

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A4224	Supply insulin inf cath/wk	\$19.40	\$21.92	(\$2.52)
A4225	Sup/ext insulin inf pump syr	\$2.60	\$2.83	(\$0.23)
A4280	Brst prsths adhsv atchmnt	\$5.74	\$6.02	(\$0.28)
A4310	Insert tray w/o bag/cath	\$8.54	\$8.97	(\$0.43)
A4311	Catheter w/o bag 2-way latex	\$16.39	\$17.21	(\$0.82)
A4312	Cath w/o bag 2-way silicone	\$19.94	\$20.96	(\$1.02)
A4314	Cath w/drainage 2-way latex	\$23.76	\$24.96	(\$1.20)
A4315	Cath w/drainage 2-way silcne	\$29.17	\$30.64	(\$1.47)
A4316	Cath w/drainage 3-way	\$31.39	\$32.99	(\$1.60)
A4320	Irrigation tray	\$5.90	\$6.21	(\$0.31)
A4322	Irrigation syringe	\$3.37	\$3.54	(\$0.17)
A4326	Male external catheter	\$11.93	\$12.53	(\$0.60)
A4327	Fem urinary collect dev cup	\$46.72	\$49.10	(\$2.38)
A4328	Fem urinary collect pouch	\$11.54	\$12.13	(\$0.59)
A4330	Stool collection pouch	\$7.91	\$8.32	(\$0.41)
A4331	Extension drainage tubing	\$3.52	\$3.69	(\$0.17)
A4333	Urinary cath anchor device	\$2.44	\$2.57	(\$0.13)
A4334	Urinary cath leg strap	\$5.44	\$5.72	(\$0.28)
A4336	Urethral insert	\$1.59	\$1.67	(\$0.08)
A4338	Indwelling catheter latex	\$13.56	\$14.25	(\$0.69)
A4340	Indwelling catheter special	\$29.84	\$31.36	(\$1.52)
A4344	Cath indw foley 2 way silicn	\$17.70	\$18.60	(\$0.90)
A4346	Cath indw foley 3 way	\$21.28	\$22.37	(\$1.09)
A4349	Disposable male external cat	\$2.23	\$2.34	(\$0.11)
A4351	Straight tip urine catheter	\$2.01	\$2.11	(\$0.10)
A4352	Coude tip urinary catheter	\$7.10	\$7.47	(\$0.37)
A4353	Intermittent urinary cath	\$7.74	\$8.13	(\$0.39)
A4354	Cath insertion tray w/bag	\$13.05	\$13.71	(\$0.66)
A4355	Bladder irrigation tubing	\$8.70	\$9.14	(\$0.44)
A4356	Ext ureth clmp or compr dvc	\$43.50	\$45.71	(\$2.21)
A4357	Bedside drainage bag	\$10.73	\$11.28	(\$0.55)
A4358	Urinary leg or abdomen bag	\$7.33	\$7.70	(\$0.37)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A4360	Disposable ext urethral dev	\$0.47	\$0.49	(\$0.02)
A4361	Ostomy face plate	\$20.31	\$21.34	(\$1.03)
A4362	Solid skin barrier	\$3.83	\$4.03	(\$0.20)
A4363	Ostomy clamp, replacement	\$2.44	\$2.57	(\$0.13)
A4364	Adhesive, liquid or equal	\$3.25	\$3.42	(\$0.17)
A4366	Ostomy vent	\$1.43	\$1.50	(\$0.07)
A4367	Ostomy belt	\$8.13	\$8.55	(\$0.42)
A4368	Ostomy filter	\$0.28	\$0.29	(\$0.01)
A4369	Skin barrier liquid per oz	\$2.28	\$2.40	(\$0.12)
A4371	Skin barrier powder per oz	\$3.98	\$4.18	(\$0.20)
A4372	Skin barrier solid 4x4 equiv	\$4.64	\$4.87	(\$0.23)
A4373	Skin barrier with flange	\$6.93	\$7.28	(\$0.35)
A4375	Drainable plastic pch w fcpl	\$18.99	\$19.95	(\$0.96)
A4376	Drainable rubber pch w fcplt	\$52.61	\$55.28	(\$2.67)
A4377	Drainable plstic pch w/o fp	\$4.75	\$4.98	(\$0.23)
A4378	Drainable rubber pch w/o fp	\$33.98	\$35.72	(\$1.74)
A4379	Urinary plastic pouch w fcpl	\$16.60	\$17.45	(\$0.85)
A4380	Urinary rubber pouch w fcplt	\$41.26	\$43.37	(\$2.11)
A4381	Urinary plastic pouch w/o fp	\$5.11	\$5.38	(\$0.27)
A4382	Urinary hvy plstc pch w/o fp	\$27.21	\$28.60	(\$1.39)
A4383	Urinary rubber pouch w/o fp	\$31.16	\$32.75	(\$1.59)
A4384	Ostomy faceplt/silicone ring	\$10.63	\$11.17	(\$0.54)
A4385	Ost skn barrier sld ext wear	\$5.64	\$5.92	(\$0.28)
A4388	Drainable pch w ex wear barr	\$4.82	\$5.07	(\$0.25)
A4389	Drainable pch w st wear barr	\$6.87	\$7.22	(\$0.35)
A4390	Drainable pch ex wear convex	\$10.62	\$11.16	(\$0.54)
A4391	Urinary pouch w ex wear barr	\$7.82	\$8.21	(\$0.39)
A4392	Urinary pouch w st wear barr	\$9.04	\$9.49	(\$0.45)
A4393	Urine pch w ex wear bar conv	\$10.00	\$10.50	(\$0.50)
A4394	Ostomy pouch liq deodorant	\$2.86	\$3.01	(\$0.15)
A4396	Peristomal hernia supprt blt	\$44.75	\$47.03	(\$2.28)
A4397	Irrigation supply sleeve	\$4.50	\$4.73	(\$0.23)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A4398	Ostomy irrigation bag	\$15.28	\$16.06	(\$0.78)
A4399	Ostomy irrig cone/cath w brs	\$13.56	\$14.25	(\$0.69)
A4400	Ostomy irrigation set	\$54.02	\$56.78	(\$2.76)
A4402	Lubricant per ounce	\$1.77	\$1.86	(\$0.09)
A4404	Ostomy ring each	\$1.80	\$1.89	(\$0.09)
A4405	Nonpectin based ostomy paste	\$3.77	\$3.97	(\$0.20)
A4406	Pectin based ostomy paste	\$6.33	\$6.65	(\$0.32)
A4407	Ext wear ost skn barr <=4sq"	\$9.68	\$10.18	(\$0.50)
A4408	Ext wear ost skn barr >4sq"	\$10.91	\$11.47	(\$0.56)
A4409	Ost skn barr convex <=4 sq i	\$6.87	\$7.22	(\$0.35)
A4410	Ost skn barr extnd >4 sq	\$10.00	\$10.50	(\$0.50)
A4411	Ost skn barr extnd =4sq	\$5.64	\$5.92	(\$0.28)
A4412	Ost pouch drain high output	\$2.99	\$3.14	(\$0.15)
A4413	2 pc drainable ost pouch	\$6.09	\$6.40	(\$0.31)
A4414	Ost sknbar w/o conv<=4 sq in	\$5.44	\$5.72	(\$0.28)
A4415	Ost skn barr w/o conv >4 sqi	\$6.62	\$6.96	(\$0.34)
A4416	Ost pch clsd w barrier/fltr	\$3.05	\$3.20	(\$0.15)
A4417	Ost pch w bar/bltinconv/fltr	\$4.11	\$4.33	(\$0.22)
A4418	Ost pch clsd w/o bar w fltr	\$2.01	\$2.11	(\$0.10)
A4419	Ost pch for bar w flange/flt	\$1.92	\$2.01	(\$0.09)
A4423	Ost pch for bar w lk fl/fltr	\$2.06	\$2.16	(\$0.10)
A4424	Ost pch drain w bar & filter	\$5.26	\$5.53	(\$0.27)
A4425	Ost pch drain for barrier fl	\$3.96	\$4.16	(\$0.20)
A4426	Ost pch drain 2 piece system	\$3.02	\$3.17	(\$0.15)
A4427	Ost pch drain/barr lk flng/f	\$3.08	\$3.23	(\$0.15)
A4428	Urine ost pouch w faucet/tap	\$7.20	\$7.57	(\$0.37)
A4429	Urine ost pouch w bltinconv	\$9.12	\$9.58	(\$0.46)
A4430	Ost urine pch w b/bltin conv	\$9.41	\$9.89	(\$0.48)
A4431	Ost pch urine w barrier/tapv	\$6.87	\$7.22	(\$0.35)
A4432	Os pch urine w bar/fange/tap	\$3.97	\$4.17	(\$0.20)
A4433	Urine ost pch bar w lock fln	\$3.70	\$3.89	(\$0.19)
A4434	Ost pch urine w lock flng/ft	\$4.15	\$4.37	(\$0.22)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A4435	1pc ost pch drain hgh output	\$6.38	\$6.70	(\$0.32)
A4452	Waterproof tape	\$0.40	\$0.41	(\$0.01)
A4455	Adhesive remover per ounce	\$1.34	\$1.41	(\$0.07)
A4456	Adhesive remover, wipes	\$0.27	\$0.28	(\$0.01)
A4461	Surgicl dress hold non-reuse	\$3.64	\$3.83	(\$0.19)
A4463	Surgical dress holder reuse	\$14.72	\$15.46	(\$0.74)
A4481	Tracheostoma filter	\$0.42	\$0.43	(\$0.01)
A4556	Electrodes, pair	\$13.43	\$14.11	(\$0.68)
A4608	Transtracheal oxygen cath	\$55.41	\$58.23	(\$2.82)
A4614	Hand-held pefr meter	\$26.29	\$27.63	(\$1.34)
A4620	Variable concentration mask	\$0.66	\$0.70	(\$0.04)
A4623	Tracheostomy inner cannula	\$6.15	\$6.47	(\$0.32)
A4625	Trach care kit for new trach	\$7.28	\$7.65	(\$0.37)
A4626	Tracheostomy cleaning brush	\$3.08	\$3.23	(\$0.15)
A4629	Tracheostomy care kit	\$5.11	\$5.38	(\$0.27)
A5051	Pouch clsd w barr attached	\$2.28	\$2.40	(\$0.12)
A5052	Clsd ostomy pouch w/o barr	\$1.64	\$1.73	(\$0.09)
A5053	Clsd ostomy pouch faceplate	\$1.63	\$1.71	(\$0.08)
A5054	Clsd ostomy pouch w/flange	\$1.99	\$2.09	(\$0.10)
A5055	Stoma cap	\$1.59	\$1.67	(\$0.08)
A5056	1 pc ost pouch w filter	\$5.16	\$5.43	(\$0.27)
A5057	1 pc ost pou w built-in conv	\$10.62	\$11.16	(\$0.54)
A5061	Pouch drainable w barrier at	\$3.90	\$4.10	(\$0.20)
A5062	Drnble ostomy pouch w/o barr	\$2.30	\$2.42	(\$0.12)
A5063	Drain ostomy pouch w/flange	\$2.99	\$3.14	(\$0.15)
A5071	Urinary pouch w/barrier	\$6.64	\$6.98	(\$0.34)
A5072	Urinary pouch w/o barrier	\$3.80	\$4.00	(\$0.20)
A5073	Urinary pouch on barr w/flng	\$3.52	\$3.69	(\$0.17)
A5081	Stoma plug or seal, any type	\$3.11	\$3.27	(\$0.16)
A5082	Continent stoma catheter	\$11.18	\$11.75	(\$0.57)
A5093	Ostomy accessory convex inse	\$2.16	\$2.27	(\$0.11)
A5102	Bedside drain btl w/wo tube	\$22.87	\$24.03	(\$1.16)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A5105	Urinary suspensory	\$45.07	\$47.37	(\$2.30)
A5112	Urinary leg bag	\$38.27	\$40.22	(\$1.95)
A5113	Latex leg strap	\$5.21	\$5.48	(\$0.27)
A5114	Foam/fabric leg strap	\$9.90	\$10.40	(\$0.50)
A5121	Solid skin barrier 6x6	\$7.43	\$7.80	(\$0.37)
A5122	Solid skin barrier 8x8	\$14.20	\$14.92	(\$0.72)
A5126	Disk/foam pad +or- adhesive	\$1.45	\$1.52	(\$0.07)
A5131	Appliance cleaner	\$15.23	\$16.01	(\$0.78)
A5200	Percutaneous catheter anchor	\$12.48	\$13.12	(\$0.64)
A5500	Diab shoe for density insert	\$70.29	\$73.87	(\$3.58)
A5501	Diabetic custom molded shoe	\$210.83	\$221.57	(\$10.74)
A5503	Diabetic shoe w/roller/rockr	\$34.55	\$35.53	(\$0.98)
A5504	Diabetic shoe with wedge	\$34.55	\$35.53	(\$0.98)
A5505	Diab shoe w/metatarsal bar	\$34.55	\$35.53	(\$0.98)
A5506	Diabetic shoe w/off set heel	\$34.55	\$35.53	(\$0.98)
A5507	Modification diabetic shoe	\$34.55	\$35.53	(\$0.98)
A5512	Multi den insert direct form	\$28.67	\$30.13	(\$1.46)
A5513	Multi den insert custom mold	\$42.79	\$44.96	(\$2.17)
A5514	Mult den insert dir carv/cam	\$44.56	\$44.96	(\$0.40)
A6010	Collagen based wound filler	\$34.24	\$35.98	(\$1.74)
A6011	Collagen gel/paste wound fil	\$2.52	\$2.65	(\$0.13)
A6021	Collagen dressing <=16 sq in	\$23.24	\$24.42	(\$1.18)
A6022	Collagen drsg>16<=48 sq in	\$23.24	\$24.42	(\$1.18)
A6023	Collagen dressing >48 sq in	\$210.39	\$221.09	(\$10.70)
A6024	Collagen dsg wound filler	\$6.84	\$7.19	(\$0.35)
A6154	Wound pouch each	\$15.88	\$16.69	(\$0.81)
A6196	Alginate dressing <=16 sq in	\$8.13	\$8.55	(\$0.42)
A6197	Alginate drsg >16 <=48 sq in	\$18.17	\$19.10	(\$0.93)
A6199	Alginate drsg wound filler	\$5.85	\$6.14	(\$0.29)
A6203	Composite drsg <= 16 sq in	\$3.72	\$3.91	(\$0.19)
A6204	Composite drsg >16<=48 sq in	\$6.88	\$7.23	(\$0.35)
A6207	Contact layer >16<= 48 sq in	\$8.11	\$8.53	(\$0.42)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A6209	Foam drsg <=16 sq in w/o bdr	\$8.26	\$8.68	(\$0.42)
A6210	Foam drg >16<=48 sq in w/o b	\$22.03	\$23.15	(\$1.12)
A6211	Foam drg > 48 sq in w/o brdr	\$32.47	\$34.12	(\$1.65)
A6212	Foam drg <=16 sq in w/border	\$10.73	\$11.28	(\$0.55)
A6214	Foam drg > 48 sq in w/border	\$11.37	\$11.96	(\$0.59)
A6219	Gauze <= 16 sq in w/border	\$1.06	\$1.11	(\$0.05)
A6220	Gauze >16 <=48 sq in w/bordr	\$2.86	\$3.01	(\$0.15)
A6222	Gauze <=16 in no w/sal w/o b	\$2.35	\$2.48	(\$0.13)
A6223	Gauze >16<=48 no w/sal w/o b	\$2.68	\$2.82	(\$0.14)
A6224	Gauze > 48 in no w/sal w/o b	\$3.99	\$4.19	(\$0.20)
A6229	Gauze >16<=48 sq in watr/sal	\$3.99	\$4.19	(\$0.20)
A6231	Hydrogel dsq<=16 sq in	\$5.18	\$5.45	(\$0.27)
A6232	Hydrogel dsq>16<=48 sq in	\$7.59	\$7.97	(\$0.38)
A6233	Hydrogel dressing >48 sq in	\$21.20	\$22.28	(\$1.08)
A6234	Hydrocolld drg <=16 w/o bdr	\$7.23	\$7.60	(\$0.37)
A6235	Hydrocolld drg >16<=48 w/o b	\$18.59	\$19.54	(\$0.95)
A6236	Hydrocolld drg > 48 in w/o b	\$30.13	\$31.66	(\$1.53)
A6237	Hydrocolld drg <=16 in w/bdr	\$8.75	\$9.19	(\$0.44)
A6238	Hydrocolld drg >16<=48 w/bdr	\$25.20	\$26.49	(\$1.29)
A6240	Hydrocolld drg filler paste	\$13.54	\$14.23	(\$0.69)
A6241	Hydrocolloid drg filler dry	\$2.84	\$2.99	(\$0.15)
A6242	Hydrogel drg <=16 in w/o bdr	\$6.70	\$7.04	(\$0.34)
A6243	Hydrogel drg >16<=48 w/o bdr	\$13.62	\$14.32	(\$0.70)
A6244	Hydrogel drg >48 in w/o bdr	\$43.43	\$45.64	(\$2.21)
A6245	Hydrogel drg <= 16 in w/bdr	\$8.03	\$8.45	(\$0.42)
A6246	Hydrogel drg >16<=48 in w/b	\$10.98	\$11.54	(\$0.56)
A6247	Hydrogel drg > 48 sq in w/b	\$26.29	\$27.63	(\$1.34)
A6248	Hydrogel drsg gel filler	\$17.96	\$18.88	(\$0.92)
A6251	Absorpt drg <=16 sq in w/o b	\$2.20	\$2.31	(\$0.11)
A6252	Absorpt drg >16 <=48 w/o bdr	\$3.60	\$3.78	(\$0.18)
A6253	Absorpt drg > 48 sq in w/o b	\$7.00	\$7.36	(\$0.36)
A6254	Absorpt drg <=16 sq in w/bdr	\$1.33	\$1.39	(\$0.06)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A6255	Absorpt drg >16<=48 in w/bdr	\$3.36	\$3.53	(\$0.17)
A6257	Transparent film <= 16 sq in	\$1.70	\$1.79	(\$0.09)
A6258	Transparent film >16<=48 in	\$4.77	\$5.00	(\$0.23)
A6259	Transparent film > 48 sq in	\$12.10	\$12.70	(\$0.60)
A6266	Impreg gauze no h20/sal/yard	\$2.13	\$2.23	(\$0.10)
A6403	Sterile gauze>16 <= 48 sq in	\$0.47	\$0.49	(\$0.02)
A6407	Packing strips, non-impreg	\$2.08	\$2.18	(\$0.10)
A6410	Sterile eye pad	\$0.43	\$0.44	(\$0.01)
A6441	Pad band w>=3" <5"/yd	\$0.75	\$0.80	(\$0.05)
A6443	Conform band n/s w>=3" <5"/yd	\$0.31	\$0.32	(\$0.01)
A6444	Conform band n/s w>=5"/yd	\$0.62	\$0.65	(\$0.03)
A6445	Conform band s w <3"/yd	\$0.36	\$0.37	(\$0.01)
A6446	Conform band s w>=3" <5"/yd	\$0.45	\$0.46	(\$0.01)
A6447	Conform band s w >=5"/yd	\$0.75	\$0.80	(\$0.05)
A6448	Lt compres band <3"/yd	\$1.28	\$1.34	(\$0.06)
A6449	Lt compres band >=3" <5"/yd	\$1.94	\$2.04	(\$0.10)
A6451	Mod compres band w>=3" <5"/yd	\$1.94	\$2.04	(\$0.10)
A6452	High compres band w>=3" <5"/yd	\$6.53	\$6.86	(\$0.33)
A6453	Self-adher band w <3"/yd	\$0.69	\$0.73	(\$0.04)
A6454	Self-adher band w>=3" <5"/yd	\$0.86	\$0.91	(\$0.05)
A6455	Self-adher band >=5"/yd	\$1.54	\$1.62	(\$0.08)
A6456	Zinc paste band w >=3" <5"/yd	\$1.40	\$1.47	(\$0.07)
A6457	Tubular dressing	\$1.26	\$1.32	(\$0.06)
A6550	Neg pres wound ther drsg set	\$24.36	\$25.50	(\$1.14)
A7040	One way chest drain valve	\$43.64	\$45.86	(\$2.22)
A7041	Water seal drain container	\$82.02	\$86.19	(\$4.17)
A7048	Vacuum drain bottle/tube kit	\$45.65	\$47.98	(\$2.33)
A7501	Tracheostoma valve w diaphra	\$116.10	\$122.01	(\$5.91)
A7502	Replacement diaphragm/fplate	\$55.19	\$58.00	(\$2.81)
A7503	Hmes filter holder or cap	\$12.54	\$13.18	(\$0.64)
A7504	Tracheostoma hmes filter	\$0.75	\$0.80	(\$0.05)
A7505	Hmes or trach valve housing	\$5.18	\$5.45	(\$0.27)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
A7506	Hmes/trachvalve adhesivedisk	\$0.37	\$0.38	(\$0.01)
A7507	Integrated filter & holder	\$2.75	\$2.89	(\$0.14)
A7508	Housing & integrated adhesiv	\$3.17	\$3.33	(\$0.16)
A7509	Heat & moisture exchange sys	\$1.56	\$1.64	(\$0.08)
A7520	Trach/laryn tube non-cuffed	\$52.49	\$55.16	(\$2.67)
A7521	Trach/laryn tube cuffed	\$52.00	\$54.65	(\$2.65)
A7522	Trach/laryn tube stainless	\$49.93	\$52.47	(\$2.54)
A7524	Tracheostoma stent/stud/bttn	\$85.58	\$89.93	(\$4.35)
A7525	Tracheostomy mask	\$2.28	\$2.40	(\$0.12)
A7526	Tracheostomy tube collar	\$3.74	\$3.94	(\$0.20)
A7527	Trach/laryn tube plug/stop	\$3.96	\$4.16	(\$0.20)
E0447	Port o2 cont, liq over 4 lpm	\$65.28	\$78.57	(\$13.29)
E1702	Repl measr scales jaw motion	\$24.95	\$26.21	(\$1.26)
K0672	Removable soft interface le	\$78.88	\$82.89	(\$4.01)
L0112	Cranial cervical orthosis	\$1,302.31	\$1,368.56	(\$66.25)
L0113	Cranial cervical torticollis	\$265.34	\$278.84	(\$13.50)
L0120	Cerv flex n/adj foam pre ots	\$31.54	\$33.15	(\$1.61)
L0130	Flex thermoplastic collar mo	\$157.52	\$165.53	(\$8.01)
L0140	Cervical semi-rigid adjustab	\$57.06	\$59.97	(\$2.91)
L0150	Cerv semi-rig adj molded chn	\$128.44	\$134.97	(\$6.53)
L0160	Cerv sr wire occ/man pre ots	\$157.57	\$165.59	(\$8.02)
L0170	Cervical collar molded to pt	\$760.01	\$798.67	(\$38.66)
L0172	Cerv col sr foam 2pc pre ots	\$141.89	\$149.10	(\$7.21)
L0174	Cerv sr 2pc thor ext pre ots	\$326.50	\$343.10	(\$16.60)
L0180	Cer post col occ/man sup adj	\$423.28	\$444.81	(\$21.53)
L0190	Cerv collar supp adj cerv ba	\$588.75	\$618.69	(\$29.94)
L0200	Cerv col supp adj bar & thor	\$613.76	\$644.99	(\$31.23)
L0220	Thor rib belt custom fabrica	\$109.17	\$114.72	(\$5.55)
L0450	Tlso flex trunk/thor pre ots	\$206.56	\$217.07	(\$10.51)
L0454	Tlso trnk sj-t9 pre cst	\$322.71	\$339.12	(\$16.41)
L0455	Tlso flex trnk sj-t9 pre ots	\$322.71	\$339.12	(\$16.41)
L0456	Tlso flex trnk sj-ss pre cst	\$925.43	\$972.50	(\$47.07)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L0457	Tlso flex trnk sj-ss pre ots	\$925.43	\$972.50	(\$47.07)
L0458	Tlso 2mod symphis-xipho pre	\$829.83	\$872.04	(\$42.21)
L0460	Tlso 2 shl symphys-stern cst	\$934.02	\$981.54	(\$47.52)
L0462	Tlso 3mod sacro-scap pre	\$1,161.79	\$1,220.88	(\$59.09)
L0464	Tlso 4mod sacro-scap pre	\$1,383.09	\$1,453.44	(\$70.35)
L0466	Tlso r fram soft ant pre cst	\$444.05	\$466.64	(\$22.59)
L0467	Tlso r fram soft pre ots	\$444.05	\$466.64	(\$22.59)
L0468	Tlso rig fram pelvic pre cst	\$538.21	\$565.58	(\$27.37)
L0469	Tlso rig fram pelvic pre ots	\$538.21	\$565.58	(\$27.37)
L0470	Tlso rigid frame pre subclav	\$757.75	\$796.29	(\$38.54)
L0472	Tlso rigid frame hyperex pre	\$480.58	\$505.02	(\$24.44)
L0480	Tlso rigid plastic custom fa	\$1,442.07	\$1,515.42	(\$73.35)
L0482	Tlso rigid lined custom fab	\$1,644.55	\$1,728.21	(\$83.66)
L0484	Tlso rigid plastic cust fab	\$1,850.70	\$1,944.84	(\$94.14)
L0486	Tlso rigidlined cust fab two	\$2,004.35	\$2,106.30	(\$101.95)
L0488	Tlso rigid lined pre one pie	\$934.02	\$981.54	(\$47.52)
L0490	Tlso rigid plastic pre one	\$263.23	\$276.62	(\$13.39)
L0491	Tlso 2 piece rigid shell	\$714.60	\$750.95	(\$36.35)
L0492	Tlso 3 piece rigid shell	\$493.13	\$518.21	(\$25.08)
L0621	Sio flex pelvic/sacr pre ots	\$109.60	\$115.17	(\$5.57)
L0622	Sio flex pelvisacral custom	\$307.05	\$322.66	(\$15.61)
L0623	Sio rig pnl pelv/sac pre ots	\$56.83	\$173.03	(\$116.20)
L0625	Lo flex l1-below l5 pre ots	\$51.24	\$53.85	(\$2.61)
L0626	Lo sag rig pnl stays pre cst	\$72.52	\$76.21	(\$3.69)
L0627	Lo sag ri an/pos pnl pre cst	\$382.48	\$401.95	(\$19.47)
L0628	Lso flex no ri stays pre ots	\$78.07	\$82.04	(\$3.97)
L0630	Lso r post pnl sj-t9 pre cst	\$150.70	\$158.36	(\$7.66)
L0631	Lso sag r an/pos pnl pre cst	\$955.20	\$1,003.79	(\$48.59)
L0633	Lso sc r pos/lat pnl pre cst	\$266.82	\$280.40	(\$13.58)
L0635	Lso sagit rigid panel prefab	\$1,137.65	\$1,195.52	(\$57.87)
L0636	Lso sagittal rigid panel cus	\$1,684.15	\$1,769.82	(\$85.67)
L0637	Lso sc r ant/pos pnl pre cst	\$1,125.73	\$1,182.99	(\$57.26)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L0638	Lso sag-coronal panel custom	\$1,227.21	\$1,289.63	(\$62.42)
L0639	Lso s/c shell/panel prefab	\$1,125.73	\$1,182.99	(\$57.26)
L0640	Lso s/c shell/panel custom	\$973.66	\$1,023.20	(\$49.54)
L0641	Lo rig pos pnl l1-l5 pre ots	\$72.52	\$76.21	(\$3.69)
L0642	Lo sag ri an/pos pnl pre ots	\$382.48	\$401.95	(\$19.47)
L0643	Lso sag ctr rigi pos pre ots	\$150.70	\$158.36	(\$7.66)
L0648	Lso sag r an/pos pnl pre ots	\$955.20	\$1,003.79	(\$48.59)
L0649	Lso sc r pos/lat pnl pre ots	\$266.82	\$280.40	(\$13.58)
L0650	Lso sc r ant/pos pnl pre ots	\$1,125.73	\$1,182.99	(\$57.26)
L0651	Lso sag-co shell pnl pre ots	\$1,125.73	\$1,182.99	(\$57.26)
L0700	Ctlso a-p-l control molded	\$2,402.85	\$2,525.08	(\$122.23)
L0710	Ctlso a-p-l control w/ inter	\$2,482.25	\$2,608.51	(\$126.26)
L0810	Halo cervical into jckt vest	\$3,065.71	\$3,221.66	(\$155.95)
L0820	Halo cervical into body jack	\$2,416.72	\$2,539.65	(\$122.93)
L0830	Halo cerv into milwaukee typ	\$3,726.97	\$3,916.55	(\$189.58)
L0859	Mri compatible system	\$1,085.93	\$1,141.17	(\$55.24)
L0861	Halo repl liner/interface	\$200.55	\$210.75	(\$10.20)
L0970	Tlso corset front	\$135.84	\$142.75	(\$6.91)
L0972	Lso corset front	\$122.32	\$128.54	(\$6.22)
L0974	Tlso full corset	\$205.67	\$216.14	(\$10.47)
L0976	Lso full corset	\$145.19	\$152.58	(\$7.39)
L0978	Axillary crutch extension	\$228.79	\$240.42	(\$11.63)
L0980	Peroneal straps pair pre ots	\$15.57	\$16.36	(\$0.79)
L0982	Stocking sup grips 4 pre ots	\$15.44	\$16.22	(\$0.78)
L0984	Protect body sock ea pre ots	\$60.94	\$64.05	(\$3.11)
L1000	Ctlso milwauke initial model	\$2,412.99	\$2,535.72	(\$122.73)
L1005	Tension based scoliosis orth	\$2,978.12	\$3,129.62	(\$151.50)
L1010	Ctlso axilla sling	\$67.71	\$71.15	(\$3.44)
L1020	Kyphosis pad	\$102.73	\$107.96	(\$5.23)
L1025	Kyphosis pad floating	\$138.40	\$145.44	(\$7.04)
L1030	Lumbar bolster pad	\$59.39	\$62.42	(\$3.03)
L1040	Lumbar or lumbar rib pad	\$92.72	\$97.43	(\$4.71)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L1050	Sternal pad	\$98.96	\$103.99	(\$5.03)
L1060	Thoracic pad	\$113.67	\$119.45	(\$5.78)
L1070	Trapezius sling	\$106.95	\$112.39	(\$5.44)
L1080	Outrigger	\$56.89	\$59.78	(\$2.89)
L1085	Outrigger bil w/ vert extens	\$182.95	\$192.25	(\$9.30)
L1090	Lumbar sling	\$108.94	\$114.48	(\$5.54)
L1100	Ring flange plastic/leather	\$189.00	\$198.62	(\$9.62)
L1110	Ring flange plas/leather mol	\$303.55	\$318.99	(\$15.44)
L1120	Covers for upright each	\$47.20	\$49.60	(\$2.40)
L1200	Furnsh initial orthosis only	\$1,862.21	\$1,956.94	(\$94.73)
L1210	Lateral thoracic extension	\$310.99	\$326.81	(\$15.82)
L1220	Anterior thoracic extension	\$263.31	\$276.71	(\$13.40)
L1230	Milwaukee type superstructur	\$529.10	\$556.01	(\$26.91)
L1240	Lumbar derotation pad	\$92.29	\$96.98	(\$4.69)
L1250	Anterior asis pad	\$73.21	\$76.93	(\$3.72)
L1260	Anterior thoracic derotation	\$80.04	\$84.11	(\$4.07)
L1270	Abdominal pad	\$92.09	\$96.77	(\$4.68)
L1280	Rib gusset (elastic) each	\$102.53	\$107.75	(\$5.22)
L1290	Lateral trochanteric pad	\$93.42	\$98.17	(\$4.75)
L1300	Body jacket mold to patient	\$1,985.35	\$2,086.34	(\$100.99)
L1310	Post-operative body jacket	\$1,865.71	\$1,960.62	(\$94.91)
L1600	Ho flex frejka w/cov pre cst	\$145.95	\$153.38	(\$7.43)
L1610	Ho frejka cov only pre cst	\$52.18	\$54.83	(\$2.65)
L1620	Ho flex pavlik harns pre cst	\$148.08	\$155.62	(\$7.54)
L1630	Abduct control hip semi-flex	\$164.32	\$172.68	(\$8.36)
L1640	Pelv band/spread bar thigh c	\$411.32	\$432.24	(\$20.92)
L1650	Ho abduction hip adjustable	\$240.80	\$253.06	(\$12.26)
L1652	Ho bi thighcuffs w sprdr bar	\$331.68	\$348.55	(\$16.87)
L1660	Ho abduction static plastic	\$152.55	\$160.31	(\$7.76)
L1680	Pelvic & hip control thigh c	\$1,448.13	\$1,521.79	(\$73.66)
L1685	Post-op hip abduct custom fa	\$1,413.74	\$1,485.65	(\$71.91)
L1686	Ho post-op hip abduction	\$1,084.17	\$1,139.32	(\$55.15)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L1690	Combination bilateral ho	\$1,799.30	\$1,890.83	(\$91.53)
L1700	Leg perthes orth toronto typ	\$1,815.02	\$1,907.34	(\$92.32)
L1710	Legg perthes orth newington	\$2,124.67	\$2,232.75	(\$108.08)
L1720	Legg perthes orthosis trilat	\$1,566.14	\$1,645.80	(\$79.66)
L1730	Legg perthes orth scottish r	\$1,345.17	\$1,413.58	(\$68.41)
L1755	Legg perthes patten bottom t	\$1,872.14	\$1,967.37	(\$95.23)
L1810	Ko elastic with joints	\$115.81	\$121.70	(\$5.89)
L1812	Ko elastic w/joints pre ots	\$115.81	\$121.70	(\$5.89)
L1820	Ko elas w/ condyle pads & jo	\$141.01	\$148.18	(\$7.17)
L1830	Ko immob canvas long pre ots	\$103.98	\$109.27	(\$5.29)
L1831	Knee orth pos locking joint	\$273.85	\$287.78	(\$13.93)
L1832	Ko adj jnt pos r sup pre cst	\$647.13	\$680.05	(\$32.92)
L1833	Ko adj jnt pos r sup pre ots	\$647.13	\$680.05	(\$32.92)
L1834	Ko w/O joint rigid molded to	\$872.02	\$916.37	(\$44.35)
L1836	Ko rigid w/o joints pre ots	\$124.16	\$130.48	(\$6.32)
L1840	Ko derot ant cruciate custom	\$1,092.83	\$1,148.42	(\$55.59)
L1843	Ko single upright pre cst	\$834.89	\$877.36	(\$42.47)
L1844	Ko w/adj jt rot cntrl molded	\$1,889.84	\$1,985.97	(\$96.13)
L1845	Ko double upright pre cst	\$728.59	\$765.65	(\$37.06)
L1846	Ko w adj flex/ext rotat mold	\$1,327.74	\$1,395.28	(\$67.54)
L1847	Ko dbl upright w/air pre cst	\$535.18	\$562.41	(\$27.23)
L1848	Ko dbl upright w/air pre ots	\$535.18	\$562.41	(\$27.23)
L1850	Ko swedish type pre ots	\$342.11	\$359.51	(\$17.40)
L1851	Ko single upright prefab ots	\$840.73	\$877.36	(\$36.63)
L1860	Ko supracondylar socket mold	\$1,275.36	\$1,340.23	(\$64.87)
L1900	Afo sprng wir drsflx calf bd	\$272.01	\$285.84	(\$13.83)
L1902	Afo ankle gauntlet pre ots	\$81.54	\$85.68	(\$4.14)
L1904	Afo molded ankle gauntlet	\$558.89	\$587.32	(\$28.43)
L1906	Afo multilig ank sup pre ots	\$142.93	\$150.21	(\$7.28)
L1907	Afo supramalleolar custom	\$523.57	\$550.20	(\$26.63)
L1910	Afo sing bar clasp attach sh	\$317.84	\$334.01	(\$16.17)
L1920	Afo sing upright w/ adjust s	\$324.97	\$341.50	(\$16.53)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L1930	Afo plastic	\$281.16	\$295.46	(\$14.30)
L1932	Afo rig ant tib prefab tcf/=	\$830.32	\$872.55	(\$42.23)
L1940	Afo molded to patient plasti	\$587.78	\$617.68	(\$29.90)
L1945	Afo molded plas rig ant tib	\$1,100.21	\$1,156.17	(\$55.96)
L1950	Afo spiral molded to pt plas	\$885.27	\$930.30	(\$45.03)
L1951	Afo spiral prefabricated	\$781.44	\$821.19	(\$39.75)
L1960	Afo pos solid ank plastic mo	\$658.79	\$692.30	(\$33.51)
L1970	Afo plastic molded w/ankle j	\$688.86	\$723.90	(\$35.04)
L1971	Afo w/ankle joint, prefab	\$436.14	\$458.32	(\$22.18)
L1980	Afo sing solid stirrup calf	\$436.19	\$458.38	(\$22.19)
L1990	Afo doub solid stirrup calf	\$529.78	\$556.73	(\$26.95)
L2000	Kafo sing fre stirr thi/calf	\$1,205.51	\$1,266.83	(\$61.32)
L2005	Kafo sng/dbl mechanical act	\$3,812.84	\$4,006.78	(\$193.94)
L2010	Kafo sng solid stirrup w/o j	\$1,098.94	\$1,154.84	(\$55.90)
L2020	Kafo dbl solid stirrup band/	\$1,387.79	\$1,458.38	(\$70.59)
L2030	Kafo dbl solid stirrup w/o j	\$1,204.03	\$1,265.28	(\$61.25)
L2034	Kafo pla sin up w/wo k/a cus	\$1,864.18	\$1,959.00	(\$94.82)
L2035	Kafo plastic pediatric size	\$161.17	\$169.37	(\$8.20)
L2036	Kafo plas doub free knee mol	\$1,977.38	\$2,077.95	(\$100.57)
L2037	Kafo plas sing free knee mol	\$1,979.61	\$2,080.30	(\$100.69)
L2038	Kafo w/o joint multi-axis an	\$1,454.72	\$1,528.71	(\$73.99)
L2040	Hkafo torsion bil rot straps	\$158.26	\$166.32	(\$8.06)
L2050	Hkafo torsion cable hip pelv	\$566.17	\$594.97	(\$28.80)
L2060	Hkafo torsion ball bearing j	\$690.06	\$725.16	(\$35.10)
L2070	Hkafo torsion unilat rot str	\$132.15	\$138.87	(\$6.72)
L2080	Hkafo unilat torsion cable	\$427.49	\$449.24	(\$21.75)
L2090	Hkafo unilat torsion ball br	\$521.16	\$547.67	(\$26.51)
L2106	Afo tib fx cast plaster mold	\$808.11	\$849.21	(\$41.10)
L2108	Afo tib fx cast molded to pt	\$1,174.42	\$1,234.16	(\$59.74)
L2112	Afo tibial fracture soft	\$511.62	\$537.65	(\$26.03)
L2114	Afo tib fx semi-rigid	\$689.86	\$724.95	(\$35.09)
L2116	Afo tibial fracture rigid	\$846.11	\$889.15	(\$43.04)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L2126	Kafo fem fx cast thermoplas	\$1,221.18	\$1,283.30	(\$62.12)
L2128	Kafo fem fx cast molded to p	\$1,918.19	\$2,015.77	(\$97.58)
L2132	Kafo femoral fx cast soft	\$741.06	\$778.76	(\$37.70)
L2134	Kafo fem fx cast semi-rigid	\$1,149.52	\$1,207.99	(\$58.47)
L2136	Kafo femoral fx cast rigid	\$1,405.56	\$1,477.05	(\$71.49)
L2180	Plas shoe insert w ank joint	\$139.19	\$146.27	(\$7.08)
L2182	Drop lock knee	\$95.28	\$100.13	(\$4.85)
L2184	Limited motion knee joint	\$110.42	\$116.04	(\$5.62)
L2186	Adj motion knee jnt lerman t	\$134.20	\$141.03	(\$6.83)
L2188	Quadrilateral brim	\$266.96	\$280.54	(\$13.58)
L2190	Waist belt	\$77.85	\$81.81	(\$3.96)
L2192	Pelvic band & belt thigh fla	\$423.78	\$445.33	(\$21.55)
L2200	Limited ankle motion ea jnt	\$56.50	\$59.38	(\$2.88)
L2210	Dorsiflexion assist each joi	\$79.89	\$83.96	(\$4.07)
L2220	Dorsi & plantar flex ass/res	\$97.33	\$102.28	(\$4.95)
L2230	Split flat caliper stirr & p	\$91.19	\$95.83	(\$4.64)
L2232	Rocker bottom, contact afo	\$92.60	\$97.32	(\$4.72)
L2240	Round caliper and plate atta	\$99.40	\$104.46	(\$5.06)
L2250	Foot plate molded stirrup at	\$422.32	\$443.80	(\$21.48)
L2260	Reinforced solid stirrup	\$238.26	\$250.37	(\$12.11)
L2265	Long tongue stirrup	\$139.97	\$147.09	(\$7.12)
L2270	Varus/valgus strap padded/li	\$63.83	\$67.08	(\$3.25)
L2275	Plastic mod low ext pad/line	\$139.42	\$146.51	(\$7.09)
L2280	Molded inner boot	\$538.18	\$565.55	(\$27.37)
L2300	Abduction bar jointed adjust	\$320.00	\$336.28	(\$16.28)
L2310	Abduction bar-straight	\$146.22	\$153.65	(\$7.43)
L2320	Non-molded lacer	\$244.54	\$256.99	(\$12.45)
L2330	Lacer molded to patient mode	\$466.69	\$490.43	(\$23.74)
L2335	Anterior swing band	\$270.00	\$283.74	(\$13.74)
L2340	Pre-tibial shell molded to p	\$531.19	\$558.21	(\$27.02)
L2350	Prosthetic type socket molde	\$1,059.04	\$1,112.91	(\$53.87)
L2360	Extended steel shank	\$60.83	\$63.92	(\$3.09)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L2370	Patten bottom	\$305.10	\$320.62	(\$15.52)
L2375	Torsion ank & half solid sti	\$134.29	\$141.12	(\$6.83)
L2380	Torsion straight knee joint	\$146.32	\$153.76	(\$7.44)
L2385	Straight knee joint heavy du	\$159.20	\$167.29	(\$8.09)
L2387	Add le poly knee custom kafo	\$196.70	\$206.70	(\$10.00)
L2390	Offset knee joint each	\$130.11	\$136.72	(\$6.61)
L2395	Offset knee joint heavy duty	\$170.44	\$179.11	(\$8.67)
L2397	Suspension sleeve lower ext	\$117.81	\$123.79	(\$5.98)
L2405	Knee joint drop lock ea jnt	\$81.11	\$85.24	(\$4.13)
L2415	Knee joint cam lock each joi	\$113.01	\$118.76	(\$5.75)
L2425	Knee disc/dial lock/adj flex	\$133.38	\$140.16	(\$6.78)
L2430	Knee jnt ratchet lock ea jnt	\$133.38	\$140.16	(\$6.78)
L2492	Knee lift loop drop lock rin	\$105.38	\$110.75	(\$5.37)
L2500	Thi/glut/ischia wgt bearing	\$374.95	\$394.03	(\$19.08)
L2510	Th/wght bear quad-lat brim m	\$863.32	\$907.24	(\$43.92)
L2520	Th/wght bear quad-lat brim c	\$547.53	\$575.38	(\$27.85)
L2525	Th/wght bear nar m-l brim mo	\$1,352.45	\$1,421.25	(\$68.80)
L2526	Th/wght bear nar m-l brim cu	\$754.91	\$793.31	(\$38.40)
L2530	Thigh/wght bear lacer non-mo	\$279.26	\$293.46	(\$14.20)
L2540	Thigh/wght bear lacer molded	\$502.49	\$528.05	(\$25.56)
L2550	Thigh/wght bear high roll cu	\$341.35	\$358.72	(\$17.37)
L2570	Hip clevis type 2 posit jnt	\$566.11	\$594.90	(\$28.79)
L2580	Pelvic control pelvic sling	\$551.61	\$579.66	(\$28.05)
L2600	Hip clevis/thrust bearing fr	\$244.10	\$256.51	(\$12.41)
L2610	Hip clevis/thrust bearing lo	\$288.64	\$303.32	(\$14.68)
L2620	Pelvic control hip heavy dut	\$317.78	\$333.95	(\$16.17)
L2622	Hip joint adjustable flexion	\$364.47	\$383.01	(\$18.54)
L2624	Hip adj flex ext abduct cont	\$393.57	\$413.59	(\$20.02)
L2627	Plastic mold recipro hip & c	\$1,528.12	\$1,605.85	(\$77.73)
L2628	Metal frame recipro hip & ca	\$1,493.44	\$1,569.40	(\$75.96)
L2630	Pelvic control band & belt u	\$294.31	\$309.28	(\$14.97)
L2640	Pelvic control band & belt b	\$399.41	\$419.73	(\$20.32)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L2650	Pelv & thor control gluteal	\$119.19	\$125.25	(\$6.06)
L2660	Thoracic control thoracic ba	\$221.52	\$232.78	(\$11.26)
L2670	Thorac cont paraspinal uprig	\$181.78	\$191.02	(\$9.24)
L2680	Thorac cont lat support upri	\$168.75	\$177.33	(\$8.58)
L2750	Plating chrome/nickel pr bar	\$74.51	\$78.30	(\$3.79)
L2755	Carbon graphite lamination	\$121.59	\$127.78	(\$6.19)
L2760	Extension per extension per	\$72.21	\$75.89	(\$3.68)
L2768	Ortho sidebar disconnect	\$121.22	\$127.39	(\$6.17)
L2780	Non-corrosive finish	\$80.44	\$84.53	(\$4.09)
L2785	Drop lock retainer each	\$37.67	\$39.58	(\$1.91)
L2795	Knee control full kneecap	\$100.99	\$106.13	(\$5.14)
L2800	Knee cap medial or lateral p	\$126.77	\$133.23	(\$6.46)
L2810	Knee control condylar pad	\$92.83	\$97.55	(\$4.72)
L2820	Soft interface below knee se	\$103.22	\$108.46	(\$5.24)
L2830	Soft interface above knee se	\$111.66	\$117.34	(\$5.68)
L2840	Tibial length sock fx or equ	\$38.94	\$40.93	(\$1.99)
L2850	Femoral lgth sock fx or equa	\$66.72	\$70.12	(\$3.40)
L3000	Ft insert ucb berkeley shell	\$292.29	\$307.16	(\$14.87)
L3001	Foot insert remov molded spe	\$123.08	\$129.33	(\$6.25)
L3002	Foot insert plastazote or eq	\$150.28	\$157.92	(\$7.64)
L3003	Foot insert silicone gel eac	\$162.15	\$170.41	(\$8.26)
L3010	Foot longitudinal arch suppo	\$162.15	\$170.41	(\$8.26)
L3020	Foot longitud/metatarsal sup	\$184.61	\$193.99	(\$9.38)
L3030	Foot arch support remov prem	\$71.01	\$74.63	(\$3.62)
L3040	Ft arch suprt premold longit	\$43.78	\$46.01	(\$2.23)
L3050	Foot arch supp premold metat	\$43.78	\$46.01	(\$2.23)
L3060	Foot arch supp longitud/meta	\$68.62	\$72.11	(\$3.49)
L3070	Arch suprt att to sho longit	\$29.55	\$31.06	(\$1.51)
L3080	Arch supp att to shoe metata	\$29.55	\$31.06	(\$1.51)
L3090	Arch supp att to shoe long/m	\$37.87	\$39.81	(\$1.94)
L3100	Hallus-valgus nt dyn pre ots	\$40.23	\$42.28	(\$2.05)
L3140	Abduction rotation bar shoe	\$82.85	\$87.07	(\$4.22)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L3150	Abduct rotation bar w/o shoe	\$75.74	\$79.59	(\$3.85)
L3170	Foot plas heel stabi pre ots	\$47.36	\$49.76	(\$2.40)
L3224	Woman's shoe oxford brace	\$69.89	\$73.45	(\$3.56)
L3225	Man's shoe oxford brace	\$80.40	\$84.49	(\$4.09)
L3300	Sho lift taper to metatarsal	\$48.51	\$50.98	(\$2.47)
L3310	Shoe lift elev heel/sole neo	\$75.74	\$79.59	(\$3.85)
L3330	Lifts elevation metal extens	\$526.60	\$553.39	(\$26.79)
L3332	Shoe lifts tapered to one-ha	\$68.62	\$72.11	(\$3.49)
L3334	Shoe lifts elevation heel /i	\$35.52	\$37.32	(\$1.80)
L3340	Shoe wedge sach	\$79.31	\$83.35	(\$4.04)
L3350	Shoe heel wedge	\$21.32	\$22.41	(\$1.09)
L3360	Shoe sole wedge outside sole	\$33.13	\$34.82	(\$1.69)
L3370	Shoe sole wedge between sole	\$46.12	\$48.46	(\$2.34)
L3380	Shoe clubfoot wedge	\$46.12	\$48.46	(\$2.34)
L3390	Shoe outflare wedge	\$46.12	\$48.46	(\$2.34)
L3400	Shoe metatarsal bar wedge ro	\$37.87	\$39.81	(\$1.94)
L3410	Shoe metatarsal bar between	\$86.38	\$90.77	(\$4.39)
L3420	Full sole/heel wedge btween	\$50.90	\$53.49	(\$2.59)
L3430	Sho heel count plast reinfor	\$149.11	\$156.69	(\$7.58)
L3440	Heel leather reinforced	\$71.01	\$74.63	(\$3.62)
L3450	Shoe heel sach cushion type	\$98.23	\$103.23	(\$5.00)
L3455	Shoe heel new leather standa	\$37.87	\$39.81	(\$1.94)
L3460	Shoe heel new rubber standar	\$31.93	\$33.55	(\$1.62)
L3465	Shoe heel thomas with wedge	\$54.44	\$57.20	(\$2.76)
L3470	Shoe heel thomas extend to b	\$57.98	\$60.93	(\$2.95)
L3480	Shoe heel pad & depress for	\$57.98	\$60.93	(\$2.95)
L3500	Ortho shoe add leather insol	\$27.21	\$28.60	(\$1.39)
L3510	Orthopedic shoe add rub insl	\$27.21	\$28.60	(\$1.39)
L3520	O shoe add felt w leath insl	\$29.55	\$31.06	(\$1.51)
L3530	Ortho shoe add half sole	\$29.55	\$31.06	(\$1.51)
L3540	Ortho shoe add full sole	\$47.36	\$49.76	(\$2.40)
L3550	O shoe add standard toe tap	\$8.26	\$8.68	(\$0.42)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L3560	O shoe add horseshoe toe tap	\$21.32	\$22.41	(\$1.09)
L3570	O shoe add instep extension	\$79.31	\$83.35	(\$4.04)
L3580	O shoe add instep velcro clo	\$60.35	\$63.42	(\$3.07)
L3590	O shoe convert to sof counte	\$49.70	\$52.23	(\$2.53)
L3595	Ortho shoe add march bar	\$39.04	\$41.02	(\$1.98)
L3600	Trans shoe calip plate exist	\$71.01	\$74.63	(\$3.62)
L3610	Trans shoe caliper plate new	\$93.48	\$98.24	(\$4.76)
L3620	Trans shoe solid stirrup exi	\$71.01	\$74.63	(\$3.62)
L3630	Trans shoe solid stirrup new	\$93.48	\$98.24	(\$4.76)
L3640	Shoe dennis browne splint bo	\$40.23	\$42.28	(\$2.05)
L3650	So 8 abd restraint pre ots	\$68.98	\$72.49	(\$3.51)
L3660	So 8 ab rstr can/web pre ots	\$106.11	\$111.50	(\$5.39)
L3670	So acro/clav can web pre ots	\$131.52	\$138.20	(\$6.68)
L3671	So cap design w/o jnts cf	\$763.06	\$801.87	(\$38.81)
L3674	So airplane w/wo joint cf	\$1,000.97	\$1,051.89	(\$50.92)
L3675	So vest canvas/web pre ots	\$148.61	\$156.17	(\$7.56)
L3702	Eo w/o joints cf	\$244.52	\$256.96	(\$12.44)
L3710	Eo elas w/metal jnts pre ots	\$120.73	\$126.88	(\$6.15)
L3720	Forearm/arm cuffs free motio	\$760.71	\$799.41	(\$38.70)
L3730	Forearm/arm cuffs ext/flex a	\$1,048.41	\$1,101.74	(\$53.33)
L3740	Cuffs adj lock w/ active con	\$1,242.98	\$1,306.21	(\$63.23)
L3760	Eo adj jt prefab custom fit	\$423.48	\$445.02	(\$21.54)
L3761	Eo, adj lock joint prefab ot	\$431.13	\$445.02	(\$13.89)
L3762	Eo rigid w/o joints pre ots	\$91.05	\$95.68	(\$4.63)
L3763	Ewho rigid w/o jnts cf	\$714.15	\$750.47	(\$36.32)
L3764	Ewho w/joint(s) cf	\$821.23	\$863.01	(\$41.78)
L3765	Ewhfo rigid w/o jnts cf	\$1,085.82	\$1,141.06	(\$55.24)
L3766	Ewhfo w/joint(s) cf	\$1,149.80	\$1,208.29	(\$58.49)
L3806	Whfo w/joint(s) custom fab	\$384.67	\$404.24	(\$19.57)
L3807	Whfo w/o joints pre cst	\$211.75	\$222.52	(\$10.77)
L3808	Whfo, rigid w/o joints	\$385.13	\$404.72	(\$19.59)
L3809	Whfo w/o joints pre ots	\$213.23	\$222.52	(\$9.29)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L3900	Hinge extension/flex wrist/f	\$1,381.87	\$1,452.16	(\$70.29)
L3901	Hinge ext/flex wrist finger	\$1,700.95	\$1,787.47	(\$86.52)
L3904	Whfo electric custom fitted	\$3,405.88	\$3,579.13	(\$173.25)
L3905	Who w/nontorsion jnt(s) cf	\$839.80	\$882.51	(\$42.71)
L3906	Who w/o joints cf	\$459.56	\$482.94	(\$23.38)
L3908	Who cock-up nonmolde pre ots	\$69.68	\$73.22	(\$3.54)
L3912	Hfo flexion glove pre ots	\$110.30	\$115.91	(\$5.61)
L3913	Hfo w/o joints cf	\$229.35	\$241.02	(\$11.67)
L3915	Who nontorsion jnts pre cst	\$450.13	\$473.03	(\$22.90)
L3916	Who nontorsion jnts pre ots	\$450.13	\$473.03	(\$22.90)
L3917	Metacarp fx orthosis pre cst	\$89.48	\$94.04	(\$4.56)
L3918	Metacarp fx orthosis pre ots	\$89.48	\$94.04	(\$4.56)
L3919	Ho w/o joints cf	\$229.35	\$241.02	(\$11.67)
L3921	Hfo w/joint(s) cf	\$272.01	\$285.84	(\$13.83)
L3923	Hfo without joints pre cst	\$75.88	\$79.73	(\$3.85)
L3924	Hfo without joints pre ots	\$75.88	\$79.73	(\$3.85)
L3925	Fo pip dip jnt/sprng pre ots	\$55.63	\$58.46	(\$2.83)
L3927	Fo pip dip no jt spr pre ots	\$29.60	\$31.11	(\$1.51)
L3929	Hfo nontorsion jnts pre cst	\$90.92	\$95.54	(\$4.62)
L3930	Hfo nontorsion jnts pre ots	\$90.92	\$95.54	(\$4.62)
L3931	Whfo nontorsion joint prefab	\$203.04	\$213.36	(\$10.32)
L3933	Fo w/o joints cf	\$180.67	\$189.85	(\$9.18)
L3935	Fo nontorsion joint cf	\$187.07	\$196.58	(\$9.51)
L3960	Sewho airplan desig abdu pos	\$854.75	\$898.23	(\$43.48)
L3961	Sewho cap design w/o jnts cf	\$1,422.75	\$1,495.12	(\$72.37)
L3962	Sewho erbs palsey design abd	\$834.47	\$876.92	(\$42.45)
L3967	Sewho airplane w/o jnts cf	\$1,679.78	\$1,765.23	(\$85.45)
L3971	Sewho cap design w/jnt(s) cf	\$1,594.52	\$1,675.63	(\$81.11)
L3973	Sewho airplane w/jnt(s) cf	\$1,679.78	\$1,765.23	(\$85.45)
L3975	Sewhfo cap design w/o jnt cf	\$1,422.75	\$1,495.12	(\$72.37)
L3976	Sewhfo airplane w/o jnts cf	\$1,422.75	\$1,495.12	(\$72.37)
L3977	Sewhfo cap desgn w/jnt(s) cf	\$1,594.52	\$1,675.63	(\$81.11)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L3978	Sewhfo airplane w/jnt(s) cf	\$1,679.78	\$1,765.23	(\$85.45)
L3980	Up ext fx orthos humeral nos	\$359.54	\$377.84	(\$18.30)
L3981	Ue fx orth shoul cap forearm	\$852.38	\$895.74	(\$43.36)
L3982	Upper ext fx orthosis rad/ul	\$434.18	\$456.26	(\$22.08)
L3984	Upper ext fx orthosis wrist	\$400.30	\$420.66	(\$20.36)
L3995	Sock fracture or equal each	\$33.24	\$34.93	(\$1.69)
L4000	Repl girdle milwaukee orth	\$1,515.43	\$1,592.51	(\$77.08)
L4010	Replace trilateral socket br	\$797.64	\$838.21	(\$40.57)
L4020	Replace quadlat socket brim	\$1,023.71	\$1,075.78	(\$52.07)
L4030	Replace socket brim cust fit	\$600.07	\$630.59	(\$30.52)
L4040	Replace molded thigh lacer	\$485.15	\$509.83	(\$24.68)
L4045	Replace non-molded thigh lac	\$389.88	\$409.71	(\$19.83)
L4050	Replace molded calf lacer	\$490.68	\$515.63	(\$24.95)
L4055	Replace non-molded calf lace	\$317.73	\$333.89	(\$16.16)
L4060	Replace high roll cuff	\$377.72	\$396.93	(\$19.21)
L4070	Replace prox & dist upright	\$334.48	\$351.49	(\$17.01)
L4080	Repl met band kafo-afo prox	\$103.02	\$108.26	(\$5.24)
L4090	Repl met band kafo-afo calf/	\$98.10	\$103.10	(\$5.00)
L4100	Repl leath cuff kafo prox th	\$123.97	\$130.28	(\$6.31)
L4110	Repl leath cuff kafo-afo cal	\$100.79	\$105.92	(\$5.13)
L4130	Replace pretibial shell	\$589.67	\$619.66	(\$29.99)
L4350	Ankle control ortho pre ots	\$106.24	\$111.65	(\$5.41)
L4360	Pneumat walking boot pre cst	\$287.96	\$302.61	(\$14.65)
L4361	Pneuma/vac walk boot pre ots	\$287.96	\$302.61	(\$14.65)
L4370	Pneum full leg splnt pre ots	\$168.28	\$176.84	(\$8.56)
L4386	Non-pneum walk boot pre cst	\$147.53	\$155.02	(\$7.49)
L4387	Non-pneum walk boot pre ots	\$147.53	\$155.02	(\$7.49)
L4392	Replace afo soft interface	\$21.53	\$22.62	(\$1.09)
L4394	Replace foot drop spint	\$15.69	\$16.49	(\$0.80)
L4396	Static or dynami afo pre cst	\$153.53	\$161.33	(\$7.80)
L4397	Static or dynami afo pre ots	\$153.53	\$161.33	(\$7.80)
L4398	Foot drop splint pre ots	\$70.69	\$74.28	(\$3.59)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L4631	Afo, walk boot type, cus fab	\$1,751.24	\$1,840.32	(\$89.08)
L5000	Sho insert w arch toe filler	\$570.72	\$599.75	(\$29.03)
L5010	Mold socket ank hgt w/ toe f	\$1,281.28	\$1,346.45	(\$65.17)
L5020	Tibial tubercle hgt w/ toe f	\$2,509.35	\$2,636.99	(\$127.64)
L5050	Ank symes mold sckt sach ft	\$2,528.64	\$2,657.26	(\$128.62)
L5060	Symes met fr leath socket ar	\$3,497.34	\$3,675.24	(\$177.90)
L5100	Molded socket shin sach foot	\$2,553.17	\$2,683.03	(\$129.86)
L5105	Plast socket jts/thgh lacer	\$4,398.83	\$4,622.58	(\$223.75)
L5150	Mold sckt ext knee shin sach	\$4,446.61	\$4,672.79	(\$226.18)
L5160	Mold socket bent knee shin s	\$4,836.49	\$5,082.50	(\$246.01)
L5200	Kne sing axis fric shin sach	\$3,811.18	\$4,005.04	(\$193.86)
L5210	No knee/ankle joints w/ ft b	\$2,811.96	\$2,954.99	(\$143.03)
L5220	No knee joint with artic ali	\$3,492.58	\$3,670.24	(\$177.66)
L5230	Fem focal defic constant fri	\$4,816.96	\$5,061.98	(\$245.02)
L5250	Hip canad sing axi cons fric	\$6,569.90	\$6,904.09	(\$334.19)
L5270	Tilt table locking hip sing	\$6,512.34	\$6,843.60	(\$331.26)
L5280	Hemipelvect canad sing axis	\$6,447.23	\$6,775.17	(\$327.94)
L5301	Bk mold socket sach ft endo	\$2,894.87	\$3,042.12	(\$147.25)
L5312	Knee disart, sach ft, endo	\$3,742.05	\$3,932.39	(\$190.34)
L5321	Ak open end sach	\$4,161.72	\$4,373.42	(\$211.70)
L5331	Hip disart canadian sach ft	\$5,530.60	\$5,811.91	(\$281.31)
L5341	Hemipelvectomy canadian sach	\$6,399.48	\$6,724.99	(\$325.51)
L5400	Postop dress & 1 cast chg bk	\$1,506.94	\$1,583.60	(\$76.66)
L5410	Postop dsq bk ea add cast ch	\$396.79	\$416.97	(\$20.18)
L5420	Postop dsq & 1 cast chg ak/d	\$1,924.69	\$2,022.59	(\$97.90)
L5430	Postop dsq ak ea add cast ch	\$536.43	\$563.72	(\$27.29)
L5450	Postop app non-wgt bear dsq	\$386.90	\$406.58	(\$19.68)
L5460	Postop app non-wgt bear dsq	\$517.84	\$544.18	(\$26.34)
L5500	Init bk ptb plaster direct	\$1,619.58	\$1,701.96	(\$82.38)
L5505	Init ak ischal plstr direct	\$2,202.37	\$2,314.40	(\$112.03)
L5510	Prep bk ptb plaster molded	\$1,670.67	\$1,755.65	(\$84.98)
L5520	Perp bk ptb thermopls direct	\$1,819.79	\$1,912.36	(\$92.57)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L5530	Prep bk ptb thermopls molded	\$2,187.08	\$2,298.33	(\$111.25)
L5535	Prep bk ptb open end socket	\$2,147.28	\$2,256.51	(\$109.23)
L5540	Prep bk ptb laminated socket	\$2,290.32	\$2,406.82	(\$116.50)
L5560	Prep ak ischial plast molded	\$2,232.55	\$2,346.12	(\$113.57)
L5570	Prep ak ischial direct form	\$2,447.65	\$2,572.14	(\$124.49)
L5580	Prep ak ischial thermo mold	\$2,970.80	\$3,121.92	(\$151.12)
L5585	Prep ak ischial open end	\$2,631.00	\$2,764.83	(\$133.83)
L5590	Prep ak ischial laminated	\$3,043.93	\$3,198.77	(\$154.84)
L5595	Hip disartic sach thermopls	\$5,098.47	\$5,357.81	(\$259.34)
L5600	Hip disartic sach laminat mold	\$5,630.25	\$5,916.64	(\$286.39)
L5610	Above knee hydracadence	\$2,327.16	\$2,445.53	(\$118.37)
L5611	Ak 4 bar link w/fric swing	\$1,882.04	\$1,977.77	(\$95.73)
L5613	Ak 4 bar ling w/hydraul swig	\$3,103.14	\$3,260.99	(\$157.85)
L5614	4-bar link above knee w/swng	\$1,573.20	\$1,653.23	(\$80.03)
L5616	Ak univ multiplex sys frict	\$1,340.21	\$1,408.38	(\$68.17)
L5617	Ak/bk self-aligning unit ea	\$521.62	\$548.15	(\$26.53)
L5618	Test socket symes	\$274.23	\$288.18	(\$13.95)
L5620	Test socket below knee	\$277.77	\$291.89	(\$14.12)
L5622	Test socket knee disarticula	\$360.01	\$378.32	(\$18.31)
L5624	Test socket above knee	\$394.87	\$414.95	(\$20.08)
L5626	Test socket hip disarticulat	\$518.75	\$545.14	(\$26.39)
L5628	Test socket hemipelvectomy	\$459.07	\$482.42	(\$23.35)
L5629	Below knee acrylic socket	\$301.80	\$317.16	(\$15.36)
L5630	Syme typ expandabl wall sckt	\$523.24	\$549.85	(\$26.61)
L5631	Ak/knee disartic acrylic soc	\$417.27	\$438.49	(\$21.22)
L5632	Symes type ptb brim design s	\$224.42	\$235.84	(\$11.42)
L5634	Symes type poster opening so	\$385.17	\$404.76	(\$19.59)
L5636	Symes type medial opening so	\$241.98	\$254.28	(\$12.30)
L5637	Below knee total contact	\$364.36	\$382.90	(\$18.54)
L5638	Below knee leather socket	\$616.23	\$647.57	(\$31.34)
L5639	Below knee wood socket	\$1,419.67	\$1,491.88	(\$72.21)
L5640	Knee disarticulat leather so	\$736.83	\$774.31	(\$37.48)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L5642	Above knee leather socket	\$588.38	\$618.31	(\$29.93)
L5643	Hip flex inner socket ext fr	\$1,478.11	\$1,553.30	(\$75.19)
L5644	Above knee wood socket	\$560.92	\$589.45	(\$28.53)
L5645	Bk flex inner socket ext fra	\$857.74	\$901.36	(\$43.62)
L5646	Below knee cushion socket	\$520.33	\$546.80	(\$26.47)
L5647	Below knee suction socket	\$1,007.23	\$1,058.47	(\$51.24)
L5648	Above knee cushion socket	\$625.24	\$657.05	(\$31.81)
L5649	Isch containmt/narrow m-l so	\$1,819.88	\$1,912.45	(\$92.57)
L5650	Tot contact ak/knee disart s	\$618.16	\$649.60	(\$31.44)
L5651	Ak flex inner socket ext fra	\$1,140.48	\$1,198.49	(\$58.01)
L5652	Suction susp ak/knee disart	\$414.04	\$435.10	(\$21.06)
L5653	Knee disart expand wall sock	\$618.70	\$650.17	(\$31.47)
L5654	Socket insert symes	\$386.95	\$406.64	(\$19.69)
L5655	Socket insert below knee	\$335.86	\$352.94	(\$17.08)
L5656	Socket insert knee articulat	\$469.70	\$493.60	(\$23.90)
L5658	Socket insert above knee	\$357.47	\$375.65	(\$18.18)
L5661	Multi-durometer symes	\$714.33	\$750.67	(\$36.34)
L5665	Multi-durometer below knee	\$648.34	\$681.32	(\$32.98)
L5666	Below knee cuff suspension	\$88.64	\$93.14	(\$4.50)
L5668	Bk molded distal cushion	\$127.87	\$134.37	(\$6.50)
L5670	Bk molded supracondylar susp	\$343.59	\$361.07	(\$17.48)
L5671	Bk/ak locking mechanism	\$629.83	\$661.88	(\$32.05)
L5672	Bk removable medial brim sus	\$299.34	\$314.58	(\$15.24)
L5673	Socket insert w lock mech	\$744.15	\$782.00	(\$37.85)
L5676	Bk knee joints single axis p	\$458.84	\$482.19	(\$23.35)
L5677	Bk knee joints polycentric p	\$624.32	\$656.08	(\$31.76)
L5678	Bk joint covers pair	\$50.27	\$52.83	(\$2.56)
L5679	Socket insert w/o lock mech	\$620.12	\$651.66	(\$31.54)
L5680	Bk thigh lacer non-molded	\$302.85	\$318.25	(\$15.40)
L5681	Intl custm cong/latyp insert	\$1,226.33	\$1,288.70	(\$62.37)
L5682	Bk thigh lacer glut/ischia m	\$791.88	\$832.16	(\$40.28)
L5683	Initial custom socket insert	\$1,226.33	\$1,288.70	(\$62.37)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L5684	Bk fork strap	\$60.94	\$64.04	(\$3.10)
L5685	Below knee sus/seal sleeve	\$119.41	\$125.49	(\$6.08)
L5686	Bk back check	\$58.95	\$61.94	(\$2.99)
L5688	Bk waist belt webbing	\$77.35	\$81.28	(\$3.93)
L5690	Bk waist belt padded and lin	\$123.91	\$130.21	(\$6.30)
L5692	Ak pelvic control belt light	\$168.26	\$176.81	(\$8.55)
L5694	Ak pelvic control belt pad/l	\$229.71	\$241.40	(\$11.69)
L5695	Ak sleeve susp neoprene/equa	\$206.50	\$217.00	(\$10.50)
L5696	Ak/knee disartic pelvic join	\$234.28	\$246.19	(\$11.91)
L5697	Ak/knee disartic pelvic band	\$101.65	\$106.82	(\$5.17)
L5698	Ak/knee disartic silesian ba	\$130.29	\$136.91	(\$6.62)
L5699	Shoulder harness	\$236.10	\$248.10	(\$12.00)
L5700	Replace socket below knee	\$3,467.63	\$3,644.02	(\$176.39)
L5701	Replace socket above knee	\$4,305.35	\$4,524.35	(\$219.00)
L5702	Replace socket hip	\$5,501.33	\$5,781.16	(\$279.83)
L5703	Symes ankle w/o (sach) foot	\$2,286.05	\$2,402.33	(\$116.28)
L5704	Custom shape cover bk	\$579.11	\$608.56	(\$29.45)
L5705	Custom shape cover ak	\$950.73	\$999.09	(\$48.36)
L5706	Custom shape cvr knee disart	\$942.30	\$990.23	(\$47.93)
L5707	Custom shape cvr hip disart	\$1,339.52	\$1,407.67	(\$68.15)
L5710	Knee-shin exo sng axi mnl loc	\$455.41	\$478.58	(\$23.17)
L5711	Knee-shin exo mnl lock ultra	\$661.18	\$694.81	(\$33.63)
L5712	Knee-shin exo frict swg & st	\$545.61	\$573.37	(\$27.76)
L5714	Knee-shin exo variable frict	\$474.20	\$498.31	(\$24.11)
L5716	Knee-shin exo mech stance ph	\$922.87	\$969.82	(\$46.95)
L5718	Knee-shin exo frct swg & sta	\$1,153.50	\$1,212.18	(\$58.68)
L5722	Knee-shin pneum swg frct exo	\$1,030.43	\$1,082.84	(\$52.41)
L5724	Knee-shin exo fluid swing ph	\$1,831.53	\$1,924.70	(\$93.17)
L5726	Knee-shin ext jnts fld swg e	\$1,872.99	\$1,968.27	(\$95.28)
L5728	Knee-shin fluid swg & stance	\$3,012.99	\$3,166.25	(\$153.26)
L5780	Knee-shin pneum/hydra pneum	\$1,449.72	\$1,523.46	(\$73.74)
L5781	Lower limb pros vacuum pump	\$3,730.25	\$3,920.00	(\$189.75)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L5785	Exoskeletal bk ultralt mater	\$521.65	\$548.18	(\$26.53)
L5790	Exoskeletal ak ultra-light m	\$839.89	\$882.61	(\$42.72)
L5795	Exoskel hip ultra-light mate	\$1,059.79	\$1,113.70	(\$53.91)
L5810	Endoskel knee-shin mnl lock	\$616.48	\$647.84	(\$31.36)
L5811	Endo knee-shin mnl lck ultra	\$923.48	\$970.45	(\$46.97)
L5812	Endo knee-shin frct swg & st	\$715.80	\$752.21	(\$36.41)
L5814	Endo knee-shin hydral swg ph	\$3,462.42	\$3,638.54	(\$176.12)
L5816	Endo knee-shin polyc mch sta	\$1,076.86	\$1,131.64	(\$54.78)
L5818	Endo knee-shin frct swg & st	\$1,215.99	\$1,277.84	(\$61.85)
L5822	Endo knee-shin pneum swg frc	\$1,617.20	\$1,699.46	(\$82.26)
L5824	Endo knee-shin fluid swing p	\$1,941.85	\$2,040.61	(\$98.76)
L5826	Miniature knee joint	\$2,911.46	\$3,059.55	(\$148.09)
L5828	Endo knee-shin fluid swg/sta	\$3,473.95	\$3,650.66	(\$176.71)
L5830	Endo knee-shin pneum/swg pha	\$2,402.72	\$2,524.93	(\$122.21)
L5840	Multi-axial knee/shin system	\$3,833.05	\$4,028.02	(\$194.97)
L5845	Knee-shin sys stance flexion	\$1,671.01	\$1,756.01	(\$85.00)
L5848	Knee-shin sys hydraul stance	\$1,002.52	\$1,053.51	(\$50.99)
L5850	Endo ak/hip knee extens assi	\$121.49	\$127.67	(\$6.18)
L5855	Mech hip extension assist	\$391.05	\$410.94	(\$19.89)
L5856	Elec knee-shin swing/stance	\$22,380.48	\$23,518.89	(\$1,138.41)
L5857	Elec knee-shin swing only	\$7,941.46	\$8,345.42	(\$403.96)
L5910	Endo below knee alignable sy	\$343.95	\$361.44	(\$17.49)
L5920	Endo ak/hip alignable system	\$503.89	\$529.52	(\$25.63)
L5925	Above knee manual lock	\$414.19	\$435.26	(\$21.07)
L5930	High activity knee frame	\$3,138.02	\$3,297.64	(\$159.62)
L5940	Endo bk ultra-light material	\$506.29	\$532.05	(\$25.76)
L5950	Endo ak ultra-light material	\$738.86	\$776.44	(\$37.58)
L5960	Endo hip ultra-light materia	\$915.52	\$962.09	(\$46.57)
L5962	Below knee flex cover system	\$744.28	\$782.14	(\$37.86)
L5964	Above knee flex cover system	\$1,071.45	\$1,125.95	(\$54.50)
L5966	Hip flexible cover system	\$1,389.08	\$1,459.74	(\$70.66)
L5968	Multiaxial ankle w dorsiflex	\$3,387.88	\$3,560.22	(\$172.34)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L5970	Foot external keel sach foot	\$242.65	\$254.99	(\$12.34)
L5971	Sach foot, replacement	\$242.65	\$254.99	(\$12.34)
L5972	Flexible keel foot	\$446.26	\$468.96	(\$22.70)
L5974	Foot single axis ankle/foot	\$295.07	\$310.08	(\$15.01)
L5975	Combo ankle/foot prosthesis	\$432.19	\$454.18	(\$21.99)
L5976	Energy storing foot	\$709.12	\$745.19	(\$36.07)
L5978	Ft prosth multiaxial ankl/ft	\$369.52	\$388.32	(\$18.80)
L5979	Multi-axial ankle/ft prosth	\$2,862.55	\$3,008.16	(\$145.61)
L5980	Flex foot system	\$4,007.92	\$4,211.80	(\$203.88)
L5981	Flex-walk sys low ext prosth	\$3,110.78	\$3,269.02	(\$158.24)
L5982	Exoskeletal axial rotation u	\$732.02	\$769.26	(\$37.24)
L5984	Endoskeletal axial rotation	\$721.34	\$758.03	(\$36.69)
L5985	Lwr ext dynamic prosth pylon	\$263.28	\$276.67	(\$13.39)
L5986	Multi-axial rotation unit	\$802.39	\$843.21	(\$40.82)
L5987	Shank ft w vert load pylon	\$6,706.67	\$7,047.81	(\$341.14)
L5988	Vertical shock reducing pylo	\$1,862.45	\$1,957.19	(\$94.74)
L5990	User adjustable heel height	\$1,691.39	\$1,777.43	(\$86.04)
L6000	Part hand thumb rem	\$1,682.43	\$1,768.01	(\$85.58)
L6010	Part hand little/ring	\$1,872.27	\$1,967.50	(\$95.23)
L6020	Part hand no fingers	\$1,745.59	\$1,834.38	(\$88.79)
L6026	Part hand myo exclu term dev	\$4,401.24	\$4,625.11	(\$223.87)
L6050	Wrst mld sck flx hng tri pad	\$2,397.74	\$2,519.69	(\$121.95)
L6055	Wrst mold sock w/exp interfa	\$3,075.00	\$3,231.41	(\$156.41)
L6100	Elb mold sock flex hinge pad	\$1,995.35	\$2,096.84	(\$101.49)
L6110	Elbow mold sock suspension t	\$2,584.09	\$2,715.53	(\$131.44)
L6120	Elbow mold doub splt soc ste	\$2,934.19	\$3,083.44	(\$149.25)
L6130	Elbow stump activated lock h	\$3,277.91	\$3,444.65	(\$166.74)
L6200	Elbow mold outsid lock hinge	\$3,454.39	\$3,630.09	(\$175.70)
L6205	Elbow molded w/ expand inter	\$4,216.78	\$4,431.28	(\$214.50)
L6250	Elbow inter loc elbow forarm	\$3,400.27	\$3,573.22	(\$172.95)
L6300	Shlder disart int lock elbow	\$4,717.50	\$4,957.46	(\$239.96)
L6310	Shoulder passive restor comp	\$3,842.51	\$4,037.96	(\$195.45)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L6320	Shoulder passive restor cap	\$2,163.90	\$2,273.97	(\$110.07)
L6350	Thoracic intern lock elbow	\$4,922.34	\$5,172.72	(\$250.38)
L6360	Thoracic passive restor comp	\$4,033.17	\$4,238.32	(\$205.15)
L6370	Thoracic passive restor cap	\$2,571.82	\$2,702.63	(\$130.81)
L6380	Postop dsg cast chg wrst/elb	\$1,228.44	\$1,290.92	(\$62.48)
L6382	Postop dsg cast chg elb dis/	\$1,545.39	\$1,624.01	(\$78.62)
L6384	Postop dsg cast chg shlder/t	\$2,003.93	\$2,105.86	(\$101.93)
L6386	Postop ea cast chg & realign	\$508.50	\$534.37	(\$25.87)
L6388	Postop applicat rigid dsg on	\$519.16	\$545.57	(\$26.41)
L6400	Below elbow prosth tiss shap	\$2,938.16	\$3,087.61	(\$149.45)
L6450	Elb disart prosth tiss shap	\$3,581.48	\$3,763.65	(\$182.17)
L6500	Above elbow prosth tiss shap	\$3,255.88	\$3,421.50	(\$165.62)
L6550	Shldr disar prosth tiss shap	\$4,828.45	\$5,074.06	(\$245.61)
L6570	Scap thorac prosth tiss shap	\$5,542.13	\$5,824.04	(\$281.91)
L6580	Wrist/elbow bowden cable mol	\$1,697.19	\$1,783.52	(\$86.33)
L6582	Wrist/elbow bowden cbl dir f	\$1,307.04	\$1,373.53	(\$66.49)
L6584	Elbow fair lead cable molded	\$2,121.97	\$2,229.91	(\$107.94)
L6586	Elbow fair lead cable dir fo	\$1,805.04	\$1,896.86	(\$91.82)
L6588	Shdr fair lead cable molded	\$3,070.89	\$3,227.10	(\$156.21)
L6590	Shdr fair lead cable direct	\$2,698.00	\$2,835.25	(\$137.25)
L6600	Polycentric hinge pair	\$237.51	\$249.59	(\$12.08)
L6605	Single pivot hinge pair	\$234.52	\$246.45	(\$11.93)
L6610	Flexible metal hinge pair	\$210.81	\$221.54	(\$10.73)
L6615	Disconnect locking wrist uni	\$173.98	\$182.83	(\$8.85)
L6616	Disconnect insert locking wr	\$61.60	\$64.73	(\$3.13)
L6620	Flexion/extension wrist unit	\$362.90	\$381.36	(\$18.46)
L6621	Flex/ext wrist w/wo friction	\$2,132.44	\$2,240.91	(\$108.47)
L6623	Spring-ass rot wrst w/ latch	\$609.18	\$640.17	(\$30.99)
L6624	Flex/ext/rotation wrist unit	\$3,511.12	\$3,689.72	(\$178.60)
L6625	Rotation wrst w/ cable lock	\$673.44	\$707.70	(\$34.26)
L6628	Quick disconn hook adapter o	\$454.94	\$478.08	(\$23.14)
L6629	Lamination collar w/ couplin	\$166.29	\$174.74	(\$8.45)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L6630	Stainless steel any wrist	\$204.67	\$215.08	(\$10.41)
L6632	Latex suspension sleeve each	\$61.70	\$64.84	(\$3.14)
L6635	Lift assist for elbow	\$223.02	\$234.37	(\$11.35)
L6637	Nudge control elbow lock	\$407.22	\$427.94	(\$20.72)
L6638	Elec lock on manual pw elbow	\$2,331.42	\$2,450.01	(\$118.59)
L6640	Shoulder abduction joint pai	\$266.01	\$279.54	(\$13.53)
L6641	Excursion amplifier pulley t	\$190.78	\$200.49	(\$9.71)
L6642	Excursion amplifier lever ty	\$247.42	\$260.00	(\$12.58)
L6645	Shoulder flexion-abduction j	\$404.22	\$424.78	(\$20.56)
L6646	Multipo locking shoulder jnt	\$2,940.45	\$3,090.01	(\$149.56)
L6647	Shoulder lock actuator	\$484.07	\$508.69	(\$24.62)
L6648	Ext pwrd shlder lock/unlock	\$3,032.65	\$3,186.91	(\$154.26)
L6650	Shoulder universal joint	\$428.60	\$450.40	(\$21.80)
L6655	Standard control cable extra	\$95.12	\$99.96	(\$4.84)
L6660	Heavy duty control cable	\$116.22	\$122.14	(\$5.92)
L6665	Teflon or equal cable lining	\$47.10	\$49.49	(\$2.39)
L6670	Hook to hand cable adapter	\$60.73	\$63.81	(\$3.08)
L6672	Harness chest/shlder saddle	\$213.51	\$224.37	(\$10.86)
L6675	Harness figure of 8 sing con	\$144.97	\$152.34	(\$7.37)
L6676	Harness figure of 8 dual con	\$153.56	\$161.38	(\$7.82)
L6677	Ue triple control harness	\$276.56	\$290.63	(\$14.07)
L6680	Test sock wrist disart/bel e	\$293.77	\$308.71	(\$14.94)
L6682	Test sock elbw disart/above	\$292.52	\$307.40	(\$14.88)
L6684	Test socket shldr disart/tho	\$441.37	\$463.82	(\$22.45)
L6686	Suction socket	\$747.54	\$785.56	(\$38.02)
L6687	Frame typ socket bel elbow/w	\$554.05	\$582.23	(\$28.18)
L6688	Frame typ sock above elb/dis	\$600.20	\$630.73	(\$30.53)
L6689	Frame typ socket shoulder di	\$684.43	\$719.25	(\$34.82)
L6690	Frame typ sock interscap-tho	\$792.85	\$833.18	(\$40.33)
L6691	Removable insert each	\$436.25	\$458.43	(\$22.18)
L6692	Silicone gel insert or equal	\$708.11	\$744.13	(\$36.02)
L6693	Lockingelbow forearm cntrbal	\$2,646.78	\$2,781.42	(\$134.64)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L6694	Elbow socket ins use w/lock	\$744.15	\$782.00	(\$37.85)
L6695	Elbow socket ins use w/o lck	\$620.12	\$651.66	(\$31.54)
L6696	Cus elbo skt in for con/atyp	\$1,226.33	\$1,288.70	(\$62.37)
L6697	Cus elbo skt in not con/atyp	\$1,226.33	\$1,288.70	(\$62.37)
L6698	Below/above elbow lock mech	\$629.83	\$661.88	(\$32.05)
L6703	Term dev, passive hand mitt	\$341.31	\$358.67	(\$17.36)
L6704	Term dev, sport/rec/work att	\$741.55	\$779.27	(\$37.72)
L6706	Term dev mech hook vol open	\$409.85	\$430.70	(\$20.85)
L6707	Term dev mech hook vol close	\$1,564.97	\$1,644.57	(\$79.60)
L6708	Term dev mech hand vol open	\$1,059.16	\$1,113.04	(\$53.88)
L6709	Term dev mech hand vol close	\$1,534.08	\$1,612.12	(\$78.04)
L6711	Ped term dev, hook, vol open	\$626.79	\$658.68	(\$31.89)
L6712	Ped term dev, hook, vol clos	\$1,154.04	\$1,212.74	(\$58.70)
L6713	Ped term dev, hand, vol open	\$1,456.54	\$1,530.63	(\$74.09)
L6714	Ped term dev, hand, vol clos	\$1,233.68	\$1,296.44	(\$62.76)
L6721	Hook/hand, hvy dty, vol open	\$2,192.71	\$2,304.24	(\$111.53)
L6722	Hook/hand, hvy dty, vol clos	\$1,890.29	\$1,986.44	(\$96.15)
L6805	Term dev modifier wrist unit	\$402.13	\$422.58	(\$20.45)
L6810	Term dev precision pinch dev	\$206.71	\$217.23	(\$10.52)
L6881	Term dev auto grasp feature	\$3,811.44	\$4,005.32	(\$193.88)
L6882	Microprocessor control uplmb	\$2,891.15	\$3,038.22	(\$147.07)
L6883	Replc sockt below e/w disa	\$1,632.49	\$1,715.53	(\$83.04)
L6884	Replc sockt above elbow disa	\$2,826.88	\$2,970.67	(\$143.79)
L6885	Replc sockt shldr dis/interc	\$4,033.17	\$4,238.32	(\$205.15)
L6890	Prefab glove for term device	\$215.37	\$226.32	(\$10.95)
L6895	Custom glove for term device	\$530.29	\$557.26	(\$26.97)
L6900	Hand restorat thumb/1 finger	\$1,905.15	\$2,002.06	(\$96.91)
L6905	Hand restoration multiple fi	\$1,859.10	\$1,953.66	(\$94.56)
L6910	Hand restoration no fingers	\$1,811.14	\$1,903.26	(\$92.12)
L6915	Hand restoration replacmnt g	\$766.77	\$805.77	(\$39.00)
L7259	Electronic wrist rotator any	\$3,831.46	\$4,026.35	(\$194.89)
L7360	Six volt bat otto bock/eq ea	\$230.69	\$242.42	(\$11.73)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L7362	Battery chrgr six volt otto	\$245.17	\$257.65	(\$12.48)
L7364	Twelve volt battery utah/equ	\$451.08	\$474.03	(\$22.95)
L7366	Battery chrgr 12 volt utah/e	\$582.81	\$612.46	(\$29.65)
L7367	Replacemnt lithium ionbatter	\$362.97	\$381.43	(\$18.46)
L7368	Lithium ion battery charger	\$470.52	\$494.45	(\$23.93)
L7400	Add ue prost be/wd, ultlite	\$285.74	\$300.28	(\$14.54)
L7401	Add ue prost a/e ultlite mat	\$319.89	\$336.16	(\$16.27)
L7402	Add ue prost s/d ultlite mat	\$345.45	\$363.03	(\$17.58)
L7403	Add ue prost b/e acrylic	\$289.93	\$360.78	(\$70.85)
L7404	Add ue prost a/e acrylic	\$518.19	\$544.55	(\$26.36)
L7405	Add ue prost s/d acrylic	\$677.72	\$712.19	(\$34.47)
L7700	Pros soc insert gasket/seal	\$118.90	\$122.72	(\$3.82)
L8000	Mastectomy bra	\$46.23	\$48.58	(\$2.35)
L8001	Breast prosthesis bra & form	\$116.94	\$122.90	(\$5.96)
L8002	Brst prsth bra & bilat form	\$153.80	\$161.62	(\$7.82)
L8015	Ext breastprosthesis garment	\$55.89	\$58.73	(\$2.84)
L8020	Mastectomy form	\$198.51	\$208.61	(\$10.10)
L8030	Breast prosthesis w/o adhesive	\$362.69	\$381.14	(\$18.45)
L8035	Custom breast prosthesis	\$3,415.59	\$3,589.33	(\$173.74)
L8300	Truss single w/ standard pad	\$106.81	\$112.25	(\$5.44)
L8310	Truss double w/ standard pad	\$168.64	\$177.22	(\$8.58)
L8320	Truss addition to std pad wa	\$67.69	\$71.13	(\$3.44)
L8330	Truss add to std pad scrotal	\$62.51	\$65.69	(\$3.18)
L8400	Sheath below knee	\$19.93	\$20.94	(\$1.01)
L8410	Sheath above knee	\$25.72	\$27.02	(\$1.30)
L8415	Sheath upper limb	\$22.75	\$23.90	(\$1.15)
L8417	Pros sheath/sock w gel cushn	\$70.11	\$73.68	(\$3.57)
L8420	Prosthetic sock multi ply bk	\$24.62	\$25.88	(\$1.26)
L8430	Prosthetic sock multi ply ak	\$26.43	\$27.78	(\$1.35)
L8435	Pros sock multi ply upper lm	\$24.53	\$25.77	(\$1.24)
L8440	Shrinker below knee	\$52.96	\$55.65	(\$2.69)
L8460	Shrinker above knee	\$84.39	\$88.69	(\$4.30)

Division of Health Care Financing & Policy
SB278 Section 16 from the 2011 Legislative Session
Durable Medical Equipment (DME) Rate Comparison 2020

Please note that this analysis does not reflect the 6% reduction to Medicaid fee-for-service reimbursement rates as approved in AB 3 of the 31st (2020) Special Session of the Nevada Legislature as the State Plan Amendments (SPAs) to implement the rate cuts are pending approval by the Centers for Medicare and Medicaid Services (CMS).

Procedure Code	Description	Nevada Medicaid Rates	2020 Medicare DMEPOS Rates	Medicaid vs Medicare DMEPOS
L8465	Shrinker upper limb	\$46.32	\$48.68	(\$2.36)
L8470	Pros sock single ply bk	\$8.45	\$8.88	(\$0.43)
L8480	Pros sock single ply ak	\$10.09	\$10.60	(\$0.51)
L8485	Pros sock single ply upper l	\$13.66	\$14.36	(\$0.70)
L8501	Tracheostomy speaking valve	\$114.72	\$120.56	(\$5.84)
L8615	Coch implant headset replace	\$420.48	\$441.87	(\$21.39)
L8616	Coch implant microphone repl	\$97.94	\$102.92	(\$4.98)
L8617	Coch implant trans coil repl	\$85.54	\$89.89	(\$4.35)
L8618	Coch implant tran cable repl	\$24.45	\$25.69	(\$1.24)
L8619	Coch imp ext proc/contr rplc	\$8,041.92	\$8,450.98	(\$409.06)
L8621	Repl zinc air battery	\$0.58	\$0.61	(\$0.03)
L8622	Repl alkaline battery	\$0.30	\$0.31	(\$0.01)
L8623	Lith ion batt cid,non-earlvl	\$60.30	\$63.37	(\$3.07)
L8624	Lith ion batt cid, ear level	\$150.35	\$158.00	(\$7.65)
L8627	Cid ext speech process repl	\$6,830.88	\$7,178.35	(\$347.47)
L8628	Cid ext controller repl	\$1,211.02	\$1,272.62	(\$61.60)
L8629	Cid transmit coil and cable	\$166.93	\$175.42	(\$8.49)
L8693	Aud osseo dev, abutment	\$1,413.66	\$1,485.57	(\$71.91)

Footnote:

Payments for DME will be calculated using the 2016 Nevada-specific non-rural fee schedule issued by the Centers for Medicare and Medicaid Services (CMS). Currently, reimbursement will be set at 100% of the Nevada-specific rates.

If there is no fee schedule available (\$0 rate), reimbursement will be the lowest of: a) manufacturer's suggested retail price (MSRP) less 25%, verifiable with quote or manufacturer's invoice that clearly identifies MSRP; b) if there is no MSRP, reimbursement will be acquisition cost plus 20%, verifiable with manufacturer's invoice; or c) the actual charge submitted by the provider.