

**Durable Medical Equipment
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 M	\$ 0.38
A4217		Sterile Water/Saline, 500 Ml	\$ 2.82
A4221		Supplies For Maintenance Of Drug Infusion Catheter, Per V	\$ 15.77
A4222		Infusion Supplies For External Drug Infusion Pump, Per C	\$ 29.90
A4223		Infusion Supplies Not Used With External Infusion Pump,	\$ 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 Cannu	\$ 14.00
A4231		Infusion Set For External Insulin Pump, Needle Type	\$ 14.00
A4232		Syringe With Needle For External Insulin Pump, Sterile, 3c	\$ 2.62
A4233		Replacement Battery, Alkaline 9 (Other Than T Cell) For U	\$ 0.41
A4234		Replacement Battery, Alkaline, J Cell, For Use With Medic	\$ 1.89
A4235		Replacement Battery, Lithium, For Use With Medically Ne	\$ 0.80
A4236		Replacement Battery, Silver Oxide, For Use With Medical	\$ 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 Cathete	\$ 6.95
A4311		Insertion Tray Without Drainage Bag With Indwelling Catl	\$ 13.34
A4312		Insertion Tray Without Drainage Bag With Indwelling Catl	\$ 16.24
A4313		Insertion Tray Without Drainage Bag With Indwelling Catl	\$ 16.68
A4314		Insertion Tray With Drainage Bag With Indwelling Cathete	\$ 22.77
A4315		Insertion Tray With Drainage Bag With Indwelling Cathete	\$ 23.75
A4316		Insertion Tray With Drainage Bag With Indwelling Cathete	\$ 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,	\$ 9.34
A4327		Female External Urinary Collection Device; Meatal Cup, E	\$ 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	\$ 2.86
A4332		Lubricant, Individual Sterile Packet, Each	\$ 0.10
A4333		Urinary Catheter Anchoring Device, Adhesive Skin Attach	\$ 1.99
A4334		Urinary Catheter Anchoring Device, Leg Strap, Each	\$ 4.43
A4335		Incontinence Supply; Miscellaneous	Cost Invoice
A4338		Indwelling Catheter; Foley Type, Two-Way Latex With Co	\$ 11.04

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A4340		Indwelling Catheter; Specialty Type, Eg; Coude, Mushroom	\$ 24.30
A4344		Indwelling Catheter, Foley Type, Two-Way, All Silicone, F	\$ 14.42
A4346		Indwelling Catheter; Foley Type, Three Way For Continuo	\$ 17.63
A4349		Male External Catheter, With Or Without Adhesive, Dispo	\$ 1.82
A4351		Intermittent Urinary Catheter; Straight Tip, With Or Witho	\$ 1.54
A4352		Intermittent Urinary Catheter; Coude (Curved) Tip, With C	\$ 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 Th	\$ 7.91
A4356		External Urethral Clamp Or Compression Device (Not To	\$ 41.08
A4357		Bedside Drainage Bag, Day Or Night, With Or Without Ar	\$ 8.74
A4358		Urinary Drainage Bag, Leg Or Abdomen, Vinyl, With Or V	\$ 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	\$ 3.78
A4373		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Acco	\$ 5.65
A4375		Ostomy Pouch, Drainable, With Faceplate Attached, Plastic	\$ 15.46
A4376		Ostomy Pouch, Drainable, With Faceplate Attached, Rubbe	\$ 42.85
A4377		Ostomy Pouch, Drainable, For Use On Faceplate, Plastic, F	\$ 3.86
A4378		Ostomy Pouch, Drainable, For Use On Faceplate, Rubber,	\$ 27.68
A4379		Ostomy Pouch, Urinary, With Faceplate Attached, Plastic,	\$ 13.52
A4380		Ostomy Pouch, Urinary, With Faceplate Attached, Rubber,	\$ 33.61
A4381		Ostomy Pouch, Urinary, For Use On Faceplate, Plastic, Ea	\$ 4.17
A4382		Ostomy Pouch, Urinary, For Use On Faceplate, Heavy Plas	\$ 22.16
A4383		Ostomy Pouch, Urinary, For Use On Faceplate, Rubber, Ea	\$ 25.38
A4384		Ostomy Faceplate Equivalent, Silicone Ring, Each	\$ 8.66
A4385		Ostomy Skin Barrier, Solid 4X4 Or Equivalent, Extended V	\$ 4.59
A4387		Ostomy Pouch, Closed, With Barrier Attached, With Built-	\$ 2.02
A4388		Ostomy Pouch, Drainable, With Extended Wear Barrier At	\$ 3.93
A4389		Ostomy Pouch, Drainable, With Barrier Attached, With Bu	\$ 5.60
A4390		Ostomy Pouch, Drainable, With Extended Wear Barrier Att	\$ 8.65
A4391		Ostomy Pouch, Urinary, With Extended Wear Barrier Attac	\$ 6.37
A4392		Ostomy Pouch, Urinary, With Standard Wear Barrier Attac	\$ 7.36
A4393		Ostomy Pouch, Urinary, With Extended Wear Barrier Attac	\$ 8.14
A4394		Ostomy Deodorant For Use In Ostomy Pouch, Liquid, Per	\$ 2.33
A4395		Ostomy Deodorant For Use In Ostomy Pouch, Solid, Per T	\$ 0.04

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HCPCS	Mod	DESCRIPTION	WV Medicaid
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 Acc	\$ 7.89
A4408		Ostomy Skin Barrier, Wtih Flange (Solid, Flexible Or Acco	\$ 8.89
A4409		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Acco	\$ 5.60
A4410		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Acco	\$ 8.14
A4411		Ostomy Skin Barrier, Solid 4 X 4 Or Equivalent, Extended	\$ 4.59
A4412		Ostomy Pouch, Drainable, High Output, For Use On A Bar	\$ 2.43
A4413		Ostomy Pouch, Drainable, High Output, For Use On A Bar	\$ 4.96
A4414		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), Without Built-In Convexity, 4 X 4 Inches Or Smaller, Each	\$ 4.43
A4415		Ostomy Skin Barrier, With Flange (Solid, Flexible Or Acco	\$ 5.39
A4416		Ostomy Pouch, Closed, With Barrier Attached, With Filter	\$ 2.48
A4417		Ostomy Pouch, Closed, With Barrier Attached, With Built-	\$ 3.35
A4418		Ostomy Pouch, Closed; Without Barrier Attached, With Fi	\$ 1.63
A4419		Ostomy Pouch, Closed; For Use On Barrier With Non-Loc	\$ 1.56
A4420		Ostomy Pouch, Closed; For Use On Barrier With Locking	Cost Invoice
A4421		Ostomy Supply; Miscellaneous	Cost Invoice
A4422		Ostomy Absorbent Material (Sheet/Pad/Crystal Packet) Fo	\$ 0.10
A4423		Ostomy Pouch, Closed; For Use On Barrier With Locking	\$ 1.67
A4424		Ostomy Pouch, Drainable, With Barrier Attached, With Fil	\$ 4.29

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HCPCS	Mod	DESCRIPTION	WV Medicaid
A4425		Ostomy Pouch, Drainable; For Use On Barrier With Non-L	\$ 3.22
A4426		Ostomy Pouch, Drainable; For Use On Barrier With Lockin	\$ 2.46
A4427		Ostomy Pouch, Drainable; For Use On Barrier With Lockin	\$ 2.50
A4428		Ostomy Pouch, Urinary, With Extended Wear Barrier Attac	\$ 5.86
A4429		Ostomy Pouch, Urinary, With Barrier Attached, With Built	\$ 7.42
A4430		Ostomy Pouch, Urinary, With Extended Wear Barrier Attac	\$ 7.66
A4431		Ostomy Pouch, Urinary; With Barrier Attached, With Fauc	\$ 5.60
A4432		Ostomy Pouch, Urinary; For Use On Barrier With Non-Loc	\$ 3.23
A4433		Ostomy Pouch, Urinary; For Use On Barrier With Locking	\$ 3.02
A4434		Ostomy Pouch, Urinary; For Use On Barrier With Locking	\$ 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 Othe	\$ 1.29
A4456		Adhesive remover, wipes	\$ 0.22
A4461		Surgical Dressing Holder, Non-Reusable, Each	\$ 2.97
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), Ea	\$ 0.75
A4550		Surgical Tray	\$ 8.00
A4554		Disposable Underpads, All Sizes, (E.G., Chux'S)	\$ 0.31
A4555		Electrode/transducer for use with electrical stimulation dev	Cost Invoice
A4556		Electrodes, (E.G., Apnea Monitor), Per Pair	\$ 9.30
A4557		Lead Wires, (E.G., Apnea Monitor), Per Pair	\$ 12.46
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. T	\$ 17.35
A4601		Lithium Ion Battery For Non-Prosthetic Use, Replacement	\$ 26.00
A4604		Tubing With Integrated Hearing Element For Use With Po	\$ 43.24
A4605		Tracheal Suction Catheter, Closed System, Each	\$ 14.77
A4606		Oxygen Probe For Use With Oximeter Device, Replaceme	\$ 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 S	\$ 2.37
A4625		Tracheostomy Care Kit For New Tracheostomy	\$ 6.23
A4627		Spacer, Bag Or Reservoir, With Or Without Mask, For Use	\$ 20.61

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HCPCS	Mod	DESCRIPTION	WV Medicaid
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 Alter	\$ 47.06
A4649		Surgical Supply; Miscellaneous	Cost Invoice
A4927		Gloves, Non-Sterile, Per 100	\$ 42.71
A5051		Ostomy Pouch, Closed; With Barrier Attached (1Piece), Ea	\$ 1.86
A5052		Ostomy Pouch, Closed; Without Barrier Attached (1 Piece)	\$ 1.34
A5053		Ostomy Pouch, Closed; For Use On Faceplate, Each	\$ 1.56
A5054		Ostomy Pouch, Closed; For Use On Barrier With Flange (2	\$ 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	\$ 3.18
A5062		Ostomy Pouch, Drainable; Without Barrier Attached (1 Pie	\$ 1.88
A5063		Ostomy Pouch, Drainable; For Use On Barrier With Flange	\$ 2.43
A5071		Ostomy Pouch, Urinary; With Barrier Attached (1 Piece), F	\$ 5.41
A5072		Ostomy Pouch, Urinary; Without Barrier Attached (1 Piece	\$ 3.18
A5073		Ostomy Pouch, Urinary; For Use On Barrier With Flange (\$ 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	\$ 0.58
A5093		Ostomy Accessory; Convex Insert	\$ 1.50
A5102		Bedside Drainage Bottle With Or Without Tubing, Rigid C	\$ 20.18
A5105		Urinary Suspensory With Leg Bag, With Or Without Tube.	\$ 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,	\$ 12.13
A5500		For Diabetics Only, Fitting (Including Follow Up), Custom	\$ 57.25
A5501		For Diabetics Only, Fitting (Including Follow Up), Custom	\$ 171.72
A5503		For Diabetics Only, Modification (Including Fitting) Of Of	\$ 28.22
A5504		For Diabetics Only, Modification (Including Fitting) Of Of	\$ 28.22
A5505		For Diabetics Only, Modification (Including Fitting) Of Of	\$ 28.22
A5506		For Diabetics Only, Modification (Including Fitting) Of Of	\$ 28.22
A5507		For Diabetics Only, Not Otherwise Specified Modification	\$ 28.22
A5512		For Diabetics Only, Multiple Density Insert, DirectForm, M	\$ 23.35

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HCPCS	Mod	DESCRIPTION	WV Medicaid
A5513		For Diabetics Only, Multiple Density Insert, Custom Molded	\$ 34.85
A6154		Wound Pouch, Each	\$ 12.55
A6196		Alginate Or Other Fiber Gelling Dressing, Wound Cover, I	\$ 6.62
A6197		Alginate Or Other Fiber Gelling Dressing, Wound Cover, I	\$ 14.80
A6198		Alginate Or Other Fiber Gelling Dressing, Wound Cover, I	\$ 14.12
A6199		Alginate Or Other Fiber Gelling Dressing, Wound Filler, P	\$ 4.76
A6203		Composite Dressing, Pad Size 16 Sq. In. Or Less, With An	\$ 3.03
A6204		Composite Dressing, Pad Size More Than 16 Sq. In. But L	\$ 5.61
A6205		Composite Dressing, Pad Size More Than 48 Sq. In., With	\$ 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 Equ	\$ 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	\$ 6.73
A6210		Foam Dressing, Wound Cover, Pad Size More Than 16 Sq.	\$ 17.94
A6211		Foam Dressing, Wound Cover, Pad Size More Than 48 Sq.	\$ 26.45
A6212		Foam Dressing, Wound Cover, Pad Size 16 Sq. In. Or Less	\$ 8.74
A6213		Foam Dressing, Wound Cover, Pad Size More Than 16 Sq.	\$ 8.34
A6214		Foam Dressing, Wound Cover, Pad Size More Than 48 Sq.	\$ 9.26
A6215		Foam Dressing, Wound Filler, Per Gram	Cost Invoice
A6216		Gauze, Non-Impregnated, Non-Sterile, Pad Size 16 Sq. In. C	\$ 0.04
A6217		Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than	\$ 0.32
A6218		Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than	\$ 0.54
A6219		Gauze, Non-Impregnated, Pad Size 16 Sq. In. Or Less, Wit	\$ 0.86
A6220		Gauze, Non-Impregnated, Pad Size More Than 16 Sq. In. E	\$ 2.33
A6221		Gauze, Non-Impregnated, Pad Size More Than 48 Sq. In.,	\$ 1.93
A6222		Gauze, Impregnated With Other Than Water, Normal Saline	\$ 1.92
A6223		Gauze, Impregnated With Other Than Water, Normal Saline	\$ 2.18
A6224		Gauze, Impregnated With Other Than Water, Normal Saline	\$ 3.25
A6231		Gauze, Impregnated, Hydrogel, For Direct Wound Contact	\$ 4.21
A6232		Gauze, Impregnated, Hydrogel, For Direct Wound Contact	\$ 6.18
A6233		Gauze, Impregnated, Hydrogel For Direct Wound Contact,	\$ 17.26
A6234		Hydrocolloid Dressing, Wound Cover, Pad Size 16 Sq. In. C	\$ 5.89
A6235		Hydrocolloid Dressing, Wound Cover, Pad Size More Than	\$ 15.14
A6236		Hydrocolloid Dressing, Wound Cover, Pad Size More Than	\$ 24.54
A6237		Hydrocolloid Dressing, Wound Cover, Pad Size 16 Sq. In. C	\$ 7.13
A6238		Hydrocolloid Dressing, Wound Cover, Pad Size More Than	\$ 20.53
A6239		Hydrocolloid Dressing, Wound Cover, Pad Size More Than	\$ 15.84
A6240		Hydrocolloid Dressing, Wound Filler, Paste, Per Fluid Our	\$ 11.02
A6241		Hydrocolloid Dressing, Wound Filler, Dry Form, Per Gram	\$ 2.31
A6242		Hydrogel Dressing, Wound Cover, Pad Size 16 Sq. In. Or I	\$ 5.46
A6243		Hydrogel Dressing, Wound Cover, Pad Size More Than 16	\$ 11.10
A6244		Hydrogel Dressing, Wound Cover, Pad Size More Than 48	\$ 35.37
A6245		Hydrogel Dressing, Wound Cover, Pad Size 16 Sq. In. Or I	\$ 6.54

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A6246		Hydrogel Dressing, Wound Cover, Pad Size More Than 16	\$ 8.94
A6247		Hydrogel Dressing, Wound Cover, Pad Size More Than 48	\$ 21.41
A6248		Hydrogel Dressing, Wound Filler, Gel, Per Fluid Ounce	\$ 14.63
A6250		Skin Sealants, Protectants, Moisturizers, Ointments, Any T	\$ 15.00
A6251		Specialty Absorptive Dressing, Wound Cover, Pad Size 16	\$ 1.79
A6252		Specialty Absorptive Dressing, Wound Cover, Pad Size Mo	\$ 2.94
A6253		Specialty Absorptive Dressing, Wound Cover, Pad Size Mo	\$ 5.70
A6254		Specialty Absorptive Dressing, Wound Cover, Pad Size 16	\$ 1.08
A6255		Specialty Absorptive Dressing, Wound Cover, PadSize Mo	\$ 2.74
A6256		Specialty Absorptive Dressing, Wound Cover, Pad Size Mo	\$ 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	\$ 3.88
A6259		Transparent Film, More Than 48 Sq. In., Each Dressing	\$ 9.85
A6260		Wound Cleansers, Any Type, Any Size	\$ 18.00
A6261		Wound Filler, Gel/Paste, Per Fluid Ounce, Not Elsewhere C	Cost Invoice
A6262		Wound Filler, Dry Form, Per Gram, Not Elsewhere Classif	Cost Invoice
A6266		Gauze, Impregnated, Other Than Water, Normal Saline, Or	\$ 1.73
A6402		Gauze, Non-Impregnated, Sterile, Pad Size 16 Sq. In. Or L	\$ 0.10
A6403		Gauze, Non-Impregnated, Sterile, Pad Size More Than 16 S	\$ 0.38
A6404		Gauze, Non-Impregnated, Sterile, Pad Size More Than 48 S	\$ 2.16
A6407		Packing Strips, Non-Impregnated, Up To 2 Inches In Width	\$ 1.69
A6441		Padding Bandage, Non-Elastic, Non-Woven/Non- Knitted,	\$ 0.62
A6442		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-S	\$ 0.14
A6443		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-S	\$ 0.25
A6444		Conforming Bandage, Non-Elastic, Knitted/Woven, Non-S	\$ 0.50
A6445		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile	\$ 0.29
A6446		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile	\$ 0.36
A6447		Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile	\$ 0.62
A6448		Light Compression Bandage, Elastic, Knitted/Woven, Wid	\$ 1.04
A6449		Light Compression Bandage, Elastic, Knitted/Woven, Wid	\$ 1.58
A6450		Light Compression Bandage, Elastic, Knitted/Woven, Wid	\$ 1.58
A6451		Moderate Compression Bandage, Elastic, Knitted/Woven, I	\$ 1.58
A6452		High Compression Bandage, Elastic, Knitted/Woven, Load	\$ 5.32
A6453		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven	\$ 0.56
A6454		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven	\$ 0.70
A6455		Self-Adherent Bandage, Elastic, Non-Knitted/Non- Woven	\$ 1.26
A6456		Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Wo	\$ 1.14
A6501		Compression Burn Garment, Body Suite (Head To Foot), C	Cost Invoice
A6502		Compression Burn Garment, Chin Strap, Custom Fabricate	Cost Invoice
A6503		Compression Burn Garment, Facial Hood, Custom Fabrica	Cost Invoice
A6504		Compression Burn Garment, Glove To Wrist, Custom Fabr	Cost Invoice
A6505		Compression Burn Garment, Glove To Elbow, Custom Fab	Cost Invoice
A6506		Compression Burn Garment, Glove To Axilla, Custom Fab	Cost Invoice

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HCPCS	Mod	DESCRIPTION	WV Medicaid
A6507		Compression Burn Garment, Foot To Knee Length, Custom	Cost Invoice
A6508		Compression Burn Garment, Foot To Thigh Length, Custo	Cost Invoice
A6509		Compression Burn Garment, Upper Trunk To Waist Includ	Cost Invoice
A6510		Compression Burn Garment, Trunk, Including Arms Down	Cost Invoice
A6511		Compression Burn Garment, Lower Trunk Including Leg C	Cost Invoice
A6512		Compression Burn Garment, Not Otherwise Classified	Cost Invoice
A6513		Compression Burn Mask, Face And/Or Neck, Plastic Or Ec	Cost Invoice
A6530		Gradient Compression Stocking, Below Knee, 18-30 Mm F	\$ 25.20
A6531		Gradient Compression Stocking, Below Knee, 30-40 Mm F	\$ 38.95
A6532		Gradient Compression Stocking, Below Knee, 40-50 Mm F	\$ 54.89
A6533		Gradient Compression Stocking, Thigh Length, 18-30 Mm	\$ 29.70
A6534		Gradient Compression Stocking, Thigh Length, 30-40 Mm	\$ 29.70
A6535		Gradient Compression Stocking, Thigh Length, 40-50 Mm	\$ 29.70
A6536		Gradient Compression Stocking, Full Length/Chap Style,18	\$ 29.70
A6537		Gradient Compression Stocking Full Length/Chap Style,30	\$ 29.70
A6538		Gradient Compression Stocking, Full Length/Chap Style,40	Cost Invoice
A6539		Gradient Compression Stocking, Waist Length,18-30 Mm	\$ 84.15
A6540		Gradient Compression Stocking, Waist Length, 30-40 Mm	Cost Invoice
A6541		Gradient Compression Stocking, Waist Length, 40-50 Mm	Cost Invoice
A6544		Gradient Compression Stocking, Garter Belt	\$ 13.50
A6549		Gradient Compression Stocking, Not Otherwise Specified	Cost Invoice
A6550		Wound Care Set, For Negative Pressure Wound Therapy E	\$ 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 Pneur	\$ 1.70
A7004		Small Volume Nonfiltered Pneumatic Nebulizer, Disposab	\$ 1.35
A7005		Administration Set, With Small Volume Nonfiltered Pneur	\$ 18.98
A7006		Administration Set, With Small Volume Filtered Pneumati	\$ 7.40
A7010		Disposable Corrugated Tubing	\$ 17.22
A7012		Nebulizer Water Collec Devic	\$ 2.66
A7013		Filter, Disposable, Used With Aerosol Compressor	\$ 0.62
A7015		Aerosol Mask, Used With Dme Nebulizer	\$ 1.28
A7020		Interface, Cough Stim Device	\$ 13.04
A7030		Full Face Mask Used With Positive Airway Pressure Devic	\$ 111.93
A7031		Face Mask Interface, Replacement For Full Face Mask, Ea	\$ 41.80
A7032		Cushion For Use On Nasal Mask Interface, Replacement O	\$ 23.96
A7033		Pillow For Use On Nasal Cannula Type Interface, Replac	\$ 17.77
A7034		Nasal Interface (Mask Or Cannula Type) Used With Positi	\$ 69.87
A7035		Headgear Used With Positive Airway Pressure Device	\$ 23.43
A7036		Chinstrap Used With Positive Airway Pressure Device	\$ 10.59
A7037		Tubing Used With Positive Airway Pressure Device	\$ 21.06
A7038		Filter, Disposable, Used With Positive Airway Pressure De	\$ 2.69
A7039		Filter, Non Disposable, Used With Positive Airway Pressur	\$ 8.06

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
A7045		Exhalation Port With Or Without Swivel Used With Acces	\$ 12.79
A7046		Water Chamber For Humidifier, Used With Positive Airwa	\$ 13.35
A7507		Filter Holder And Integrated Filter Without Adhesive, For	\$ 2.24
A7508		Housing And Integrated Adhesive, For Use In A Tracheost	\$ 2.58
A7509		Filter Holder And Integrated Filter Housing, And Adhesive	\$ 1.27
A7520		Tracheostomy/Laryngectomy Tube, Non-Cuffed, Polyviny	\$ 42.75
A7521		Tracheostomy/Laryngectomy Tube, Cuffed, Polyvinylchlor	\$ 42.35
A7522		Tracheostomy/Laryngectomy Tube, Stainless Steel Or Equi	\$ 40.66
A7523		Tracheostomy Shower Protector, Each	Cost Invoice
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 Comp	\$ 138.09
A8001		Helmet, Protective, Hard, Prefabricated, Includes All Comp	\$ 138.09
A8002		Helmet, Protective, Soft, Custom Fabricated, Includes All C	\$ 375.35
A8003		Helmet, Protective, Hard, Custom Fabricated, Includes All	\$ 375.35
B4034		Enteral Feeding Supply Kit; Syringe Fed, Per Day	\$ 3.88
B4035		Enteral Feeding Supply Kit; Pump Fed, Per Day	\$ 7.16
B4036		Enteral Feeding Supply Kit; Gravity Fed, Per Day	\$ 5.16
B4081		Nasogastric Tubing With Stylet	\$ 15.71
B4082		Nasogastric Tubing Without Stylet	\$ 11.50
B4083		Stomach Tube - Levine Type	\$ 1.74
B4087		Gastrostomy/Jejunostomy Tube, Standard, Any Material A	\$ 26.59
B4088		Gastrostomy/Jejunostomy Tube, Low-Profile, Any Materia	\$ 28.58
B4164		Parenteral Nutrition Solution: Carbohydrates (Dextrose), 5	\$ 15.89
B4168		Parenteral Nutrition Solution; Amino Acid, 3.5%, (500 ML	\$ 23.17
B4172		Parenteral Nutrition Solution; Amino Acid, 5.5% Through	\$ 30.50
B4176		Parenteral Nutrition Solution; Amino Acid, 7% Through 8.	\$ 44.82
B4178		Parenteral Nutrition Solution: Amino Acid, Greater Than 8	\$ 53.79
B4180		Parenteral Nutrition Solution; Carbohydrates (Dextrose), G	\$ 22.81
B4185		Parental Nutrition Solution, Per 10 Grams Lipids	\$ 10.50
B4189		Parenteral Nutrition Solution; Compounded Amino Acid A	\$ 166.20
B4193		Parenteral Nutrition Solution; Compounded Amino Acid A	\$ 214.75
B4197		Parenteral Nutrition Solution; Compounded Amino Acid A	\$ 261.46
B4199		Parenteral Nutrition Solution; Compounded Amino Acid A	\$ 298.75
B4216		Parenteral Nutrition; Additives (Vitamins, Trace Elements,	\$ 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 A	\$ 11.12
B5100		Parenteral Nutrition Solution: Compounded Amino Acid A	\$ 4.34
B5200		Parenteral Nutrition Solution: Compounded Amino Acid A	\$ 4.94

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
B9002	RR	Enteral Nutrition Infusion Pump - With Alarm	\$ 76.46
B9004	RR	Parenteral Nutrition Infusion Pump, Portable	\$ 373.46
B9006	RR	Parenteral Nutrition Infusion Pump, Stationary	\$ 373.46
B9998		Noc For Enteral Supplies	Cost Invoice
B9999		Noc For Parenteral Supplies	Cost Invoice
E0100		Cane, Includes Canes Of All Materials, Adjustable Or Fixed	\$ 17.58
E0105		Cane, Quad Or Three Prong, Includes Canes Of All Materials	\$ 40.89
E0110		Crutches, Forearm, Includes Crutches Of Various Materials	\$ 59.38
E0111		Crutch Forearm, Includes Crutches Of Various Materials, Adjustable	\$ 43.59
E0112		Crutches Underarm, Wood, Adjustable Or Fixed, Pair, With	\$ 30.21
E0113		Crutch Underarm, Wood, Adjustable Or Fixed, Each, With	\$ 16.18
E0114		Crutches Underarm, Other Than Wood, Adjustable Or Fixed	\$ 36.12
E0116		Crutch, Underarm, Other Than Wood, Adjustable Or Fixed	\$ 21.24
E0130		Walker, Rigid (Pickup), Adjustable Or Fixed Height	\$ 46.65
E0135		Walker, Folding (Pickup), Adjustable Or Fixed Height	\$ 49.10
E0140		Walker, With Trunk Support, Adjustable Or Fixed Height, Any	\$ 259.60
E0141		Walker, Rigid, Wheeled, Adjustable Or Fixed Height	\$ 58.27
E0143		Walker, Folding, Wheeled, Adjustable Or Fixed Height	\$ 59.90
E0147		Walker, Heavy Duty, Multiple Braking System, Variable Width	\$ 392.15
E0148		Walker, Heavy Duty, Without Wheels, Rigid Or Folding, Any	\$ 84.58
E0149		Walker, Heavy Duty, Wheeled, Rigid Or Folding, Any Type	\$ 136.60
E0153		Platform Attachment, Forearm Crutch, Each	\$ 53.11
E0154		Platform Attachment, Walker, Each	\$ 44.14
E0155		Wheel Attachment, Rigid Pick-Up Walker, Per Pair	\$ 21.14
E0156		Seat Attachment, Walker	\$ 15.42
E0157		Crutch Attachment, Walker, Each	\$ 50.94
E0158		Leg Extensions For Walker, Per Set Of Four (4)	\$ 21.70
E0159		Brake Attachment For Wheeled Walker, Replacement, Each	\$ 13.19
E0160		Sitz Type Bath Or Equipment, Portable, Used With Or Without	\$ 24.97
E0161		Sitz Type Bath Or Equipment, Portable, Used With Or Without	\$ 22.35
E0162		Sitz Bath Chair	\$ 125.96
E0163		Commode Chair, Mobile Or Stationary, With Fixed Arms	\$ 70.41
E0165		Commode Chair, Mobile Or Stationary, With Detachable Arms	\$ 123.36
E0167		Pail Or Pan For Use With Commode Chair, Replacement Cover	\$ 10.02
E0168		Commode Chair, Extra Wide And/Or Heavy Duty, Stationary	\$ 117.88
E0181		Powered Pressure Reducing Mattress Overlay/Pad, Alternative	\$ 183.68
E0182		Pump For Alternating Pressure Pad, For Replacement Only	\$ 188.96
E0184		Dry Pressure Mattress	\$ 143.16
E0185		Gel Or Gel-Like Pressure Pad For Mattress, Standard Mattress	\$ 194.71
E0186		Air Pressure Mattress	\$ 171.20
E0187		Water Pressure Mattress	\$ 195.28
E0188		Synthetic Sheepskin Pad	\$ 22.42
E0189		Lambswool Sheepskin Pad, Any Size	\$ 44.62

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E0190		Positioning Cushion/Pillow/Wedge, Any Shape Or Size, In	\$ 14.18
E0191		Heel Or Elbow Protector, Each	\$ 8.95
E0196		Gel Pressure Mattress	\$ 277.36
E0197		Air Pressure Pad For Mattress, Standard Mattress Length A	\$ 215.00
E0198		Water Pressure Pad For Mattress, Standard Mattress Length	\$ 199.52
E0199		Dry Pressure Pad For Mattress, Standard Mattress Length A	\$ 24.54
E0202	RR	Phototherapy (Bilirubin) Light With Photometer	\$ 56.38
E0240		Bath/Shower Chair, With Or Without Wheels, Any Size	Cost Invoice
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
E0247		Transfer Bench For Tub Or Toilet With Or Without Comm	Cost Invoice
E0248		Transfer Bench, Heavy Duty, For Tub Or Toilet With Or W	Cost Invoice
E0250		Hospital Bed, Fixed Height, With Any Type Side Rails, W	\$ 63.88
E0255		Hospital Bed, Variable Height, Hi-Lo, With Any Type Side	\$ 71.73
E0260		Hospital Bed, Semi-Electric (Head And Foot Adjustment),	\$ 80.66
E0261		Hosp bed semi-electr w/o mat	\$ 73.55
E0271		Mattress, Innerspring	\$ 126.00
E0272		Mattress, Foam Rubber	\$ 133.82
E0275		Bed Pan, Standard, Metal Or Plastic	\$ 12.86
E0276		Bed Pan, Fracture, Metal Or Plastic	\$ 11.11
E0277		Powered Pressure-Reducing Air Mattress	\$ 355.12
E0300		Pediatric Crib, Hospital Grade, Fully Enclosed	\$ 194.22
E0303		Hospital Bed, Heavy Duty, Extra Wide, With Weight Capa	\$ 183.82
E0304		Hospital Bed, Extra Heavy Duty, Extra Wide, With Weigh	\$ 505.35
E0305		Bed Side Rails, Half Length	\$ 104.64
E0310		Bed Side Rails, Full Length	\$ 119.49
E0325		Urinal; Male, Jug-Type, Any Material	\$ 7.74
E0326		Urinal; Female, Jug-Type, Any Material	\$ 8.90
E0371		Nonpowered Advanced Pressure Reducing Overlay For Ma	\$ 248.71
E0424	RR	Stationary Compressed Gaseous Oxygen System, Rental; In	\$ 97.17
E0431	RR	Portable Gaseous Oxygen System, Rental; Includes Portabl	\$ 19.95
E0434	RR	Portable Liquid Oxygen System, Rental; Includes Portable	\$ 19.95
E0439	RR	Stationary Liquid Oxygen System, Rental; Includes Contain	\$ 97.17
E0441		Oxygen Contents, Gaseous (For Use With Owned Gaseous	\$ 54.17
E0443		Portable Oxygen Contents, Gaseous (For Use Only With Po	\$ 52.02
E0445		Oximeter Device For Measuring Blood Oxygen Levels No	\$ 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, W	\$ 146.11
E0471	RR	Respiratory Assist Device, Bi-Level Pressure Capability, W	\$ 364.96
E0472	RR	Respiratory Assist Device, Bi-Level Pressure Capability, W	\$ 422.42

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E0480		Percussor, Electric Or Pneumatic, Home Model	\$ 36.29
E0482		Cough Stimulating Device, Alternating Positive And Nega	\$ 374.10
E0483		High Frequency Chest Wall Oscillation Air-Pulse Generato	\$ 957.24
E0484		Oscillatory Positive Expiratory Pressure Device, Non-Elect	\$ 33.26
E0555		Humidifier, durable, glass or autoclavable plastic bottle typ	\$ 7.38
E0561		Humidifier, Non-Heated, Used With Positive Airway Press	\$ 72.68
E0562		Humidifier, Heated, Used With Positive Airway Pressure D	\$ 176.42
E0565		Compressor, Air Power Source For Equipment Which Is N	\$ 41.38
E0570		Nebulizer, With Compressor	\$ 97.20
E0600		Respiratory Suction Pump, Home Model, Portable Or Stati	\$ 412.24
E0601		Continuous Airway Pressure (Cpap) Device	\$ 59.84
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
E0617		Automatic ext defibrillator	\$ 273.75
E0619		Apnea Monitor, With Recording Feature	\$ 323.00
E0621		Sling Or Seat, Patient Lift, Canvas Or Nylon	\$ 72.43
E0630		Patient Lift, Hydraulic Or Mechanical, Includes Any Seat, S	\$ 69.34
E0650		Pneumatic Compressor, Non-Segmental Home Model	\$ 80.02
E0651		Pneumatic Compressor, Segmental Home Model Without C	\$ 71.81
E0652		Pneumatic Compressor, Segmental Home Model With Cal	\$ 471.74
E0655		Non-Segmental Pneumatic Appliance For Use With Pneum	\$ 97.18
E0660		Non-Segmental Pneumatic Appliance For Use With Pneum	\$ 143.84
E0665		Non-Segmental Pneumatic Appliance For Use With Pneum	\$ 104.85
E0666		Non-Segmental Pneumatic Appliance For Use With Pneum	\$ 124.34
E0667		Segmental Pneumatic Appliance For Use With Pneumatic C	\$ 291.51
E0668		Segmental Pneumatic Appliance For Use With Pneumatic C	\$ 338.18
E0669		Segmental Pneumatic Appliance For Use With Pneumatic C	\$ 156.71
E0671		Segmental Gradient Pressure Pneumatic Appliance, Full Le	\$ 373.98
E0672		Segmental Gradient Pressure Pneumatic Appliance, Full A	\$ 290.58
E0673		Segmental Gradient Pressure Pneumatic Appliance, Half L	\$ 241.46
E0705		Transfer Device, Any Type, Each	\$ 40.82
E0720		Transcutaneous Electrical Nerve Stimulation (Tens) Devis	\$ 194.02
E0730		Transcutaneous Electrical Nerve Stimulation (Tens) Devis	\$ 194.26
E0747		Osteogenesis Stimulator, Electrical, Non- Invasive, Other T	\$ 3,526.01
E0748		Osteogenesis Stimulator, Electrical, Non- Invasive, Spinal	\$ 3,503.17
E0760		Osteogenesis Stimulator, Low Intensity Ultrasound, Non-It	\$ 2,911.07
E0766		Elec stim cancer treatment	\$ 340.44
E0781		Ambulatory Infusion Pump, Single Or Multiple Channels, S	\$ 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, Wi	\$ 118.96

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E0911		Trapeze Bar, Heavy Duty, For Patient Weight Capacity Gre	\$ 372.96
E0912		Trapeze Bar, Heavy Duty, For Patient Weight Capacity Gre	\$ 792.72
E0935	RR	Continuous Passive Motion Exercise Device For Use On K	\$ 20.48
E0940		Trapeze Bar, Free Standing, Complete With Grab Bar	\$ 204.40
E0942		Cervical Head Harness/Halter	\$ 15.90
E0950		Wheelchair Accessory, Tray, Each	\$ 66.29
E0951		Heel Loop/Holder, Any Type, With Or Without Ankle Stra	\$ 11.78
E0952		Toe Loop/Holder, Any Type, Each	\$ 12.42
E0953		Wheelchair accessory, lateral thigh or knee support, any ty	\$ 70.38
E0954		Wheelchair accessory, foot box, any type, includes attachm	\$ 40.54
E0955		Wheelchair Accessory, Headrest, Cushioned, Any Type, In	\$ 139.40
E0956		Wheelchair Accessory, Lateral Trunk Or Hip Support, Any	\$ 70.38
E0957		Wheelchair Accessory, Medial Thigh Support, Any Type, I	\$ 104.06
E0958		Manual Wheelchair Accessory, One-Arm Drive Attachmer	\$ 370.90
E0959		Manual Wheelchair Accessory, Adapter For Amputee, Eac	\$ 33.83
E0960		Wheelchair Accessory, Shoulder Harness/Straps Or Chest S	\$ 65.77
E0961		Manual Wheelchair Accessory, Wheel Lock Brake Extensi	\$ 21.99
E0966		Manual Wheelchair Accessory, Headrest Extension, Each	\$ 55.77
E0967		Manual Wheelchair Accessory, Hand Rim With Projection	\$ 59.14
E0968		Commode Seat, Wheelchair	\$ 161.40
E0969		Narrowing Device, Wheelchair	\$ 133.86
E0970		No.2 Footplates, Except For Elevating Leg Rest	Cost Invoice
E0971		Manual Wheelchair Accessory, Anti-Tipping Device Each	\$ 32.23
E0973		Wheelchair Accessory, Adjustable Height, Detachable Arm	\$ 60.36
E0974		Manual Wheelchair Accessory, Anti-Rollback Device, Eac	\$ 66.15
E0978		Wheelchair Accessory, Positioning Belt/Safety Belt/Pelvic	\$ 26.57
E0980		Safety Vest, Wheelchair	\$ 28.78
E0981		Wheelchair Accessory, Seat Upholstery, Replacement Only	\$ 31.10
E0982		Wheelchair Accessory, Back Upholstery, Replacement Onl	\$ 33.99
E0983		Manual Wheelchair Accessory, Power Add-On To Convert	\$ 2,178.88
E0984		Manual Wheelchair Accessory, Power Add-On To Convert	\$ 1,522.88
E0988		Lever-Activated Wheel Drive	\$ 2,695.36
E0990		Wheelchair Accessory, Elevating Leg Rest, Complete Asse	\$ 68.23
E0992		Manual Wheelchair Accessory, Solid Seat Insert	\$ 70.03
E1002		Wheelchair Accessory, Power Seating System, Tilt Only	\$ 2,813.60
E1003		Wheelchair Accessory, Power Seating System, Recline On	\$ 3,293.28
E1004		Wheelchair Accessory, Power Seating System, Recline On	\$ 3,619.76
E1005		Wheelchair Accessory, Power Seatng System, Recline Onl	\$ 3,959.76
E1006		Wheelchair Accessory, Power Seating System, Combinatio	\$ 4,882.24
E1007		Wheelchair Accessory, Power Seating System, Combinatio	\$ 6,060.32
E1008		Wheelchair Accessory, Power Seating System, Combinatio	\$ 6,216.16
E1009		Wheelchair Accessory, Addition To Power Seating System	Cost Invoice
E1010		Wheelchair Accessory, Addition To Power Seating System	\$ 844.70

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E1011		Modification To Pediatric Size Wheelchair, Width Adjustn	Cost Invoice
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	\$ 101.68
E1016		Shock Absorber For Power Wheelchair, Each	\$ 97.93
E1020		Residual Limb Support System For Wheelchair	\$ 169.80
E1028		Wheelchair Accessory, Manual Swingaway, Retractable Or	\$ 136.60
E1029		Wheelchair Accessory, Ventilator Tray, Fixed	\$ 284.60
E1030		Wheelchair Accessory, Ventilator Tray, Gimbaled	\$ 889.00
E1031		Rollabout Chair, Any And All Types With Castors5" Or Gr	\$ 40.73
E1161		Manual Adult Size Wheelchair, Includes Tilt In Space	\$ 2,130.40
E1225		Wheelchair Accessory, Manual Semi-Reclining Back, (Rec	\$ 362.10
E1226		Wheelchair Accessory, Manual Fully Reclining Back, (Rec	\$ 397.12
E1229		Wheelchair, Pediatric Size, Not Otherwise Specified	Cost Invoice
E1231		Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustabl	\$ 1,710.73
E1232		Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjusta	\$ 1,925.52
E1233		Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustabl	\$ 1,994.96
E1234		Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjusta	\$ 1,736.88
E1235		Wheelchair, Pediatric Size, Rigid, Adjustable, With Seatin	\$ 1,672.56
E1236		Wheelchair, Pediatric Size, Folding, Adjustable, With Seat	\$ 1,475.52
E1237		Wheelchair, Pediatric Size, Rigid, Adjustable, Without Sea	\$ 1,488.40
E1238		Wheelchair, Pediatric Size, Folding, Adjustable, Without S	\$ 1,475.52
E1239		Power Wheelchair, Pediatric Size, Not Otherwise Specified	Cost Invoice
E1372		Immersion External Heater For Nebulizer	\$ 115.17
E1390	RR	Oxygen Concentrator, Single Delivery Port, Capable Of De	\$ 97.17
E1399		Durable Medical Equipment, Miscellaneous	Cost Invoice
E2100		Blood Glucose Monitor With Integrated Voice Synthesizer	\$ 579.12

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E2201		Manual Wheelchair Accessory, Nonstandard Seat Frame, Width Greater Than Or Equal To 20 Inches And Less Than 24 Inches	\$ 296.68
E2202		Manual Wheelchair Accessory, Nonstandard Seat Frame W	\$ 400.90
E2203		Manual Wheelchair Accessory, Nonstandard Seat Frame D	\$ 391.07
E2204		Manual Wheelchair Accessory, Nonstandard Seat Frame D	\$ 673.15
E2205		Manual Wheelchair Accessory, Handrim Without Projections (Includes Ergonomic Or Contoured), Any Type, Replacement Only, Each	\$ 29.22
E2206		Manual Wheelchair Accessory, Wheel Lock Assembly, Co	\$ 34.22
E2207		Wheelchair Accessory, Crutch And Cane Holder, Each	\$ 38.55
E2208		Wheelchair Accessory, Cylinder Tank Carrier, Each	\$ 78.06
E2209		Accessory, Arm Tough, With Or Without Handsupport, Ea	\$ 76.46
E2210		Wheelchair Accessory, Bearngs, Any Type, Replacement C	\$ 4.77

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E2211		Manual Wheelchair Accessory, Pneumatic Propulsion Tire	\$ 29.85
E2212		Manual Wheelchair Accessory, Tube For Pneumatic Propu	\$ 5.25
E2213		Manual Wheelchair Accessory, Insert For Pneumatic Propu	\$ 26.09
E2214		Manual Wheelchair Accessory, Pneumatic Caster Tire, Any	\$ 27.42
E2215		Manual Wheelchair Accessory, Tube For Pneumatic Caster	\$ 8.60
E2216		Manual Wheelchair Accessory, Foam Filled Propulsion Tir	Cost Invoice
E2217		Manual Wheelchair Accessory, Foam Filled Caster Tire, A	Cost Invoice
E2218		Manual Wheelchair Accessory, Foam Propulsion Tire, Any	Cost Invoice
E2219		Manual Wheelchair Accessory, Foam Caster Tire, Any Siz	\$ 35.74
E2220		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Prop	\$ 23.19
E2221		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Caste	\$ 22.59
E2222		Manual Wheelchair Accessory, Solid (Rubber/Plastic) Cast	\$ 18.75
E2224		Manual Wheelchair Accessory, Propulsion Wheel Exclude	\$ 75.05
E2225		Manual Wheelchair Accessory, Caster Wheel Excludes Tir	\$ 15.65
E2226		Manual Wheelchair Accessory, Caster Fork, Any Size, Rep	\$ 33.46
E2227	RR	Manual Wheelchair Accessory, Gear Reduction Drive Whe	\$ 1,684.50
E2228		Manual Wheelchair Accessory, Wheel Braking System An	\$ 818.20
E2231		Solid Seat Support Base	\$ 127.14
E2291		Back, Planar, For Pediatric Size Wheelchair Including Fixe	Cost Invoice
E2292		Seat, Planar, For Pediatric Size Wheelchair Including Fixe	Cost Invoice
E2293		Back, Contoured, For Pediatric Size Wheelchair Including	Cost Invoice
E2294		Seat, Contoured, For Pediatric Size Wheelchair Including F	Cost Invoice
E2295		Manual Wheelchair Accessory, For Pediatric Size Wheelch	Cost Invoice
E2310		Power Wheelchair Accessory, Electronic Connection Betw	\$ 823.84
E2311		Power Wheelchair Accessory, Electronic Connection Betw	\$ 1,662.56
E2312		Power Wheelchair Accessory, Hand Or Chin Control Interf	\$ 1,815.76
E2313		Power Wheelchair Accessory, Harness For Upgrade To Ex	\$ 288.56
E2321		Power Wheelchair Accessory, Hand Control Interface, Ren	\$ 1,119.44
E2322		Power Wheelchair Accessory, Hand Control Interface, Mul	\$ 1,057.60
E2323		Power Wheelchair Accessory, Specialty Joystick Handle Fo	\$ 51.55
E2324		Power Wheelchair Accessory, Chin Cup For Chin Control	\$ 34.01
E2325		Power Wheelchair Accessory, Sip And Puff Interface, Non	\$ 1,010.80
E2326		Power Wheelchair Accessory, Breath Tube Kit For Sip And	\$ 265.10
E2327		Power Wheelchair Accessory, Head Control Interface, Mec	\$ 1,977.28
E2328		Power Wheelchair Accessory, Head Control Or Extremity	\$ 3,732.00
E2329		Power Wheelchair Accessory, Head Control Interface, Con	\$ 1,347.68
E2330		Power Wheelchair Accessory, Head Control Interface, Prox	\$ 2,587.52
E2340		Power Wheelchair Accessory, Nonstandard Seat Frame Wi	\$ 322.66
E2341		Power Wheelchair Accessory, Nonstandard Seat Frame Wi	\$ 484.03
E2342		Power Wheelchair Accessory, Nonstandard Seat Frame De	\$ 403.37
E2343		Power Wheelchair Accessory, Nonstandard Seat Frame De	\$ 645.39
E2351		Power Wheelchair Accessory, Electronic Interface To Oper	\$ 536.02
E2359		Gr34 sealed leadacid battery	\$ 148.22

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E2360		Power Wheelchair Accessory, 22 Nf Non-Sealed Lead Acid	\$ 94.73
E2361		Power Wheelchair Accessory, 22Nf Sealed Lead Acid Batt	\$ 102.26
E2362		Power Wheelchair Accessory, Group 24 Non- Sealed Lead	\$ 81.59
E2363		Power Wheelchair Accessory, Group 24 Sealed Lead Acid	\$ 133.04
E2364		Power Wheelchair Accessory, U-1 Non-Sealed Lead Acid	\$ 93.15
E2365		Power Wheelchair Accessory, U-1 Sealed Lead Acid Batte	\$ 75.62
E2366		Power Wheelchair Accessory, Battery Charger, Single Mod	\$ 167.76
E2368		Power Wheelchair Component, Motor, Replacement Only	\$ 371.40
E2369		Power Wheelchair Component, Gear Box, Replacement Or	\$ 336.60
E2370		Power Wheelchair Component, Motor And Gear Box Com	\$ 533.20
E2371		Power Wheelchair Accessory, Group 27 Sealed Lead Acid	\$ 116.92
E2372		Power Wheelchair Accessory, Group 27 Non- Sealed Lead	Cost Invoice
E2373		Power Wheelchair Accessory, Hand Or Chin Control Interface, Compact Remote Joystick, Proportional, Including Fixed Mounting Hardware	\$ 600.16
E2374		Power Wheelchair Accessory, Hand Or Chin Control Interf	\$ 379.60
E2375		Power Wheelchair Accessory, Non-Expandable Controller.	\$ 614.70
E2376		Power Wheelchair Accessory, Expandable Controller, Includ	\$ 943.12

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E2377		Power Wheelchair Accessory, Expandable Controller, Including All Related Electronics And Mounting Hardware, Upgrade Provided At Initial Issue	\$ 349.36
E2378		Pw Actuator Replacement	\$ 458.88
E2381		Power Wheelchair Accessory, Pneumatic Drive Wheel Tire	\$ 55.02
E2382		Power Wheelchair Accessory, Tube For Pneumatic Drive Wheel Tire	\$ 13.84
E2383		Power Wheelchair Accessory, Insert For Pneumatic Drive Wheel Tire	\$ 112.35
E2384		Power Wheelchair Accessory, Pneumatic Caster Tire, Any Size	\$ 57.07
E2385		Power Wheelchair Accessory, Tube For Pneumatic Caster Tire, Any Size, Replacement Only, Each	\$ 33.21
E2386		Power Wheelchair Accessory, Foam Filled Drive Wheel Tire	\$ 101.23
E2387		Power Wheelchair Accessory, Foam Filled Caster Tire, Any Size	\$ 45.75
E2388		Power Wheelchair Accessory, Foam Drive Wheel Tire, Any Size	\$ 36.14
E2389		Power Wheelchair Accessory, Foam Caster Tire, Any Size	\$ 20.20

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
E2390		Power Wheelchair Accessory, Solid (Rubber/Plastic) Drive	\$ 31.27
E2391		Power Wheelchair Accessory, Solid (Rubber/Plastic) Caste	\$ 15.33
E2392		Power Wheelchair Accessory, Solid (Rubber/Plastic) Caste	\$ 38.54
E2394		Power Wheelchair Accessory, Drive Wheel Excludes Tire,	\$ 54.11
E2395		Power Wheelchair Accessory, Caster Wheel Excludes Tire	\$ 39.38
E2396		Power Wheelchair Accessory, Caster Fork, Any Size, Repl	\$ 45.86
E2397		Power Wheelchair Accessory, Lithium-Based Battery, Eacl	\$ 372.44
E2402		Negative Pressure Wound Therapy Electrical Pump, Statio	\$ 947.30
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
E2512		Sgd Accessory, Mounting Sys	Cost Invoice
E2599		Accessory For Speech Generating Device	Cost Invoice
E2601		General Use Wheelchair Seat Cushion, Width Less Than 2	\$ 40.02
E2602		General Use Wheelchair Seat Cushion, Width 22Inches Or	\$ 81.45
E2603		Skin Protection Wheelchair Seat Cushion, Width Less Tha	\$ 101.86
E2604		Skin Protection Wheelchair Seat Cushion, Width22 Inches	\$ 134.06
E2605		Positioning Wheelchair Seat Cushion, Width Less Than 22	\$ 192.28
E2606		Positioning Wheelchair Seat Cushion, Width 22Inches Or C	\$ 303.78
E2607		Skin Protection And Positioning Wheelchair Seat Cushion,	\$ 197.51
E2608		Skin Protection And Positioning Wheelchair Seat Cushion,	\$ 242.21
E2609		Custom Fabricated Wheelchair Seat Cushion, Any Size	Cost Invoice
E2611		General Use Wheelchair Back Cushion, Width Less Than 2	\$ 186.66
E2612		General Use Wheelchair Back Cushion, Width 22Inches Or	\$ 291.70
E2613		Positioning Wheelchair Back Cushion, Posterior, Width Le	\$ 281.78
E2614		Positioning Wheelchair Back Cushion, Posterior, Width 22	\$ 401.80
E2615		Positioning Wheelchair Back Cushion, Posterior- Lateral, V	\$ 322.97
E2616		Positioning Wheelchair Back Cushion, Posterior- Lateral, V	\$ 434.76
E2617		Custom Fabricated Wheelchair Back Cushion, Any Size, Ir	Cost Invoice
E2619	RP	Replacement Cover For Wheelchair Seat Cushion Or Back	\$ 37.21
E2620		Positioning Wheelchair Back Cushion, Planar Back With L	\$ 370.58
E2621		Positioning Wheelchair Back Cushion, Planar Back With L	\$ 410.24
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	\$ 545.54
E2627		Arm Supp Att To Wc Rancho Ty	\$ 758.54
E2628		Mobile Arm Supports Reclinin	\$ 571.44
E2629		Friction Dampening Arm Supp	\$ 831.69

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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	\$ 33.78
K0002		Standard Hemi (Low Seat) Wheelchair	\$ 48.35
K0003		Lightweight Wheelchair	\$ 55.03
K0004		High Strength, Lightweight Wheelchair	\$ 73.51
K0005		Ultralightweight Wheelchair	\$ 166.44
K0006		Heavy Duty Wheelchair	\$ 74.86
K0007		Extra Heavy Duty Wheelchair	\$ 116.44
K0009		Other Manual Wheelchair/Base	\$ 66.95
K0015		Detachable, Non-Adjustable Height Armrest, Each	\$ 129.70
K0017		Detachable, Adjustable Height Armrest, Base, Each	\$ 35.82
K0018		Detachable, Adjustable Height Armrest, Upper Portion, Ea	\$ 20.25
K0019		Arm Pad, Each	\$ 11.91
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	\$ 50.94
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
K0052		Swingaway, Detachable Footrests, Each	\$ 65.60
K0053		Elevating Footrests, Articulating (Telescoping), Each	\$ 74.98
K0056		Seat Height Less Than 17" Or Equal To Or Greater Than 2	\$ 82.27
K0065		Spoke Protectors, Each	\$ 39.64
K0069		Rear Wheel Assembly, Complete, With Solid Tire, Spokes	\$ 84.65
K0070		Rear Wheel Assembly, Complete, With Pneumatic Tire, Sp	\$ 149.00
K0071		Front Caster Assembly, Complete, With Pneumatic Tire, E	\$ 94.92
K0072		Front Caster Assembly, Complete, With Semi- Pneumatic	\$ 58.02
K0073		Caster Pin Lock,Each	\$ 29.94
K0077		Front Caster Assembly, Complete, With Solid Tire, Each	\$ 48.98
K0098		Drive Belt For Power Wheelchair	\$ 20.32
K0105		Iv Hanger, Each	\$ 86.49
K0108		Wheelchair Component Or Accessory, Not Otherwise Spec	Cost Invoice

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
K0195		Elevating Leg Rests, Pair (For Use With Capped Rental W	\$ 126.40
K0606		Automatic External Defibrillator, With Integrated Electroca	\$ 2,267.45
K0669		Wheelchair Accessory, Seat Or Back Cushion, Does Not M	Cost Invoice
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	\$ 12.21
K0740		Repair Of Nonroutine Service For Oxygen Equipment Req	\$ 6.30
K0800		Power Operated Vehicle, Group 1 Standard, Patient Weight	\$ 85.48
K0801		Power Operated Vehicle, Group 1 Heavy Duty, Patient We	\$ 145.44
K0802		Power Operated Vehicle, Group 1 Very Heavy Duty, Patien	\$ 177.58
K0806		Power Operated Vehicle, Group 2 Standard, Patient Weight	\$ 106.18
K0807		Power Operated Vehicle, Group 2 Heavy Duty, Patient We	\$ 164.54
K0808		Power Operated Vehicle, Group 2 Very Heavy Duty, Patien	\$ 254.36
K0812		Power Operated Vehicle, Not Otherwise Classified	Cost Invoice
K0813		Power Wheelchair, Group 1 Standard, Portable, Sling/Solid	\$ 251.53
K0814		Power Wheelchair, Group 1 Standard, Portable, Captains C	\$ 294.66
K0815		Power Wheelchair, Group 1 Standard, Sling/Solid Seat An	\$ 331.46
K0816		Power Wheelchair, Group 1 Standard, Captains Chair, Pati	\$ 313.58
K0820		Power Wheelchair, Group 2 Standard, Portable, Sling/Solid	\$ 264.12
K0821		Power Wheelchair, Group 2 Standard, Portable, Captains C	\$ 310.32
K0822		Power Wheelchair, Group 2 Standard, Sling/Solid Seat/Bac	\$ 359.35
K0823		Power Wheelchair, Group 2 Standard, Captains Chair, Pati	\$ 352.09
K0824		Power Wheelchair, Group 2 Heavy Duty, Sling/Solid Seat/l	\$ 463.55
K0825		Power Wheelchair, Group 2 Heavy Duty, Captains Chair, F	\$ 426.38
K0826		Power Wheelchair, Group 2 Very Heavy Duty, Sling/Solid	\$ 672.53
K0827		Power Wheelchair, Group 2 Very Heavy Duty, Captains Ch	\$ 579.06
K0828		Power Wheelchair, Group 2 Extra Heavy Duty, Sling/Solid	\$ 783.33
K0829		Power Wheelchair, Group 2 Extra Heavy Duty, Captains C	\$ 738.47
K0830		Power Wheelchair, Group 2 Standard, Seat Elevator, Sling	\$ 354.07
K0831		Power Wheelchair, Group 2 Standard, Seat Elevator, Capta	\$ 354.07
K0835		Power Wheelchair, Group 2 Standard, Single Power Option	\$ 272.81
K0836		Power Wheelchair, Group 2 Standard, Single Power Option	\$ 282.96
K0837		Power Wheelchair, Group 2 Heavy Duty, Single Power Op	\$ 349.90
K0838		Power Wheelchair, Group 2 Heavy Duty, Single Power Op	\$ 310.14
K0839		Power Wheelchair, Group 2 Very Heavy Duty, Single Pow	\$ 464.79
K0840		Power Wheelchair, Group 2 Extra Heavy Duty, Single Pow	\$ 713.62
K0841		Power Wheelchair, Group 2 Standard, Multiple Power Opt	\$ 307.43
K0842		Power Wheelchair, Group 2 Standard, Multiple Power Opt	\$ 306.98
K0843		Power Wheelchair, Group 2 Heavy Duty, Multiple Power C	\$ 364.43
K0848		Power Wheelchair, Group 3 Standard, Sling/Solid Seat/Bac	\$ 615.15
K0849		Power Wheelchair, Group 3 Standard, Captains Chair, Pati	\$ 591.42
K0850		Power Wheelchair, Group 3 Heavy Duty, Sling/Solid Seat/l	\$ 713.54
K0851		Power Wheelchair, Group 3 Heavy Duty, Captains Chair, F	\$ 686.08

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
K0852		Power Wheelchair, Group 3 Very Heavy Duty, Sling/Solid	\$ 824.46
K0853		Power Wheelchair, Group 3 Very Heavy Duty, Captains Ch	\$ 846.93
K0854		Power Wheelchair, Group 3 Extra Heavy Duty, Sling/Solid	\$ 1,121.99
K0855		Power Wheelchair, Group 3 Extra Heavy Duty, Captains C	\$ 1,059.89
K0856		Power Wheelchair, Group 3 Standard, Single Power Optio	\$ 660.29
K0857		Power Wheelchair, Group 3 Standard, Single Power Optio	\$ 673.53
K0858		Power Wheelchair, Group 3 Heavy Duty, Single Power Op	\$ 819.23
K0859		Power Wheelchair, Group 3 Heavy Duty, Single Power Op	\$ 781.30
K0860		Power Wheelchair, Group 3 Very Heavy Duty, Single Pow	\$ 1,170.38
K0861		Power Wheelchair, Group 3 Standard, Multiple Power Opt	\$ 661.34
K0862		Power Wheelchair, Group 3 Heavy Duty, Multiple Power C	\$ 819.23
K0863		Power Wheelchair, Group 3 Very Heavy Duty, Multiple Pc	\$ 1,170.38
K0864		Power Wheelchair, Group 3 Extra Heavy Duty, Multiple P	\$ 1,392.75
K0868		Power Wheelchair, Group 4 Standard, Sling/Solid Seat/Bac	Cost Invoice
K0869		Power Wheelchair, Group 4 Standard, Captains Chair, Pati	Cost Invoice
K0870		Power Wheelchair, Group 4 Heavy Duty, Sling/Solid Seat/l	Cost Invoice
K0871		Power Wheelchair, Group 4 Very Heavy Duty, Sling/Solid	Cost Invoice
K0877		Power Wheelchair, Group 4 Standard, Single Power Optio	Cost Invoice
K0878		Power Wheelchair, Group 4 Standard, Single Power Optio	Cost Invoice
K0879		Power Wheelchair, Group 4 Heavy Duty, Single Power Op	Cost Invoice
K0880		Power Wheelchair, Group 4 Very Heavy Duty, Single Pow	Cost Invoice
K0884		Power Wheelchair, Group 4 Standard, Multiple Power Opt	Cost Invoice
K0885		Power Wheelchair, Group 4 Standard, Multiple Power Opt	Cost Invoice
K0886		Power Wheelchair, Group 4 Heavy Duty, Multiple Power C	Cost Invoice
K0890		Power Wheelchair, Group 5 Pediatric, Single Power Optio	Cost Invoice
K0891		Power Wheelchair, Group 5 Pediatric, Multiple Power Opt	Cost Invoice
K0898		Power Wheelchair, Not Otherwise Classified	Cost Invoice
K0899		Power Mobility Device, Not Coded By Sadmerc Or Does N	Cost Invoice
K0903		A diabetic shoe insert that is a total contact, removable inla	\$ 34.85
L0112		Cranial Cervical Orthosis, Congenital Torticollis Type Wit	\$ 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 Patie	\$ 143.50
L0140		Cervical, Semi-Rigid; Adjustable (Plastic Collar)	\$ 47.46

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L0150		Cervical, Semi-Rigid, Adjustable Molded Chin Cup (Plastic Collar With Mandibular/Occipital Piece	\$ 87.06
L0160		Cervical, Semi-Rigid, Wire Frame Occipital/Mandibular S	\$ 113.70
L0170		Cervical Collar; Molded To Patient Model	\$ 468.22
L0172		Cervical, Collar, Semi-Rigid, Thermoplastic Foam, Two P	\$ 101.52
L0174		Cervical, Collar, Semi-Rigid, Thermoplastic Foam, Two P	\$ 199.44
L0180		Cervical, Multiple Post Collar, Occipital/Mandibular Supp	\$ 276.56
L0190		Cervical, Multiple Post Collar, Occipital/Mandibular Supp	\$ 359.63
L0200		Cervical, Multiple Post Collar, Occipital/Mandibular Supp	\$ 374.91
L0220		Thoracic, Rib Belt, Custom Fabricated	\$ 102.39
L0450		Tlso, Flexible, Provides Trunk Support, Upper Thoracic Re	\$ 128.55
L0452		Tlfo, Flexible, Provides Trunk Support, Upper Thoracic Re	\$ 198.51
L0454		Tls0 Flexible, Provides Trunk Support, Extends From Sacr	\$ 262.83
L0456		Tlso, Flexible Provides Trunk Support, Thoracic Region, R	\$ 753.73
L0466		Tlso, Sagittal Control, Rigid Posterior Frame And Flexible	\$ 273.79
L0468		Tlso, Sagittal-Coronal Control, Rigid Posterior Frame And	\$ 362.73
L0470		Tlso, Triplanar Control, Rigid Posterior Frame And Flexib	\$ 462.86
L0472		Tlso, Triplanar Control, Hyperextension, Rigid Anterior A	\$ 293.56

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L0480		Tlso, Triplanar Control, One Piece Rigid Plastic Shell Without Interface Liner, With Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal Notch, Anterior Or Posterior Opening, Restricts Gross Trunk Motion In Sagittal, Coronal And Transverse Planes, Includes A Carved Plaster Or Cad-Cam Model, Custom Fabricated	\$ 1,033.79
L0482		Tlso, Triplanar Control, One Piece Rigid Plastic Shell With	\$ 1,200.79
L0484		Tslo, Triplanar Control, Two Piece Rigid Plastic Shell With	\$ 1,290.22
L0486		Tlfo, Triplanar Control, Two Piece Rigid Plastic Shell With	\$ 1,368.85
L0488		Tlso, Triplanar Control, One Piece Rigid Plastic Shell With	\$ 760.73

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L0490		Tlso, Sagittal-Coronal Control, One Piece Rigid Plastic Shell, With Overlapping Reinforced Anterior, With Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates At Or Before The T-9 Vertebra, Anterior Extends From Symphysis Pubis To Xiphoid, Anterior Opening, Restricts Gross Trunk Motion In Sagittal And Coronal Planes, Prefabricated, Includes Fitting And Adjustment	\$ 214.39
L0491		Tlso, Sagittal-Coronal Control, Modular Segmented Spinal	\$ 582.02
L0492		Tlso, Sagittal-Coronal Control, Modular Segmented Spinal	\$ 382.78
L0621		Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support	\$ 66.95
L0622		Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support	\$ 219.27
L0623		Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With I	\$ 336.26
L0624		Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With I	Cost Invoice
L0625		Lumbar Orthosis, Flexible, Provides Lumbar Support, Post	\$ 41.74
L0626		Lumbar Orthosis, Sagittal Control, With Rigid Posterior Pa	\$ 59.06
L0627		Lumbar Orthosis, Sagittal Control, With Rigid Anterior An	\$ 311.52
L0628		Lso, Flexible, Provides Lumbo-Sacral Support, Posterior E	\$ 63.58
L0629		Lso, Flexible, Provides Lumbo-Sacral Support, Posterior E	\$ 164.18
L0630		Lso, Sagittal Control, With Rigid Posterior Panel(S), Poste	\$ 122.74

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L0631		Lso, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Pendulous Abdomen Design, Prefabricated, Includes Fitting And Adjustment	\$ 777.98

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L0632		Lso, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Padding, Shoulder Straps, Pendulous Abdomen Design, Custom Fabricated	Cost Invoice
L0633		Lso, Sagittal-Coronal Control, With Rigid Posterior Frame	\$ 217.32
L0634		Lso, Sagittal-Coronal Control, With Rigid Posterior Frame	Cost Invoice
L0635		Lso, Sagittal-Coronal Control, Lumbar Flexion, Rigid Post	\$ 694.93
L0636		Lso, Sagittal-Coronal Control, Lumbar Flexion Rigid Poste	\$ 1,028.75
L0637		Lso, Sagittal-Coronal Control, With Rigid Anterior And Pc	\$ 814.13
L0638		Lso, Sagittal-Coronal Control, With Rigid Anterior And Pc	\$ 999.51
L0639		Lso, Sagittal-Coronal Control, Rigid Shell (S)/Panel(S), Po	\$ 814.13
L0640		Lso, Sagittal-Coronal Control, Rigid Shell(S)/Panel(S), Pos	\$ 793.02
L0700		Ctlso, Anterior-Posterior-Lateral Control, Molded To Patie	\$ 1,484.18
L0710		Ctlso, Anterior-Posterior-Lateral Control, Molded To Patie	\$ 1,516.27
L0810		Halo Procedure, Cervical Halo Incorporated Into Jacket Ve	\$ 1,896.29
L0820		Halo Procedure, Cervical Halo Incorporated Into Plaster Bo	\$ 1,702.05
L0830		Halo Procedure, Cervical Halo Incorporated IntoMilwauke	\$ 2,398.67
L0859		Addition To Halo Procedure, Magnetic Resonance Image C	\$ 999.63
L0861		Additional To Halo Procedure, Replacement Liner/Interfac	\$ 163.34
L0970		Tlso, Corset Front	\$ 97.62

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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
L0982		Stocking Supporter Grips, Set Of Four (4)	\$ 11.82
L0984		Protective Body Sock, Each	\$ 49.08
L0999		Additional To Spinal Orthosis, Not Otherwise Specified	Cost Invoice
L1000		Cervical-Thoracic-Lumbar-Sacral Orthosis (Ctlso) (Milwa	\$ 1,489.07
L1001		Cervical Thoracic Lumbar Sacral Orthosis Immobilizer, In	Cost Invoice
L1010		Additions To Cervical-Thoracic-Lumbar-Sacral Orthosis(C	\$ 48.73
L1020		Addition To Ctlso Or Scoliosis, Kyphosis Pad	\$ 62.75
L1025		Addition To Ctlso Or Scoliosis Orthosis, Kyphosis Pad, Fl	\$ 119.78
L1030		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Bolster P	\$ 46.18
L1040		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Or Lumb	\$ 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, Outtrigger	\$ 48.00
L1085		Addition To Ctlso Or Scoliosis Orthosis. Outtrigger, Bilate	\$ 129.86
L1090		Addition To Ctlso Or Scoliosis Orthosis, Lumbar Sling	\$ 85.90
L1100		Addition To Ctlso Or Scoliosis Orthosis, Ring Flange, Plas	\$ 137.18
L1110		Addition To Ctlso Or Scoliosis Orthosis. Ring Flange, Pla	\$ 185.42
L1120		Addition To Ctlso Or Scoliosis Orthosis Covers For Uprig	\$ 31.36
L1200		Thoracic-Lumbar-Sacral-Orthosis (Tlso), Inclusive Of Furr	\$ 1,137.53
L1210		Addition To Tlso, (Low Profile); Lateral Thoracic Extensio	\$ 189.97
L1220		Addition To Tlso, (Low Profile), Anterior Thoracic Extens	\$ 181.47
L1230		Addition To Tlso, (Low Profile), Milwaukee Type Superstr	\$ 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 Derota	\$ 64.20
L1270		Addition To Tlso, (Low Profile), Abdominal Pad	\$ 65.22
L1280		Addition To Tlso, (Low Profile), Rib Gusset (Elastic), Eac	\$ 75.02
L1290		Addition To Tlso, (Low Profile), Lateral Trochanteric Pad	\$ 59.39
L1300		Other Scoliosis Procedure, Body Jacket Molded To Patient	\$ 1,337.26
L1310		Other Scoliosis Procedure, Post Operative Body Jacket	\$ 1,374.05
L1499		Spinal Orthosis, Not Otherwise Specified	Cost Invoice
L1600		Hip Orthosis, Ho), Abduction Control Of Hip Joints, Flexil	\$ 93.55
L1610		Ho, Abduction Control Of Hip Joints; Flexible, (Frejka Co	\$ 41.28
L1620		Ho, Abduction Control Of Hip Joints; Flexible, (Pavlik Ha	\$ 116.93
L1630		Ho, Abduction Control Of Hip Joints; Semi-Flexible(Von F	\$ 123.02
L1640		Ho, Abduction Control Of Hip Joints; Static, Pelvic Band C	\$ 374.48
L1650		Ho, Abduction Control Of Hip Joints; Static, Adjustable, (L	\$ 189.50

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L1660		Ho, Abduction Control Of Hip Joints; Static, Plastic, Prefa	\$ 124.25
L1680		Ho, Abduction Control Of Hip Joints; Dynamic, Pelvic Co	\$ 884.58
L1685		Ho, Abduction Control Of Hip Joints; Postoperative Hip A	\$ 902.77
L1686		Ho, Abduction Control Of Hip Joints; Postoperative Hip A	\$ 833.58
L1690		Combination, Bilateral, Lumbo-Sacral, Hip, Femur Orthosi	\$ 1,465.46
L1700		Legg Perthes Orthosis, (Toronto Type), Custom Fabricated	\$ 1,108.70
L1710		Legg Perthes Orthosis, (Newington Type), Custom Fabrica	\$ 1,297.85
L1720		Legg Perthes Orthosis, Trilateral, (Tachdijan Type), Custor	\$ 956.67
L1730		Legg Perthes Orthosis, (Scottish Rite Type), Custom Fabric	\$ 821.69
L1755		Legg Perthes Orthosis, (Pattern Bottom Type), Custom Fab	\$ 1,303.97
L1810		Ko, Elastic With Joints, Prefabricated, Includes Fitting And	\$ 71.50
L1820		Ko, Elastic With Condylar Pads And Joints, With Or Witho	\$ 110.78
L1830		Ko, Immobilizer, Canvas Longitudinal, Prefabricated, Inclu	\$ 67.36
L1831		Ko, Locking Knee Joint(S), Positional Orthosis, Prefabrica	\$ 223.04
L1832		Knee Orthosis, Adjustable Knee Joints (Unicentric Or Poly	\$ 513.46
L1834		Ko, Without Knee Joint, Rigid, Custom Fabricated	\$ 563.58
L1836		Ko, Rigid, Without Joint(S), Includes Soft Interface Materi	\$ 101.13
L1840		Ko, Derotation, Medial-Lateral, Anterior Cruciate Ligamer	\$ 750.70
L1843		Knee Orthosis, Single Upright, Thigh And Calf, With Adju	\$ 679.98
L1844		Knee Orthosis, Double Upright, Thigh And Calf, With Adj	\$ 1,178.62
L1845		Knee Orthosis, Double Upright, Thigh And Calf, With Adj	\$ 705.63
L1846		Knee Orthosis, Double Upright, Thigh And Calf, With Adj	\$ 865.17
L1847		Ko, Double Upright With Adjustable Joint, With Inflatable	\$ 435.89
L1850		Ko, Swedish Type, Prefabricated, Includes Fitting And Adj	\$ 220.69
L1860		Ko, Modification Of Supracondylar Prosthetic Socket, Cus	\$ 779.05
L1900		Ankle-Foot Orthosis (Afo), Spring Wire, Dorsiflexion Assi	\$ 195.86
L1902		Afo, Ankle Gauntlet, Prefabricated, Includes Fitting And A	\$ 67.68
L1904		Afo, Molded Ankle Gauntlet, Custom Fabricated	\$ 407.00
L1906		Afo, Multiligamentous Ankle Support, Prefabricated, Inclu	\$ 87.31
L1907		Afo, Supramalleolar With Straps, With Or Without Interfac	\$ 426.42
L1910		Afo, Posterior, Single Bar, Clasp Attachment To Shoe Cou	\$ 198.29
L1920		Afo, Single Upright With Static Or Adjustable Stop(Phelps	\$ 253.82
L1930		Afo, Plastic Or Other Material, Prefabricated, Includes Fitt	\$ 171.74
L1932		Afo, Rigid Anterior Tibial Section, Total Carbon Fiber Or	\$ 676.26
L1940		Afo, Plastic Or Other Material, Custom Fabricated	\$ 359.05
L1945		Afo, Molded To Patient Model, Plastic, Rigid Anterior Tib	\$ 858.41
L1950		Afo, Spiral (Institute Of Rehabilitative Medicine Type), Pla	\$ 569.17
L1951		Afo, Spiral, (Institute Of Rehabilitative Medicine Type)Pla	\$ 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, Prefabric	\$ 355.22
L1980		Afo, Single Upright Free Plantar Dorsiflexion, Solid Stirru	\$ 266.45
L1990		Afo, Double Upright Free Plantar Dorsiflexion, Solid Stirru	\$ 323.62

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L2000		Knee-Ankle-Foot-Orthosis (Kafo); Single Upright, Free Kr	\$ 766.71
L2005		Kafo, Any Material, Single Or Double Upright, Stance Cor	\$ 3,105.41
L2010		Kafo, Single Upright, Free Ankle, Solid Stirrup, Thigh Anc	\$ 715.22
L2020		Kafo, Double Upright, Free Ankle, Solid Stirrup, Thigh Ar	\$ 900.57
L2030		Kafo Double Upright, Free Ankle, Solid Stirrup, Thigh Ar	\$ 817.51
L2034		Kafo, Full Plastic, Single Upright, With Or Without Free M	\$ 1,544.10
L2035		Kafo, Full Plastic, Static (Pediatric Size), Prefabricated, Inc	\$ 132.61
L2036		Kafo, Full Plastic, Double Upright, With Or Without Free	\$ 1,395.86
L2037		Knee Ankle Foot Orthosis, Full Plastic, Single Upright, Wi	\$ 1,302.26
L2038		Knee Ankle Foot Orthosis, Full Plastic, With Or Without	\$ 1,322.90
L2040		Hip-Knee-Ankle-Foot Orthosis (Hkafo), Torsion Control, I	\$ 160.44
L2050		Hkafo, Torsion Control, Bilateral Torsion Cables, Hip Join	\$ 345.84
L2060		Hkafo, Torsion Control, Bilateral Torsion Cables, Ball Bea	\$ 421.52
L2070		Hkafo, Torsion Control, Unilateral Rotation Straps, Pelvic	\$ 108.23
L2080		Hkafo, Torsion Control, Unilateral Torsion Cable, Hip Join	\$ 261.13
L2090		Hkafo, Torsion Control, Unilateral Torsion Cable, Ball Bea	\$ 318.34
L2106		Ankle-Foot-Orthosis (Afo), Fracture Orthosis, Tibial Fract	\$ 493.62
L2108		Afo, Fracture Orthosis, Tibial Fracture Cast Orthosis, Cust	\$ 859.50
L2112		Afo, Fracture Orthosis, Tibial Fracture Soft, Prefabricated.	\$ 395.32
L2114		Afo, Fracture Orthosis, Tibial Fracture Semi-Rigid, Prefa	\$ 495.84
L2116		Afo, Fracture Orthosis, Tibial Fracture Rigid, Prefabricate	\$ 570.51
L2126		Knee-Ankle-Foot-Orthosis (Kafo), Fracture Orthosis, Femo	\$ 954.37
L2128		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, C	\$ 1,351.45
L2132		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, S	\$ 732.70
L2134		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, S	\$ 781.85
L2136		Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, R	\$ 933.19
L2180		Addition To Lower Extremity Fracture Orthosis, Plastic Sh	\$ 87.10
L2182		Addition To Lower Extremity Fracture Orthosis, Drop Loc	\$ 72.16
L2184		Addition To Lower Extremity Fracture Orthosis, Limited M	\$ 98.64
L2186		Addition To Lower Extremity Fracture Orthosis, Adjustabl	\$ 136.83
L2188		Addition To Lower Extremity Fracture Orthosis, Quadrilat	\$ 262.02
L2190		Addition To Lower Extremity Fracture Orthosis, Waist Bel	\$ 67.70
L2192		Addition To Lower Extremity Fracture Orthosis, Hip Joint.	\$ 297.29
L2200		Addition To Lower Extremity, Limited Ankle Motion, Eac	\$ 34.52
L2210		Addition To Lower Extremity, Dorsiflexion Assist(Plantar	\$ 49.96
L2220		Addition To Lower Extremity, Dorsiflexion And Plantar Fl	\$ 59.46
L2230		Addition To Lower Extremity, Split Flat Caliper Stirrups A	\$ 55.70
L2232		Addition To Lower Extremity, Rocker Bottom For Total C	\$ 75.42
L2240		Addition To Lower Extremity, Round Caliper And Plate A	\$ 68.95
L2250		Addition To Lower Extremity, Foot Plate, Molded To Patie	\$ 279.54
L2260		Addition To Lower Extremity, Reinforced Solid Stirrup(Sc	\$ 145.54
L2265		Addition To Lower Extremity, Long Tongue Stirrup	\$ 85.50
L2270		Addition To Lower Extremity, Varus/Valgus Correction, ('	\$ 40.09

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L2275		Addition To Lower Extremity, Varus/Valgus Correction, P	\$ 94.51
L2280		Addition To Lower Extremity, Molded Inner Boot	\$ 330.50
L2300		Addition To Lower Extremity, Abduction Bar (Bilateral Hi	\$ 207.23
L2310		Addition To Lower Extremity, Abduction Bar-Straight	\$ 103.78
L2320		Addition To Lower Extremity, Non-Molded Lacer , For Cu	\$ 149.38
L2330		Addition To Lower Extremity, Lacer Molded To Patient M	\$ 312.69
L2335		Addition To Lower Extremity, Anterior Swing Band	\$ 193.06
L2340		Addition To Lower Extremity, Pretibial Shell, Molded To	\$ 417.93
L2350		Addition To Lower Extremity, Prosthetic Type, (Bk) Sock	\$ 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 Joir	\$ 102.81
L2380		Addition To Lower Extremity, Torsion Control, Straight K	\$ 89.38
L2385		Addition To Lower Extremity, Straight Knee Joint, Heavy	\$ 97.24
L2387		Addition To Lower Extremity, Polycentric Knee Joint, For	\$ 140.10
L2390		Addition To Lower Extremity, Offset Knee Joint, Each Joi	\$ 81.42
L2395		Addition To Lower Extremity, Offset Knee Joint, Heavy D	\$ 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 Mechanis	\$ 92.04
L2425		Addition To Knee Joint, Disc Or Dial Lock For Adjustable	\$ 108.63
L2430		Addition To Knee Joint, Ratchet Lock For Active And Pro	\$ 108.63
L2492		Addition To Knee Joint, Life Look For Drop Lock Ring	\$ 98.62
L2500		Addition To Lower Extremity, Thigh/Weight Bearing, Glu	\$ 235.95
L2510		Addition To Lower Extremity, Thigh/Weight Bearing, Qua	\$ 529.39
L2520		Addition To Lower Extremity, Thigh/Weight Bearing, Qua	\$ 349.22
L2525		Addition To Lower Extremity, Thigh/Weight Bearing, Isch	\$ 942.18
L2526		Addition To Lower Extremity, Thigh/Weight Bearing, Isch	\$ 537.66
L2530		Addition To Lower Extremity, Thigh/Weight Bearing Lace	\$ 170.58
L2540		Addition To Lower Extremity, Thigh/Weight Bearing, Lac	\$ 306.94
L2550		Addition To Lower Extremity, Thigh/Weight Bearing, Hig	\$ 208.51
L2570		Addition To Lower Extremity, Pelvic Control, Hip Joint, C	\$ 345.81
L2580		Addition To Lower Extremity, Pelvic Control, Pelvic Sling	\$ 336.94
L2600		Addition To Lower Extremity, Pelvic Control, Hip Joint, C	\$ 184.51
L2610		Addition To Lower Extremity, Pelvic Control, Hip Joint, C	\$ 195.43
L2620		Addition To Lower Extremity, Pelvic Control, Hip Joint;He	\$ 219.74
L2622		Addition To Lower Extremity, Pelvic Control, Adjustable I	\$ 249.13
L2624		Addition To Lower Extremity, Pelvic Control, Adjustable I	\$ 240.42
L2627		Addition To Lower Extremity, Pelvic Control, Plastic, Mol	\$ 1,311.86
L2628		Addition To Lower Extremity, Pelvic Control, Metal Fram	\$ 1,290.42
L2630		Addition To Lower Extremity, Pelvic Control, Band And B	\$ 179.78
L2640		Addition To Lower Extremity, Pelvic Control, Band And B	\$ 243.98
L2650		Addition To Lower Extremity, Pelvic And Thoracic Contro	\$ 103.87

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L2660		Addition To Lower Extremity, Thoracic Control, Band	\$ 135.31
L2670		Addition To Lower Extremity, Thoracic Control, Paraspina	\$ 131.22
L2680		Addition To Lower Extremity, Thoracic Control, Lateral S	\$ 121.55
L2750		Addition To Lower Extremity Orthosis, Plating Chrome Or	\$ 60.68
L2755		Addition To Lower Extremity Orthosis, High Strength, Lig	\$ 99.00
L2760		Addition To Lower Extremity Orthosis, Extension, Per Ex	\$ 44.11
L2780		Addition To Lower Extremity Orthosis, Non-Corrosive Fir	\$ 49.14
L2785		Addition To Lower Extremity Orthosis, Drop Lock Retaine	\$ 23.10
L2795		Addition To Lower Extremity Orthosis, Knee Control, Full	\$ 62.66
L2800		Addition To Lower Extremity Orthosis, Knee Control, Kne	\$ 96.31
L2810		Addition To Lower Extremity Orthosis, Knee Control, Cor	\$ 75.61
L2820		Addition To Lower Extremity Orthosis, Soft Interface For	\$ 63.05
L2830		Addition To Lower Extremity Orthosis, Soft Interface For	\$ 68.21
L2840		Addition To Lower Extremity Orthosis, Tibial Length Sock	\$ 40.32
L2850		Addition To Lower Extremity Orthosis, Femoral Length Sc	\$ 44.95
L2999		Lower Extremity Orthosis, Not Otherwise Specified	Cost Invoice
L3000		Foot, Insert, Removable, Molded To Patient Model, "Ucb"	\$ 238.06
L3001		Foot, Insert, Removable, Molded To Patient Model, Spence	\$ 100.24
L3002		Foot, Insert, Removable, Molded To Patient Model, Plasta	\$ 122.39
L3003		Foot, Insert, Removable, Molded To Patient Model, Silico	\$ 132.07
L3010		Foot, Insert, Removable, Molded To Patient Model, Longit	\$ 132.07
L3020		Foot, Insert, Removable, Molded To Patient Model, Longit	\$ 150.35
L3030		Foot, Insert, Removable, Formed To Patient Foot Each	\$ 57.84
L3031		Foot, Insert/Plate, Removable, Addition To Lower Extremi	\$ 92.82
L3040		Foot, Arch Support, Removable, Premolded, Longitudinal,	\$ 35.66
L3050		Foot, Arch Support, Removable, Premolded, Metatarsal, E	\$ 35.66
L3060		Foot, Arch Support, Removable, Premolded, Longitudinal/	\$ 55.89
L3070		Foot, Arch Support, Non-Removable Attached To Shoe, Le	\$ 24.07
L3080		Foot, Arch Support, Non-Removable Attached To Shoe, M	\$ 24.07
L3090		Foot, Arch Support, Non-Removable Attached To Shoe, Le	\$ 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, Infa	\$ 36.00
L3202		Orthopedic Shoe, Oxford With Supinator Or Pronator Chil	\$ 36.00
L3203		Orthopedic Shoe, Oxford With Supinator Or Pronator Junio	\$ 37.80
L3204		Orthopedic Shoe, Hightop With Supinator Or Pronator, Inf	\$ 36.00
L3206		Orthopedic Shoe, Hightop With Supinator Or Pronator, Ch	\$ 36.00
L3207		Orthopedic Shoe, Hightop With Supinator Or Pronator, Jun	\$ 37.80
L3208		Surgical Boot, Each, Infant	\$ 17.10
L3209		Surgical Boot, Each, Child	\$ 17.10
L3211		Surgical Boot, Each, Junior	\$ 27.00

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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
L3216		Orthopedic Footwear, Ladies Shoes, Depth Inlay, Each	\$ 123.93
L3217		Orthopedic Footwear, Ladies Shoes, Hightop, Depth Inlay	\$ 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	\$ 162.00
L3224		Orthopedic Footwear, Woman'S Shoe, Oxford, Used As A	\$ 48.30
L3225		Orthopedic Footwear, Man'S Shoe, Oxford, Used As An In	\$ 49.59
L3230		Orthopedic Footwear, Custom Shoes, Depth Inlay, Each	\$ 392.04
L3250		Orthopedic Footwear, Custom Molded Shoe, Removable In	\$ 277.83
L3251		Foot, Shoe Molded To Patient Model, Silicone Shoe, Each	Cost Invoice
L3252		Foot, Shoe Molded To Patient Model, Plastazote (Or Simi	\$ 81.00
L3253		Foot, Molded Shoe Plastazote (Or Similar) Custom Fitted,	\$ 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 Inc	\$ 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

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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
L3520		Orthopedic Shoe Addition Insole, Felt Covered With Leath	\$ 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(Le	\$ 64.60
L3580		Orthopedic Shoe Addition, Convert Instep To Velcro Clost	\$ 49.15
L3590		Orthopedic Shoe Addition, Convert Firm Shoe Counter To	\$ 40.48
L3595		Orthopedic Shoe Addition, March Bar	\$ 31.79
L3600		Transfer Of An Orthosis From One Shoe To Another, Calip	\$ 57.84
L3610		Transfer Of An Orthosis From One Shoe To Another, Calip	\$ 76.14
L3620		Transfer Of An Orthosis From One Shoe To Another, Solid	\$ 57.84
L3630		Transfer Of An Orthosis From One Shoe To Another, Solid	\$ 76.14
L3640		Transfer Of An Orthosis From One Shoe To Another, Dem	\$ 32.77
L3649		Orthopedic Shoe, Modification, Addition Or Transfer, Not	Cost Invoice
L3650		Shoulder Orthosis, (So); Figure Of Eight Design Abduction	\$ 48.27
L3660		Shoulder Orthosis, Figure Of Eight Design Abduction Rest	\$ 73.02
L3670		Shoulder Orthosis, Acromio/Clavicular (Canvas And Web	\$ 96.50
L3671		Shoulder Orthosis, Shoulder Cap Design, Without Joints, M	\$ 621.48
L3674		So Airplane W/Wo Joint Cf	\$ 815.26
L3702		Elbow Orthosis, Without Joints, May Include Soft Interface	\$ 199.15
L3710		Elbow Orthosis (Eo), Elastic With Metal Joints, Prefabrica	\$ 111.02
L3720		Elbow Orthosis (Eo), Double Upright With Forearm/Arm C	\$ 495.37
L3730		Elbow Orthosis (Eo), Double Upright With Fore/Arm Cuff	\$ 640.42
L3740		Elbow Orthosis (Eo), Double Upright With Forearm/Arm C	\$ 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,	\$ 484.13
L3764		Ewho, Includes One Or More Nontorsion Joints, Elastic Ba	\$ 631.90
L3765		Ewhfo, Rigid, Without Joints, May Include Soft Interface,	\$ 884.36
L3766		Ewhfo, Includes One Or More Nontorsion Joints, Elastic B	\$ 936.47
L3806		Wrist-Hand-Finger Orthosis, Includes One Or More Nonto	\$ 313.30
L3807		Wrist-Hand-Finger-Orthosis (Whfo), Without Joint(S), Pre	\$ 172.46
L3808		Wrist-Hand-Finger Orthosis, Rigid Without Joints, May In	\$ 257.91
L3900		Wrist-Hand-Finger Orthosis, Dynamic Flexor Hinge, Recip	\$ 1,005.66
L3901		Wrist-Hand-Finger Orthosis, Dynamic Flexor Hinge, Recip	\$ 1,142.05
L3904		Wrist-Hand-Finger Orthosis, External Powered, Electric, C	\$ 2,080.47
L3905		Wrist-Hand Orthosis, Includes One Or More Nontorsion Jo	\$ 683.98

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L3906		Wrist-Hand Orthosis, Without Joints, May Include Soft Int	\$ 303.69
L3908		Wrist-Hand Orthosis (Who), Wrist Extension Control Coc	\$ 47.79
L3912		Hand-Finger Orthosis, Flexion Glove With Elastic Finger C	\$ 82.79
L3913		Hand-Finger Orthosis, Without Joints, May Include Soft In	\$ 186.80
L3915		Wrist-Hand-Finger Orthosis, Includes One Or More Nonto	\$ 366.62
L3917		Hand Orthosis, Metacarpal Fracture Orthosis, Prefabricate	\$ 72.88
L3919		Hand Orthosis, Without Joints, May Include Soft Interface	\$ 186.80
L3921		Hand-Finger Orthosis, Includes One Or More Nontorsion J	\$ 221.54
L3923		Hfo, Without Joints, May Include Soft Interface, Straps, Pr	\$ 66.57
L3925		Finger Orthosis Proximal Interphalangeal (Pip)/Distal Inter	\$ 35.70
L3927		Finger Orthosis, Proximal Interphalangeal (Pip)/DistalInter	\$ 24.11
L3929		Hand Finger Orthosis, Includes One Or More Nontorsion J	\$ 63.26
L3931		Wrist Hand Finger Orthosis, Includes One Or More Nontor	\$ 129.54
L3933		Finger Orthosis, Without Joints, May Include Soft Interface	\$ 147.14
L3935		Finger Orthosis, Nontorsion Joint, May Include Soft Interfa	\$ 152.36
L3956		Addition Of Joint To Upper Extremity Orthosis, Any Mate	Cost Invoice
L3960		Shoulder-Elbow-Wrist-Hand Orthosis (Sewho); Abduction	\$ 522.59
L3961		Shoulder-Elbow-Wrist-Hand Orthosis, Shoulder Cap Desig	\$ 1,158.78
L3962		Shoulder-Elbow-Wrist-Hand Orthosis, Abduction Position	\$ 509.74
L3967		Sewho, Abduction Positioning (Airplane Design), Thoracic	\$ 1,368.12
L3971		Sewho, Shoulder Cap Design, Includes One Or More Nont	\$ 1,298.67
L3973		Sewho, Abduction Positioning (Airplane Design), Thoracic	\$ 1,368.12
L3975		Sewhfo, Shoulder Cap Design, Without Joints, May Includ	\$ 1,158.78
L3976		Sewhfo, Abduction Positioning (Airplane Design), Thoraci	\$ 1,158.78
L3977		Sewhfo, Shoulder Cap Design, Includes One Or More Non	\$ 1,298.67
L3978		Sewhfo, Abduction Positioning (Airplane Design), Thoraci	\$ 1,368.12
L3980		Upper Extremity Fracture Orthosis, Humeral, Prefabricate	\$ 227.49
L3981		Ue fx orth shoul cap forearm	\$ 694.23
L3982		Upper Extremity Fracture Orthosis, Radius/Ulnar, Prefabr	\$ 265.22
L3984		Upper Extremity Fracture Orthosis, Wrist, Prefabricated, I	\$ 244.52
L3995		Addition To Upper Extremity Orthosis, Sock, Fracture Or	\$ 25.34
L3999		Upper Limb Orthosis, Not Otherwise Specified	Cost Invoice
L4000		Replace Girdle For Spinal Orthosis (Ct Iso Or So)	\$ 999.42
L4002		Replacement Strap, Any Orthosis, Includes All Component	\$ 11.52
L4010		Replace trilateral socket br	\$ 487.24
L4020		Replace Quadrilateral Socket Brim, Molded To Patient Mo	\$ 681.42
L4030		Replace Quadrilateral Socket Brim, Custom Fitted	\$ 366.55
L4040		Replace Molded Thigh Lacer, For Custom Fabricated Orth	\$ 299.11
L4045		Replace Non-Molded Thigh Lacer, For Custom Fabricated	\$ 238.15
L4050		Replace Molded Calf Lacer, For Custom Fabricated Orthos	\$ 299.73
L4055		Replace Non-Molded Calf Lacer, For Custom Fabricated C	\$ 194.08
L4060		Replace High Roll Cuff	\$ 230.73
L4070		Replace Proximal And Distal Upright For Kafo	\$ 204.32

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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
L4205		Repair Of Orthotic Device, Labor Component, Per 15 Min	\$ 18.17
L4210		Repair Of Orthotic Device, Repair Or Replace Minor Parts	Cost Invoice
L4350		Ankle Control Orthosis, Stirrup Style, Rigid, IncludesAny	\$ 72.66
L4360		Walking Boot, Pneumatic, With Or Without Joints, With C	\$ 223.40
L4370		Pneumatic Full Leg Splint, Prefabricated, Includes Fitting	\$ 147.74
L4386		Walking Boot, Non-Pneumatic, With Or Without Joints, W	\$ 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 Materi	\$ 127.16
L4398		Foot Drop Splint, Recumbent Positioning Device, Prefabric	\$ 58.55
L4631		Afo, Walk Boot Type, Cus Fab	\$ 1,208.39
L5000		Partial Foot, Shoe Insert With Longitudinal Arch, Toe Filt	\$ 431.10
L5010		Partial Foot, Molded Socket, Ankle Height, With Toe Fille	\$ 941.66
L5020		Partial Foot, Molded Socket, Tibial Tubercle Height, With	\$ 1,532.83
L5050		Ankle, Symes, Molded Socket Sach Foot	\$ 1,775.09
L5060		Ankle, Symes, Metal Frame, Molded Leather Socket, Artic	\$ 2,136.34
L5100		Below Knee, Molded, Socket, Shin, Sach Foot	\$ 1,849.17
L5105		Below Knee, Plastic Socket, Joints And Thigh Lacer, Sach	\$ 2,935.02
L5150		Knee Disarticulation (Or Through Knee), Molded Socket, I	\$ 2,716.19
L5160		Knee Disarticulation (Or Through Knee), Molded Socket E	\$ 2,954.34
L5200		Above Knee, Molded Socket, Single Axis Constant Frictio	\$ 2,573.49
L5210		Above Knee, Short Prosthesis, No Knee Joint("Stubbies"),	\$ 1,876.90
L5220		Above Knee, Short Prosthesis, No Knee Joint ("Stubbies").	\$ 2,133.43
L5230		Above Knee, For Proximal Femoral Focal Deficiency, Con	\$ 2,942.42
L5250		Hip Disarticulation, Canadian Type, Molded Socket, Hip J	\$ 4,013.20
L5270		Hip Disarticulation, Tilt Table Type; Molded Socket, Lock	\$ 3,978.04
L5280		Hemipelvectomy, Canadian Type; Molded Socket, Hip Joi	\$ 3,938.26
L5301		Below Knee, Molded Socket, Shin, Sach Foot, Endoskeleta	\$ 1,775.91
L5312		Knee Disarticulation (Or Through Knee), Molded Socket, I	\$ 2,551.30
L5321		Above Knee, Molded Socket, Open End, Sach Foot, Endos	\$ 2,542.18
L5331		Hip Disarticulation, Canadian Type, Molded Socket, Endo	\$ 3,597.27
L5341		Hemipelvectomy, Canadian Type, Molded Socket, Endoske	\$ 3,909.10
L5400		Immediate Post Surgical Or Early Fitting; Application Of I	\$ 930.90
L5410		Immediate Post Surgical Or Early Fitting; Application Of	\$ 407.86
L5420		Immediate Post Surgical Or Early Fitting; Application Of	\$ 1,175.69
L5430		Immediate Post Surgical Or Early Fitting; Application Of I	\$ 518.96
L5450		Immediate Post Surgical Or Early Fitting; Application Of	\$ 331.99
L5460		Immediate Post Surgical Or Early Fitting; Application Of N	\$ 489.33

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L5500		Initial, Below Knee "Ptb" Type Socket, Non-Alignable Sys	\$ 993.39
L5505		Initial, Above Knee - Knee Disarticulation, Ischial Level S	\$ 1,345.31
L5510		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignab	\$ 1,126.07
L5520		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignab	\$ 1,112.30
L5530		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignab	\$ 1,407.94
L5535		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignab	\$ 1,387.51
L5540		Preparatory, Below Knee "Ptb" Type Socket, Non- Alignab	\$ 1,465.15
L5560		Preparatory, Above Knee - Knee Disarticulation, Ischial Le	\$ 1,503.30
L5570		Preparatory, Above Knee - Knee Disarticulation, Ischial Le	\$ 1,562.90
L5580		Preparatory, Above Knee - Knee Disarticulation, Ischial Le	\$ 1,824.58
L5585		Preparatory, Above Knee - Knee Disarticulation, Ischial Le	\$ 1,978.98
L5590		Preparatory, Above Knee - Knee Disarticulation, Ischial Le	\$ 1,859.38
L5595		Preparatory, Hip Disarticulation-Hemipelvectomy, Pylon, M	\$ 3,268.29
L5600		Preparatory, Hip Disarticulation – Hemipelvectomy, Pylon	\$ 3,564.79
L5610		Addition To Lower Extremity, Endoskeletal System;Above	\$ 1,601.38
L5611		Addition To Lower Extremity, Endoskeletal System; Abov	\$ 1,246.20
L5613		Addition To Lower Extremity, Endoskeletal System; Abov	\$ 1,895.54
L5614		Addition To Lower Extremity, Endoskeletal Above Knee- F	\$ 1,281.31
L5616		Addition To Lower Extremity, Endoskeletal Above Knee- U	\$ 1,050.50
L5617		Addition To Lower Extremity, Quick Change Self- Alignin	\$ 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 Disarticu	\$ 328.41
L5624		Addition To Lower Extremity, Test Socket, Above Knee	\$ 313.33
L5626		Addition To Lower Extremity, Test Socket, Hip Disarticul	\$ 440.43
L5628		Addition To Lower Extremity, Test Socket, Hemipelvector	\$ 417.15
L5629		Addition To Lower Extremity, Below Knee, Acrylic Socke	\$ 318.55
L5630		Addition To Lower Extremity, Symes Type, Expandable W	\$ 347.13
L5631		Addition To Lower Extremity, Above Knee Or Knee Disar	\$ 415.11
L5632		Addition To Lower Extremity, Symes Type; "Ptb" Brim De	\$ 171.74
L5634		Addition To Lower Extremity, Symes Type; Posterior Ope	\$ 235.28
L5636		Addition To Lower Extremity, Symes Type; Medial Openi	\$ 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, Leath	\$ 537.63
L5642		Addition To Lower Extremity, Above Knee, Leather Socke	\$ 481.33
L5643		Addition To Lower Extremity, Hip Disarticulation, Flexibl	\$ 1,203.86
L5644		Addition To Lower Extremity, Above Knee, Wood Socket	\$ 456.85
L5645		Addition To Lower Extremity, Below Knee, Flexible Inner	\$ 617.15
L5646		Addition To Lower Extremity, Below Knee, Air Cushion S	\$ 423.79
L5647		Addition To Lower Extremity, Below Knee, Suction Socke	\$ 615.26
L5648		Addition To Lower Extremity, Above Knee, Air Cushion S	\$ 509.23

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L5649		Addition To Lower Extremity, Ischial Containment/Narrow	\$ 1,545.97
L5650		Addition To Lower Extremity, Total Contact, Above Knee	\$ 377.60
L5651		Addition To Lower Extremity, Above Knee, Flexible Inner	\$ 928.88
L5652		Addition To Lower Extremity, Suction Suspension, Above	\$ 337.22
L5653		Addition To Lower Extremity, Knee Disarticulation, Expar	\$ 450.16
L5654		Addition To Lower Extremity, Socket Insert; Symes, (Kem	\$ 256.52
L5655		Addition To Lower Extremity, Socket Insert Below Knee	\$ 217.19
L5656		Addition To Lower Extremity, Socket Insert, Knee Disartic	\$ 305.94
L5658		Addition To Lower Extremity, Socket Insert, Above Knee(I	\$ 297.94
L5661		Addition To Lower Extremity, Socket Insert ,Multi-Durom	\$ 517.77
L5665		Addition To Lower Extremity, Socket Insert Multi-Durom	\$ 396.04
L5666		Addition To Lower Extremity; Below Knee, Cuff Suspensi	\$ 58.85
L5668		Addition To Lower Extremity; Below Knee, Molded Distal	\$ 78.58
L5670		Addition To Lower Extremity; Below Knee, Molded Supra	\$ 239.20
L5671		Addition To Lower Extremity; Below Knee/Above Knee S	\$ 384.74
L5672		Additional To Lower Extremity Below Knee, Removable M	\$ 292.28
L5673		Additional To Lower Extremity Below Knee/Above Knee,	\$ 543.42
L5676		Additional To Lower Extremity Below Knee, Knee Joints,	\$ 280.28
L5677		Additional To Lower Extremity Below Knee, Knee Joints,	\$ 381.37
L5678		Additional To Lower Extremity Below Knee, Joint Covers,	\$ 30.71
L5679		Additional To Lower Extremity, Below Knee/Above Knee,	\$ 452.83
L5680		Additional To Lower Extremity Below Knee, Thigh Lacer,	\$ 267.89
L5681		Additional To Lower Extremity, Below Knee/AboveKnee,	\$ 998.79
L5682		Additional To Lower Extremity Below Knee, Thigh Lacer,	\$ 483.72
L5683		Addition To Lower Extremity, Below Knee/Above Knee, C	\$ 998.79
L5684		Addition To Lower Extremity, Below Knee, Fork Strap	\$ 37.22
L5685		Addition To Lower Extremity Prosthesis, Below Knee, Sus	\$ 97.26
L5686		Addition To Lower Extremity, Below Knee, Back Check(F	\$ 50.21
L5688		Addition To Lower Extremity, Below Knee, Waist Belt, W	\$ 47.25
L5690		Addition To Lower Extremity, Below Knee, Waist Belt, Pa	\$ 91.49
L5692		Addition To Lower Extremity, Above Knee; Pelvic Contro	\$ 106.19
L5694		Addition To Lower Extremity, Pelvic Control Belt, Padded	\$ 140.32
L5695		Addition To Lower Extremity, Pelvic Control, Sleeve Sus	\$ 147.20
L5696		Addition To Lower Extremity, Above Knee Or Knee Disar	\$ 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 Mo	\$ 2,228.31
L5701		Replacement, Socket; Above Knee/Knee Disarticulation, I	\$ 2,764.42
L5702		Replacement, Socket; Hip Disarticulation, Including Hip J	\$ 3,484.14
L5703		Ankle, Symes, Molded To Patient Model, Socket Without	\$ 1,618.00
L5704		Custom Shaped Protective Cover, Below Knee	\$ 454.34
L5705		Custom Shaped Protective Cover, Above Knee	\$ 832.99

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
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;Man	\$ 278.18
L5711		Addition, Exoskeletal Knee-Shin System, Single Axis;Man	\$ 422.00
L5712		Addition, Exoskeletal Knee-Shin System, Single Axis;Fric	\$ 333.29
L5714		Addition, Exoskeletal Knee-Shin System, Single Axis;Vari	\$ 343.70
L5716		Addition, Exoskeletal Knee-Shin System, Polycentric;Mec	\$ 563.74
L5718		Addition, Exoskeletal Knee-Shin System, Single Axis;Fric	\$ 704.61
L5722		Addition, Exoskeletal Knee-Shin System, Single Axis;Pne	\$ 735.29
L5724		Addition, Exoskeletal Knee-Shin System, Single Axis;Flui	\$ 1,167.49
L5726		Addition, Exoskeletal Knee-Shin System, Single Axis;Ext	\$ 1,533.04
L5728		Addition, Exoskeletal Knee-Shin System, Single Axis;Flui	\$ 1,909.97
L5780		Addition, Exoskeletal Knee-Shin System, Single Axis;Pne	\$ 920.89
L5785		Addition, Exoskeletal System, Below Knee, Ultra-Light M	\$ 401.86
L5790		Addition, Exoskeletal System, Above Knee, Ultra-Light M	\$ 556.14
L5795		Addition, Exoskeletal System, Hip Disarticulation, Ultra-L	\$ 830.46
L5810		Addition, Endoskeletal Knee-Shin System, Single Axis;Ma	\$ 386.34
L5811		Addition, Endoskeletal Knee-Shin System, Single Axis;Ma	\$ 564.10
L5812		Addition, Endoskeletal Knee-Shin System, Single Axis;Fric	\$ 437.24
L5814		Addition, Endoskeletal Knee-Shin System, Polycentric; Hy	\$ 2,819.98
L5816		Addition, Endoskeletal Knee-Shin System, Polycentric;Me	\$ 657.80
L5818		Addition, Endoskeletal Knee-Shin System, Polycentric;Fric	\$ 742.78
L5822		Addition, Endoskeletal Knee-Shin System, Single Axis;Pne	\$ 1,441.06
L5824		Addition, Endoskeletal Knee-Shin System, Single Axis Flu	\$ 1,186.17
L5826		Addition, Endoskeletal Knee-Shin System, Single Axis Hy	\$ 2,394.98
L5828		Addition, Endoskeletal Knee-Shin System, Single Axis Flu	\$ 2,261.09
L5830		Addition, Endoskeletal Knee-Shin System, Single Axis Pn	\$ 1,606.60
L5840		Addition, Endoskeletal Knee-Shin System, 4-Bar Linkage	\$ 2,833.05
L5845		Addition, Endoskeletal, Knee-Shin System; Stance Flexion	\$ 1,360.98
L5850		Addition, Endoskeletal System; Above Knee Or Hip Disart	\$ 102.74
L5855		Addition, Endoskeletal System; Hip Disarticulation, Mech	\$ 238.87
L5910		Addition, Endoskeletal System, Below Knee, Alignable Sy	\$ 282.12
L5920		Addition, Endoskeletal System, Above Knee Or Hip Disart	\$ 410.40
L5925		Addition, Endoskeletal System, Above Knee, Knee Disarti	\$ 259.90
L5930		Addition, Endoskeletal System; High Activity Knee Contro	\$ 2,555.80
L5940		Addition, Endoskeletal System; Below Knee, Ultra- Light	\$ 387.98
L5950		Addition, Endoskeletal System; Above Knee, Ultra- Light	\$ 655.44
L5960		Addition, Endoskeletal System; Hip Disarticulation, Ultra	\$ 785.10
L5961		Endo Poly Hip, Pneu/Hyd/Rot	\$ 3,518.88
L5962		Addition, Endoskeletal System; Below Knee, Flexible Pro	\$ 454.64
L5964		Addition, Endoskeletal System; Above Knee, Flexible Pro	\$ 814.37
L5966		Addition, Endoskeletal System; Hip Disarticulation, Flexi	\$ 1,049.02
L5970		All Lower Extremity Prostheses; Foot, External Keel, Sach	\$ 169.80

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L5971		All Lower Extremity Prosthesis, Solid Ankle Cushion Heel	\$ 169.80
L5972		All Lower Extremity Prosthesis, Flexible Keel Foot(Safe, S	\$ 272.59
L5974		All Lower Extremity Prosthesis, Foot, Single Axis Ankle/F	\$ 229.99
L5975		All Lower Extremity Prosthesis; Combination Single Axis	\$ 352.01
L5976		All Lower Extremity Prostheses, Energy Storing Foot(Seat	\$ 433.17
L5978		All Lower Extremity Prostheses, Foot, Multiaxial Ankle/Fc	\$ 225.72
L5979		All Lower Extremity Prostheses, Multiaxial Ankle, Dynam	\$ 1,811.26
L5980		All Lower Extremity Prostheses, Flex Foot System	\$ 2,867.81
L5981		All Lower Extremity Prostheses, Flex-Walk System Or Equ	\$ 2,478.84
L5982		All Exoskeletal Lower Extremity Prostheses, Axial Rotatio	\$ 447.15
L5984		All Endoskeletal Lower Extremity Prostheses, Axial Rotati	\$ 443.18
L5985		All Endoskeletal Lower Extremity Prostheses, Dynamic Pr	\$ 214.43
L5986		All Lower Extremity Prostheses, Multi-Axial Rotation Uni	\$ 492.74
L5987		All Lower Extremity Prostheses, Shank Foot System With	\$ 5,462.31
L5988		Addition To Lower Limb Prosthesis, Vertical Shock Reduc	\$ 1,516.90
L5990		Addition To Lower Extremity Prosthesis, User Adjustable	\$ 1,377.58
L5999		Lower Extremity Prosthesis, Not Otherwise Specified	Cost Invoice
L6000		Partial Hand, Robin-Aids; Thumb Remaining (Or Equal)	\$ 1,027.70
L6010		Partial Hand, Robin-Aids; Little And/Or Ring Finger Ren	\$ 1,143.66
L6020		Partial Hand, Robin-Aids; No Finger Remaining (Or Equa	\$ 1,066.29
L6026		Part hand myo exclu term dev	\$ 3,270.94
L6050		Wrist Disarticulation, Molded Socket, Flexible Elbow Hing	\$ 1,469.30
L6055		Wrist Disarticulation, Molded Socket With Expandable Int	\$ 2,335.51
L6100		Below Elbow, Molded Socket; Flexible Elbow Hinge, Tric	\$ 1,488.63
L6110		Below Elbow, (Muenster Or Northwestern Suspension Ty	\$ 1,578.94
L6120		Below Elbow, Molded Double Wall Split Socket; Set-Up H	\$ 1,840.03
L6130		Below Elbow, Molded Double Wall Split Socket Stump A	\$ 2,002.30
L6200		Elbow Disarticulation, Molded Socket, Outside Locking H	\$ 2,110.10
L6205		Elbow Disarticulation, Molded Socket With Expandable In	\$ 3,516.25
L6250		Above Elbow, Molded Double Wall Socket, Internal Locki	\$ 2,077.04
L6300		Shoulder Disarticulation, Molded Socket, Shoulder Bulkhe	\$ 2,881.67
L6310		Shoulder Disarticulation, Passive Restoration; (Complete F	\$ 2,369.80
L6320		Shoulder Disarticulation, Passive Restoration; (Complete F	\$ 1,321.81
L6350		Interscapular Thoracic; Molded Socket, Shoulder Bulkhead	\$ 3,029.63
L6360		Interscapular Thoracic Passive Restoration (Complete Pro	\$ 2,487.16
L6370		Interscapular Thoracic Passive Restoration (Shoulder Cap	\$ 1,872.44
L6380		Immediate Post Surgical Or Early Fitting, Application Of I	\$ 1,011.28
L6382		Immediate Post Surgical Or Early Fitting, Application Of I	\$ 1,210.14
L6384		Immediate Post Surgical Or Early Fitting, Application Of I	\$ 1,476.70
L6386		Immediate Post Surgical Or Early Fitting; Each Additional	\$ 354.13
L6388		Immediate Post Surgical Or Early Fitting; Application Of I	\$ 340.03
L6400		Below Elbow, Molded Socket Endoskeletal System, Includ	\$ 1,798.54
L6450		Elbow Disarticulation, Molded Socket, Endoskeletal Syste	\$ 2,384.68

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L6500		Above Elbow, Molded Socket, Endoskeletal System, Inclu	\$ 2,386.63
L6550		Shoulder Disarticulation, Molded Socket, Endoskeletal Sys	\$ 2,949.44
L6570		Interscapular Thoracic, Molded Socket, Endoskeletal Syste	\$ 3,578.68
L6580		Preparatory, Wrist Disarticulation Or Below Elbow, Single	\$ 1,249.19
L6582		Preparatory, Wrist Disarticulation Or Below Elbow, Single	\$ 1,064.54
L6584		Preparatory, Elbow Disarticulation Or Above Elbow; Singl	\$ 1,724.36
L6586		Preparatory, Elbow Disarticulation Or Above Elbow;Single	\$ 1,508.46
L6588		Preparatory, Shoulder Disarticulation Or Interscapular Tho	\$ 2,490.11
L6590		Preparatory, Shoulder Disarticulation Or Interscapular Tho	\$ 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	\$ 312.64
L6615		Upper Extremity Additions, Disconnect Locking Wrist Uni	\$ 158.78
L6616		Upper Extremity Additions, Additional Disconnect Insert F	\$ 66.90
L6620		Upper Extremity Additions, Flexion/Extension Wrist Unit,	\$ 249.22
L6621		Upper Extremity Prosthesis Addition, Flexion/Extension W	\$ 1,736.79
L6623		Upper Extremity Additions, Spring Assisted Rotational Wr	\$ 570.44
L6624		Upper Extremity Addition, Flexion/Extension And Rotatio	\$ 2,859.67
L6625		Upper Extremity Additions, Rotation Wrist Unit With Cab	\$ 415.10
L6628		Upper Extremity Additions, Quick Disconnect Hook Adap	\$ 424.19
L6629		Upper Extremity Additions, Quick Disconnect Lamination	\$ 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	\$ 1,898.86
L6640		Upper Extremity Addition To Prosthesis, Shoulder Abduct	\$ 218.72
L6641		Upper Extremity Addition To Prosthesis, Excursion Ampli	\$ 145.37
L6642		Upper Extremity Addition To Prosthesis, Excursion Ampli	\$ 206.97
L6645		Upper Extremity Addition To Prosthesis, Shoulder Flexion	\$ 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, S	\$ 130.42
L6675		Upper Extremity Addition, Harness, (E.G., Figure Of Eigh	\$ 92.89
L6676		Upper Extremity Addition, Harness, (E.G., Figure Of Eigh	\$ 93.80
L6677		Upper Extremity Addition, Harness, Triple Control, Simult	\$ 225.25
L6680		Upper Extremity Addition, Test Socket, Wrist Disarticulat	\$ 179.45
L6682		Upper Extremity Addition, Test Socket, Elbow Disarticula	\$ 201.13
L6684		Upper Extremity Addition, Test Socket, Should Disarticula	\$ 269.61

**Durable Medical Equipment
CY 2018**

HCPCS	Mod	DESCRIPTION	WV Medicaid
L6686		Upper Extremity Addition, Suction Socket	\$ 501.38
L6687		Upper Extremity Addition, Frame Type Socket, Below Elb	\$ 446.14
L6688		Upper Extremity Addition, Frame Type Socket, Above Ell	\$ 431.57
L6689		Upper Extremity Addition, Frame Type Socket, Should Dis	\$ 521.17
L6690		Upper Extremity Addition, Frame Type Socket, Interscapu	\$ 564.39
L6691		Upper Extremity Addition, Removable Insert, Each	\$ 337.54
L6692		Upper Extremity Addition, Silicone Gel Insert Or Equal, E	\$ 432.55
L6693		Upper Extremity Addition, Locking Elbow, Forearm Cour	\$ 2,155.70
L6694		Addition To Upper Extremity Prosthesis, Below Elbow/Ab	\$ 543.42
L6695		Additional To Upper Extremity Prosthesis, Below Elbow/A	\$ 452.83
L6696		Addition To Upper Extremity Prosthesis, Below Elbow/Ab	\$ 998.79
L6697		Addition To Upper Extremity Prosthesis, Below Elbow/Ab	\$ 998.79
L6698		Addition To Upper Extremity Prosthesis, Below Elbow/Ab	\$ 384.74
L6703		Terminal Device, Passive Hand/Mitt, Any Material, Any S	\$ 273.54
L6706		Terminal Device, Hook, Mechanical, Voluntary Opening, A	\$ 269.88
L6707		Terminal Device, Hook, Mechanical, Voluntary Closing, A	\$ 1,137.43
L6708		Terminal Device, Hand, Mechanical, Voluntary Opening, A	\$ 646.98
L6709		Terminal Device, Hand, Mechanical, Voluntary Closing, A	\$ 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, I	\$ 1,227.41
L6884		Replacement Socket, Above Elbow, Disarticulation, Molde	\$ 1,726.79
L6885		Replacement Socket, Shoulder Disarticulation/Interscapula	\$ 2,487.16
L6890		Addition To Upper Extremity Prosthesis, Glove For Termi	\$ 131.56
L6895		Addition To Upper Extremity Prosthesis, Glove For Termi	\$ 478.82
L6900		Hand Restoration (Casts, Shading And Measurements Includ	\$ 1,242.69
L6905		Hand Restoration (Casts, Shading And Measurements Includ	\$ 1,219.98
L6910		Hand Restoration (Casts, Shading And Measurements Includ	\$ 1,252.38
L6915		Hand Restoration (Shading And Measurements Included),	\$ 484.21
L6920		Wrist Disarticulation, External Power, Self-Suspended Inn	\$ 5,962.10
L6925		Wrist Disarticulation, External Power, Self-Suspended Inn	\$ 6,536.19
L6930		Below Elbow, External Power, Self-Suspended Inner Sock	\$ 5,640.30
L6935		Below Elbow, External Power, Self-Suspended Inner Sock	\$ 6,674.31
L6940		Elbow Disarticulation, External Power, Molded Inner Sock	\$ 7,353.15
L6945		Elbow Disarticulation, External Power, Molded Inner Sock	\$ 8,224.36
L6950		Above Elbow, External Power, Molded Inner Socket, Rem	\$ 7,792.77
L6955		Otto Bock Or Equal Electrodes, Cables, Two Batteries And	\$ 9,477.52

**Durable Medical Equipment
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HCPCS	Mod	DESCRIPTION	WV Medicaid
L6960		Shoulder Disarticulation, External Power, Molded Inner Socket	\$ 10,061.83
L6965		Shoulder Disarticulation, External Power, Molded Inner Socket	\$ 11,525.79
L6970		Interscapular Thoracic, External Power, Molded Inner Socket	\$ 12,387.92
L6975		Interscapular Thoracic, External Power, Molded Inner Socket	\$ 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	\$ 27,006.27
L7185		Electronic Elbow, Adolescent, Variety Village Or Equal, Switch	\$ 4,643.35
L7186		Electronic Elbow, Child, Variety Village Or Equal, Switch	\$ 7,090.78
L7190		Electronic Elbow, Adolescent, Variety Village Or Equal, Myoelectric	\$ 6,045.46
L7191		Electronic Elbow, Child, Variety Village Or Equal, Myoelectric	\$ 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	\$ 232.73
L7401		Addition To Upper Extremity Prosthesis; Above Elbow Distal	\$ 260.54
L7402		Addition To Upper Extremity Prosthesis; Shoulder Disarticulation	\$ 281.36
L7403		Addition To Upper Extremity Prosthesis; Below Elbow Wrist	\$ 279.62
L7404		Addition To Upper Extremity Prosthesis; Above Elbow Distal	\$ 422.05
L7405		Addition To Upper Extremity Prosthesis; Shoulder Disarticulation	\$ 551.98
L7499		Upper Extremity Prosthesis, Not Otherwise Specified	Cost Invoice
L7510		Repair Of Prosthetic Device, Repair Or Replace Minor Part	\$ 46.80
L7520		Repair Prosthetic Device, Labor Component, Per 15 Minutes	\$ 24.70
L7600		Prosthetic Donning Sleeve, Any Material , Each	Cost Invoice
L7700		Pros soc insert gasket/seal	\$ 111.46
L8000		Breast Prosthesis; Mastectomy Bra	\$ 28.24
L8001		Breast Prosthesis, Mastectomy Bra, With Integrated Breast	\$ 95.25
L8002		Breast Prosthesis, Mastectomy Bra, With Integrated Breast	\$ 125.26
L8010		Breast Prosthesis Mastectomy Sleeve	\$ 39.03
L8015		External Breast Prosthesis Garment, With Mastectomy Form	\$ 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	\$ 2,781.86
L8039		Breast Prosthesis, Not Otherwise Specified	Cost Invoice
L8300		Truss, Single With Standard Pad	\$ 65.25
L8310		Truss, Double With Standard Pad	\$ 103.01

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HCPCS	Mod	DESCRIPTION	WV Medicaid
L8320		Truss, Addition To Standard Pad, Water Pad	\$ 46.18
L8330		Truss, Addition To Standard Pad, Scrotal Pad	\$ 38.18
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, B	\$ 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
L8499		Unlisted Procedure For Miscellaneous Prosthetic Services	Cost Invoice
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
L8692		Auditory Osseointegrated Device, External Sound Processo	Cost Invoice
L8694		Aoi transducer/actuator repl	\$ 717.07
S1040		Cranial Remolding Orthosis, Rigid, With Soft Interface Ma	\$ 1,200.00
T4535		Disposable liner/shield/guard/pad/undergarment, for incont	\$ 0.19
V2531		Contact lens gas permeable	\$ 411.14
V5008		Hearing Screening	\$ 20.00
V5014		Repair/Modification Of Hearing Aid	Cost Invoice
V5030		Hearing Aid, Monaural, Body Worn, Air Conduction	Cost Invoice
V5040		Hearing Aid, Monaural, Body Worn, Bone	Cost Invoice

**Durable Medical Equipment
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HCPCS	Mod	DESCRIPTION	WV Medicaid
V5050		Hearing Aid, Monaural, In The Ear (Ite)	Cost Invoice
V5060		Hearing Aid, Monaural, Behind The Ear (Bte)	Cost Invoice
V5120		Binaural, Body	Cost Invoice
V5130		Binaural, Ite	Cost Invoice
V5140		Binaural, Bte	Cost Invoice
V5170		Hearing Aid, Cros, Ite	Cost Invoice
V5180		Hearing Aid, Cros, Bte	Cost Invoice
V5210		Hearing Aid, Bicros, Ite	Cost Invoice
V5220		Hearing Aid, Bicros, Bte	Cost Invoice
V5246		Hearing Aid, Digitally Programmable Analog, Monaural, I	Cost Invoice
V5247		Hearing Aid, Digitally Programmable Analog, Monaural, B	Cost Invoice
V5252		Hearing Aid, Digitally Programmable, Binaural, Ite	Cost Invoice
V5253		Hearing Aid, Digitally Programmable, Binaural, Bte	Cost Invoice
V5256		Hearing Aid, Digital, Monaural, Ite	Cost Invoice
V5257		Hearing Aid, Digital, Monaural, Bte	Cost Invoice
V5260		Hearing Aid, Digital, Binaural, Ite	Cost Invoice
V5261		Hearing Aid, Digital, Binaural, Bte	Cost Invoice
V5264		Ear Mold Insert	\$ 34.75
V5266		Battery For Use In Hearing Device	\$ 2.25
V5275		Ear Impression	\$ 32.27
V5336		Repair/Modification Of Augmentative Communicative Sys	Cost Invoice