, Endoskeletal Knee-Shin System, Single Axis Pneumatic	\$ 1,606.60
L5840		Addition, Endoskeletal Knee-Shin System, 4-Bar Linkage Or Multi	\$ 2,833.05
L5845		Addition, Endoskeletal, Knee-Shin System; Stance Flexion Feature	\$ 1,360.98
L5850		Addition, Endoskeletal System; Above Knee Or Hip Disarticulation	\$ 102.74
L5855		Addition, Endoskeletal System; Hip Disarticulation, Mechanical H	\$ 238.87
L5910		Addition, Endoskeletal System, Below Knee, Alignable System	\$ 282.12
L5920		Addition, Endoskeletal System, Above Knee Or Hip Disarticulation	\$ 410.40
L5925		Addition, Endoskeletal System, Above Knee, Knee Disarticulation	\$ 259.90
L5930		Addition, Endoskeletal System; High Activity Knee Control Frame	\$ 2,555.80
L5940		Addition, Endoskeletal System; Below Knee, Ultra- Light Material	\$ 387.98
L5950		Addition, Endoskeletal System; Above Knee, Ultra- Light Material	\$ 655.44
L5960		Addition, Endoskeletal System; Hip Disarticulation, Ultra-Light M	\$ 785.10
L5961		Endo Poly Hip, Pneu/Hyd/Rot	\$ 3,518.88
L5962		Addition, Endoskeletal System; Below Knee, Flexible Protective C	\$ 454.64
L5964		Addition, Endoskeletal System; Above Knee, Flexible Protective C	\$ 814.37
L5966		Addition, Endoskeletal System; Hip Disarticulation, Flexible Prot	\$ 1,049.02
L5970		All Lower Extremity Prostheses; Foot, External Keel, Sach Foot	\$ 169.80
L5971		All Lower Extremity Prosthesis, Solid Ankle Cushion Heel (Sach)	\$ 169.80
L5972		All Lower Extremity Prosthesis, Flexible Keel Foot(Safe, Sten, Boc	\$ 272.59

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L5974		All Lower Extremity Prosthesis, Foot, Single Axis Ankle/Foot	\$ 229.99
L5975		All Lower Extremity Prosthesis; Combination Single Axis Ankle A	\$ 352.01
L5976		All Lower Extremity Prosthesis, Energy Storing Foot(Seattle Carb	\$ 433.17
L5978		All Lower Extremity Prosthesis, Foot, Multiaxial Ankle/Foot	\$ 225.72
L5979		All Lower Extremity Prosthesis, Multiaxial Ankle, Dynamic Respo	\$ 1,811.26
L5980		All Lower Extremity Prosthesis, Flex Foot System	\$ 2,867.81
L5981		All Lower Extremity Prosthesis, Flex-Walk System Or Equal	\$ 2,478.84
L5982		All Exoskeletal Lower Extremity Prosthesis, Axial Rotation Unit	\$ 447.15
L5984		All Endoskeletal Lower Extremity Prosthesis, Axial Rotation Unit,	\$ 443.18
L5985		All Endoskeletal Lower Extremity Prosthesis, Dynamic Prosthetic	\$ 214.43
L5986		All Lower Extremity Prosthesis, Multi-Axial Rotation Unit ("Mcp'	\$ 492.74
L5987		All Lower Extremity Prosthesis, Shank Foot System With Vertical	\$ 5,462.31
L5988		Addition To Lower Limb Prosthesis, Vertical Shock Reducing Pylc	\$ 1,516.90
L5990		Addition To Lower Extremity Prosthesis, User Adjustable Heel He	\$ 1,377.58
L6000		Partial Hand, Robin-Aids; Thumb Remaining (Or Equal)	\$ 1,027.70
L6010		Partial Hand, Robin-Aids; Little And/Or Ring Finger Remaining (\$ 1,143.66
L6020		Partial Hand, Robin-Aids; No Finger Remaining (Or Equal)	\$ 1,066.29
L6026		Part hand myo exclu term dev	\$ 3,270.94
L6050		Wrist Disarticulation, Molded Socket, Flexible Elbow Hinges, Tric	\$ 1,469.30
L6055		Wrist Disarticulation, Molded Socket With Expandable Interface, F	\$ 2,335.51
L6100		Below Elbow, Molded Socket; Flexible Elbow Hinge, Triceps Pad	\$ 1,488.63
L6110		Below Elbow, (Muenster Or Northwestern Suspension Types)	\$ 1,578.94
L6120		Below Elbow, Molded Double Wall Split Socket; Set-Up Hinges, F	\$ 1,840.03
L6130		Below Elbow, Molded Double Wall Split Socket Stump Activated	\$ 2,002.30
L6200		Elbow Disarticulation, Molded Socket, Outside Locking Hinge, Fo	\$ 2,110.10
L6205		Elbow Disarticulation, Molded Socket With Expandable Interface,	\$ 3,516.25
L6250		Above Elbow, Molded Double Wall Socket, Internal Locking Elbo	\$ 2,077.04
L6300		Shoulder Disarticulation, Molded Socket, Shoulder Bulkhead, Hum	\$ 2,881.67
L6310		Shoulder Disarticulation, Passive Restoration; (Complete Prosthesi	\$ 2,369.80
L6320		Shoulder Disarticulation, Passive Restoration; (Complete Prosthesi	\$ 1,321.81
L6350		Interscapular Thoracic; Molded Socket, Shoulder Bulkhead, Humer	\$ 3,029.63
L6360		Interscapular Thoracic Passive Restoration (Complete Prosthesis)	\$ 2,487.16
L6370		Interscapular Thoracic Passive Restoration (Shoulder Cap Only)	\$ 1,872.44
L6380		Immediate Post Surgical Or Early Fitting, Application Of Initial Rig	\$ 1,011.28
L6382		Immediate Post Surgical Or Early Fitting, Application Of Initial Rig	\$ 1,210.14
L6384		Immediate Post Surgical Or Early Fitting, Application Of Initial Rig	\$ 1,476.70
L6386		Immediate Post Surgical Or Early Fitting; Each Additional Cast Ch	\$ 354.13
L6388		Immediate Post Surgical Or Early Fitting; Application Of Rigid Dr	\$ 340.03
L6400		Below Elbow, Molded Socket Endoskeletal System, Including Soft	\$ 1,798.54
L6450		Elbow Disarticulation, Molded Socket, Endoskeletal System, Includ	\$ 2,384.68
L6500		Above Elbow, Molded Socket, Endoskeletal System, Including Sof	\$ 2,386.63
L6550		Shoulder Disarticulation, Molded Socket, Endoskeletal System, Inc	\$ 2,949.44

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
L6570		Interscapular Thoracic, Molded Socket, Endoskeletal System, Inclu	\$ 3,578.68
L6580		Preparatory, Wrist Disarticulation Or Below Elbow, Single Wall Pl	\$ 1,249.19
L6582		Preparatory, Wrist Disarticulation Or Below Elbow, Single Wall Sc	\$ 1,064.54
L6584		Preparatory, Elbow Disarticulation Or Above Elbow; Single Wall F	\$ 1,724.36
L6586		Preparatory, Elbow Disarticulation Or Above Elbow; Single Wall Sc	\$ 1,508.46
L6588		Preparatory, Shoulder Disarticulation Or Interscapular Thoracic; Si	\$ 2,490.11
L6590		Preparatory, Shoulder Disarticulation Or Interscapular Thoracic; Si	\$ 2,277.76
L6600		Upper Extremity Additions, Polycentric Hinge, Pair	\$ 153.69
L6605		Upper Extremity Additions, Single Pivot Hinge, Pair	\$ 143.46
L6610		Upper Extremity Additions, Flexible Metal Hinge, Pair	\$ 128.78
L6611		Addition To Upper Extremity Prosthesis, External Powered, Additi	\$ 312.64
L6615		Upper Extremity Additions, Disconnect Locking Wrist Unit	\$ 158.78
L6616		Upper Extremity Additions, Additional Disconnect Insert For Lock	\$ 66.90
L6620		Upper Extremity Additions, Flexion/Extension Wrist Unit, With Or	\$ 249.22
L6621		Upper Extremity Prosthesis Addition, Flexion/Extension Wrist Wit	\$ 1,736.79
L6623		Upper Extremity Additions, Spring Assisted Rotational Wrist Unit	\$ 570.44
L6624		Upper Extremity Addition, Flexion/Extension And Rotation Wrist	\$ 2,859.67
L6625		Upper Extremity Additions, Rotation Wrist Unit With Cable Lock	\$ 415.10
L6628		Upper Extremity Additions, Quick Disconnect Hook Adapter, Otto	\$ 424.19
L6629		Upper Extremity Additions, Quick Disconnect Lamination Collar V	\$ 113.16
L6630		Upper Extremity Additions, Stainless Steel, Any Wrist	\$ 166.70
L6632		Upper Extremity Additions, Latex Suspension Sleeve, Each	\$ 55.60
L6635		Upper Extremity Additions, Lift Assist For Elbow	\$ 154.40
L6637		Upper Extremity Additions, Nudge Control Elbow Lock	\$ 320.50
L6638		Upper Extremity Addition To Prosthesis, Electric Locking Feature,	\$ 1,898.86
L6640		Upper Extremity Addition To Prosthesis, Shoulder Abduction Joint	\$ 218.72
L6641		Upper Extremity Addition To Prosthesis, Excursion Amplifier, Pul	\$ 145.37
L6642		Upper Extremity Addition To Prosthesis, Excursion Amplifier, Lev	\$ 206.97
L6645		Upper Extremity Addition To Prosthesis, Shoulder Flexion - Abduc	\$ 251.34
L6650		Upper Extremity Addition, Shoulder Universal Joint, Each	\$ 261.81
L6655		Upper Extremity Addition, Standard Control Cable, Extra	\$ 58.10
L6660		Upper Extremity Addition, Heavy Duty Control Cable	\$ 70.99
L6665		Upper Extremity Addition, Teflon, Or Equal, Cable Lining	\$ 40.58
L6670		Upper Extremity Addition, Hook To Hand, Cable Adapter	\$ 38.48
L6672		Upper Extremity Addition, Harness, Chest Or Shoulder, Saddle Ty	\$ 130.42
L6675		Upper Extremity Addition, Harness, (E.G., Figure Of Eight Type),	\$ 92.89
L6676		Upper Extremity Addition, Harness, (E.G., Figure Of Eight Type)	\$ 93.80
L6677		Upper Extremity Addition, Harness, Triple Control, Simultaneous C	\$ 225.25
L6680		Upper Extremity Addition, Test Socket, Wrist Disarticulation Or B	\$ 179.45
L6682		Upper Extremity Addition, Test Socket, Elbow Disarticulation Or A	\$ 201.13
L6684		Upper Extremity Addition, Test Socket, Should Disarticulation Or	\$ 269.61
L6686		Upper Extremity Addition, Suction Socket	\$ 501.38

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
L6687		Upper Extremity Addition, Frame Type Socket, Below Elbow Or W	\$ 446.14
L6688		Upper Extremity Addition, Frame Type Socket, Above Elbow Or H	\$ 431.57
L6689		Upper Extremity Addition, Frame Type Socket, Should Disarticulat	\$ 521.17
L6690		Upper Extremity Addition, Frame Type Socket, Interscapular Thora	\$ 564.39
L6691		Upper Extremity Addition, Removable Insert, Each	\$ 337.54
L6692		Upper Extremity Addition, Silicone Gel Insert Or Equal, Each	\$ 432.55
L6693		Upper Extremity Addition, Locking Elbow, Forearm Counterbalan	\$ 2,155.70
L6694		Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbo	\$ 543.42
L6695		Additional To Upper Extremity Prosthesis, Below Elbow/Above El	\$ 452.83
L6696		Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbo	\$ 998.79
L6697		Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbo	\$ 998.79
L6698		Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbo	\$ 384.74
L6703		Terminal Device, Passive Hand/Mitt, Any Material, Any Size	\$ 273.54
L6706		Terminal Device, Hook, Mechanical, Voluntary Opening, Any Mat	\$ 269.88
L6707		Terminal Device, Hook, Mechanical, Voluntary Closing, Any Mate	\$ 1,137.43
L6708		Terminal Device, Hand, Mechanical, Voluntary Opening, Any Mat	\$ 646.98
L6709		Terminal Device, Hand, Mechanical, Voluntary Closing, Any Mate	\$ 1,047.11
L6711		Ped Term Dev, Hook, Vol Open	\$ 510.48
L6712		Ped Term Dev, Hook, Vol Clos	\$ 939.92
L6713		Ped Term Dev, Hand, Vol Open	\$ 1,186.30
L6714		Ped Term Dev, Hand, Vol Clos	\$ 1,004.78
L6721		Hook/Hand, Hvy Dty, Vol Open	\$ 1,785.88
L6722		Hook/Hand, Hvy Dty, Vol Clos	\$ 1,539.57
L6805		Terminal Device, Modifier Wrist Flexion Unit	\$ 278.42
L6810		Terminal Device; Pincher Tool, Otto Bock Or Equal	\$ 151.76
L6883		Replacement Socket, Below Elbow/Wrist Disarticulation, Molded	\$ 1,227.41
L6884		Replacement Socket, Above Elbow, Disarticulation, Molded To Pa	\$ 1,726.79
L6885		Replacement Socket, Shoulder Disarticulation/Interscapular Thora	\$ 2,487.16
L6890		Addition To Upper Extremity Prosthesis, Glove For Terminal Devi	\$ 131.56
L6895		Addition To Upper Extremity Prosthesis, Glove For Terminal Devi	\$ 478.82
L6900		Hand Restoration (Casts, Shading And Measurements Included), Pa	\$ 1,242.69
L6905		Hand Restoration (Casts, Shading And Measurements Included), Pa	\$ 1,219.98
L6910		Hand Restoration (Casts, Shading And Measurements Included), Pa	\$ 1,252.38
L6915		Hand Restoration (Shading And Measurements Included), Replacem	\$ 484.21
L6920		Wrist Disarticulation, External Power, Self-Suspended Inner Socke	\$ 5,962.10
L6925		Wrist Disarticulation, External Power, Self-Suspended Inner Socke	\$ 6,536.19
L6930		Below Elbow, External Power, Self-Suspended Inner Socket, Remo	\$ 5,640.30
L6935		Below Elbow, External Power, Self-Suspended Inner Socket, Remo	\$ 6,674.31
L6940		Elbow Disarticulation, External Power, Molded Inner Socket, Remo	\$ 7,353.15
L6945		Elbow Disarticulation, External Power, Molded Inner Socket, Remo	\$ 8,224.36
L6950		Above Elbow, External Power, Molded Inner Socket, Removable H	\$ 7,792.77
L6955		Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Ch	\$ 9,477.52

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
L6960		Shoulder Disarticulation, External Power, Molded Inner Socket, Re	\$ 10,061.83
L6965		Shoulder Disarticulation, External Power, Molded Inner Socket, Re	\$ 11,525.79
L6970		Interscapular Thoracic, External Power, Molded Inner Socket Remo	\$ 12,387.92
L6975		Interscapular Thoracic, External Power, Molded Inner Socket Remo	\$ 13,676.42
L7007		Electric Hand, Switch Or Myoelectric Controlled, Adult	\$ 2,805.40
L7008		Electric Hand, Switch Or Myoelectric, Controlled, Pediatric	\$ 4,739.36
L7009		Electric Hook, Switch Or Myoelectric Controlled, Adult	\$ 2,868.86
L7040		Prehensile Actuator; Hosmer Or Equal, Switch Controlled	\$ 2,250.06
L7045		Electronic Hook, Child, Michigan Or Equal, Switch Controlled	\$ 1,250.18
L7170		Electronic Elbow; Hosmer Or Equal, Switch Controlled	\$ 4,535.26
L7180		Electronic Elbow, Microprocessor Sequential Control Of Elbow Ar	\$ 27,006.27
L7185		Electronic Elbow, Adolescent, Variety Village Or Equal, Switch Co	\$ 4,643.35
L7186		Electronic Elbow, Child, Variety Village Or Equal, Switch Control	\$ 7,090.78
L7190		Electronic Elbow, Adolescent, Variety Village Or Equal, Myoelect	\$ 6,045.46
L7191		Electronic Elbow, Child, Variety Village Or Equal, Myoelectronica	\$ 7,637.36
L7259		Electronic wrist rotator any	\$ 3,225.16
L7360		Six-Volt Battery, Otto Bock , Each	\$ 231.11
L7362		Battery Charger, Six-Volt, Each	\$ 208.20
L7364		Twelve-Volt Battery, Each	\$ 384.86
L7366		Battery Charger, Twelve-Volt, Each	\$ 518.49
L7400		Addition To Upper Extremity Prosthesis; Below Elbow Wrist Disa	\$ 232.73
L7401		Addition To Upper Extremity Prosthesis; Above Elbow Disarticula	\$ 260.54
L7402		Addition To Upper Extremity Prosthesis; Shoulder Disarticulation/	\$ 281.36
L7403		Addition To Upper Extremity Prosthesis; Below Elbow Wrist Disa	\$ 279.62
L7404		Addition To Upper Extremity Prosthesis; Above Elbow Disarticula	\$ 422.05
L7405		Addition To Upper Extremity Prosthesis; Shoulder Disarticulation/	\$ 551.98
L7510		Repair Of Prosthetic Device, Repair Or Replace Minor Parts	\$ 46.80
L7520		Repair Prosthetic Device, Labor Component, Per 15 Minutes	\$ 24.70
L7700		Pros soc insert gasket/seal	\$ 111.46
L8000		Breast Prosthesis; Mastectomy Bra	\$ 28.24
L8001		Breast Prosthesis, Mastectomy Bra, With Integrated Breast Prosthes	\$ 95.25
L8002		Breast Prosthesis, Mastectomy Bra, With Integrated Breast Prosthes	\$ 125.26
L8010		Breast Prosthesis Mastectomy Sleeve	\$ 39.03
L8015		External Breast Prosthesis Garment, With Mastectomy Form, Post	\$ 45.52
L8020		Breast Prosthesis; Mastectomy Form	\$ 193.51
L8030		Breast Prosthesis Silicone Or Equal	\$ 250.46
L8031		Breast Prosthesis W Adhesive	\$ 250.46
L8035		Custom Breast Prosthesis, Post Mastectomy, Molded To Patient Mo	\$ 2,781.86
L8300		Truss, Single With Standard Pad	\$ 65.25
L8310		Truss, Double With Standard Pad	\$ 103.01
L8320		Truss, Addition To Standard Pad, Water Pad	\$ 46.18
L8330		Truss, Addition To Standard Pad, Scrotal Pad	\$ 38.18

**Durable Medical Equipment
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HCPCS	Mod	Description	WV Medicaid
L8400		Prosthetic Sheath, Below Knee, Each	\$ 13.43
L8410		Prosthetic Sheath, Above Knee, Each	\$ 17.94
L8415		Prosthetic Sheath, Upper Limb, Each	\$ 17.64
L8417		Prosthetic Sheath/Sock, Including A Gel Cushion Layer, Below Kn	\$ 57.06
L8420		Prosthetic Sock, Multiple Ply, Below Knee, Each	\$ 15.85
L8430		Prosthetic Sock, Multiple Ply, Above Knee, Each	\$ 17.12
L8435		Prosthetic Sock, Multiple Ply, Upper Limb, Each	\$ 16.26
L8440		Prosthetic Shrinker; Below Knee, Each	\$ 32.34
L8460		Prosthetic Shrinker; Above Knee, Each	\$ 51.55
L8465		Prosthetic Shrinker; Upper Limb, Each	\$ 45.63
L8470		Prosthetic Sock, Single Ply, Fitting; Below Knee, Each	\$ 5.16
L8480		Prosthetic Sock, Single Ply, Fitting; Above Knee, Each	\$ 7.12
L8485		Prosthetic Sock, Single Ply, Fitting; Upper Limb, Each	\$ 8.94
L8500		Artificial Larynx, Any Type	\$ 680.62
L8501		Tracheostomy Speaking Valve	\$ 93.43
L8505		Artificial Larynx Replacement Battery, Any Type	\$ 49.40
L8510		Voice Amplifier	\$ 191.86
L8607		Inj vocal cord bulking agent	\$ 32.56
L8614		Cochlear Device	\$ 15,082.65
L8615		Coch Implant Headset Replace	\$ 342.46
L8616		Coch Implant Microphone Repl	\$ 79.77
L8617		Coch Implant Trans Coil Repl	\$ 69.67
L8618		Coch Implant Tran Cable Repl	\$ 19.91
L8619		Coch Imp Ext Proc/Contr Rplc	\$ 6,474.87
L8621		Repl Zinc Air Battery	\$ 0.47
L8622		Repl Alkaline Battery	\$ 0.24
L8623		Lith Ion Batt Cid,Non-Earlvl	\$ 49.11
L8624		Lith Ion Batt Cid, Ear Level	\$ 122.46
L8679		Imp Neurosti Pls Gn Any Type	\$ 6,362.11
L8690		Aud Osseo Dev, Int/Ext Comp	\$ 3,612.22
L8691		Osseointegrated Snd Proc Rpl	\$ 1,307.65
L8694		Aoi transducer/actuator repl	\$ 717.07
S1040		Cranial Remolding Orthosis, Rigid, With Soft Interface Material, C	\$ 1,200.00
V2531		Contact lens gas permeable	\$ 411.14
V5008		Hearing Screening	\$ 20.00
V5264		Ear Mold Insert	\$ 34.75
V5266		Battery For Use In Hearing Device	\$ 2.25
V5275		Ear Impression	\$ 32.27

**Durable Medical Equipment
Fee Schedule
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Cost Invoice

HCPCS	Mod	Description	WV Medicaid
A4335		Incontinence Supply; Miscellaneous	\$ -
A4420		Ostomy Pouch, Closed; For Use On Barrier With Locking Flange (C	\$ -
A4421		Ostomy Supply; Miscellaneous	\$ -
A4555		Electrode/transducer for use with electrical stimulation device used	\$ -
A4649		Surgical Supply; Miscellaneous	\$ -
A6215		Foam Dressing, Wound Filler, Per Gram	\$ -
A6261		Wound Filler, Gel/Paste, Per Fluid Ounce, Not Elsewhere Classifie	\$ -
A6262		Wound Filler, Dry Form, Per Gram, Not Elsewhere Classified	\$ -
A6501		Compression Burn Garment, Body Suite (Head To Foot), Custom F	\$ -
A6502		Compression Burn Garment, Chin Strap, Custom Fabricated	\$ -
A6503		Compression Burn Garment, Facial Hood, Custom Fabricated	\$ -
A6504		Compression Burn Garment, Glove To Wrist, Custom Fabricated	\$ -
A6505		Compression Burn Garment, Glove To Elbow, Custom Fabricated	\$ -
A6506		Compression Burn Garment, Glove To Axilla, Custom Fabricated	\$ -
A6507		Compression Burn Garment, Foot To Knee Length, Custom Fabrica	\$ -
A6508		Compression Burn Garment, Foot To Thigh Length, Custom Fabric	\$ -
A6509		Compression Burn Garment, Upper Trunk To Waist Including Arm	\$ -
A6510		Compression Burn Garment, Trunk, Including Arms Down To Leg	\$ -
A6511		Compression Burn Garment, Lower Trunk Including Leg Openings	\$ -
A6512		Compression Burn Garment, Not Otherwise Classified	\$ -
A6513		Compression Burn Mask, Face And/Or Neck, Plastic Or Equal, Cus	\$ -
A6538		Gradient Compression Stocking, Full Length/Chap Style,40-50 Mm	\$ -
A6540		Gradient Compression Stocking, Waist Length, 30-40 Mm Hg, Eac	\$ -
A6541		Gradient Compression Stocking, Waist Length, 40-50 Mm Hg, Eac	\$ -
A6549		Gradient Compression Stocking, Not Otherwise Specified	\$ -
A7523		Tracheostomy Shower Protector, Each	\$ -
B9998		Noc For Enteral Supplies	\$ -
B9999		Noc For Parenteral Supplies	\$ -
E0240		Bath/Shower Chair, With Or Without Wheels, Any Size	\$ -
E0247		Transfer Bench For Tub Or Toilet With Or Without Commode Ope	\$ -
E0248		Transfer Bench, Heavy Duty, For Tub Or Toilet With Or Without C	\$ -
E0970		No.2 Footplates, Except For Elevating Leg Rest	\$ -
E1009		Wheelchair Accessory, Addition To Power Seating System, Mecha	\$ -
E1011		Modification To Pediatric Size Wheelchair, Width Adjustment Pac	\$ -
E1229		Wheelchair, Pediatric Size, Not Otherwise Specified	\$ -
E1239		Power Wheelchair, Pediatric Size, Not Otherwise Specified	\$ -
E1399		Durable Medical Equipment, Miscellaneous	\$ -
E2216		Manual Wheelchair Accessory, Foam Filled Propulsion Tire, Any S	\$ -
E2217		Manual Wheelchair Accessory, Foam Filled Caster Tire, Any Size,	\$ -
E2218		Manual Wheelchair Accesory, Foam Propulsion Tire, Any Size, Ea	\$ -

**Durable Medical Equipment
Fee Schedule
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HCPCS	Mod	Description	WV Medicaid
E2291		Back, Planar, For Pediatric Size Wheelchair Including Fixed Attach	\$ -
E2292		Seat, Planar, For Pediatric Size Wheelchair Including Fixed Attach	\$ -
E2293		Back, Contoured, For Pediatric Size Wheelchair Including Fixed A	\$ -
E2294		Seat, Contoured, For Pediatric Size Wheelchair Including Fixed At	\$ -
E2295		Manual Wheelchair Accessory, For Pediatric Size Wheelchair, Dyn	\$ -
E2372		Power Wheelchair Accessory, Group 27 Non- Sealed Lead Acid Ba	\$ -
E2512		Sgd Accessory, Mounting Sys	\$ -
E2599		Accessory For Speech Generating Device	\$ -
E2609		Custom Fabricated Wheelchair Seat Cushion, Any Size	\$ -
E2617		Custom Fabricated Wheelchair Back Cushion, Any Size, Including	\$ -
K0108		Wheelchair Component Or Accessory, Not Otherwise Specified	\$ -
K0669		Wheelchair Accessory, Seat Or Back Cushion, Does Not Meet Spec	\$ -
K0812		Power Operated Vehicle, Not Otherwise Classified	\$ -
K0868		Power Wheelchair, Group 4 Standard, Sling/Solid Seat/Back, Patie	\$ -
K0869		Power Wheelchair, Group 4 Standard, Captains Chair, Patient Weig	\$ -
K0870		Power Wheelchair, Group 4 Heavy Duty, Sling/Solid Seat/Back, Pa	\$ -
K0871		Power Wheelchair, Group 4 Very Heavy Duty, Sling/Solid Seat/Bac	\$ -
K0877		Power Wheelchair, Group 4 Standard, Single Power Option, Sling/	\$ -
K0878		Power Wheelchair, Group 4 Standard, Single Power Option, Captai	\$ -
K0879		Power Wheelchair, Group 4 Heavy Duty, Single Power Option, Sli	\$ -
K0880		Power Wheelchair, Group 4 Very Heavy Duty, Single Power Optio	\$ -
K0884		Power Wheelchair, Group 4 Standard, Multiple Power Option, Slin	\$ -
K0885		Power Wheelchair, Group 4 Standard, Multiple Power Option, Cap	\$ -
K0886		Power Wheelchair, Group 4 Heavy Duty, Multiple Power Option, S	\$ -
K0890		Power Wheelchair, Group 5 Pediatric, Single Power Option, Sling/	\$ -
K0891		Power Wheelchair, Group 5 Pediatric, Multiple Power Option, Slin	\$ -
K0898		Power Wheelchair, Not Otherwise Classified	\$ -
K0899		Power Mobility Device, Not Coded By Sadmerc Or Does Not Meet	\$ -
L0624		Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With Rigid Or	\$ -
L0632		Lso, Sagittal Control, With Rigid Anterior And Posterior Panels, Po	\$ -
L0634		Lso, Sagittal-Coronal Control, With Rigid Posterior Frame/Panel(S	\$ -
L0999		Additional To Spinal Orthosis, Not Otherwise Specified	\$ -
L1001		Cervical Thoracic Lumbar Sacral Orthosis Immobilizer, Infant Size	\$ -
L1499		Spinal Orthosis, Not Otherwise Specified	\$ -
L2999		Lower Extremity Orthosis, Not Otherwise Specified	\$ -
L3251		Foot, Shoe Molded To Patient Model, Silicone Shoe, Each	\$ -
L3649		Orthopedic Shoe, Modification, Addition Or Transfer, Not Otherwi	\$ -
L3956		Addition Of Joint To Upper Extremity Orthosis, Any Material; Per	\$ -
L3999		Upper Limb Orthosis, Not Otherwise Specified	\$ -
L4210		Repair Of Orthotic Device, Repair Or Replace Minor Parts	\$ -
L5999		Lower Extremity Prosthesis, Not Otherwise Specified	\$ -
L7499		Upper Extremity Prosthesis, Not Otherwise Specified	\$ -

**Durable Medical Equipment
Fee Schedule
CY 2018**

HCPCS	Mod	Description	WV Medicaid
L7600		Prosthetic Donning Sleeve, Any Material , Each	\$ -
L8039		Breast Prosthesis, Not Otherwise Specified	\$ -
L8499		Unlisted Procedure For Miscellaneous Prosthetic Services	\$ -
L8692		Auditory Osseointegrated Device, External Sound Processor, Used	\$ -
V5014		Repair/Modification Of Hearing Aid	\$ -
V5030		Hearing Aid, Monaural, Body Worn, Air Conduction	\$ -
V5040		Hearing Aid, Monaural, Body Worn, Bone	\$ -
V5050		Hearing Aid, Monaural, In The Ear (Ite)	\$ -
V5060		Hearing Aid, Monaural, Behind The Ear (Bte)	\$ -
V5120		Binaural, Body	\$ -
V5130		Binaural, Ite	\$ -
V5140		Binaural, Bte	\$ -
V5170		Hearing Aid, Cros, Ite	\$ -
V5180		Hearing Aid, Cros, Bte	\$ -
V5210		Hearing Aid, Bicos, Ite	\$ -
V5220		Hearing Aid, Bicos, Bte	\$ -
V5246		Hearing Aid, Digitally Programmable Analog, Monaural, Ite	\$ -
V5247		Hearing Aid, Digitally Programmable Analog, Monaural, Bte	\$ -
V5252		Hearing Aid, Digitally Programmable, Binaural, Ite	\$ -
V5253		Hearing Aid, Digitally Programmable, Binaural, Bte	\$ -
V5256		Hearing Aid, Digital, Monaural, Ite	\$ -
V5257		Hearing Aid, Digital, Monaural, Bte	\$ -
V5260		Hearing Aid, Digital, Binaural, Ite	\$ -
V5261		Hearing Aid, Digital, Binaural, Bte	\$ -
V5336		Repair/Modification Of Augmentative Communicative System Or	\$ -