

State Plan Amendment 20-0001
Durable Medical Equipment (DME) and Medical Supply

Proposed Rates Effective March 1, 2020 - Revised February 26, 2020

Code	Code Status	PA	Description	Min Age	Max Age	Begin Date	End Date	Max Units	Fee
A4554	SC-Fee on File	YES	DISPOSABLE UNDERPADS, ALL SIZ	3	999	3/1/2020	12/31/9999	186	\$0.32
T4523	SC-Fee on File	YES	ADULT SIZE BRIEF/DIAPER LG	3	999	3/1/2020	12/31/9999	186	\$0.78
T4524	SC-Fee on File	YES	ADULT SIZE BRIEF/DIAPER XL	3	999	3/1/2020	12/31/9999	186	\$0.83
T4522	SC-Fee on File	YES	ADULT SIZE BRIEF/DIAPER MED	3	999	3/1/2020	12/31/9999	186	\$0.62
T4543	SC-Fee on File	YES	ADULT DISP BRIEF/DIAP ABV XL	3	999	3/1/2020	12/31/9999	186	\$1.32
T4521	SC-Fee on File	YES	ADULT SIZE BRIEF/DIAPER SMALL	3	999	3/1/2020	12/31/9999	186	\$0.57
A4215	SC-Fee on File	NO	Needle, Any size,sterile,Each	0	999	3/1/2020	12/31/9999	120	\$0.37
A4927	SC-Fee on File	NO	NON-STERILE GLOVES	0	999	3/1/2020	12/31/9999	2	\$7.43
T4525	SC-Fee on File	YES	ADULT SIZE PULL ON/SMALL	3	999	3/1/2020	12/31/9999	186	\$0.57
A6250	SC-Fee on File	NO	SKIN SEAL PROTECT MOISTURIZER, 4 oz. minimum	0	999	3/1/2020	12/31/9999	2	\$3.47
A4483	SC-Fee on File	NO	Moisture Exchanger	0	999	3/1/2020	12/31/9999	35	\$3.76
A4305	SC-Fee on File	NO	Disposable Drug Delivery System,Flow Rate	0	999	3/1/2020	12/31/9999	120	\$11.16
A4606	SC-Fee on File	NO	O2 probe to use Oximeter Device	0	20	3/1/2020	12/31/9999	1	\$17.09
A7522	SC-Fee on File	NO	Tracheostomy/Laryngectomy Tube,Stainless Steel	0	999	3/1/2020	12/31/9999	5	\$41.60
A4247	SC-Fee on File	NO	Betadine or Iodine Swabs/Wips,Per box	0	999	3/1/2020	12/31/9999	3	\$4.11
A4230	SC-Fee on File	NO	Infusion set for External Insulin Pump	0	999	3/1/2020	12/31/9999	0	\$10.22
A4930	SC-Fee on File	NO	Gloves, streile, per pair	0	999	3/1/2020	12/31/9999	100	\$0.49
A4213	SC-Fee on File	NO	Syringe Sterile 20cc or greater each	0	999	3/1/2020	12/31/9999	120	\$1.09
A9274	SC-Fee on File	NO	External Ambulatory Insulin Delivery System	0	999	3/1/2020	12/31/9999	1	\$39.40
A6213	SC-Fee on File	NO	Foam Dressing/Wound Cover,Sterile	0	20	3/1/2020	12/31/9999	15	\$8.67
A4231	SC-Fee on File	NO	Infusion set for External Insulin Pump	0	999	3/1/2020	12/31/9999	1	\$8.59
E0637	NU-Fee on File	YES	Combination Sit to stand	0	999	3/1/2020	12/31/9999	1	\$2,179.95
E0637	RR-Fee on File	YES	Combination Sit to stand	0	999	3/1/2020	12/31/9999	1	\$218.00
E0637	KR-Fee on File	YES	Combination Sit to stand	0	999	3/1/2020	12/31/9999	1	\$5.97
E0637	UE-Fee on File	YES	Combination Sit to stand	0	999	3/1/2020	12/31/9999	1	\$1,089.98
E0328	NU-Fee on File	YES	Hospital Bed, Pediatric,Manual,360 degree	0	20	3/1/2020	12/31/9999	1	\$4,510.00
E0328	RR-Fee on File	YES	Hospital Bed, Pediatric,Manual,360 degree	0	20	3/1/2020	12/31/9999	1	\$451.00
E0328	KR-Fee on File	YES	Hospital Bed, Pediatric,Manual,360 degree	0	20	3/1/2020	12/31/9999	1	\$12.36
E0328	UE-Fee on File	YES	Hospital Bed, Pediatric,Manual,360 degree	0	20	3/1/2020	12/31/9999	1	\$2,255.00
E0603	NU-Fee on File	YES	Electric breast Pump	0	999	3/1/2020	12/31/9999	1	\$157.15
E0603	RR-Fee on File	YES	Electric breast Pump	0	999	3/1/2020	12/31/9999	1	\$15.72
E0603	KR-Fee on File	YES	Electric breast Pump	0	999	3/1/2020	12/31/9999	1	\$0.43
E0641	NU-Fee on File	YES	Standing Frame Table system	0	999	3/1/2020	12/31/9999	1	\$2,190.55
E0641	RR-Fee on File	YES	Standing Frame Table system	0	999	3/1/2020	12/31/9999	1	\$219.06
E0641	KR-Fee on File	YES	Standing Frame Table system	0	999	3/1/2020	12/31/9999	1	\$6.00
E0641	UE-Fee on File	YES	Standing Frame Table system	0	999	3/1/2020	12/31/9999	1	\$1,095.28
E0642	NU-Fee on File	YES	Standing Frame Table System/Mobile	0	999	3/1/2020	12/31/9999	1	\$2,388.91
E0642	RR-Fee on File	YES	Standing Frame Table System/Mobile	0	999	3/1/2020	12/31/9999	1	\$238.89
E0642	KR-Fee on File	YES	Standing Frame Table System/Mobile	0	999	3/1/2020	12/31/9999	1	\$6.54
E0642	UE-Fee on File	YES	Standing Frame Table System/Mobile	0	999	3/1/2020	12/31/9999	1	\$1,194.46
E0300	NU-Fee on File	YES	Pediatric Crib, hospital grade with or without Enclosure	0	999	3/1/2020	12/31/9999	1	\$1,998.56
E0300	RR-Fee on File	YES	Pediatric Crib, hospital grade with or without Enclosure	0	999	3/1/2020	12/31/9999	1	\$199.86
E0300	KR-Fee on File	YES	Pediatric Crib, hospital grade with or without Enclosure	0	999	3/1/2020	12/31/9999	1	\$5.48
E0300	UE-Fee on File	YES	Pediatric Crib, hospital grade with or without Enclosure	0	999	3/1/2020	12/31/9999	1	\$999.28
E0638	NU-Fee on File	YES	Standing Frame Table System	0	999	3/1/2020	12/31/9999	1	\$1,828.17
E0638	RR-Fee on File	YES	Standing Frame Table System	0	999	3/1/2020	12/31/9999	1	\$182.82
E0638	KR-Fee on File	YES	Standing Frame Table System	0	999	3/1/2020	12/31/9999	1	\$5.01
E0638	UE-Fee on File	YES	Standing Frame Table System	0	999	3/1/2020	12/31/9999	1	\$914.08
L8692	NU-Fee on File	YES	Auditory Osseointegrated Device, External	0	999	3/1/2020	12/31/9999	1	\$3,155.65
E0329	NU-Fee on File	YES	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE B	0	20	3/1/2020	12/31/9999	1	\$6,000.00
E0329	RR-Fee on File	YES	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE B	0	20	3/1/2020	12/31/9999	1	\$600.00
E0329	KR-Fee on File	YES	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE B	0	20	3/1/2020	12/31/9999	1	\$16.44
E0329	UE-Fee on File	YES	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE B	0	20	3/1/2020	12/31/9999	1	\$3,000.00
A4253	SC-Fee on File	NO	BLOOD GLUCOSE TEST OR REAGENT	0	999	3/1/2020	12/31/9999	4	\$24.14
T4526	SC-Fee on File	YES	ADULT SIZE PULL ON/MED	3	999	3/1/2020	12/31/9999	186	\$0.70
T4527	SC-Fee on File	YES	ADULT SIZE PULL ON/LG	3	999	3/1/2020	12/31/9999	186	\$0.85
T4528	SC-Fee on File	YES	ADULT SIZE PULL ON/XL	3	999	3/1/2020	12/31/9999	186	\$0.95