Durable Medical Equipment, Prosthetics, Orthotics and Supplies Fee Schedule

The effective date for this publication is: 9/1/2012

The procedure codes and fee schedule amounts in this document do not necessarily indicate coverage or payment. All coverage and payments are subject to Offender Health Plan Coverage, exclusions, limitations, and pre-authorization requirements. For detailed coverage information, refer to the Department of Corrections (DOC) Offender Health Plan, Billing Instructions and Payment Policies. For directions on submitting claims to ProviderOne, see the ProviderOne Billing and Resource Guide.

Fees in this publication are subject to change without notice. Although we make every effort to ensure the accuracy of the fees in our publications, changes or corrections may occur throughout the year.

Visit the DOC web site at www.doc.wa.gov/business/healthcareproviders to download the latest versions of this fee schedule, and all other DOC publications mentioned in this document.

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DOC Durable Medical Equipment, Prosthetic and Orthotic Payment Policy

General Information

The Department of Corrections (DOC) Durable Medical Equipment, Prosthetics, Orthotics and Supplies Fee Schedule contains the maximum allowances used to reimburse suppliers.

The DOC fee schedule uses the Healthcare Common Procedure Coding System (HCPCS). For billing purposes, please use the most recent edition of the HCPCS level II coding references, which include complete descriptions of the service or supply.

The DOC’s primary fee schedule updates occur annually in July. The fee schedules are also updated in January to incorporate new HCPCS codes and remove deleted codes. Other updates or corrections may occur throughout the year.

DOC’s fee schedule amounts are based on Medicare’s July 2012 Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule.

Differences in DOC payment policies from Medicare are that we do not cover payment differentials for the following modifiers when billed:

<table>
<thead>
<tr>
<th>Modifier</th>
<th>Long Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>KL</td>
<td>DMEPOS ITEM DELIVERED VIA MAIL</td>
</tr>
<tr>
<td>KC</td>
<td>REPLACEMENT OF SPECIAL POWER WHEELCHAIR INTERFACE</td>
</tr>
<tr>
<td>KE</td>
<td>BID UNDER ROUND ONE OF THE DMEPOS COMPETITIVE BIDDING PROGRAM FOR USE WITH NON-COMPETITIVE BID BASE EQUIPMENT</td>
</tr>
</tbody>
</table>

Unlike Medicare, DOC does not cover the rental of durable medical equipment with the limited exceptions on a case by case basis with prior approval from the Department.

Whenever possible, used equipment is to be provided at the used rate.

All DOC coverage rules regarding the medical necessity of a given procedure for a given patient are applicable to Durable Medical Equipment, Prosthetics, Orthotics, and supplies in the same manner as all other covered services. Note that orthotics are generally not covered by DOC. Providers should follow the current coding guidelines and policies used by Medicare.

Visit the DOC website at www.doc.wa.gov/business/healthcareproviders to download copies of all DOC publications mentioned in this document.