

CHAPTER 55

PROSTHETIC AND ORTHOTIC SERVICES

Authority

N.J.S.A. 30:4D-6b(6), 7, 7a, b, c; 30:4D-12.

Source and Effective Date

R.1995 d.185, effective April 3, 1995.
See: 26 N.J.R. 4979(a), 27 N.J.R. 1446(a).

Executive Order No. 66(1978) Expiration Date

Chapter 55, Prosthetic and Orthotic Services, expires on April 3, 2000.

Chapter Historical Note

Chapter 55, Prosthetic and Orthotic Services Manual, was filed and became effective June 1, 1971 as R.1971 d.43 with Subchapters 1 through 3. See: 3 N.J.R. 43(d), 3 N.J.R. 63(b). Chapter 55 was readopted as R.1990 d.194. See: 22 N.J.R. 4(b), 22 N.J.R. 1140(a). Pursuant to Executive Order No. 66(1978), Subchapter 1 was readopted as R.1985 d.152. See: 17 N.J.R. 26(a), 17 N.J.R. 817(a). Old Subchapter 3 was deleted and new Subchapter 3, HCFA Common Procedure Coding System (HCPCS), was adopted as R.1986 d.52. See: 17 N.J.R. 1519(b), 18 N.J.R. 478(a).

Pursuant to Executive Order No. 66(1978), Chapter 55 expired on March 8, 1995 and subsequently was adopted as new rules by R.1995 d. 185. See: Source and Effective Date. See, also, section annotations.

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APPENDIX A

SUBCHAPTER 1. GENERAL PROVISIONS

10:55-1.1 Introduction

(a) This chapter of the manual N.J.A.C. 10:55 outlines the rules of the New Jersey Medicaid program relevant to the provision of prosthetic and orthotic services to Medicaid recipients. It also lists the specific requirements which must be followed in order to be approved and to participate as a New Jersey Medicaid provider of prosthetic and orthotic services.

(b) The Prosthetic and Orthotic Services Manual N.J.A.C. 10:55 does not include rules for the provision to Medicaid recipients of dentures, artificial eyes, or hearing aids. These services are covered in the New Jersey Medicaid program's Dental Services Manual N.J.A.C. 10:56, Vision Care Services Manual N.J.A.C. 10:62, and the Hearing Aid Services Manual N.J.A.C. 10:64, respectively.

Case Notes

In re Horst Oertel, 167 N.J.Super. 557, 558, n. 1 (App.Div.1979). "Orthotic appliances" defined.

10:55-1.2 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

"Accredited" means those facilities that have met the standards of qualification as established by the American Board of Certification in Orthotics and Prosthetics, Incorporated, 1650 King Street, Suite 500, Alexandria, VA 22314-2747.

"Certified" means those individuals that have met the standards of qualification and the requirements as established by the American Board of Certification in Orthotics and Prosthetics, Incorporated (see address above).

"Custom-made" means a device or appliance fabricated (constructed and/or assembled) in an approved facility (see N.J.A.C. 10:55-1.3) and designed to fit and perform a useful function solely for that individual for whom it was ordered.

"Facility" means the work area of operation of the prosthetist, orthotist or pedorthist.

"Orthotic appliances" means a device or brace prescribed by a physician or other practitioner, within the scope of his or her practice as defined by State law, for the purpose of providing support, increased function, and overcoming physical impairment or defects.

1. A brace includes rigid and semi-rigid devices used for the purpose of supporting a weak or deformed body member or restricting or eliminating motion in a diseased or injured part of the body.

“Orthotist” means one certified by the American Board of Certification in Orthotics and Prosthetics, Incorporated in the profession of measuring, designing, fabricating and fitting of orthotic devices.

“Pedorthist” means one certified by the American Board of Certification in Orthotics and Prosthetics, Incorporated in the profession of designing, manufacturing, fitting and modification of footwear and related appliances.

“Practitioner” means a physician or other medical care individual licensed or certified under State law to practice his or her profession.

“Prosthetic appliances” means functional replacement, corrective, or supportive devices prescribed by a physician or other licensed practitioner within the scope of his or her practice as defined by State law to:

1. Artificially replace a missing portion of the body; or
2. Prevent or correct physical deformity or malfunction; or
3. Support a weak or deformed portion of the body.

“Prosthetist” means one certified by the American Board of Certification in Orthotics and Prosthetics, Incorporated in the profession of making of artificial parts to replace a missing body part or to augment the performance of a natural function externally.

Case Notes

In re Horst Oertel, 167 N.J.Super. 557, 558, n. 1 (App.Div.1979).
“Orthotic appliances” defined.

10:55-1.3 Requirements for approval as a provider of prosthetic and orthotic services

(a) In order to be a fully approved New Jersey Medicaid provider of prosthetic and orthotic services, the applicant shall:

1. Submit a completed application (see N.J.A.C. 10:49-3.2) together with a copy of the facility and personnel accreditation/certification by the American Board for Certification in Orthotics and Prosthetics. (The applicant may be applying for either orthotics or prosthetics or both) and;
2. Meet the following criteria:
 - i. Appliances shall be fabricated in the facility and not sent out to another facility;
 - ii. The facility shall employ personnel (owner and/or employee(s)) certified in the field of speciality of the appliance(s) being produced by that facility.

(1) Exception: If the provider or facility limits the scope of practice to shoe orthotics, custom molded shoes, and shoe modifications, accreditation/certification by the Board for Certification in Pedorthics may be accepted in lieu of accreditation/certification by the American Board for Certification in Orthotics and Prosthetics.

iii. Facilities and their qualified personnel shall maintain current accreditation/certification by the American Board for Certification in Orthotics and Prosthetics, Incorporated.

(b) In order to be granted “provisional” approval by the New Jersey Medicaid program, facilities and/or personnel whose application for accreditation/certification is pending with the American Board for Certification in Orthotics and Prosthetics, Incorporated, the applicant shall:

1. Submit a letter requesting “provisional” provider status together with a copy of the American Board for Certification in Orthotics and Prosthetics, Incorporated accreditation/certification acceptance letter and;
2. Meet the following criteria:
 - i. Appliances shall be fabricated in the facility and not sent out to another facility;
 - ii. The facility may be noncertified and may employ certified or noncertified personnel (owner and/or employee(s)).
3. “Provisional” status shall be approved for a period of one year commencing with the date of the letter of acceptance by the American Board for Certification in Orthotics and Prosthetics, Incorporated and shall expire, without further notification, if certification has not been obtained.

(c) If a certified facility loses its certified prosthetist(s), orthotist(s) and/or pedorthist(s), the fiscal agent shall be notified within 5 working days of the loss. A grace period of 180 days from the date of such loss shall be granted for demonstrating recertification before provider eligibility is terminated. In the interval between the loss and recertification of personnel, the minimum requirement for continuing acceptable Medicaid provider eligibility is that fabricated appliances must be fabricated by personnel whose board eligibility is established.

10:55-1.4 Requirements for program participation as prosthetic and orthotic services provider

(a) An approved Medicaid provider of prosthetic and orthotic services, shall be responsible for the following:

1. Assuring that an appliance furnished by the approved facility conforms to the prescriber’s prescription and the description of the appliance as set forth in the accepted nomenclature used by the American Board for Certification in Orthotics and Prosthetics, Incorporated; fitting the appliance properly to the extent that the recipient’s condition(s) permits; and providing maximum efficiency and comfort consistent with the condition(s) of the recipient for whom the appliance is prescribed;

2. Assuming liability for defective materials over which the provider has (or should have had) control;

3. Agreeing to accept return of an appliance when the prescribing physician, after appropriate evaluation of the appliance(s), determines that the appliance(s) does not conform to the prescription and description of the appliance set forth in the accepted nomenclature by the American Board for Certification in Orthotics and Prosthetics, Incorporated; and/or does not fit properly, and/or is not of acceptable quality, and/or does not provide maximum efficiency and comfort consistent with the condition of the recipient for whom it is prescribed, and refabricating the appliance; and

4. Warranting against defective material and workmanship (except for parts normally worn from natural use) for a period of one year from date of delivery to and acceptance by the recipient. If it is found that either the material or the workmanship is defective, the provider shall be allowed a reasonable opportunity to make such adjustment and/or corrections or replacement without additional charge to the Medicaid program, or the recipient.

i. The warranty shall not apply to an appliance corrected/alterd as a result of a change in the recipient's physical condition (anatomical change).

ii. The warranty shall not apply to a misused appliance or an appliance altered by other than the original provider.

10:55-1.5 Prior authorization for prosthetic and orthotic appliances

(a) This section specifies the services that require prior authorization and the procedures to follow. Prior authorization shall be required for:

1. Any prosthetic appliance (except for preparatory (temporary) upper and lower prostheses) for which the provider's charge is \$1,000.00 or more;

2. Any orthotic appliance for which the provider's charge is \$500.00 or more; or

3. Replacement of parts of an appliance when the cost exceeds \$250, except in an emergency (see (d) below);

i. Prior authorization shall not be required for replacement of parts which involve solely the mechanical aspects of an appliance and for which the charge is \$250.00 or less.

4. Labor (hourly rate) charges for repair of items or appliances totalling more than \$250.00 shall be prior authorized by the Medicaid District Office (MDO). (See codes L4200 and L7500 (Repair), at N.J.A.C. 10:55-2.)

i. Total labor (hourly rate) charges for repair of items or appliances, not under warranty, are reimbursable for up to \$250.00.

5. Any foot and ankle orthotic appliance;

6. Any orthopedic footwear; or

7. Custom molded shoes.

(b) If prior authorization is required, the provider shall not provide those items or services until the authorization is received.

(c) To request prior authorization for prosthetic and orthotic services, the provider shall submit form FD-357 (Request for Prior Authorization for Prosthetic and Orthotic Services, see Appendix A), together with a prescription as specified in N.J.A.C. 10:55-1.6, to the appropriate Medicaid District Office (MDO) (see N.J.A.C. 10:49 Appendix—Form #17 for address) or to the Central Office of Medicaid, Office of Medical Affairs and Provider Relations, Division of Medical Assistance and Health Services, Mail Code #15, PO Box 712, Trenton, New Jersey 08625-0712.

1. Prior authorization for all orthopedic footwear and foot orthotics shall be obtained from the Central Office of Medicaid, Office of Medical Affairs and Provider Relations, except for all components of orthopedic footwear attached to a bar or brace (including the bar, brace, and/or shoe), which must be obtained from the appropriate MDO.

i. When requesting prior authorization for custom molded shoes, the provider shall submit a FD-357 form together with a copy of the prescription and a cost estimate which shall include a detailed cost breakdown of the basic shoe plus any additional charges for materials and/or services.

2. The fiscal agent will inform the provider that the authorization request is approved, denied, or suspended. If approved, the letter to the provider will indicate the authorization number that must be recorded at Item 23B on the 1500 N.J. claim form.

(d) The Medicaid District Office shall grant authorization by telephone when an emergency condition exists, as defined in (d)1, below, and N.J.A.C. 10:49-6.1.

1. When an orthotic or prosthetic appliance or device becomes non-functional due to mechanical failure and must be repaired immediately for the recipient to continue normal functional behavior, the situation shall be considered an emergency. Emergencies include, but are not limited to, mechanical breakdown, fitting problems due to anatomical change, skin breakdown, irritation and/or ulcer, pressure pain, or an ill-fitting socket.

Amended by R.1998 d.410, effective August 3, 1998.
See: 30 N.J.R. 512(a), 30 N.J.R. 2919(a).
In (c), updated the address.

10:55-1.6 Prescription policies

(a) A personally signed and dated order (prescription) by the prescriber shall be required for the following:

1. Prosthetic and orthotic appliances;
2. Repair and replacement of parts for custom-made prosthetic and orthotic appliances; and
3. Orthopedic footwear.

(b) The prescription shall include the following:

1. Recipient's name, age, address, HSP (Medicaid) Case Number and Patient Person Number;
2. Relevant diagnosis supporting need for custom-made prosthetic and orthotic appliances; and
3. A detailed breakdown of the appliance ordered, written according to the accepted New Jersey prosthetic and orthotic nomenclature as set forth in the nomenclature accepted by the American Board for Certification in Orthotics and Prosthetics, Incorporated. A prescription written: "leg brace", "artificial limb", "orthopedic shoes", for example, shall not be acceptable.

10:55-1.7 Policy on footwear

(a) For purposes of the New Jersey Medicaid program, "an orthopedic shoe" means footwear, with or without accompanying appliances, used to prevent or correct gross deformities of the feet, which is properly fitted as to length and width, and consists of the following basic parts:

1. Correct straight last line;
2. Heels with sufficient bearing surface;
3. Toe with ample room for function;
4. Sole of sufficient weight for foot protection;
5. Rigid shank;
6. Properly fitting upper;
7. Smooth and protective lining; and
8. Snug fitting heel counter.

(b) Orthopedic footwear shall be reimbursable under the following conditions:

1. When attached to a brace or bar; and/or
2. When part of the normal (customary, usual) post-operative or postfracture treatment program; and/or
3. When used to correct or adapt to gross foot deformities.

10:55-1.8 Reimbursement for prosthetic and orthotic appliances

(a) This section outlines the Program's policy of reimbursement for prosthetic and orthotic services and specifies the procedure for submitting a claim to request payment.

(b) Providers of prosthetic and orthotic appliances shall be reimbursed on a fee-for-service basis not to exceed the maximum fee schedule allowance in N.J.A.C. 10:55-2. Generally, the reimbursement policy for the purchase or repair of any appliance or footwear is in accordance with the lower of the Medicaid maximum fee allowance or the provider's usual and customary charge. In certain instances, a maximum fee allowance can not easily be established because of the variety of items that can be provided under the same HCPCS code. In those instances, the notation "B.R.", by report, is listed in the fee schedule. In those cases, Medicaid reimbursement will be established by the Division after a review of the additional material submitted by the provider.

1. An additional labor charge shall only be paid for repair-related activities after warranty or prescription change. Such a charge shall not be reimbursed for a new item or appliance.

2. If it is necessary for the provider to visit the recipient at home or another setting to measure, fit or deliver an appliance, the following conditions shall apply:

- i. The provider shall be reimbursed for travel time when the distance exceeds five miles one way. If more than one recipient is seen during the visit, travel time allowance shall only be billed for the initial recipient, in accordance with procedure code X3680, Travel time, N.J.A.C. 10:55-2.

- ii. A maximum of three "home visits" shall be allowed, unless there is adequate documentation, including a prescription, justifying the need for additional visits.

(b) To request reimbursement for a service provided, the provider shall submit a 1500 N.J. claim form using HCPCS procedure code(s) to identify the item or service provided. Instructions for submitting claims for payment are provided in the Fiscal Agent Billing Supplement following this chapter N.J.A.C. 10:55.

1. HCPCS procedure codes are listed in N.J.A.C. 10:55-2—HCPCS, the HCFA (Health Care Financing Administration's) Common Procedure Coding System).

2. Instructions for the completion of claim forms and other forms are provided in the Fiscal Agent Billing Supplement following N.J.A.C. 10:55-2.

- i. Requirements for the timely submission of claims are listed in the Administration Chapter of this manual (N.J.A.C. 10:49-7.2).

3. A provider shall submit a copy of the prescription along with the claim form to the fiscal agent, when the charge for repair and/or replacement of parts is less than \$250.00.

(c) The provider shall verify recipient eligibility, in accordance with N.J.A.C. 10:49-2. Payment shall not be made for services provided to an ineligible individual, even if the service was prior authorized, except under the following circumstances:

1. If fabrication of an appliance (including repair or replacement of parts on existing appliance) has commenced following authorization but has not been completed during the recipient's period of eligibility, reimbursement to the provider shall be allowed.
2. In circumstances involving the recipient over which no one may have control, such as moving out-of-state, or in case of death of the recipient, reimbursement will be made in an amount consistent with the stage of completion of the appliance consistent with the Program's Maximum Fee Allowance schedule.
 - i. The provider shall use the date fabrication of the appliance was begun as the date of service when the above situation(s) occur(s).

SUBCHAPTER 2. HCFA COMMON PROCEDURE CODING SYSTEM (HCPCS)

10:55-2.1 Introduction

(a) The New Jersey Medicaid program has adopted the Health Care Financing Administration's (HCFA) Common Procedure Coding System (HCPCS). The HCPCS procedure codes listed in this subchapter shall be used when filing a claim for prosthetic and/or orthotic services.

1. The responsibility of the prosthetic and orthotic services provider when rendering services and requesting reimbursement is listed in N.J.A.C. 10:55-1 of the Prosthetic and Orthotic Services Manual.

10:55-2.2 Elements of HCPCS coding system

(a) The list of HCPCS procedure codes in N.J.A.C. 10:55-2.3 and N.J.A.C. 10:55-2.4 is arranged in tabular form with specific information for each code given under columns with the titles "HCPCS CODE," "DESCRIPTION," and "MAXIMUM FEE ALLOWANCE."

(b) The column titled "MAXIMUM FEE ALLOWANCE" indicates the maximum amount of reimbursement or the following symbol:

1. Where "B.R." (By Report) is listed instead of a dollar amount, it means that additional information will be required in order to properly evaluate the service. In such instances, the provider shall attach a copy of the report to the claim form.

(c) Services and procedures may be modified under certain circumstances. When applicable, the modifying circum-

stances should be identified by the addition of alphabetic and/or numeric characters at the end of the HCPCS procedure code. The New Jersey Medicaid program's recognized modifier codes for prosthetic and orthotic services are as follows:

1. "RP" (Repair and/or Replacement) is used to indicate repair and/or replacement of prosthetic and orthotic devices. The claim shows the HCPCS procedure code for the repairs and/or parts, followed by the "RP" modifier and the charge for the repairs and/or parts.
2. "XE" (Non-Medicare-covered Service) is used to indicate that a service provided to a Medicare/Medicaid recipient is not reimbursable by Medicare.

10:55-2.3 HCPCS Procedure Codes and Maximum Fee Allowance Schedule for Orthotic Services

HCPCS Code	Description	Maximum Fee Allowance (\$)
(a) ORTHOTIC DEVICES (L0100-L0999)		
SPINAL: CERVICAL		
L0100	Cervical, craniostenosis, helmet molded to patient model	300.00
L0110	Cervical, craniostenosis, helmet nonmolded	72.00
L0120	Cervical, flexible, nonadjustable (foam collar)	13.04
L0130	Cervical, flexible, thermoplastic collar, molded to patient	54.40
L0140	Cervical, semi-rigid, adjustable (plastic collar)	24.40
L0150	Cervical, semi-rigid, adjustable molded chin up (plastic collar with mandibular/occipital piece)	75.20
L0160	Cervical, semi-rigid, wire frame occipital/mandibular support	100.00
L0170	Cervical collar, molded to patient model	300.00
L0172	Cervical collar, semi-rigid, thermoplastic foam, two piece	68.34
L0174	Cervical collar, semi-rigid, thermoplastic foam, two piece with thoracic extension	113.90
MULTIPLE POST COLLAR		
L0180	Cervical, multiple post collar occipital/mandibular supports, adjustable	163.80
L0190	Cervical, multiple post collar, occipital/mandibular supports, adjustable cervical bars (Somi, Guilford, Taylor types)	240.00
L0200	Cervical, multiple post collar, occipital/mandibular supports, adjustable cervical bars, and thoracic extension	175.00
SPINAL: THORACIC		
L0210	Thoracic rib belt, custom fitted	13.20
L0220	Thoracic rib belt, custom fabricated	24.40
SPINAL: THORACIC--LUMBAR--SACRAL ORTHOSIS (TLSO)--FLEXIBLE		
L0300	Thoracic-lumbar-sacral-orthoses (TLSO), flexible (dorso-lumbar surgical support) custom fitted	101.68

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L0310	TLSO, flexible, (dorso-lumbar surgical support), custom fabricated	214.80	L0540	LUMBAR FLEXION LSO, lumbar flexion (Williams flexion type)	320.00
L0315	TLSO, flexible dorso-lumbar surgical support, elastic type, with rigid posterior panel	120.00	L0550	LSO, anterior-posterior-lateral control, molded to patient model	760.00
L0317	TLSO, flexible dorso-lumbar surgical support, hyperextension, elastic type, with rigid posterior panel	140.00	L0560	LSO, anterior-posterior-lateral control, molded to patient model, with interface material	880.00
L0320	ANTERIOR-POSTERIOR CONTROL TLSO, anterior-posterior control (Taylor type), with apron front	271.60	L0565	LSO, anterior-posterior-lateral, custom fitted	427.14
L0330	TLSO, anterior-posterior-lateral control (Knight-Taylor type), with apron front	304.10	L0600	SPINAL: SACROILIAC/FLEXIBLE Sacroiliac, flexible (sacroiliac surgical support), custom fitted	40.72
L0340	ANTERIOR--POSTERIOR--LATERAL--ROTARY CONTROL TLSO, anterior-posterior-lateral-rotary control (Arnold, Magnuson, Steindler types), with apron front	428.57	L0610	Sacroiliac, flexible (sacroiliac surgical support), custom fabricated	89.28
L0350	TLSO, anterior-posterior-lateral-rotary control, flexion compression jacket, custom fitted	621.48	L0620	SEMI-RIGID Sacroiliac, semi-rigid (Goldthwaite, Os-good types), with apron front	192.00
L0360	TLSO, anterior-posterior-lateral-rotary control, flexion compression jacket molded to patient model	800.00	L0700	SPINAL: CERVICAL--THORACIC--LUMBAR--SACRAL ORTHOSIS (CTLSO)--HALO/ANTERIOR, POSTERIOR--LATERAL CONTROL Cervical-thoracic-lumbarsacral-orthoses (CTLSO), anterior-posterior-lateral-control, molded to patient model (Minerva type)	1,160.00
L0370	TLSO, anterior-posterior-lateral-rotary control, hyperextension (Jewett, Lennox, Baker, Cash types)	246.40	L0710	CTLSO, anterior-posterior-lateral-control, molded to patient model, with interface material (Minerva type)	1,280.00
L0380	TLSO, anterior-posterior-lateral-rotary control, with extensions	460.00	L0810	HALO PROCEDURE Halo procedure, cervical halo incorporated into jacket vest	1,677.11
L0390	TLSO, anterior-posterior-lateral control, molded to patient model	840.00	L0820	Halo procedure, cervical halo incorporated into plaster body jacket	1,200.00
L0400	TLSO, anterior-posterior-lateral control, molded to patient model, with interface material	952.56	L0830	Halo procedure, cervical halo incorporated into Milwaukee type orthosis	2,053.61
L0410	TLSO, anterior-posterior-lateral control, two-piece construction, molded to patient model	917.48	L0860	Addition to halo procedure, magnetic resonance image compatible system	500.00
L0420	TLSO, anterior-posterior-lateral control, two-piece construction, molded to patient model, with interface material	982.15	L0900	SPINAL: TORSO SUPPORTS--PTOSIS AND POSTSURGICAL SUPPORTS Torso support, ptosis support, custom fitted	102.11
L0430	TLSO, anterior-posterior-lateral control, with interface material, custom fitted	731.36	L0910	Torso support, ptosis support, custom fabricated	220.33
L0440	TLSO, anterior-posterior-lateral control, with overlapping front section, spring steel front, custom fitted	651.20	L0920	PENDULOUS ABDOMEN SUPPORTS Torso support, pendulous abdomen support, custom fitted	118.36
L0500	SPINAL: LUMBAR--SACRAL--ORTHOSIS (LSO)--FLEXIBLE Lumbar-sacral-orthoses (LSO), flexible, (lumbo-sacral surgical supports), custom fitted	77.28	L0930	Torso support, pendulous abdomen support, custom fabricated	250.68
L0510	LSO, flexible (lumbo-sacral surgical support), custom fabricated	113.52	L0940	POSTSURGICAL SUPPORTS Torso support, postsurgical support, custom fitted	110.18
L0515	LSO, flexible (lumbo-sacral surgical support), elastic type, with rigid posterior panel	69.16	L0950	Torso support, postsurgical support, custom fabricated	240.00
L0520	ANTERIOR--POSTERIOR--LATERAL CONTROL LSO, anterior-posterior lateral control (Knight, Wilcox types), with apron front	252.00	L0960	Torso support, postsurgical support, pads for postsurgical support	48.71
L0530	ANTERIOR--POSTERIOR CONTROL LSO, anterior-posterior control (Macauland type), with apron front	192.00	X4070	Apron front replacement	65.12
			L0970	ADDITIONS TO SPINAL ORTHOSES TLSO, corset front	33.60
			L0972	LSO, corset front	69.20
			L0974	TLSO, full corset	88.20

HCPCS Code	Description	Maximum Fee Allowance (\$)
L0976	LSO, full corset	103.88
L0978	Axillary crutch extension	35.00
L0980	Peroneal straps, pair	11.33
L0982	Stocking supporter grips, set of four (4)	9.60
L0984	Protective body sock, each	34.12
L0999	Addition to spinal orthosis, not otherwise specified	B.R.

(b) ORTHOTIC DEVICES—SCOLIOSIS PROCEDURES (L1000-L1499)

The orthotic care of scoliosis differs from other care in that the treatment is more dynamic in nature and uses ongoing continual modification of the orthosis to the patient's changing condition. This coding structure uses the proper names or eponyms of the procedures because they have historic and universal acceptance in the profession. It should be recognized that variations to the basic procedures described by the founders/developers are accepted in various medical and orthotic practices throughout the country. All procedures include model of patient when indicated.

HCPCS Code	Description	Maximum Fee Allowance (\$)
SCOLIOSIS: CERVICAL--THORACIC--LUMBAR--SACRAL ORTHOSIS (CTLSO) (MILWAUKEE)		
L1000	Cervical-thoracic-lumbar-sacral orthosis (CTLSO), inclusive of furnishing initial orthoses including model	1,134.00
L1010	Additions to (CTLSO) or scoliosis orthosis, axilla sling	44.88
L1020	Addition to CTLSO or scoliosis orthosis, kyphosis pad	25.00
L1025	Addition to CTLSO or scoliosis orthosis, kyphosis pad, floating	77.29
L1030	Addition to CTLSO or scoliosis orthosis, lumbar bolster pad	40.83
L1040	Addition to CTLSO or scoliosis orthosis, lumbar or lumbar rib pad	39.00
L1050	Addition to CTLSO or scoliosis orthosis, sternal pad	39.00
L1060	Addition to CTLSO or scoliosis orthosis, thoracic pad	39.00
L1070	Addition to CTLSO or scoliosis orthosis, trapezius sling	51.00
L1080	Addition to CTLSO or scoliosis orthosis, outrigger	35.42
L1085	Addition to CTLSO or scoliosis orthosis, outrigger bilateral with vertical extensions	108.45
L1090	Addition to CTLSO or scoliosis orthosis, lumbar sling	51.00
L1100	Addition to CTLSO or scoliosis orthosis, ring flange, plastic or leather	66.00
L1110	Addition to CTLSO or scoliosis orthosis, ring flange, plastic or leather, molded to patient model	90.00
L1120	Addition to CTLSO or scoliosis orthosis, cover for upright, each	26.05
SCOLIOSIS: THORACIC--LUMBAR--SACRAL ORTHOSIS (TLSO) (LOW PROFILE)		

HCPCS Code	Description	Maximum Fee Allowance (\$)
L1200	Thoracic-lumbar-sacral-orthosis (TLSO), inclusive of furnishing initial orthosis only	1,037.53
L1210	Additions to TLSO, (low profile), lateral thoracic extension	175.00
L1220	Additions to TLSO, (low profile), anterior or thoracic extension	175.00
L1230	Additions to TLSO, (low profile), Milwaukee type superstructure	340.00
L1240	Additions to TLSO, (low profile), lumbar derotation pad	44.75
L1250	Addition to TLSO, (low profile), anterior asis pad	44.75
L1260	Addition to TLSO, (low profile), anterior thoracic derotation pad	44.75
L1270	Addition to TLSO, (low profile), abdominal pad	44.75
L1280	Addition to TLSO, (low profile), rib gusset (elastic), each	61.02
L1290	Addition to TLSO, (low profile), lateral trochanteric pad	40.68
OTHER SCOLIOSIS PROCEDURES		
L1300	Other scoliosis procedure, body jacket molded to patient model	1,200.00
L1310	Other scoliosis procedure, post-operative body jacket	1,200.00
L1499	Unlisted procedure for spinal orthosis	B.R.
THORACIC--HIP--KNEE--ANKLE ORTHOSIS (THKAO)		
L1500	Thoracic-hip-knee-ankle orthoses (THKAO), mobility frame (Newington, Parapodium types)	1,243.33
L1510	THKAO, standing frame	877.67
L1520	THKAO, swivel walker	1,487.44

(c) ORTHOTIC DEVICES—LOWER LIMB (L1600-L2699)

The procedures in L1600-L2999 are considered as "base" or "basic procedures" and may be modified by listing procedures from the "additions" sections and adding them to the base procedures.

HCPCS Code	Description	Maximum Fee Allowance (\$)
LOWER LIMB: HIP ORTHOSIS (HO)--FLEXIBLE		
L1600	Hip orthoses (HO), abduction control of hip joints, flexible, Frejka type with cover	40.32
L1610	HO, abduction control of hip joints, flexible, (Frejka cover only)	25.00
L1620	HO, abduction control of hip joints, flexible, (Pavlik harness)	75.00
L1630	HO, abduction control of hip joints, semi-flexible (Von Rosen type)	111.31
L1640	HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs	250.00
L1650	HO, abduction control of hip joints, static, adjustable, custom fitted (Ifled type)	150.00
L1660	HO, abduction control of hip joints, static, plastic, custom fitted	109.07
L1680	HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type)	802.72

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L1685	HO, abduction control of hip joints, post-operative hip adduction type, custom fabricated	610.20	L1870	KO, double upright, thigh and calf lacers, molded to patient model with knee joints	488.16
L1686	HO, abduction control of hip joint, post-operative hip abduction type, custom fitted	600.00	L1880	KO, double upright, nonmolded thigh and calf cuffs/lacers with knee joints	366.16
L1690	Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control	1,040.29	L1885	KO, Single or double upright, thigh and calf, with functional active resistance control	291.64
	LOWER LIMB--LEGG PERTHES		L1899	Unlisted procedure for lower limb knee	B.R.
L1700	Legg Perthes orthosis, (Toronto type)	996.07		LOWER LIMB: ANKLE-FOOT ORTHOSIS (AFO)	
L1710	Legg Perthes orthosis, (Newington type)	1,159.26	L1900	Ankle-foot orthoses (AFO), spring wire, dorsiflexion assist calf band	158.64
L1720	Legg Perthes orthosis, trilateral, (Tachdijan type)	852.85	L1902	AFO, ankle gauntlet, custom fitted	48.81
L1730	Legg Perthes orthosis, (Scottish Rite type)	739.21	L1904	AFO, molded ankle gauntlet, molded to patient model	284.76
L1750	Legg Perthes orthosis, Legg Perthes sling (Sam Brown type)	80.00	L1906	AFO, multiligamentous ankle support	75.00
L1755	Legg Perthes orthosis, (Patten Bottom type)	854.40	L1910	AFO, posterior, single bar, clasp attachment to shoe counter	192.99
	LOWER LIMB--KNEE ORTHOSIS (KO)		L1920	AFO, single upright with static or adjustable stop (Phelps or Perlstein type)	200.00
L1800	Knee orthosis (KO), elastic with stays	32.56	L1930	AFO, custom fitted, plastic	156.80
L1810	KO, elastic with joints	61.04	L1940	AFO, molded to patient model, plastic	387.94
L1815	KO, elastic with condylar pads	63.19	L1945	AFO, molded to patient model, plastic, rigid anterior tibial section (floor reaction)	540.00
L1820	KO, elastic with condyle pads and joints	72.40	L1950	AFO, spiral, molded to patient model (Irm type), plastic	593.22
L1825	KO, elastic knee cap	28.00	L1960	AFO, posterior solid ankle, molded to patient model, plastic	421.60
L1830	KO, immobilizer; canvas longitudinal	52.88	L1970	AFO, plastic molded to patient model, with ankle joint	513.35
L1832	KO, adjustable knee joints, positional orthosis, rigid support, custom fitted	320.00	L1980	AFO, single upright free plantar dorsiflexion, solid stirrup, calf band/cuff (single bar "BK" orthosis)	229.60
L1834	KO, without knee joint, rigid, molded to patient model	388.00	L1990	AFO, double upright free plantar dorsiflexion, solid stirrup, calf band/cuff (double bar "BK" orthosis)	287.20
L1840	KO, derotation, medial-lateral, anterior cruciate ligament, custom fabricated to patient model	520.00	X4004	Carbon composites at ankle of MAFO, plastic only, each	35.00
L1843	Knee orthosis (KO); single upright, thigh and calf, with adjustable flexion and extension joint, medial-lateral and rotation control, custom fitted	392.81	X4005	Tone reducing orthoses knee high, custom molded, supply by orthotist, each	1,121.00
L1844	KO, single upright, thigh and calf, with adjustable flexion and extension joint, medial-lateral and rotation control, molded to patient model	852.38	X4006	Tone reducing orthoses ankle high, custom molded, supply by orthotist, each	350.00
L1845	KO, double upright, thigh and calf, with adjustable flexion and extension joint, medial-lateral and rotation control, custom fitted	468.00	X4007	Swedo ankle orthoses, each	90.00
L1846	KO, double upright, thigh and calf, with adjustable flexion and extension joint, medial-lateral and rotation control, molded to patient model	528.80	X4450	AFO, posterior leaf spring molded to patient model (Tirr, Rancho) includes casting	386.40
L1847	Knee orthosis (KO); double upright with adjustable joint, with inflatable air support chamber(s)	309.42		LOWER LIMB: HIP-KNEE-ANKLE-FOOT ORTHOSIS (KAFO)--OR ANY COMBINATION	
L1850	KO, Swedish type	148.00		L2000, L2020, and L2036 are base procedures which may be used with any knee joint; L2010 and L2030 shall only be used with no knee joint.	
L1855	KO, molded plastic, thigh and calf, sections, with double upright knee joints, molded to patient model	610.20	L2000	Knee-ankle-foot-orthoses (KAFO), single upright, free knee, free ankle, solid stirrup, thigh and calf bands/cuffs (single bar "AK" orthosis)	760.00
L1858	KO, molded plastic, polycentric knee joints, pneumatic knee pads (CTI)	610.20	L2010	KAFO, single upright, free ankle, solid stirrup, thigh and calf bands/cuffs (single bar "AK" orthosis), without knee joint	568.68
L1860	KO, modification of supracondylar prosthetic socket, molded to patient model (SK)	555.68			

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L2020	KAFO, double upright, free knee, free ankle, solid stirrup, thigh and calf bands/cuffs (double bar "AK" orthosis)	786.13	L2128	KAFO, fracture orthosis, femoral fracture cast orthosis, molded to patient model	895.20
L2030	KAFO, double upright, free ankle, solid stirrup, thigh and calf bands/cuffs (double bar "AK" orthosis), without knee joint	571.20	L2132	KAFO, fracture orthosis, femoral fracture cast orthosis, soft custom fitted	488.16
L2035	Knee-ankle-foot-orthosis (KAFO); full plastic, static, prefabricated (pediatric size)	B.R.	L2134	KAFO, fracture orthosis, femoral fracture cast orthosis, semi-rigid custom fitted	528.81
L2036	KAFO, full plastic, double upright, free knee, molded to patient model	1,000.00	L2136	KAFO, fracture orthosis, femoral fracture cast orthosis, rigid custom fitted	630.40
L2037	KAFO, full plastic, single upright, free knee, molded to patient model	900.00	ADDITIONS TO FRACTURE ORTHOSIS		
L2038	KAFO, full plastic, without knee joint, multiaxis molded to patient model (lively orthosis or equal)	900.00	L2180	Addition to lower extremity fracture orthosis, plastic shoe insert with ankle joints	53.69
L2040	TORSION CONTROL: HIP--KNEE--ANKLE--FOOT ORTHOSIS (HKAFO) Hip-knee-ankle-foot orthosis (HKAFO), torsion control, bilateral rotation straps, pelvic band/belt	131.05	L2182	Addition to lower extremity fracture orthosis, drop lock knee joint	48.80
L2050	HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt	223.44	L2184	Addition to lower extremity fracture orthosis, limited motion knee joint	69.16
L2060	HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt	250.00	L2186	Addition to lower extremity fracture orthosis, adjustable motion knee joint, Lerman type	101.70
L2070	HKAFO, torsion control, unilateral rotation straps, pelvic band/belt	90.76	L2188	Addition to lower extremity fracture orthosis, quadrilateral brim	203.40
L2080	HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt	200.00	L2190	Addition to lower extremity fracture orthosis, waist belt	48.81
L2090	HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt	200.00	L2192	Addition to lower extremity fracture orthosis, hip joint pelvic band, thigh flange, and pelvic belt	203.40
L2102	FRACTURE ORTHOSES: ANKLE-FOOT ORTHOSIS (AFO) AND KNEE-ANKLE-FOOT ORTHOSIS (KAFO) Ankle-foot-orthosis (AFO), fracture orthosis, tibial fracture cast orthosis, plaster type casting material molded to patient	162.40	X4008	Graphite bands, each	100.00
L2104	AFO, fracture orthosis, tibial fracture cast orthosis, synthetic type casting material, molded to patient	203.20	ADDITIONS TO LOWER EXTREMITY ORTHOSIS; SHOE--ANKLE--SHIN--KNEE		
L2106	AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, molded to patient	284.76	L2200	Addition to lower extremity, limited ankle motion, each joint	30.80
L2108	AFO, fracture orthosis, tibial fracture cast orthosis, molded to patient model	569.60	L2210	Addition to lower extremity, dorsiflexion assist (plantar flexion resist), each joint	48.00
L2112	AFO, fracture orthosis, tibial fracture orthosis, soft custom fitted	244.08	L2220	Addition to lower extremity, dorsiflexion and plantar flexion assist/resist, each joint	59.65
L2114	AFO, fracture orthosis, tibial fracture orthosis, semi-rigid custom fitted	321.37	L2230	Addition to lower extremity, split flat caliper stirrups and plate attachment	49.95
L2116	AFO, fracture orthosis, tibial fracture orthosis, rigid custom fitted	366.40	L2240	Addition to lower extremity, round caliper and plate attachment	54.10
L2122	Knee-ankle-foot-orthosis (KAFO), fracture orthosis, femoral fracture cast orthosis, plaster type casting material, molded to patient	508.50	L2250	Addition to lower extremity, foot plate, molded to patient model, stirrup attachment	234.08
L2124	KAFO, fracture orthosis, femoral fracture cast orthosis, synthetic type casting material, molded to patient	569.60	L2260	Addition to lower extremity, reinforced solid stirrup (Scott-Craig type)	169.83
L2126	KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, molded to patient	651.20	L2265	Addition to lower extremity, long tongue stirrup	32.00
			L2270	Addition to lower extremity, varus/valgus correction ("T") strap, padded/lined or malleolus pad	35.03
			L2275	Addition to lower extremity, varus/vulgus corrections, plastic modification, padded/lined	65.71
			L2280	Addition to lower extremity, molded inner boot	105.76
			L2300	Addition to lower extremity, abduction bar (bilateral hip involvement), jointed, adjustable	175.00
			L2310	Addition to lower extremity, abduction bar, straight	80.01
			L2320	Addition to lower extremity, nonmolded lacer	96.00

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L2830	Addition to lower extremity orthosis, soft interface for molded plastic, above knee section	40.68	L3140	ABDUCTION AND ROTATION BARS Foot, rotation positioning device, including shoe(s)	56.00
L2840	Addition to lower extremity orthosis, tibial length sock, fracture or equal, each	28.00	L3150	Foot, rotation positioning device, without shoe(s)	60.00
L2850	Addition to lower extremity orthosis, femoral length sock, fracture or equal, each	33.60	L3170	Foot, plastic heel stabilizer	112.00
L2999	Unlisted procedures for lower extremity orthoses	B.R.	SPACE SHOES		
X3610	"D" rings	12.24	X4850	Space shoe rubber raise for shoe: 1/4" raise	8.00
X3620	Bullet (spring loaded) retentions	23.60	X4851	Space shoe rubber raise for shoe: 1/2" raise	9.00
X4003	"T" strap medial or lateral with velcro foam padded lined with horse hide	75.00	X4852	Space shoe rubber raise for shoe: 3/4" raise	13.00
			X4853	Space shoe rubber raise for shoe: 1" raise	20.00
			X4854	Space shoe rubber raise for shoe: Each addition 1/2" raise	8.00
(e) ORTHOPEDIC SHOES (L3000-L3649) INSERTS			CASTING		
L3000	Foot insert, removable, molded to patient model, "UCB" type, Berkeley shell, each	140.00	X4890	Foot	50.00
L3001	Foot insert, removable, molded to patient model; Spenco, each Qualifier: Custom Spenco device	76.00	X4891	Foot, ankle	65.00
L3002	Foot insert, removable, molded to patient model, Plastazote or equal, each	76.00	X4892	Foot, ankle, shin	70.00
L3003	Foot insert, removable, molded to patient model, silicone gel, each	76.00	X4893	KAFO castings	125.00
L3010	Foot insert, removable, molded to patient model; longitudinal arch support, each Qualifier: Any custom leather/metal device (Example: Schaeffer, Whitman)	76.00	ORTHOPEDIC FOOTWEAR		
L3020	Foot insert, removable, molded to patient model; longitudinal/metatarsal support, each Qualifier: Any custom leather/plastic device, full foot only	88.00	L3201	Orthopedic shoe, oxford with supinator or pronator, infant	48.00
L3030	Foot insert, removable, formed to patient foot, each Qualifier: Only off-the-shelf Spenco	48.00	L3202	Orthopedic shoe, oxford with supinator or pronator, child	48.00
X4290	Filler for amputee toes	16.00	L3203	Orthopedic shoe, oxford with supinator or pronator, junior	48.00
	ARCH SUPPORTS, REMOVABLE, PREMOLDED		L3204	Orthopedic shoe, hightop with supinator or pronator, infant	48.00
X4810	Velcro straps, attached to a pair of shoes, per pair	14.00	L3206	Orthopedic shoe, hightop with supinator or pronator, child	48.00
L3040	Foot, arch support, removable, premolded; longitudinal, each Qualifier: Only off-the-shelf plastazote	29.60	L3207	Orthopedic shoe, hightop with supinator or pronator, junior	48.00
L3050	Foot, arch support, removable, premolded metatarsal, each Qualifier: Only off-the-shelf with metatarsal or heel pad with no longitudinal control	32.00	L3208	Surgical boot, each infant	24.00
L3060	Foot, arch support, removable, premolded, longitudinal/metatarsal, each Qualifier: Only off-the-shelf with longitudinal control	48.00	L3209	Surgical boot, each child	24.00
	ARCH SUPPORT, NON-REMOVABLE, ATTACHED TO SHOE		L3211	Surgical boot, each junior	24.00
L3070	Foot, arch support, nonremovable, attached to shoe, longitudinal, each	16.00	L3212	Benesch boot, pair, infant	48.00
L3080	Foot, arch support, nonremovable, attached to shoe, metatarsal, each	20.00	L3213	Benesch boot, pair, child	48.00
L3090	Foot, arch support, nonremovable, attached to shoe longitudinal/metatarsal, each	24.00	L3214	Benesch boot, pair, junior	48.00
L3100	Hallus-Valgus night dynamic splint	20.00	L3215	Orthopedic footwear, ladies shoes, oxford	76.00
			L3216	Orthopedic footwear, ladies shoes, depth inlay	100.00
			L3217	Orthopedic footwear, ladies shoes, hightop, depth inlay	116.00
			L3218	Orthopedic footwear, ladies surgical boot, each	64.00
			L3219	Orthopedic footwear, men's shoes, oxford	76.00
			L3221	Orthopedic footwear, men's shoes, depth inlay	100.00
			L3222	Orthopedic footwear, men's shoes, hightop, depth inlay	116.00
			L3223	Orthopedic footwear, men's surgical boot, each	64.00
			L3230	Orthopedic footwear, custom shoes, depth inlay	380.00
			L3250	Orthopedic footwear, custom molded shoe, removable inner mold, prosthetic shoe, each	250.00
			L3251	Foot, shoe molded to patient model, silicone shoe, each	280.00
			L3252	Foot, shoe molded to patient model, Plastazote (or similar), custom fabricated, each	256.00

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L3253	Foot, molded shoe Plastazote (or similar), custom fitted, each	112.00	L3600	Transfer of an orthosis from one shoe to another, caliper plate, existing	48.00
L3254	Nonstandard size or width	20.00	L3610	Transfer of an orthosis from one shoe to another, caliper plate, new	76.00
L3255	Nonstandard size or length	20.00	L3620	Transfer of an orthosis from one shoe to another, solid stirrup, existing	39.04
L3257	Orthopedic footwear, additional charge for split size	50.00	L3630	Transfer of an orthosis from one shoe to another, solid stirrup, new	76.00
L3260	Ambulatory surgical boot, each	88.00	L3640	Transfer of an orthosis from one shoe to another, Dennis Browne splint (Riveton), both shoes	28.00
L3265	Plastazote sandal, each	56.00	L3649	Unlisted procedures for foot orthopedic shoes, shoe modifications and transfers	B.R.
SHOE MODIFICATION--LIFTS			X4280	Velcro strap used with orthoses, for each strap	18.00
L3300	Lift, elevation, heel, tapered to metatarsals, per inch	64.00	(f) ORTHOTIC DEVICES—UPPER LIMB (L3650 L3999)		
L3310	Lift, elevation, heel and sole, neoprene, per inch	64.00	Note: The procedures in this section are considered as “base” or “basic procedures” and may be modified by listing procedures from the “additions” sections and adding them to the base procedure.		
L3320	Lift, elevation, heel and sole, cork, per inch	100.00	UPPER LIMB: SHOULDER ORTHOSIS (SO)		
L3330	Lift, elevation, metal extension (skate)	316.00	L3650	Shoulder orthosis, (SO), figure of “8” design abduction restrainer	32.00
L3332	Lift, elevation, inside shoe, tapered, up to one-half inch	44.00	L3660	SO, figure of “8” design abduction restrainer, canvas and webbing	60.00
L3334	Lift, elevation, heel, per inch	36.00	L3670	SO, acromion/clavicular (canvas and webbing type)	88.62
X4894	Orthopedic shoe, articulated (Bebax type)	72.00	L3675	Shoulder orthosis, (SO); vest type abduction restrainer, canvas webbing type, or equal	85.92
WEDGES			UPPER LIMB: ELBOW ORTHOSIS (EO)		
L3340	Heel wedge, Sach	10.40	L3700	Elbow orthoses (EO), elastic with stays	36.00
L3350	Heel wedge	12.00	L3710	EO, elastic with metal joints	60.00
L3360	Sole wedge, outside sole	12.00	L3720	EO, double upright with forearm/arm cuffs, free motion	520.00
L3370	Sole wedge, between sole	14.40	L3730	EO, double upright with forearm/arm cuffs, extension/flexion assist	617.71
L3380	Clubfoot wedge	12.00	L3740	EO, double upright with forearm/arm cuffs, adjustable position with lock with active control	692.08
L3390	Outflare wedge	16.00	UPPER LIMB: WRIST-HAND-FINGER ORTHOSIS (WHFO)		
L3400	Metatarsal bar wedge, rocker	16.00	L3800	Wrist-hand-finger-orthoses (WHFO), short opponens, no attachments	124.28
L3410	Metatarsal bar wedge, between sole	16.00	L3805	WHFO, long opponens, no attachment	240.00
L3420	Full sole and heel wedge, between sole	24.00	ADDITIONS		
L3430	Heel, counter, plastic reinforced	24.00	L3810	WHFO, addition to short and long opponens, thumb abduction (“C”) bar	28.00
L3440	Heel, counter, leather reinforced	24.00	L3815	WHFO, addition to short and long opponens, second M.P. abduction assist	28.00
L3450	Heel, Sach cushion type	64.00	L3820	WHFO, addition to short and long opponens, I.P. extension assist, with M.P. extension stop	60.00
L3455	Heel, new leather, standard	8.00	L3825	WHFO, addition to short and long opponens, M.P. extension stop	28.00
L3460	Heel, new rubber, standard	8.00			
L3465	Heel, Thomas with wedge	20.00			
L3470	Heel, Thomas extended to ball	24.00			
L3480	Heel, pad and depression for spur	16.00			
L3485	Heel, pad, removable for spur	32.00			
MISCELLANEOUS SHOE ADDITIONS					
L3500	Miscellaneous shoe addition, insole, leather	4.00			
L3510	Miscellaneous shoe addition, insole, rubber	8.00			
L3520	Miscellaneous shoe additions, insole, felt covered with leather	8.00			
L3530	Miscellaneous shoe addition, sole, half	12.00			
L3540	Miscellaneous shoe addition, sole, full	36.00			
L3550	Miscellaneous shoe addition, toe tap, standard	4.00			
L3560	Miscellaneous shoe addition, toe tap, horseshoe	6.40			
L3570	Miscellaneous shoe addition, special extension to instep (leather with eyelets)	152.00			
L3580	Miscellaneous shoe addition, convert instep to velcro closure	13.60			
L3590	Miscellaneous shoe addition, convert firm shoe counter to soft counter	28.00			
L3595	Miscellaneous shoe addition, March bar	12.00			
TRANSFER OR REPLACEMENT					

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L3830	WHFO, addition to short and long opposens, M.P. extension assist	44.00	L3948	WHFO, finger knuckle bender	36.00
L3835	WHFO, addition to short and long opposens, M.P. spring extension assist	60.00	L3950	WHFO, combination Oppenheimer, with knuckle bender and two attachments	96.00
L3840	WHFO, addition to short and long opposens, spring swivel thumb	32.00	L3952	WHFO, combination Oppenheimer, with reverse knuckle and two attachments	96.00
L3845	WHFO, addition to short and long opposens, thumb I.P. extension assist, with N.P. stop	36.00	L3954	WHFO, spreading hand	52.00
L3850	WHFO, addition to short and long opposens, action wrist, with dorsiflexion assist	64.00	UPPER LIMB: SHOULDER--EL-BOW--WRIST--HAND ORTHOSIS (SEWHO)--ABDUCTION POSITIONING--CUSTOM FITTED		
L3855	WHFO, addition to short and long opposens, adjustable M.P. flexion control	75.81			
L3860	WHFO, addition to short and long opposens, adjustable M.P. flexion control and I.P.	103.17	L3960	Shoulder-elbow-wrist-hand orthosis (SEWHO), abduction positioning, air-plane design	460.00
DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION			L3962	SEWHO, abduction positioning, Erbs Palsey design	420.00
L3900	WHFO, dynamic flexor hinge; reciprocal wrist extension/flexion, finger flexion/extension, wrist or finger driven	800.00	L3963	SEWHO, molded shoulder, arm, forearm, and wrist, with articulating elbow joint	847.70
L3901	WHFO, dynamic flexor hinge; reciprocal wrist extension/flexion, finger flexion/extension, cable driven	884.00	L3964	SEWHO, mobile arm support attached to wheelchair, balanced and fitted to patient, adjustable	520.00
EXTERNAL POWER			L3965	SEWHO, radial arm support attached to wheelchair, balanced and fitted to patient, adjustable rancho type	759.66
L3902	WHFO, external powered, compressed gas	369.00	L3966	SEWHO, mobile arm support attached to wheelchair, balanced and fitted to patient, reclining	488.00
L3904	WHFO, external powered, electric	369.00	L3968	SEWHO, mobile arm support attached to wheelchair, balanced and fitted to patient, friction arm support (friction dampening to proximal and distal joints)	680.00
OTHER WHFO'S--CUSTOM FITTED			L3969	SEWHO, mobile arm support, monosuspension arm and hand support, overhead elbow forearm hand sling support, yoke type arm suspension support	417.06
L3906	WHFO, wrist gauntlet, molded to patient model	267.41	ADDITIONS TO MOBILE ARM SUPPORTS		
L3907	WHFO, wrist gauntlet with thumb spica, molded to patient model	B.R.	L3970	SEWHO, addition to mobile arm support, elevating proximal arm	200.00
L3908	WHFO, wrist extension control cock-up, non-molded	50.13	L3972	SEWHO, addition to mobile arm support, offset or lateral rocker arm with elastic balance control	112.00
L3910	WHFO, Swanson design	216.00	L3974	SEWHO, addition to mobile arm support, supinator	112.00
L3912	WHFO, flexion glove with elastic finger control	67.25	UPPER LIMB--FRACTURE ORTHOSIS		
L3914	WHFO, wrist extension cock-up	60.00	L3980	Upper extremity fracture orthosis, humeral	163.17
L3916	WHFO, wrist extension cock-up, with outrigger	72.00	L3982	Upper extremity fracture orthosis, radius/ulnar	172.00
L3918	WHFO, knuckle bender	50.45	L3984	Upper extremity fracture orthosis, wrist	122.40
L3920	WHFO, knuckle bender, with outrigger	60.00	L3985	Upper extremity fracture orthosis, forearm, hand with wrist hinge	366.12
L3922	WHFO, knuckle bender, two segment to flex joints	63.54	L3986	Upper extremity fracture orthosis, combination of humeral, radius/ulnar, wrist, (example: Colles fracture)	391.85
L3924	WHFO, Oppenheimer	60.00	L3995	Addition to upper extremity orthosis, sock, fracture or equal, each	14.80
L3926	WHFO, Thomas suspension	64.00	L3999	Unlisted procedures for upper limb orthosis	B.R.
L3928	WHFO, finger extension, with clock spring	40.00	(g) SPECIFIC REPAIR (L4000-L4199)		
L3930	WHFO, finger extension, with wrist support	44.79			
L3932	WHFO, safety pin, spring wire	29.94			
L3934	WHFO, safety pin, modified	31.24			
L3936	WHFO, Palmer	48.00			
L3938	WHFO, dorsal wrist	48.00			
L3940	WHFO, dorsal wrist, with outrigger attachment	60.00			
L3942	WHFO, reverse knuckle bender	48.40			
L3944	WHFO, reverse knuckle bender, with outrigger	60.00			
L3946	WHFO, composite elastic	57.63			

HCPCS Code	Description	Maximum Fee Allowance (\$)
L4000	Replace girdle for Milwaukee orthosis	696.00
L4010	Replace trilateral socket brim	444.59
L4020	Replace quadrilateral socket brim, molded to patient model	532.00
L4030	Replace quadrilateral socket brim, custom fitted	373.06
L4040	Replace molded thigh lacer	272.53
L4045	Replace nonmolded thigh lacer	140.00
L4050	Replace molded calf lacer	331.80
L4055	Replace nonmolded calf lacer	61.02
L4060	Replace high roll cuff	136.00
L4070	Replace proximal and distal upright for KAFO	168.00
L4080	Replace metal bands KAFO, proximal thigh	72.00
L4090	Replace metal bands KAFO-AFO, calf or distal thigh	60.00
L4100	Replace leather cuff KAFO, proximal thigh	80.00
L4110	Replace leather cuff KAFO-AFO, calf or distal thigh	52.00
L4130	Replace pretibial shell	331.45
X4370	Calf cuff	52.00
X4375	Calf band	34.00

(h) REPAIRS (L4200-L4299)

L4200	Repair of orthotic device, hourly rate	42.40
L4210	Repair of orthotic device, repair or replace minor parts	69.00

(i) ANCILLARY ORTHOTIC SERVICES (L4300-L4399)

L4350	Pneumatic ankle control splint (for example, aircast)	52.00
L4360	Pneumatic walking splint (for example, aircast)	160.00
L4370	Pneumatic full leg splint (for example, aircast)	88.00
L4380	Pneumatic knee splint (for example, aircast)	56.00
L4392	Replace soft interface material, ankle contracture splint	13.56
L4394	Replace soft interface material, foot drop splint	9.90
L4396	Ankle contracture splint	96.67
L4398	Foot drop splint, recumbent positioning device	44.52
X3680	Travel time per hour (specify time involved)	40.72

Amended by R.1998 d.410, effective August 3, 1998.

See: 30 N.J.R. 512(a), 30 N.J.R. 2919(a).

In (c) and (i), inserted new Codes.

Amended by R.1999 d.40, effective February 1, 1999.

See: 30 N.J.R. 3897(a), 31 N.J.R. 439(a).

In (a), added L0999; in (c), inserted L1843 and L2035; and in (e), added Qualifiers in L3001, L3010, L3020, L3030, L3040, L3050 and L3060, and deleted X4800, X4801, X4802, X4803, X4804 and X4805.

Amended by R.1999 d.391, effective November 15, 1999.

See: 31 N.J.R. 2291(b), 31 N.J.R. 3635(a).

In (c), inserted L1690 and L1847; in (f), inserted L3675; and in (i), deleted L4310 and L4320.

10:55-2.4 HCPCS Procedure Codes and Maximum Fee Allowance Schedule for Prosthetic Services

HCPCS Code	Description	Maximum Fee Allowance (\$)
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(a) PROSTHETIC LIMB—(L5000-L5999) PROCEDURES—LOWER

The procedures in this section are considered as “base” or “basic procedures” and may be modified by listing items/procedures or special material from the “additions” section and adding them to the base procedure.

PARTIAL FOOT		
L5000	Partial foot, shoe insert with longitudinal arch, toe filler	339.53
L5010	Partial foot, molded socket, ankle height, with toe filler	680.00
L5020	Partial foot, molded socket, tibial tubercle height, with toe filler	1,040.00
ANKLE		
L5050	Ankle, Syme, molded socket, Sach foot	1,360.00
L5060	Ankle, Syme, metal frame, molded leather socket, articulated ankle/foot	2,000.00
BELOW KNEE		
L5100	Below knee, molded socket, shin, Sach foot	1,036.56
L5105	Below knee, plastic socket, joints and thigh lacer, Sach foot	2,000.00
KNEE DISARTICULATION		
L5150	Knee disarticulation (or through knee), molded socket, external knee joints, shin, Sach foot	2,500.00
L5160	Knee disarticulation (or through knee), molded socket, bent knee configuration, external knee joints, shin, Sach foot	2,683.30
ABOVE KNEE		
L5200	Above knee, molded socket, single axis constant friction knee, shin, Sach foot	1,301.76
L5210	Above knee, short prosthesis, no knee joint (“stubbies”), with foot blocks, no ankle joints, each	1,360.00
L5220	Above knee, short prosthesis, no knee joint (“stubbies”), with articulated ankle/foot, dynamically aligned, each	1,680.00
L5230	Above knee, for proximal femoral focal deficiency, constant friction knee, shin, Sach foot	1,607.20
HIP DISARTICULATION		
L5250	Hip disarticulation, Canadian type; molded socket, hip joint, single axis constant friction knee, shin, Sach foot	3,040.00
L5270	Hip disarticulation, tilt table type, molded socket, locking hip joint, single axis constant friction knee, shin, Sach foot	3,040.00
HEMIPELVECTOMY		
L5280	Hemipelvectomy, Canadian type; molded socket, hip joint, single axis constant friction knee, shin, Sach foot	3,440.00
ENDOSKELETAL: BELOW KNEE		

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L5300	Below knee, molded socket, Sach foot, endoskeletal system, including soft cover and finishing	1,379.04	L5510	Preparatory, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, plaster socket, molded to model	726.60
L5310	ENDOSKELETAL: KNEE DISARTICULATION Knee disarticulation (or through knee), molded socket, Sach foot endoskeletal system, including soft cover and finishing	2,800.00	L5520	Preparatory, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, thermoplastic or equal, direct formed	960.00
L5320	ENDOSKELETAL: ABOVE KNEE Above knee, molded socket, open end, Sach foot, endoskeletal system, single axis knee, including soft cover and finishing	1,610.96	L5530	Preparatory, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, thermoplastic or equal, molded to model	1,120.00
L5330	ENDOSKELETAL: HIP DISARTICULATION Hip disarticulation, Canadian type; molded socket, endoskeletal system, single axis knee, hip joint, Sach foot, including soft cover and finishing	2,800.00	L5535	Preparatory, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, prefabricated, adjustable open end socket	1,000.00
L5340	ENDOSKELETAL: HEMIPELVECTOMY Hemipelvectomy, Canadian type; molded socket, endoskeletal system, single axis knee, hip joint, Sach foot, including soft cover and finishing	4,000.00	L5540	Preparatory, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, laminated socket, molded to model	1,146.60
L5400	IMMEDIATE POSTSURGICAL OR EARLY FITTING PROCEDURES Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment, suspension, and one cast change, below knee	844.78	L5560	Preparatory, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover, Sach foot, plaster socket, molded to model	1,120.00
L5410	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension, below knee, each additional cast change and realignment	328.42	L5570	Preparatory, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover, Sach foot, thermoplastic or equal, direct formed	1,200.00
L5420	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension and one cast change "AK" or knee disarticulation	1,070.47	L5580	Preparatory, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover Sach foot, thermoplastic or equal, molded to model	1,320.00
L5430	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting, alignment and suspension, "AK" or knee disarticulation, each additional cast change and realignment	461.40	L5585	Preparatory, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover, Sach foot, prefabricated adjustable open end socket	1,248.88
L5450	Immediate postsurgical or early fitting, application of nonweight bearing rigid dressing, below knee	200.00	L5590	Preparatory, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover, Sach foot, laminated socket, molded to model	1,499.40
L5460	Immediate postsurgical or early fitting, application of nonweight bearing rigid dressing, above knee	240.00	L5595	Preparatory, hip disarticulation-hemipelvectomy, pylon, no cover, Sach foot, thermoplastic or equal, molded to patient model	2,120.00
L5500	INITIAL PROSTHESIS Initial, below knee "PTB" type socket, "USMC" or equal pylon, no cover, Sach foot, plaster socket, direct formed	726.60	ADDITIONS TO LOWER EXTREMITY		
L5505	Initial, above knee--knee disarticulation, ischial level socket, "USMC" or equal pylon, no cover, Sach foot plaster socket, direct formed	980.00	L5600	Preparatory, hip disarticulation-hemipelvectomy, pylon, no cover, Sach foot, laminated socket, molded to patient model	2,240.00
	PREPARATORY PROSTHESIS		L5610	Addition to lower extremity, above knee, hydracadence system	1,454.31
			L5611	Addition to lower extremity, above knee--knee disarticulation, 4-bar linkage, with friction swing phase control	768.00
			L5613	Addition to lower extremity, above knee--knee disarticulation, 4-bar linkage, with hydraulic swing phase control	1,240.00
			L5614	Addition to lower extremity, above knee--knee disarticulation, 4-bar linkage, with pneumatic swing phase control	2,307.16
			L5616	Additions to lower extremity, above knee, universal multiplex system, friction swing phase control	720.00

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L5617	Addition to lower extremity, quick change self-aligning unit, above knee or below knee, each	320.52	X3435	Socket-thigh component, total contact above knee	607.00
	ADDITIONS: TEST SOCKETS			ADDITIONS: SOCKET INSERT AND SUSPENSION	
L5618	Addition to lower extremity, test socket, Symes	160.00	L5654	Addition to lower extremity, socket insert, Symes (Kemblo, Pelite, Aliplast, Plastazote or equal)	231.71
L5620	Addition to lower extremity, test socket, below knee	208.63	L5655	Addition to lower extremity, socket insert, below knee (Kemblo, Pelite, Aliplast, Plastazote or equal)	184.80
L5622	Addition to lower extremity, test socket, knee disarticulation	264.00	L5656	Addition to lower extremity, socket insert, knee disarticulation (Kemblo, Pelite, Aliplast, Plastazote or equal)	273.00
L5624	Addition to lower extremity, test socket, above knee	240.00	L5658	Addition to lower extremity, socket insert, above knee (Kemblo, Pelite, Aliplast, Plastazote or equal)	259.38
L5626	Addition to lower extremity, test socket, hip disarticulation	300.00	L5660	Addition to lower extremity, socket insert, Symes, silicone gel or equal	320.00
L5628	Addition to lower extremity, test socket, hemipelvectomy	340.00	L5661	Addition to lower extremity, socket insert, multi-durometer, Symes	438.84
L5629	Addition to lower extremity, below knee, acrylic socket	289.07	L5662	Addition to lower extremity, socket insert, below knee, silicone gel or equal	300.00
	ADDITIONS: SOCKET VARIATIONS		L5663	Addition to lower extremity, socket insert, knee disarticulation, silicone gel or equal	380.00
L5630	Addition to lower extremity, Symes type, expandable wall socket	280.00	L5664	Addition to lower extremity, socket insert, above knee, silicone gel or equal	380.00
L5631	Addition to lower extremity, above knee or knee disarticulation, acrylic socket	320.00	L5665	Addition to lower extremity, socket insert, multidurometer, below knee	223.74
L5632	Addition to lower extremity, Symes type, "PTB" brim design socket	180.02	L5666	Addition to lower extremity, below knee, cuff suspension	40.72
L5634	Addition to lower extremity, Symes type, posterior opening (Canadian) socket	231.74	L5667	Addition to lower extremity, below knee/above knee, socket insert, suction suspension, with locking mechanism	909.03
L5636	Addition to lower extremity, Symes type, medial opening socket	196.85	L5668	Addition to lower extremity, below knee, molded distal cushion	77.53
L5637	Addition to lower extremity, below knee, total contact	160.00	L5669	Addition to lower extremity, below knee/above knee, socket insert, suction suspension, without locking mechanism	697.05
L5638	Addition to lower extremity, below knee, leather socket	320.00	L5670	Addition to lower extremity, below knee, molded supracondylar suspension ("PTS" or similar)	199.00
L5639	Addition to lower extremity, below knee, wood socket	600.00	L5672	Addition to lower extremity, below knee, removable medial brim suspension	220.00
L5640	Addition to lower extremity, knee disarticulation, leather socket	400.00	X3540	Suction socket valve	79.76
L5642	Addition to lower extremity, above knee, leather socket	400.00	L5674	Addition to lower extremity, below knee, latex sleeve suspension or equal, each	44.28
L5643	Addition to lower extremity, hip disarticulation, flexible inner socket, external frame	691.20	L5675	Addition to lower extremity, below knee, latex sleeve suspension or equal, heavy duty, each	40.68
L5644	Addition to lower extremity, above knee, wood socket	400.00	L5676	Addition to lower extremity, below knee, knee joints, single axis, pair	178.96
L5645	Addition to lower extremity, below knee, flexible inner socket, external frame	325.44	L5677	Addition to lower extremity, below knee, knee joints, polycentric, pair	203.40
L5646	Addition to lower extremity, below knee, air cushion socket	260.00	L5678	Addition to lower extremity, below knee joint covers, pair	20.00
L5647	Addition to lower extremity, below knee, suction socket	223.74	L5680	Addition to lower extremity, below knee, thigh lacer, nonmolded	172.88
L5648	Addition to lower extremity, above knee, air cushion socket	300.00	L5682	Addition to lower extremity, below knee, thigh lacer, gluteal/ischial, molded	420.00
L5649	Addition to lower extremity, ischial containment/narrow M-L socket	1,354.99	L5684	Addition to lower extremity, below knee, fork strap	32.56
L5650	Addition to lower extremity, total contact, above knee or knee disarticulation socket	354.91	L5686	Addition to lower extremity, below knee, back check (extension control)	32.00
L5651	Addition to lower extremity, above knee, flexible inner socket, external frame	528.84			
L5652	Addition to lower extremity, suction suspension, above knee or knee disarticulation socket	310.53			
L5653	Addition to lower extremity, knee disarticulation, expandable wall socket	408.96			

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L5688	Addition to lower extremity, below knee, waist belt, webbing	40.72	L5726	Addition, exoskeletal knee-shin system, single axis, external joints fluid swing phase control	1,000.00
L5690	Addition to lower extremity, below knee, waist belt, padded and lined	71.62	L5728	Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control	1,500.00
L5692	Addition to lower extremity, above knee, pelvic control belt, light	69.20	L5780	Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control	600.00
L5694	Addition to lower extremity, above knee, pelvic control belt, padded and lined	125.53	COMPONENT MODIFICATION		
L5695	Addition to lower extremity, below knee, pelvic control, sleeve suspension, neoprene or equal, Sach	100.00	L5785	Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)	203.40
L5696	Addition to lower extremity, above knee or knee disarticulation, pelvic joint	140.00	L5790	Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)	305.10
L5697	Addition to lower extremity, above knee or knee disarticulation, pelvic band	32.56	L5795	Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium, carbon fiber or equal)	406.80
L5698	Addition to lower extremity, above knee or knee disarticulation, silesian bandage	72.40	ENDOSKELETAL		
L5699	All lower extremity prostheses, shoulder harness	113.40	L5810	Addition, endoskeletal knee-shin system, single axis, manual lock	264.62
X3001	Tees pelvic suspensory	125.00	L5811	Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material	325.44
REPLACEMENTS/ADDITIONS: EXOSKELETAL KNEE-SHIN SYSTEM			L5812	Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)	284.80
L5700	Replacement, socket, below knee, molded to patient model	1,549.30	L5816	Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock	385.45
L5701	Replacement, socket, above knee-knee disarticulation, including attachment plate, molded to patient model	1,922.04	L5818	Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control	552.00
L5702	Replacement, socket, hip disarticulation, including hip joint, molded to patient model	2,422.44	L5822	Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control	1,120.00
L5704	Replacement, custom shaped protective cover, below knee	315.89	L5824	Addition, endoskeletal knee-shin system, single axis, fluid swing phase control	610.20
L5705	Replacement, custom shaped protective cover, above knee	579.14	L5826	Addition, endoskeletal knee-shin system, single axis; hydraulic swing phase control, with miniature high activity frame.	B.R.
L5706	Replacement, custom shaped protective cover, knee disarticulation	564.88	L5828	Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control	1,440.00
L5707	Replacement, custom shaped protective cover, hip disarticulation	758.92	L5830	Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control	1,076.00
L5710	Addition, exoskeletal knee-shin system, single axis, manual lock	174.96	L5840	Addition, endoskeletal knee-shin system, multi-axial, pneumatic/swing phase control	1,262.80
L5711	Addition, exoskeletal knee-shin system, single axis, manual lock, ultra-light material	284.80	L5845	Addition, endoskeletal, knee-shin system, stance flexion feature, adjustable	2,211.66
L5712	Addition, exoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)	252.00	L5846	Addition, endoskeletal, knee-shin system, microprocessor control feature, swing phase only	3,192.21
L5714	Addition, exoskeletal knee-shin system, single axis, variable friction swing phase control (safety knee)	280.00	L5850	Addition, endoskeletal system, above knee or hip disarticulation, knee extension assist	64.80
L5716	Addition, exoskeletal knee-shin system, polycentric, mechanical stance phase lock	420.00	L5855	Addition, endoskeletal system, hip disarticulation, mechanical hip extension assist	171.52
L5718	Addition, exoskeletal knee-shin system, polycentric, friction swing and stance phase control	420.00	L5910	Addition, endoskeletal system, below knee, alignable system	280.25
L5722	Addition, exoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control	633.19			
X3002	Quarting foot	700.00			
X3610	"D" Rings	12.24			
L5724	Addition, exoskeletal knee-shin system, single axis, fluid swing phase control	880.00			

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L5920	Addition, endoskeletal system, above knee or hip disarticulation, alignable system	252.00	L5999	Unlisted procedures for lower extremity prosthesis	B.R.
L5925	Addition, endoskeletal system, above knee, knee disarticulation or hip disarticulation, manual lock	186.61	(b) UPPER LIMB (L6000-L6699)		
L5930	Addition, endoskeletal system, high activity knee control frame	1,928.18	The procedures in L6000-L6599 are base procedures which may be modified by listing procedures from the "additions" sections. The base procedures include only standard friction wrist and control cable system, unless otherwise specified.		
L5940	Addition, endoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)	224.00	PARTIAL HAND		
L5950	Addition, endoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)	500.00	L6000	Partial hand, Robin-aids, thumb remaining (or equal)	924.32
L5960	Addition, endoskeletal system, hip disarticulation, ultra-light material (titanium, carbon fiber or equal)	467.82	L6010	Partial hand, Robin-aids, little and/or ring finger remaining (or equal)	1,000.00
L5962	Addition, endoskeletal system, below knee, flexible protective outer surface covering system	326.45	L6020	Partial hand, Robin-aids, no finger remaining (or equal)	953.27
L5964	Addition, endoskeletal system, above knee, flexible protective outer surface covering system	566.20	WRIST DISARTICULATION		
L5966	Addition, endoskeletal system, hip disarticulation, flexible protective outer surface covering system	729.36	L6050	Wrist disarticulation, molded socket, flexible elbow hinges, triceps pad	1,120.00
L5968	All lower extremity prosthesis; ankle, multiaxial shock absorbing system	1,958.73	L6055	Wrist disarticulation, molded socket with expandable interface, flexible elbow hinges, triceps pad	1,287.00
L5970	All lower extremity prostheses, foot, external keel, Sach foot	78.40	BELOW ELBOW		
L5972	All lower extremity prostheses, flexible keel foot (Safe, Sten, Bock Dynamic or equal)	122.40	L6100	Below elbow, molded socket, flexible elbow hinge, triceps pad	1,120.00
L5974	All lower extremity prostheses, foot, single axis ankle/foot	109.60	L6110	Below elbow, molded socket (Muenster or Northwestern suspension types)	1,420.00
L5975	All lower extremity prosthesis; combination single axis ankle and flexible kneel foot	249.89	L6120	Below elbow, molded double wall split socket, step-up hinges, half cuff	1,520.00
L5976	All lower extremity prostheses, energy storing foot (Seattle Carbon Copy II or equal)	284.80	L6130	Below elbow, molded double wall split socket, stump activated locking hinge, half cuff	1,975.33
L5978	All lower extremity prostheses, foot, multi-axial ankle/foot	135.20	ELBOW DISARTICULATION		
L5979	All lower extremity prostheses, multi-axial ankle/foot, dynamic response	1,267.27	L6200	Elbow disarticulation, molded socket, outside locking hinge, forearm	1,504.00
L5980	All lower extremity prostheses, flex-foot system	2,033.60	L6205	Elbow disarticulation, molded socket with expandable interface, outside locking hinges, forearm	2,522.40
L5981	All lower extremity prostheses, flex-walk system or equal	1,723.48	ABOVE ELBOW		
L5982	All exoskeletal lower extremity prostheses, axial rotation unit	406.40	L6250	Above elbow, molded double wall socket, internal locking elbow, forearm	1,760.00
L5984	All endoskeletal lower extremity prostheses, axial rotation unit	304.80	SHOULDER DISARTICULATION		
L5985	All endoskeletal lower extremity prostheses, dynamic prosthetic pylon	362.49	L6300	Shoulder disarticulation, molded socket, shoulder bulkhead, humeral section, internal locking elbow forearm	2,120.00
L5986	All lower extremity prostheses, multi-axial rotation unit ("MCP" or equal)	304.80	L6310	Shoulder disarticulation, passive restoration (complete prosthesis)	1,840.00
L5987	All lower extremity prostheses, shank foot system with vertical loading pylon	4,152.19	L6320	Shoulder disarticulation, passive restoration (shoulder cap only)	1,200.00
L5988	All lower extremity prosthesis, combination vertical shock and multiaxial rotation/torsional force reducing pylon	1,076.78	INTERSCAPULAR THORACIC		
			L6350	Interscapular thoracic, molded socket, shoulder bulkhead, humeral section, internal locking elbow, forearm	2,380.00
			L6360	Interscapular thoracic, passive restoration (complete prosthesis)	1,545.84
			L6370	Interscapular thoracic, passive restoration (shoulder cap only)	1,400.00
			IMMEDIATE AND EARLY POST SURGICAL PROCEDURES		

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L6380	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting alignment and suspension of components, and one cast change, wrist disarticulation or below elbow	691.56	L6586	Preparatory, elbow disarticulation or below elbow, single wall socket, friction wrist, locking elbow, figure of eight harness, humeral cuff, fair lead cable control, "USMC" or equal pylon, no cover, direct formed	996.66
L6382	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting alignment and suspension of components, and one cast change, elbow disarticulation or above elbow	813.60	L6588	Preparatory, shoulder disarticulation or interscapular thoracic, single wall plastic socket, shoulder joint, locking elbow, friction wrist, chest strap, fair lead cable control, "USMC" or equal pylon, no cover, molded to patient model	1,732.80
L6384	Immediate postsurgical or early fitting, application of initial rigid dressing, including fitting alignment and suspension of components, and one cast change, shoulder disarticulation or interscapular thoracic	976.00	L6590	Preparatory, shoulder disarticulation or interscapular thoracic, single wall socket, shoulder joint, locking elbow, friction wrist, chest strap, fair lead cable control, "USMC" or equal pylon, no cover, direct formed	1,586.40
L6386	Immediate postsurgical or early fitting, each additional cast change and realignment	223.74	ADDITIONS: UPPER LIMB		
L6388	Immediate postsurgical or early fitting, application of rigid dressing only	203.40	<p>The following procedures/modifications/components may be added to other base procedures. The items in this section should reflect the additional complexity of each modification procedure, in addition to base procedure, at the time of the original order.</p>		
L6400	ENDOSKELETAL: BELOW ELBOW Below elbow, molded socket, endoskeletal system, including soft prosthetic tissue shaping	1,204.00			
L6450	ENDOSKELETAL: ELBOW DISARTICULATION Elbow disarticulation, molded socket, endoskeletal system, including soft prosthetic tissue shaping	1,301.60	L6600	Upper extremity additions, polycentric hinge, pair	52.00
L6500	ENDOSKELETAL: ABOVE ELBOW Above elbow, molded socket, endoskeletal system, including soft prosthetic tissue shaping	1,512.00	L6605	Upper extremity additions, single pivot hinge, pair	116.00
L6550	ENDOSKELETAL: SHOULDER DISARTICULATION Shoulder disarticulation, molded socket, endoskeletal system, including soft prosthetic tissue shaping	1,760.00	L6610	Upper extremity additions, flexible metal hinge, pair	46.00
L6570	ENDOSKELETAL: INTERSCAPULAR THORACIC Interscapular thoracic, molded socket, endoskeletal system, including soft prosthetic tissue shaping	2,160.00	L6615	Upper extremity addition, disconnect locking wrist unit	60.00
L6580	Preparatory, wrist disarticulation or below elbow, single wall plastic socket, friction wrist, flexible elbow hinges, figure of eight harness, humeral cuff, Bowen cable control, "USMC" or equal pylon, no cover, molded to patient model	813.60	L6616	Upper extremity addition, additional disconnect insert for locking wrist unit, each	59.89
L6582	Preparatory, wrist disarticulation or below elbow, single wall socket, friction wrist, flexible elbow hinges, figure of eight harness, humeral cuff, Bowen cable control, "USMC" or equal pylon, no cover, direct formed	691.56	L6620	Upper extremity addition, flexion-friction wrist unit	211.56
L6584	Preparatory, elbow disarticulation or above elbow, single wall plastic socket, friction wrist, locking elbow, figure of eight harness, fair lead cable control, "USMC" or equal pylon, no cover, molded to patient model	1,159.38	L6623	Upper extremity addition, spring assisted rotational wrist unit with latch release	386.40
			L6625	Upper extremity addition, rotation wrist unit with cable lock	160.00
			L6628	Upper extremity addition, quick disconnect hook adapter, Otto Bock or equal	284.76
			L6629	Upper extremity addition, quick disconnect lamination collar with coupling piece, Otto Bock or equal	73.22
			L6630	Upper extremity addition, stainless steel, any wrist	68.00
			L6632	Upper extremity addition, latex suspension sleeve, each	32.54
			L6635	Upper extremity addition, lift assist for elbow	152.48
			L6637	Upper extremity addition, nudge control elbow lock	251.68
			L6640	Upper extremity additions, shoulder abduction joint, pair	130.40
			L6641	Upper extremity addition, excursion amplifier, pulley type	97.60
			L6642	Upper extremity addition, excursion amplifier, lever type	138.40

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L6645	Upper extremity addition, shoulder flexion-abduction joint, each	65.00	L6745	Terminal device, hook, Dorrance or equal, model # 88X	220.00
L6650	Upper extremity addition, shoulder universal joint, each	200.00	L6750	Terminal device, hook, Dorrance or equal, model # 10P	195.58
L6655	Upper extremity addition, standard control cable, extra	35.00	L6755	Terminal device, hook, Dorrance or equal, model # 10X	270.00
L6660	Upper extremity addition, heavy duty control cable	56.00	L6765	Terminal device, hook, Dorrance or equal, model # 12P	203.81
L6665	Upper extremity addition, Teflon, or equal, cable lining	24.00	L6770	Terminal device, hook, Dorrance or equal, model # 99X	245.45
L6670	Upper extremity addition, hook to hand, cable adapter	43.40	L6775	Terminal device, hook, Dorrance or equal, model # 555	288.51
L6672	Upper extremity addition, harness, chest or shoulder, saddle type	108.00	L6780	Terminal device, hook, Dorrance or equal, model # SS555	243.20
L6675	Upper extremity addition, harness, figure of ("8") eight type, for single control	80.42	L6790	Terminal device, hook, Accu hook or equal	300.80
L6676	Upper extremity addition, harness, figure of ("8") eight type, for dual control	86.32	L6795	Terminal device, hook, 2 load or equal	750.00
L6680	Upper extremity addition, test socket, wrist disarticulation or below elbow	160.00	L6800	Terminal device, hook, APRL VC or equal	700.00
L6682	Upper extremity addition, test socket, elbow disarticulation or above elbow	180.00	L6805	Terminal device, modifier wrist flexion unit	248.00
L6684	Upper extremity addition, test socket, shoulder disarticulation or interscapular thoracic	148.00	L6806	Terminal device, hook, TRS Grip, VC	915.81
L6686	Upper extremity addition, suction socket	406.80	L6807	Terminal device, hook, TRS Adept, child, VC	696.18
L6687	Upper extremity addition, frame type socket, below elbow or wrist disarticulation	244.08	L6808	Terminal device, hook, TRS Adept, infant, VC	581.43
L6688	Upper extremity addition, frame type socket, above elbow or elbow disarticulation	284.76	L6809	Terminal device, hook, TRS Super Sport, passive	253.74
L6689	Upper extremity addition, frame type socket, shoulder disarticulation	325.60	L6810	Terminal device, pincher tool, Otto Bock or equal	104.24
L6690	Upper extremity addition, frame type socket, interscapular-thoracic	366.40	HANDS		
L6691	Upper extremity addition, removable insert, each	244.08	L6825	Terminal device, hand, Dorrance, VO	700.00
L6692	Upper extremity addition, silicone gel insert or equal, each	240.00	L6830	Terminal device, hand, APRL, VC	780.00
L6693	Upper extremity additions; external locking elbow, forearm counter balance	1,530.26	L6835	Terminal device, hand, Sierra, VO	680.00
(c) TERMINAL DEVICES—HOOKS (L6700-L6899)			L6840	Terminal device, hand, Becker Imperial	525.00
L6700	Terminal device, hook, Dorrance or equal, model # 3	265.00	L6845	Terminal device, hand, Becker Lock Grip	460.00
L6705	Terminal device, hook, Dorrance or equal, model # 5	211.67	L6850	Terminal device, hand, Becker Plylite	460.00
L6710	Terminal device, hook, Dorrance or equal, model # 5X	240.00	L6855	Terminal device, hand, Robin-aids, VO	480.00
L6715	Terminal device, hook, Dorrance or equal, model # 5XA	226.00	L6860	Terminal device, hand, Robin-aids, VO soft	400.00
L6720	Terminal device, hook, Dorrance or equal, model # 6	591.22	L6865	Terminal device, hand, Passive Hand	168.00
L6725	Terminal device, hook, Dorrance or equal, model # 7	288.69	L6867	Terminal device, hand, Detroit Infant Hand (mechanical)	618.06
L6730	Terminal device, hook, Dorrance or equal, model # 7LO	350.00	L6868	Terminal device, hand, Passive Infant Hand, Steeper, Hosmer or equal	136.97
L6735	Terminal device, hook, Dorrance or equal, model # 8	208.02	L6870	Terminal device, hand, child mitt	140.00
L6740	Terminal device, hook, Dorrance or equal, model # 8X	215.69	L6872	Terminal device, hand, NYU child hand	615.38
			L6873	Terminal device, hand, mechanical infant hand, Steeper or equal	257.50
			L6875	Terminal device, hand, Bock, VC	540.00
			L6880	Terminal device, hand, Bock, VO	320.00
			GLOVES FOR ABOVE HANDS		
			L6890	Terminal device, glove for above hands, production glove	84.00
			L6895	Terminal device, glove for above hands, custom glove	296.00
			(d) HAND RESTORATION (L6900-L6999)		
			L6900	Hand restoration (casts, shading and measurements included), partial hand, with glove, thumb or one finger remaining	1,000.00

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L6905	Hand restoration (casts, shading and measurements included), partial hand, with glove, multiple fingers remaining	1,000.00		shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal, electrodes, cables, two batteries and one charger myoelectronic control of terminal device	7,934.50
L6910	Hand restoration (casts, shading and measurements included), partial hand, with glove, no fingers remaining	1,000.00	L6970	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	8,475.55
L6915	Hand restoration (shading and measurements included), replacement glove for above	320.00	L6975	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	9,418.54
L6920	EXTERNAL POWER--BASE DEVICES Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	3,789.90		(e) EXTERNAL POWER—TERMINAL DEVICES (L7000-L7499)	
L6925	Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	4,350.58	L7010	Electronic hand, Otto Bock, Steeper or equal, switch controlled	1,982.40
L6930	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	3,807.50	L7015	Electronic hand, System Teknik, Variety Village or equal, switch controlled	3,307.05
L6935	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	4,384.65	L7020	Electronic greifer, Otto Bock or equal, switch controlled	2,071.86
L6940	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	5,210.69	L7025	Electronic hand, Otto Bock or equal, myoelectronically controlled	2,076.36
L6945	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	5,780.01	L7030	Electronic hand, System Teknik, Variety Village or equal, myoelectronically controlled	3,443.55
L6950	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow forearm, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	5,761.18	L7035	Electronic greifer, Otto Bock or equal, myoelectronically controlled	2,014.85
L6955	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	6,850.89	L7040	Prehensile actuator, Hosmer or equal, switch controlled	1,616.36
L6960	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow forearm, Otto Bock or equal, switch, cables, two batteries and one charger, switch control of terminal device	6,950.69	L7045	Electronic hook, child, Michigan or equal, switch controlled	854.01
L6965	Shoulder disarticulation, external power, molded inner socket, removable shoulder			EXTERNAL POWER--ELBOW	
			L7160	Electronic elbow, Boston or equal, switch controlled	8,938.22
			L7165	Electronic elbow, Boston or equal, myoelectronically controlled	10,015.91
			L7170	Electronic elbow, Hosmer or equal, switch controlled	3,238.90
			L7180	Electronic elbow, Utah or equal, myoelectronically controlled	19,382.46
			L7185	Electronic elbow, adolescent, Variety Village or equal, switch controlled	3,625.58
			L7186	Electronic elbow, child, Variety Village or equal, switch controlled	4,800.00
			L7190	Electronic elbow, adolescent, Variety Village or equal, myoelectronically controlled	5,177.71
			L7191	Electronic elbow, child, Variety Village or equal, myoelectronically controlled	5,072.00
			L7260	Electronic wrist rotator, Otto Bock or equal	1,342.44
			L7261	Electronic wrist rotator, for Utah arm	2,000.62
			L7266	Servo control, Steeper or equal	554.90
			L7272	Analogue control, UNB or equal	1,216.24

HCPCS Code	Description	Maximum Fee Allowance (\$)	HCPCS Code	Description	Maximum Fee Allowance (\$)
L7274	Proportional control, 12 volt, Utah or equal	3,666.11	L8210	Elastic support, elastic stocking, custom-made	B.R.
	EXTERNAL POWER--BATTERY COMPONENTS		L8220	Elastic support, elastic stocking, lymphedema	B.R.
L7360	Six volt battery, Otto Bock or equal, each	167.90	L8230	Elastic support, elastic stocking, garter belt	B.R.
L7362	Battery charger, six volt, Otto Bock or equal	150.23	L8239	Elastic support; not otherwise specified	B.R.
L7364	Twelve volt battery, Utah or equal, each	296.74		TRUSSES	
L7366	Battery charger, twelve volt, Utah or equal	398.67	L8300	Truss, single with standard pad	51.28
L7499	Unlisted procedures for upper extremity prosthesis	B.R.	L8310	Truss, double with standard pads	101.68
			L8320	Truss, addition to standard pad, water pad	24.00
			L8330	Truss, addition to standard pad, scrotal pad	33.65
(f) REPAIRS (L7500-L7599)			(h) PROSTHETIC SOCKS (L8400-L8499)		
L7500	Repair of prosthetic device, hourly rate	40.72	L8400	Prosthetic sheath, below knee, each	12.00
L7510	Repair prosthetic device, repair or replace minor parts	B.R.	L8410	Prosthetic sheath, above knee, each	12.00
X3680	Travel time per hour (specify time involved)	40.72	L8415	Prosthetic sheath, upper limb, each	11.20
X3690	Consultation without provision of an appliance (prosthetics or orthotics)	30.00	L8420	Prosthetic sock, wool, below knee, each	14.94
			L8430	Prosthetic sock, wool, above knee, each	18.40
			L8435	Prosthetic sock, wool, upper limb, each	8.14
			L8440	Prosthetic shrinker, below knee, each	33.60
			L8460	Prosthetic shrinker, above knee, each	41.60
			L8465	Prosthetic shrinker, upper limb, each	33.60
			L8470	Stump sock, single ply, fitting, below knee, each	2.52
			L8480	Stump sock, single ply, fitting, above knee, each	2.52
			L8485	Stump sock, single ply, fitting, upper limb, each	6.21
			L8490	Addition to prosthetic sheath/sock, air seal suction retention system	88.68
			L8499	Unlisted procedure for miscellaneous prosthetic services	B.R.
(g) GENERAL (L8000 L8399)			(i) HEAD (SKULL, FACIAL BONES AND TEMPOROMANDIBULAR JOINT)		
	BREAST PROSTHESES		L8619	Cochlear implant external speech processor, replacement	B.R.
L8000	Breast prosthesis, mastectomy bra	B.R.			
L8010	Breast prosthesis, mastectomy sleeve	40.56			
L8015	External breast prosthesis garment, with mastectomy form, post mastectomy	30.58			
L8020	Breast prosthesis, mastectomy form	132.00			
L8030	Breast prosthesis, silicone or equal	B.R.			
L8035	Custom breast prosthesis, post mastectomy, molded to patient model	1,974.74			
L8039	Breast prosthesis; not otherwise specified	B.R.			
X3650	Breast prosthesis, insert type	63.20			
	ELASTIC SUPPORTS				
L8100	Elastic support, elastic stocking, below knee, medium weight, each	24.00			
L8110	Elastic support, elastic stocking, below knee, heavy weight, each	30.40			
L8120	Elastic support, elastic stocking, below knee, surgical weight, (Linton type or equal), each	32.00			
L8130	Elastic support, elastic stocking, above knee, medium weight, each	33.60			
L8140	Elastic support, elastic stocking, above knee, heavy weight, each	36.00			
L8150	Elastic support, elastic stocking, above knee, surgical weight, (Linton type or equal), each	44.00			
L8160	Elastic support, elastic stocking, full-length, medium weight, each	40.00			
L8170	Elastic support, elastic stocking, full-length, heavy weight, each	48.00			
L8180	Elastic support, elastic stocking, full-length, heavy surgical weight, (Linton type or equal), each	52.00			
L8190	Elastic support, elastic stocking, leotards, medium weight, each	108.00			
L8200	Elastic support, elastic stocking, leotards, surgical weight, (Linton type), each	120.00			

Amended by R.1998 d.410, effective August 3, 1998.

See: 30 N.J.R. 512(a), 30 N.J.R. 2919(a).

In (a), added new Codes; and a new (i).

Amended by R.1999 d.40, effective February 1, 1999.

See: 30 N.J.R. 3897(a), 31 N.J.R. 439(a).

In (a), inserted L5826; and in (g), inserted L8039 and L8239.

Amended by R.1999 d.391, effective November 15, 1999.

See: 31 N.J.R. 2291(b), 31 N.J.R. 3635(a).

In (a), inserted L5968, L5975 and L5988; in (b), inserted L6693; and in (g), changed fee allowances in L8000 and L8030, and inserted L8015 and L8035.

APPENDIX A

FISCAL AGENT BILLING SUPPLEMENT

AGENCY NOTE: The Fiscal Agent Billing Supplement is appended as part of this chapter but is not reproduced in the New Jersey Administrative Code. When revisions are made to the Fiscal Agent Billing Supplement, replacement pages will be distributed to providers and copies will be filed with the Office of Administrative Law. For a copy of the Fiscal Agent Billing Supplement, write to:

UNISYS
PO Box 4801
Trenton, New Jersey 08619-4801

Amended by R.1998 d.410, effective August 3, 1998.
See: 30 N.J.R. 512(a), 30 N.J.R. 2919(a).
Updated the address.

or contact:

Office of Administrative Law
Quakerbridge Plaza, Building 9
PO Box 049
Trenton, New Jersey 08625-0049