



# MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

Related Change Request (CR) #: 4026

MLN Matters Number: MM4026

Related CR Release Date: September 2, 2005

Related CR Transmittal #: 665

Effective Date: January 1, 2005 for implementation of revised fee schedule amounts for codes in effect on January 1, 2005; October 1, 2005 for all other changes

Implementation Date: October 3, 2005

## *October 2005 Quarterly Fee Schedule Update for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)*

**Note:** This article was updated on February 16, 2013, to reflect current Web addresses. All other information remains unchanged.

### Provider Types Affected

Physicians, suppliers, and providers billing Medicare carriers, including Durable Medical Equipment Regional Carriers (DMERCs) and/or Fiscal Intermediaries (FIs), including Regional Home Health Intermediaries (RHHIs), for services paid under the DMEPOS Fee Schedule

### Provider Action Needed

This article is based on Change Request (CR) 4026 and provides specific information regarding the October quarterly update of the 2005 Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) fee schedule.

### Background

The DMEPOS fee schedules are updated on a quarterly basis in order to:

- Implement fee schedule amounts for new codes; and
- Revise any fee schedule amounts for existing codes that were calculated in error.

Payment on a fee schedule basis is required for:

- Durable Medical Equipment (DME), prosthetic devices, orthotics, prosthetics, and surgical dressings by the Social Security Act (Sections 1834(a)(h)(i)); and
- Parenteral and Enteral Nutrition (PEN) by regulations contained in the Code of Federal Regulations (42 CFR 414.102).

**Note:** There are no changes to the PEN fee schedule file for October 2005.

#### Disclaimer

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The following codes are being added to the Healthcare Common Procedure Coding System (HCPCS) on October 1, 2005, and are effective for claims with dates of service on or after October 1, 2005:

Code	Description of Code
Q0480	Driver for use with pneumatic ventricular assist device, replacement only
Q0481	Microprocessor control unit for use with electric ventricular assist device, replacement only
Q0482	Microprocessor control unit for use with electric/pneumatic combination ventricular assist device, replacement only
Q0483	Monitor/display module for use with electric ventricular assist device, replacement only
Q0484	Monitor/display module for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0485	Monitor control cable for use with electric ventricular assist device, replacement only
Q0486	Monitor control cable for use with electric/pneumatic ventricular assist device, replacement only
Q0487	Leads (pneumatic/electrical) for use with any type electric/pneumatic ventricular assist device, replacement only
Q0488	Power pack base for use with electric ventricular assist device, replacement only
Q0489	Power pack base for use with electric/pneumatic ventricular assist device, replacement only
Q0490	Emergency power source for use with electric ventricular assist device, replacement only
Q0491	Emergency power source for use with electric/pneumatic ventricular assist device, replacement only
Q0492	Emergency power supply cable for use with electric ventricular assist device, replacement only
Q0493	Emergency power supply cable for use with electric/pneumatic ventricular assist device, replacement only
Q0494	Emergency hand pump for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0495	Battery/power pack charger for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0496	Battery for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0497	Battery clips for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0498	Holster for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0499	Belt/vest for use with electric or electric/pneumatic ventricular assist device, replacement only
<b>Q0500*</b>	Filters for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0501	Shower covers for use with electric or electric/pneumatic ventricular assist device, replacement only
Q0502	Mobility cart for pneumatic ventricular assist device, replacement only
Q0503	Battery for pneumatic ventricular assist device, replacement only, each
Q0504	Power adapter for pneumatic ventricular assist device, replacement only, vehicle type
Q0505	Miscellaneous supply or accessory for use with ventricular assist device

\* **Replacement filters** described by code Q0500 are furnished in boxes of varying quantities by different manufacturers. Therefore, the base unit for code Q0500 for billing purposes is per each filter.

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**Note:** Instructions regarding the implementation of the above codes were furnished in CR3931.

The following table describes upcoming changes in certain HCPCS codes for wheelchairs beginning October 1, 2005.

HCPCS CODE	New Information
<b>E0971</b> (anti-tipping device for wheelchairs)	The fee schedule amount for code E0971 is being revised to reflect a base <b>billing unit of "EACH."</b> Up to this point E0971 represented "each" or a "pair" of devices. In October the fee schedule will be standardized to represent fees per each unit.
<b>E1038 &amp; E1039</b> (transport chairs)	The fee schedule amounts for E1038 are being revised to correct errors in the fee calculations and reflect changes in billing for items under these codes. The fees <b>erroneously included elevating leg rests and those should be billed separately using code K0195.</b> The updated schedule will no longer include prices for the leg rests.
<b>K0195</b> (elevating leg rests)	Suppliers should be billing these leg rests under this code.
<b>E1039</b> (transport chairs with patient weight capacity <b>over 300 pounds</b> )	Claims dated on/after October 1, 2005 should contain E1039 for chairs with weight capacity OVER 300 pounds.
<b>E1038</b> (transport chairs with patient weight capacity <b>under 300 pounds</b> )	Claims dated on/after October 1, 2005 should contain E1038 for chairs with weight capacity of 300 pounds or less.
<b>E1238</b> (Pediatric size, folding, adjustable wheelchair without seating system)	The fee schedule is being revised for E1238 to correct fee schedule calculation errors.

HCPCS codes L3000 through L3649 were added to the fee schedule file effective July 1, 2005, for use in paying claims for shoes that are an integral part of an orthoses.

L5685 was added to the HCPCS effective January 1, 2005. The fee schedules are being established as part of this report.

## Additional Information

For complete details, please see the official instruction issued to your carrier/DMERC/intermediary regarding this change. That instruction may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R665CP.pdf> on the CMS website.

If you have any questions, please contact your carrier/DMERC/intermediary at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

Also, the quarterly updates process for the DMEPOS fee schedule is located in the Medicare Claims Processing Manual (Pub 100-04, Chapter 23, Section 60). This manual can be accessed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c23.pdf> on the CMS website.

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