

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3129	Date: February 6, 2015
	Change Request 8999

Transmittal 3129, dated November 21, 2014, is being rescinded and replaced by Transmittal 3190, dated February 6, 2015, to revise the filenames in the Policy section and the Business Requirement (BR) 8999.1 to [MU00.@BF12393.DMEPOS.TI150101.V1125](#) and the filename in BR 8999.2 to [MU00.@BF12393.DMEPOS.TI150101.V1125.FI](#). Also, the CWF categories for 2 codes, L6026 and L7259, are revised from (03, 67) to (03, 60) in BR 8999.6. All other information remains the same.

SUBJECT: CY 2015 Update for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Fee Schedule