South Carolina
DEPARTMENT OF HEALTH AND HUMAN SERVICES
Post Office Box 8206
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www.scdhhs.gov

January 8, 2007

MEDICAID BULLETIN

DME *07-01*

TO: **DURABLE MEDICAL EQUIPMENT PROVIDERS (DME)**

SUBJECT: **Reimbursement Updates and Changes**

Effective December 20, 2006, the procedure codes listed below have been re-priced retroactively to November 15, 2006, and the previously posted reimbursements are no longer valid. This action is taken to maintain compliance and not exceed the 2006 DMEPOS (Medicare) fee schedule for the new Power Mobility Device (PMD) codes fee schedule amounts.

Procedure Code	Modifier	Price	Unit	Mo/Year	Prior Authorization
K0813	NU	2,171.16	1	5	Yes
K0813	LL	217.12	1	1	Yes
K0813	UE	1,628.37	1	3	Yes
K0814	NU	2,779.02	1	5	Yes
K0814	LL	277.90	1	1	Yes
K0814	UE	2,084.27	1	3	Yes
K0815	NU	3,164.67	1	5	Yes
K0815	LL	316.47	1	1	Yes
K0815	UE	2,373.50	1	3	Yes
K0816	NU	3,030.66	1	5	Yes
K0816	LL	303.07	1	1	Yes
K0816	UE	2,273.00	1	3	Yes
K0820	NU	2,318.94	1	5	Yes
K0820	LL	231.89	1	1	Yes
K0820	UE	1,739.21	1	3	Yes
K0821	NU	2,976.93	1	5	Yes
K0821	LL	297.69	1	1	Yes
K0821	UE	2,232.70	1	3	Yes
K0822	NU	3607.29	1	5	Yes
K0822	LL	360.73	1	1	Yes
K0822	UE	2,705.46	1	3	Yes
K0823	NU	3,621.33	1	5	Yes
K0823	LL	362.13	1	1	Yes
K0823	UE	2,716.00	1	3	Yes
K0824	NU	4,358.43	1	5	Yes
K0824	LL	435.84	1	1	Yes
K0824	UE	3,268.83	1	3	Yes
K0825	NU	3,806.64	1	5	Yes
K0825	LL	380.66	1	1	Yes
K0825	UE	2,854.98	1	3	Yes
K0826	NU	5,642.37	1	5	Yes
K0826	LL	564.24	1	1	Yes

Procedure Code	Modifier	Price	Unit	Mo/Year	Prior Authorization
K0826	UE	4,231.78	1	3	Yes
K0827	NU	4,328.37	1	5	Yes
K0827	LL	432.84	1	1	Yes
K0827	UE	3,246.28	1	3	Yes
K0828	NU	6,217.38	1	5	Yes
K0828	LL	621.74	1	1	Yes
K0828	UE	4663.04	1	3	Yes
K0829	NU	5,410.62	1	3	Yes
K0829	LL	541.06	1	3	Yes
K0829	UE	4,057.97	1	3	Yes
K0835	NU	3,719.07	1	5	Yes
K0835	LL	371.91	1	1	Yes
K0835	UE	2,789.30	1	3	Yes
K0836	NU	3,786.75	1	5	Yes
K0836	LL	378.68	1	1	Yes
K0836	UE	2,840.06	1	3	Yes
K0837	NU	4,358.43	1	5	Yes
K0837	LL	435.84	1	1	Yes
K0837	UE	3,268.82	1	3	Yes
K0838	NU	3,934.98	1	5	Yes
K0838	LL	393.50	1	1	Yes
K0838	UE	2,951.24	1	3	Yes
K0839	NU	5,642.37	1	3	Yes
K0839	UE	564.24	1	3	Yes
K0839	LL	4,231.78	1	3	Yes
K0840	NU	8,548.47	1	5	Yes
K0840	LL	854.85	1	1	Yes
K0840	UE	6,411.35	1	3	Yes
K0841	NU	3,886.74	1	5	Yes
K0841	LL	388.67	1	1	Yes
K0841	UE	2,915.06	1	3	Yes
K0842	NU	3,886.74	1	5	Yes
K0842	LL	388.67	1	1	Yes
K0842	UE	2,915.06	1	3	Yes
K0843	NU	4,679.64	1	5	Yes
K0843	LL	467.96	1	1	Yes
K0843	UE	3,509.73	1	3	Yes
K0848	NU	4.890.24	1	5	Yes
K0848	LL	489.02	1	1	Yes
K0848	UE	3,667.68	1	3	Yes
K0849	NU	4,572.63	1	5	Yes
K0849	LL	457.26	1	1	Yes
K0849	UE	3,429.47	1	3	Yes
K0850	NU	5,525.91	1	5	Yes
K0850	LL	552.59	1	1	Yes
K0850	UE	4,144.43	1	3	Yes
K0851	NU	5,167.26	1	5	Yes

Procedure Code	Modifier	Price	Unit	Mo/Year	Prior Authorization
K0851	LL	516.73	1	1	Yes
K0851	UE	3,875.45	1	3	Yes
K0852	NU	6,374.34	1	5	Yes
K0852	LL	637.43	1	1	Yes
K0852	UE	4,780.76	1	3	Yes
K0853	NU	6,548.04	1	5	Yes
K0853	LL	654.80	1	1	Yes
K0853	UE	4,911.03	1	3	Yes
K0854	NU	8,674.74	1	5	Yes
K0854	LL	867.47	1	1	Yes
K0854	UE	6,506.06	1	3	Yes
K0855	NU	8,194.59	1	3	Yes
K0855	LL	819.46	1	3	Yes
K0855	UE	6,145.94	1	3	Yes
K0856	NU	5,105.07	1	5	Yes
K0856	LL	510.51	1	1	Yes
K0856	UE	3,828.80	1	3	Yes
K0857	NU	5,207.40	1	5	Yes
K0857	LL	520.74	1	1	Yes
K0857	UE	3,905.56	1	3	Yes
K0858	NU	6,333.84	1	5	Yes
K0858	LL	633.38	1	1	Yes
K0858	UE	4,750.38	1	3	Yes
K0859	NU	5,884.29	1	3	Yes
K0859	LL	588.43	1	3	Yes
K0859	UE	4,413.22	1	3	Yes
K0860	NU	9,048.69	1	5	Yes
K0860	LL	904.87	1	1	Yes
K0860	UE	6,786.52	1	3	Yes
K0861	NU	5,113.26	1	5	Yes
K0861	LL	511.33	1	1	Yes
K0861	UE	3,834.95	1	3	Yes
K0862	NU	6,333.84	1	5	Yes
K0862	LL	633.38	1	1	Yes
K0862	UE	4,750.38	1	3	Yes
K0863	NU	9,048.69	1	5	Yes
K0863	LL	904.87	1	1	Yes
K0863	UE	6,786.52	1	3	Yes
K0864	NU	11,310.75	1	5	Yes
K0864	LL	1,131.08	1	1	Yes
K0864	UE	8,483.06	1	3	Yes

A complete listing of DME codes, descriptions, modifiers, reimbursements, and frequencies is found in the DME Manual, Section 4, which can be accessed via the Internet at www.scdhhs.gov.

Thank you for your participation in the South Carolina Medicaid Program. Please contact your Durable Medical Equipment Program Coordinator with any questions at (803) 898-2882.

/s/

Robert M. Kerr
Director

RMK/bgah

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