



HEALTHCARE COMMON PROCEDURE CODING SYSTEM (HCPCS)

The rate identified in the rate column is the purchase price of the item represented by the HCPCS code if the modifier next to it is NU or there is no modifier listed. The sum of payments for the respective item should not exceed the purchase price throughout the life of the claim. No additional payment should be allowed upon reaching the purchase amount as shown in the fee schedule. If there is a modifier of RR next to the code then the rate is the rental cost per unit. Rental costs per claim shall not exceed ten times the rental amount shown in the fee schedule.

Examples:

E1310	RR	\$ 204.46
E1353		\$ 31.53
E1372	NU	\$ 121.32

E1310 should never exceed \$2,044.60 per claim

E1353 should never exceed \$31.53 per claim

E1372 should never exceed \$121.32 per claim

For any Durable Medical Equipment (DME) code that is not listed in the fee schedule or does not have a corresponding fee schedule amount, reimbursement will be limited to the invoice cost plus a 30% mark-up.

Example:

E0231		\$ 0.00
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E0231 the invoice cost + 30% = amount reimbursed