Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program • Round 1 2017

Single Payment Amounts

General Home Equipment and Related Supplies and Accessories

Charlotte-Concord-Gastonia, NC	
Commodes, Urinals, Bedpans	4
Hospital Beds (Manual)	17
Hospital Beds (Semi-Electric)	21
Hospital Bed Accessories	26
Patient Lifts	33
Seat Lift Mechanisms	37
Support Surfaces (Group 1 & 2)	40
Chester, Lancaster & York Counties, SC	
Commodes, Urinals, Bedpans	4
Hospital Beds (Manual)	17
Hospital Beds (Semi-Electric)	21
Hospital Bed Accessories	26
Patient Lifts	33
Seat Lift Mechanisms	37
Support Surfaces (Group 1 & 2)	40
Cincinnati, OH	
Commodes, Urinals, Bedpans	6
Hospital Beds (Manual)	17
Hospital Beds (Semi-Electric)	21
Hospital Bed Accessories	27
Patient Lifts	33
Seat Lift Mechanisms	37
Support Surfaces (Group 1 & 2)	42
Cleveland-Elyria, OH	
Commodes, Urinals, Bedpans	6
Hospital Beds (Manual)	17
Hospital Beds (Semi-Electric)	22
Hospital Bed Accessories	27
Patient Lifts	33
Seat Lift Mechanisms	37
Support Surfaces (Group 1 & 2)	42





Covington-Florence-Newport, KY	
Commodes, Urinals, Bedpans	7
Hospital Beds (Manual)	18
Hospital Beds (Electric)	22
Hospital Bed Accessories	28
Patient Lifts	34
Seat Lift Mechanisms	37
Support Surfaces (Group 1 & 2)	43
Dallas-Fort Worth-Arlington, TX	
Commodes, Urinals, Bedpans	8
Hospital Beds (Manual)	18
Hospital Beds (Semi-Electric)	22
Hospital Bed Accessories	28
Patient Lifts	34
Seat Lift Mechanisms	38
Support Surfaces (Group 1 & 2)	44
Dearborn, Franklin, Ohio & Union Counties, IN	
Commodes, Urinals, Bedpans	9
Hospital Beds (Manual)	18
Hospital Beds (Semi-Electric)	23
Hospital Bed Accessories	28
Patient Lifts	34
Seat Lift Mechanisms	38
Support Surfaces (Group 1 & 2)	45
Kansas City, MO	
Commodes, Urinals, Bedpans	10
Hospital Beds (Manual)	18
Hospital Beds (Semi-Electric)	23
Hospital Bed Accessories	29
Patient Lifts	34
Seat Lift Mechanisms	38
Support Surfaces (Group 1 & 2)	46
Kansas City-Overland Park-Ottawa, KS	
Commodes, Urinals, Bedpans	11
Hospital Beds (Manual)	18
Hospital Beds (Semi-Electric)	23
Hospital Bed Accessories	29
Patient Lifts	35
Seat Lift Mechanisms	38
Support Surfaces (Group 1 & 2)	47
Miami-Fort Lauderdale-West Palm Beach, FL	
Commodes, Urinals, Bedpans	12
Hospital Beds (Manual)	19
Hospital Beds (Semi-Electric)	24
Hospital Bed Accessories	30
Patient Lifts	35
Seat Lift Mechanisms	39
Support Surfaces (Group 1 & 2)	48

Orlando-Kissimmee-Sanford, FL	
Commodes, Urinals, Bedpans	13
Hospital Beds (Manual)	19
Hospital Beds (Semi-Electric)	24
Hospital Bed Accessories	31
Patient Lifts	35
Seat Lift Mechanisms	39
Support Surfaces (Group 1 & 2)	49
Pittsburgh, PA	
Commodes, Urinals, Bedpans	14
Hospital Beds (Manual)	19
Hospital Beds (Semi-Electric)	24
Hospital Bed Accessories	31
Patient Lifts	36
Seat Lift Mechanisms	39
Support Surfaces (Group 1 & 2)	50
Riverside-San Bernardino-Ontario, CA	
Commodes, Urinals, Bedpans	15
Hospital Beds (Manual)	20
Hospital Beds (Semi-Electric)	25
Hospital Bed Accessories	32
Patient Lifts	36
Seat Lift Mechanisms	39
Support Surfaces (Group 1 & 2)	51

Single Payment Amounts General Home Equipment and Related Supplies and Accessories

Commodes, Urinals, Bedpans

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$29.63
Charlotte-Concord-Gastonia, NC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.96
Charlotte-Concord-Gastonia. NC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$22.22
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Charlotte-Concord-Gastonia, NC	E0161	FAUCET ATTACHMENT/S	NU			\$28.00
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Charlotte-Concord-Gastonia, NC	E0161	FAUCET ATTACHMENT/S	RR			\$2.80
Charlotte-Concord-Gastonia, NC	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	UE			\$21.00
Charlotte-Concord-Gastonia, NC	E0161	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$21.00
,			-			
Charlotte-Concord-Gastonia, NC	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.29
Charlotte-Concord-Gastonia, NC	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$39.69
Charlotte-Concord-Gastonia, NC	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$13.82
Charlotte-Concord-Gastonia, NC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$12.00
Charlotte-Concord-Gastonia, NC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.20
Charlotte-Concord-Gastonia, NC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$9.00
Charletta Canadad Castania NC	50400	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	NU I			¢400.00
Charlotte-Concord-Gastonia, NC	E0168	WITHOUT ARMS, ANY TYPE, EACH COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	NU			\$133.90
Charlotte-Concord-Gastonia, NC	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$13.39
	20100	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Charlotte-Concord-Gastonia, NC	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$100.43
Charlotte-Concord-Gastonia, NC	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.48
Charlotte-Concord-Gastonia, NC	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.76
Charlotte-Concord-Gastonia, NC	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$15.00
Charlotte-Concord-Gastonia, NC	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.50
Charlotte-Concord-Gastonia, NC	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$11.25
Charlotte-Concord-Gastonia, NC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.00
Charlotte-Concord-Gastonia, NC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.20
Charlotte-Concord-Gastonia, NC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.00
Charlotte-Concord-Gastonia. NC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$8.95
Charlotte-Concord-Gastonia, NC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90
Charlotte-Concord-Gastonia, NC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.71
Charlotte-Concord-Gastonia, NC	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.00
Charlotte-Concord-Gastonia, NC	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90
Charlotte-Concord-Gastonia, NC	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$6.75
Chester, Lancaster & York	20020					ψ0.75
Counties, SC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$29.00
Chester, Lancaster & York						
Counties, SC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.90

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Chester, Lancaster & York						
Counties, SC	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$21.75
Chester, Lancaster & York		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Counties, SC	E0161	FAUCET ATTACHMENT/S	NU			\$27.65
Chester, Lancaster & York		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Counties, SC	E0161	FAUCET ATTACHMENT/S	RR			\$2.77
Chester, Lancaster & York		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Counties, SC	E0161	FAUCET ATTACHMENT/S	UE			\$20.74
Chester, Lancaster & York						
Counties, SC	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$47.64
Chester, Lancaster & York						•
Counties, SC	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$4.76
Chester, Lancaster & York	50400					* •• 5 7 •
Counties, SC	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$35.73
Chester, Lancaster & York			חח			¢40.00
Counties, SC Chester, Lancaster & York	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.30
Counties, SC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$12.00
Chester, Lancaster & York	E0107	PAIL OR PAIL FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$12.00
Counties, SC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.20
Chester, Lancaster & York	LUIUI					φ1.20
Counties, SC	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$9.00
Chester, Lancaster & York	2010/	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	02			φ3.00
Counties, SC	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$125.00
Chester, Lancaster & York		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				•
Counties, SC	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$12.50
Chester, Lancaster & York		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Counties, SC	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$93.75
Chester, Lancaster & York						
Counties, SC	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.48
Chester, Lancaster & York						
Counties, SC	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.50
Chester, Lancaster & York						
Counties, SC	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$15.44
Chester, Lancaster & York	50075		DD.			* 4 F 4
Counties, SC	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.54
Chester, Lancaster & York Counties, SC	E0275		UE			¢44 50
Counties, SC Chester, Lancaster & York	EU213	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$11.58
Counties, SC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.00
Chester, Lancaster & York	20210					ψ12.00
Counties, SC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.20
Chester, Lancaster & York	20270					Q1120
Counties, SC	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.00
Chester, Lancaster & York			-			,
Counties, SC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.00
Chester, Lancaster & York						
Counties, SC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90
Chester, Lancaster & York						
Counties, SC	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.75

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Chester, Lancaster & York	50000					60.44
Counties, SC Chester, Lancaster & York	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.41
Counties, SC	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.94
Chester, Lancaster & York						4 0.0
Counties, SC	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.06
Cincinnati, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$24.98
Cincinnati, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.50
Cincinnati, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$18.74
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Cincinnati, OH	E0161	FAUCET ATTACHMENT/S	NU			\$23.14
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Cincinnati, OH	E0161	FAUCET ATTACHMENT/S	RR			\$2.31
Cincinnati, OH	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	UE			\$17.36
Cincinnati, OH	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$52.73
Cincinnati, OH	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.27
Cincinnati, OH	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$39.55
Cincinnati, OH	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.20
Cincinnati, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.58
Cincinnati, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$10.58
Cincinnati, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.94
	LUIUI	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				φ1.94
Cincinnati, OH	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$120.00
		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Cincinnati, OH	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$12.00
	_	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Cincinnati, OH	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$90.00
Cincinnati, OH	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.74
Cincinnati, OH	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.25
Cincinnati, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$13.55
Cincinnati, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.36
Cincinnati, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.16
Cincinnati, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$11.88
Cincinnati, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.19
Cincinnati, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$8.91
Cincinnati, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$8.18
Cincinnati, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.82
Cincinnati, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.14
Cincinnati, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.80
Cincinnati, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.98
Cincinnati, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.35
Cleveland-Elyria, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$26.50
Cleveland-Elyria, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.65
Cleveland-Elyria, OH	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$19.88
Cleveland-Elyria, OH	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	NU			\$22.64

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Cleveland-Elyria, OH	E0161	FAUCET ATTACHMENT/S	RR			\$2.26
Cleveland-Elyria, OH	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	UE			\$16.98
Cleveland-Elyria, OH	E0161	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$10.98
			RR			\$5.04
Cleveland-Elyria, OH Cleveland-Elyria, OH	E0163 E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$5.04 \$37.81
			RR			\$37.81
Cleveland-Elyria, OH	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	NU			\$12.45
Cleveland-Elyria, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			•
Cleveland-Elyria, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY				\$1.00
Cleveland-Elyria, OH	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.50
Cleveland-Elyria, OH	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	NU			\$120.00
oleveland-Elyna, on	20100	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				ψ120.00
Cleveland-Elyria, OH	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$12.00
		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Cleveland-Elyria, OH	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$90.00
Cleveland-Elyria, OH	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$172.42
Cleveland-Elyria, OH	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.50
Cleveland-Elyria, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$13.30
Cleveland-Elyria, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.33
Cleveland-Elyria, OH	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$9.98
Cleveland-Elyria, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$11.50
Cleveland-Elyria, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.15
Cleveland-Elyria, OH	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$8.63
Cleveland-Elyria, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$8.50
Cleveland-Elyria, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.85
Cleveland-Elyria, OH	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.38
Cleveland-Elyria, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$10.15
Cleveland-Elyria, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$1.02
Cleveland-Elyria, OH	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.61
Covington-Florence-Newport, KY	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$25.00
Covington-Florence-Newport, KY	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.50
Covington-Florence-Newport, KY	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$18.75
comigion i cronoc no aport, m		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				•
Covington-Florence-Newport, KY	E0161	FAUCET ATTACHMENT/S	NU			\$22.00
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Covington-Florence-Newport, KY	E0161	FAUCET ATTACHMENT/S	RR			\$2.20
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				A40 50
Covington-Florence-Newport, KY	E0161	FAUCET ATTACHMENT/S	UE			\$16.50
Covington-Florence-Newport, KY	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$50.82
Covington-Florence-Newport, KY	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.08
Covington-Florence-Newport, KY	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$38.12
Covington-Florence-Newport, KY	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.40
Covington-Florence-Newport, KY	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.00
Covington-Florence-Newport, KY	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.00
Covington-Florence-Newport, KY	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.50

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Covington-Florence-Newport, KY	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$115.00
Covington-Florence-Newport, KY	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	RR			\$11.50
	20100	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Covington-Florence-Newport, KY	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$86.25
Covington-Florence-Newport, KY	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.48
Covington-Florence-Newport, KY	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.76
Covington-Florence-Newport, KY	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$13.50
Covington-Florence-Newport, KY	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.35
Covington-Florence-Newport, KY	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.13
Covington-Florence-Newport, KY	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$11.92
Covington-Florence-Newport, KY	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.19
Covington-Florence-Newport, KY	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$8.94
Covington-Florence-Newport, KY	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.31
Covington-Florence-Newport, KY	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.93
Covington-Florence-Newport, KY	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.98
Covington-Florence-Newport, KY	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.41
Covington-Florence-Newport, KY	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.94
Covington-Florence-Newport, KY	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.06
Dallas-Fort Worth-Arlington, TX	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$24.98
Dallas-Fort Worth-Arlington, TX	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.50
Dallas-Fort Worth-Arlington, TX	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$18.74
Dallas-Fort Worth-Arlington, TX	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	NU			\$22.50
Dallas-Fort Worth-Arlington, TX	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	RR			\$2.25
Dallas-Fort Worth-Arlington, TX	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	UE			\$16.88
Dallas-Fort Worth-Arlington, TX	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$51.20
Dallas-Fort Worth-Arlington, TX	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.12
Dallas-Fort Worth-Arlington, TX	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$38.40
Dallas-Fort Worth-Arlington, TX	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$11.37
Dallas-Fort Worth-Arlington, TX	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$9.81
Dallas-Fort Worth-Arlington, TX	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$0.98
Dallas-Fort Worth-Arlington, TX	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.36
Danas i oli Woltin Anington, 1X	20107	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				ψ1.50
Dallas-Fort Worth-Arlington, TX	E0168	WITHOUT ARMS, ANY TYPE, EACH COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	NU			\$108.36
Dallas-Fort Worth-Arlington, TX	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$10.84
Dallas-Fort Worth-Arlington, TX	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	UE			\$81.27
Dallas-Fort Worth-Arlington, TX	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$148.14
Dallas-Fort Worth-Arlington, TX	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$27.93
Dallas-Fort Worth-Arlington, TX	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$13.44
Dallas-Fort Worth-Arlington, TX	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.34
Dallas-Fort Worth-Arlington, TX	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.08

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dallas-Fort Worth-Arlington, TX	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.02
Dallas-Fort Worth-Arlington, TX	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.20
Dallas-Fort Worth-Arlington, TX	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.02
Dallas-Fort Worth-Arlington, TX	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.34
Dallas-Fort Worth-Arlington, TX	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.93
0						
Dallas-Fort Worth-Arlington, TX	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$7.01
Dallas-Fort Worth-Arlington, TX	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.62
Dallas-Fort Worth-Arlington, TX	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.96
Dallas-Fort Worth-Arlington, TX	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.22
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$27.92
Dearborn, Franklin, Ohio & Union	50400		DD			* 0 7 0
Counties, IN	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.79
Dearborn, Franklin, Ohio & Union Counties, IN	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$20.94
Dearborn, Franklin, Ohio & Union	E0160		UE			\$ 20.9 4
Counties, IN	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	NU			\$22.50
Dearborn, Franklin, Ohio & Union	LUIUI	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH	NO			φ ΖΖ.30
Counties. IN	E0161	FAUCET ATTACHMENT/S	RR			\$2.25
Dearborn, Franklin, Ohio & Union	20101	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				ψ2.20
Counties. IN	E0161	FAUCET ATTACHMENT/S	UE			\$16.88
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$49.78
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$4.98
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$37.34
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.50
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.60
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.06
Dearborn, Franklin, Ohio & Union	50407					¢7.05
Counties, IN	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.95
Dearborn, Franklin, Ohio & Union Counties, IN	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	NU			\$117.00
Dearborn, Franklin, Ohio & Union	EUIOO	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	NU			φ117.00
Counties, IN	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$11.70
Dearborn, Franklin, Ohio & Union	LOTOO	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				ψ11.70
Counties, IN	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$87.75
Dearborn, Franklin, Ohio & Union	20100		02			
Counties, IN	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.74
Dearborn, Franklin, Ohio & Union		· · · · · · · · · · · · · · · · ·				
Counties, IN	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.63
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$13.75
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.38

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.31
Dearborn, Franklin, Ohio & Union Counties, IN	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.38
Dearborn, Franklin, Ohio & Union Counties, IN	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.24
Dearborn, Franklin, Ohio & Union Counties, IN	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.29
Dearborn, Franklin, Ohio & Union Counties, IN	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.18
Dearborn, Franklin, Ohio & Union Counties, IN	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.92
Dearborn, Franklin, Ohio & Union Counties, IN	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.89
Dearborn, Franklin, Ohio & Union						A
Counties, IN	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.50
Dearborn, Franklin, Ohio & Union Counties, IN	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.95
Dearborn, Franklin, Ohio & Union Counties, IN	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.13
Kansas City, MO	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$29.00
Kansas City, MO	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.90
Kansas City, MO	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$21.75
Kansas City, MO	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	NU			\$25.20
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH	55			40.50
Kansas City, MO	E0161	FAUCET ATTACHMENT/S SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH	RR			\$2.52
Kansas City, MO	E0161	FAUCET ATTACHMENT/S	UE			\$18.90
Kansas City, MO	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$53.60
Kansas City, MO	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.36
Kansas City, MO	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$40.20
Kansas City, MO	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.57
Kansas City, MO	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.00
Kansas City, MO	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.00
Kansas City, MO	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.50
Kansas City, MO	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	NU			\$105.78
Kansas City, MO	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	RR			\$10.58
Kansas City, MO	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	UE			\$79.34
Kansas City, MO	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.50
Kansas City, MO	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$31.10
Kansas City, MO	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$14.00
Kansas City, MO	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.40
Kansas City, MO	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.50
Kansas City, MO	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.00
Kansas City, MO	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.20

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City, MO	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.00
Kansas City, MO	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.50
Kansas City, MO	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.95
Kansas City, MO	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$7.13
Kansas City, MO	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.00
Kansas City, MO	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90
Kansas City, MO	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$6.75
Kansas City-Overland Park-Ottawa,						
KS	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$26.74
Kansas City-Overland Park-Ottawa,						AA AT
KS	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.67
Kansas City-Overland Park-Ottawa, KS	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$20.06
Kansas City-Overland Park-Ottawa,	LUIUU	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				φ20.00
KS	E0161	FAUCET ATTACHMENT/S	NU			\$24.08
Kansas City-Overland Park-Ottawa,		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
KS	E0161	FAUCET ATTACHMENT/S	RR			\$2.41
Kansas City-Overland Park-Ottawa,		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
KS	E0161	FAUCET ATTACHMENT/S	UE			\$18.06
Kansas City-Overland Park-Ottawa, KS	E0162	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			¢50.75
Kansas City-Overland Park-Ottawa,	E0163	COMMODE CHAIR, MODILE OR STATIONART, WITH FIXED ARMS	NU			\$58.75
KS	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.88
Kansas City-Overland Park-Ottawa,	_0.00					
KS	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$44.06
Kansas City-Overland Park-Ottawa,						
KS	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$13.85
Kansas City-Overland Park-Ottawa,	E0407		NU 1			¢40.00
KS Kansas City Overland Park Ottawa	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.00
Kansas City-Overland Park-Ottawa, KS	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.00
Kansas City-Overland Park-Ottawa,	20101					<i>Q</i> HOU
KS	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.50
Kansas City-Overland Park-Ottawa,		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
KS	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$111.38
Kansas City-Overland Park-Ottawa,	50400	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	DD			
KS	E0168	WITHOUT ARMS, ANY TYPE, EACH COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	RR			\$11.14
Kansas City-Overland Park-Ottawa, KS	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$83.54
Kansas City-Overland Park-Ottawa,	LUTUU		02			φ00.04
KS	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$154.98
Kansas City-Overland Park-Ottawa,						
KS	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$31.05
Kansas City-Overland Park-Ottawa,						
KS	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$12.00
Kansas City-Overland Park-Ottawa, KS	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.20
Kansas City-Overland Park-Ottawa,	20213					φ1.20
KS	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$9.00

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City-Overland Park-Ottawa,	oouc		Mounter 1		Modifier 0	
KS	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$11.43
Kansas City-Overland Park-Ottawa,						
KS	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.14
Kansas City-Overland Park-Ottawa,						
KS	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$8.57
Kansas City-Overland Park-Ottawa,	E0325	URINAL: MALE, JUG-TYPE, ANY MATERIAL	NU			¢0.46
KS	E0325	URINAL, MALE, JUG-TTPE, ANT MATERIAL	NU			\$9.16
Kansas City-Overland Park-Ottawa, KS	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.92
Kansas City-Overland Park-Ottawa,						
KS	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.87
Kansas City-Overland Park-Ottawa,						
KS	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$8.72
Kansas City-Overland Park-Ottawa,	Faara					
KS	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.87
Kansas City-Overland Park-Ottawa, KS	FODDE		UE			¢C EA
No Miami-Fort Lauderdale-West Palm	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$6.54
Beach, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$20.11
Miami-Fort Lauderdale-West Palm	LUIUU	ONZ THE BATTOR EQUILMENT, FORTABLE, OUED WITHOR WITHOUT COMMODE				Ψ20.11
Beach, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.01
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$15.08
Miami-Fort Lauderdale-West Palm		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Beach, FL	E0161	FAUCET ATTACHMENT/S	NU			\$19.82
Miami-Fort Lauderdale-West Palm		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				·
Beach, FL	E0161	FAUCET ATTACHMENT/S	RR			\$1.98
Miami-Fort Lauderdale-West Palm	50404	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				¢4407
Beach, FL	E0161	FAUCET ATTACHMENT/S	UE			\$14.87
Miami-Fort Lauderdale-West Palm Beach, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$51.91
Miami-Fort Lauderdale-West Palm	LUIUU					ψ31.31
Beach, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.19
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$38.93
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$12.28
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$7.70
Miami-Fort Lauderdale-West Palm	E0167					¢0.77
Beach, FL Miami-Fort Lauderdale-West Palm	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$0.77
Beach, FL	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$5.78
Miami-Fort Lauderdale-West Palm	_0.0/	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				\$5.10
Beach, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$106.86
Miami-Fort Lauderdale-West Palm	-	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Beach, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH	RR			\$10.69
Miami-Fort Lauderdale-West Palm		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Beach, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$80.15

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Miami-Fort Lauderdale-West Palm	oouo		inounior r		inculier o	UT A
Beach, FL	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$129.28
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$22.42
Miami-Fort Lauderdale-West Palm						40 70
Beach, FL Miami-Fort Lauderdale-West Palm	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$9.79
Beach, FL	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$0.98
Miami-Fort Lauderdale-West Palm	L0275					φ0.50
Beach, FL	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$7.34
Miami-Fort Lauderdale-West Palm						· · · · ·
Beach, FL	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$9.11
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$0.91
Miami-Fort Lauderdale-West Palm	F0070					¢c.02
Beach, FL Miami-Fort Lauderdale-West Palm	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$6.83
Beach, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$7.22
Miami-Fort Lauderdale-West Palm	20020					ψ1.22
Beach, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.72
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$5.42
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$7.88
Miami-Fort Lauderdale-West Palm	F0000		DD			¢0.70
Beach, FL Miami-Fort Lauderdale-West Palm	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.79
Beach, FL	E0326	URINAL: FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$5.91
Orlando-Kissimmee-Sanford, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$22.11
Orlando-Kissimmee-Sanford, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.21
Orlando-Kissimmee-Sanford, FL	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$16.58
Onando-Rissimmee-Samold, FL	LUIUU	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH	UL			\$10.50
Orlando-Kissimmee-Sanford, FL	E0161	FAUCET ATTACHMENT/S	NU			\$21.16
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Orlando-Kissimmee-Sanford, FL	E0161	FAUCET ATTACHMENT/S	RR			\$2.12
		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
Orlando-Kissimmee-Sanford, FL	E0161	FAUCET ATTACHMENT/S	UE			\$15.87
Orlando-Kissimmee-Sanford, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$59.74
Orlando-Kissimmee-Sanford, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.97
Orlando-Kissimmee-Sanford, FL	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$44.81
Orlando-Kissimmee-Sanford, FL	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$13.40
Orlando-Kissimmee-Sanford, FL	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$8.33
Orlando-Kissimmee-Sanford, FL	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$0.83
Orlando-Kissimmee-Sanford, FL	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$6.25
		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
Orlando-Kissimmee-Sanford, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$108.89
Odende Kiesinmer De Kend. 51	50400	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	DD			\$ 40.00
Orlando-Kissimmee-Sanford, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR	RR			\$10.89
Orlando-Kissimmee-Sanford, FL	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$81.67
	20100					W 01.07

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Orlando-Kissimmee-Sanford, FL	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR		inculier e	\$140.00
Orlando-Kissimmee-Sanford, FL	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$27.71
Orlando-Kissimmee-Sanford, FL	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$10.80
Orlando-Kissimmee-Sanford, FL	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.08
Orlando-Kissimmee-Sanford, FL	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$8.10
Orlando-Kissimmee-Sanford, FL	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$9.52
Orlando-Kissimmee-Sanford, FL	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$0.95
Orlando-Kissimmee-Sanford, FL	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$7.14
Orlando-Kissimmee-Sanford, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$7.60
Orlando-Kissimmee-Sanford, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.76
Orlando-Kissimmee-Sanford, FL	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$5.70
Orlando-Kissimmee-Sanford, FL	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$8.29
Orlando-Kissimmee-Sanford, FL	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.83
Orlando-Kissimmee-Sanford, FL	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$6.22
Pittsburgh, PA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$27.32
Pittsburgh, PA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.73
Pittsburgh, PA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$20.49
	20100	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH	02			<i>Q20110</i>
Pittsburgh, PA	E0161	FAUCET ATTACHMENT/S	NU			\$27.65
Pittsburgh, PA	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	RR			\$2.77
Pittsburgh, PA	E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	UE			\$20.74
Pittsburgh, PA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$48.12
Pittsburgh, PA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$4.81
Pittsburgh, PA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$36.09
Pittsburgh, PA	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$11.40
Pittsburgh, PA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$10.10
Pittsburgh, PA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.01
Pittsburgh, PA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$7.58
Pittsburgh, PA	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	NU			\$120.24
Pittsburgh, PA	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	RR			\$12.02
	50400	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				¢00.40
Pittsburgh, PA	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$90.18
Pittsburgh, PA	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$169.48
Pittsburgh, PA	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$30.50
Pittsburgh, PA	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$15.25
Pittsburgh, PA	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.53
Pittsburgh, PA	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$11.44
Pittsburgh, PA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.38
Pittsburgh, PA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.24
Pittsburgh, PA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.29
Pittsburgh, PA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.04
Pittsburgh, PA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Pittsburgh, PA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE	1		\$6.78
Pittsburgh, PA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.94
Pittsburgh, PA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.99
Pittsburgh, PA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.46
Riverside-San Bernardino-Ontario,						
CA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	NU			\$29.52
Riverside-San Bernardino-Ontario, CA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	RR			\$2.95
Riverside-San Bernardino-Ontario,	EUIOU	SILZ ITPE BATH OR EQUIPMENT, FORTABLE, USED WITH OR WITHOUT COMMODE				φ 2.95
CA	E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	UE			\$22.14
Riverside-San Bernardino-Ontario,		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
CA	E0161	FAUCET ATTACHMENT/S	NU			\$22.55
Riverside-San Bernardino-Ontario,		SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				
CA	E0161	FAUCET ATTACHMENT/S	RR			\$2.26
Riverside-San Bernardino-Ontario,	50404	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH				* 40.04
CA Riverside-San Bernardino-Ontario,	E0161	FAUCET ATTACHMENT/S	UE			\$16.91
CA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	NU			\$52.90
Riverside-San Bernardino-Ontario,	20100					VOLIOU
CA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	RR			\$5.29
Riverside-San Bernardino-Ontario,						
CA	E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	UE			\$39.68
Riverside-San Bernardino-Ontario,						
CA Diverside Can Demonding Optania	E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	RR			\$14.13
Riverside-San Bernardino-Ontario, CA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	NU			\$11.02
Riverside-San Bernardino-Ontario,	LUIUI					φ11.02
CA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	RR			\$1.10
Riverside-San Bernardino-Ontario,						
CA	E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	UE			\$8.27
Riverside-San Bernardino-Ontario,		COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				
CA	E0168	WITHOUT ARMS, ANY TYPE, EACH	NU			\$128.17
Riverside-San Bernardino-Ontario, CA	E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	RR			\$12.82
Riverside-San Bernardino-Ontario,	EUI00	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR				\$12.0Z
CA	E0168	WITHOUT ARMS, ANY TYPE, EACH	UE			\$96.13
Riverside-San Bernardino-Ontario,						
CA	E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	RR			\$172.42
Riverside-San Bernardino-Ontario,						
CA	E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	RR			\$31.11
Riverside-San Bernardino-Ontario,	50075					* 4 4 5 0
CA Biverside San Bernardina Ontaria	E0275	BED PAN, STANDARD, METAL OR PLASTIC	NU			\$14.50
Riverside-San Bernardino-Ontario, CA	E0275	BED PAN, STANDARD, METAL OR PLASTIC	RR			\$1.45
Riverside-San Bernardino-Ontario,	20210					ψ1. 4 5
CA	E0275	BED PAN, STANDARD, METAL OR PLASTIC	UE			\$10.88
Riverside-San Bernardino-Ontario,						
CA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	NU			\$12.04
Riverside-San Bernardino-Ontario,						
CA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	RR			\$1.20

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Riverside-San Bernardino-Ontario,	1					
CA	E0276	BED PAN, FRACTURE, METAL OR PLASTIC	UE			\$9.03
Riverside-San Bernardino-Ontario,						
CA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	NU			\$9.02
Riverside-San Bernardino-Ontario,						
CA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	RR			\$0.90
Riverside-San Bernardino-Ontario,						
CA	E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	UE			\$6.77
Riverside-San Bernardino-Ontario,						
CA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	NU			\$9.90
Riverside-San Bernardino-Ontario,						
CA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	RR			\$0.99
Riverside-San Bernardino-Ontario,						
CA	E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	UE			\$7.43

Single Payment Amounts General Home Equipment and Related Supplies and Accessories Hospital Bed (Manual)

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0250	HOSPITAL BED. FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR		inculier o	\$68.06
Charlotte-Concord-Gastonia, NC	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$67.33
Charlotte-Concord-Gastonia, NC	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$69.34
Charlotte-Concord-Gastonia, NC	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$65.00
Charlotte-Concord-Gastonia, NC	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$59.80
Charlotte-Concord-Gastonia, NC	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$44.33
Charlotte-Concord-Gastonia, NC	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$64.91
Charlotte-Concord-Gastonia, NC	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$55.25
Chester, Lancaster & York						
Counties, SC Chester, Lancaster & York	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$57.76
Counties, SC	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$59.04
Chester, Lancaster & York	20201					<i>Q</i>00.04
Counties, SC	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$62.00
Chester, Lancaster & York						
Counties, SC	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$53.69
Chester, Lancaster & York						
Counties, SC Chester, Lancaster & York	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$59.00
Counties, SC	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$43.28
Chester, Lancaster & York	20201					¢ ioi⊒o
Counties, SC	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$66.96
Chester, Lancaster & York						
Counties, SC	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$57.00
Cincinnati, OH	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$74.90
Cincinnati, OH	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$61.77
Cincinnati, OH	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$69.91
Cincinnati, OH	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$54.68
Cincinnati, OH	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$52.39
Cincinnati, OH	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$41.73
Cincinnati, OH	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$56.75
Cincinnati, OH	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$47.71
Cleveland-Elyria, OH	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$75.15
Cleveland-Elyria, OH	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$59.62
Cleveland-Elyria, OH	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$70.00
Cleveland-Elyria, OH			RR			\$55.00
	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$55.00
Cleveland-Elyria, OH Cleveland-Elyria, OH	E0290 E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$55.01
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Cleveland-Elyria, OH	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$64.91

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Cleveland-Elyria, OH	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$50.00
Covington-Florence-Newport, KY	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$64.02
Covington-Florence-Newport, KY	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$59.04
Covington-Florence-Newport, KY	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$69.83
Covington-Florence-Newport, KY	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$55.00
Covington-Florence-Newport, KY	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$59.00
Covington-Florence-Newport, KY	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$43.28
Covington-Florence-Newport, KY	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$64.91
Covington-Florence-Newport, KY	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$48.90
Dallas-Fort Worth-Arlington, TX	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$60.46
Dallas-Fort Worth-Arlington, TX	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$58.38
Dallas-Fort Worth-Arlington, TX	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$65.00
	20200	TIOGHTAE BED, VARIABLE HEIGHT, HEIG, WITTART THE GIDE RAIEG, WITTMATRIEGO				ψ03.00
Dallas-Fort Worth-Arlington, TX	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$58.78
Dallas-Fort Worth-Arlington, TX	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$58.39
Dallas-Fort Worth-Arlington, TX	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$46.59
Dallas-Fort Worth-Arlington, TX	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$65.82
Dallas-Fort Worth-Arlington, TX	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$58.25
Dearborn, Franklin, Ohio & Union	20200					
Counties, IN	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$71.98
Dearborn, Franklin, Ohio & Union Counties, IN	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$66.32
Dearborn, Franklin, Ohio & Union	20201					ψ00.02
Counties, IN	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$69.91
Dearborn, Franklin, Ohio & Union Counties, IN	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$57.97
Dearborn, Franklin, Ohio & Union	L0230	TIOSPITAL BED, VARIABLE HEIGHT, HIEO, WITTANT TIPE SIDE RAILS, WITTOUT WATTRESS				\$31.91
Counties, IN	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$58.39
Dearborn, Franklin, Ohio & Union						· · · · · ·
Counties, IN	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$43.72
Dearborn, Franklin, Ohio & Union Counties, IN	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$64.91
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$53.78
Kansas City, MO	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$68.25
Kansas City, MO	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$62.98
Kansas City, MO	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$71.80
Kansas City, MO	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$55.00
Kansas City, MO	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$59.00
Kansas City, MO	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$43.90
Kansas City, MO	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$66.96
Kansas City, MO	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$53.00
Kansas City-Overland Park-Ottawa,	20235	TOOLTAL DED, VARIABLE FLIGHT, HEO, WITHOUT ODE RAIES, WITHOUT WATTRESS				ψ33.00
KS	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$72.75
Kansas City-Overland Park-Ottawa, KS	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$60.00

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City-Overland Park-Ottawa,		•				
KS	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$73.24
Kansas City-Overland Park-Ottawa,	50050		DD			¢50.05
KS Kansas City-Overland Park-Ottawa,	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$58.35
KS	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$56.70
Kansas City-Overland Park-Ottawa,						
KS	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$42.61
Kansas City-Overland Park-Ottawa,	50000		DD			¢cr co
KS Kansas City-Overland Park-Ottawa,	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$65.60
KS	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$53.48
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$57.88
Miami-Fort Lauderdale-West Palm	50054					* 10 10
Beach, FL Miami-Fort Lauderdale-West Palm	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$46.48
Beach, FL	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$64.45
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$47.75
Miami-Fort Lauderdale-West Palm						
Beach, FL Miami-Fort Lauderdale-West Palm	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$47.36
Beach, FL	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$37.66
Miami-Fort Lauderdale-West Palm	20201					φ01.00
Beach, FL	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$48.83
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$41.88
Orlando-Kissimmee-Sanford, FL	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$64.83
Orlando-Kissimmee-Sanford, FL	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$53.15
Orlando-Kissimmee-Sanford, FL	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$68.75
Orlando-Kissimmee-Sanford, FL	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$55.43
Orlando-Kissimmee-Sanford, FL	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$52.70
Orlando-Kissimmee-Sanford, FL	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$41.40
Orlando-Kissimmee-Sanford, FL	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$56.73
Orlando-Kissimmee-Sanford, FL	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$48.90
Pittsburgh, PA	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$62.72
Pittsburgh, PA	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$59.52
Pittsburgh, PA	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$67.65
Pittsburgh, PA	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$57.40
Pittsburgh, PA	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$55.70
Pittsburgh, PA	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$43.13
Pittsburgh, PA	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$64.91
Pittsburgh, PA	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$56.12

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Riverside-San Bernardino-Ontario, CA	E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$70.02
Riverside-San Bernardino-Ontario, CA	E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$63.66
Riverside-San Bernardino-Ontario, CA	E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$71.15
Riverside-San Bernardino-Ontario, CA	E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$62.20
Riverside-San Bernardino-Ontario, CA	E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$53.77
Riverside-San Bernardino-Ontario, CA	E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$42.71
Riverside-San Bernardino-Ontario, CA	E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$60.46
Riverside-San Bernardino-Ontario, CA	E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$53.88

Single Payment Amounts General Home Equipment and Related Supplies and Accessories

Hospital Bed (Semi-Electric)

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0260	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$65.85
Charlotte-Concord-Gastonia, NC	E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$65.00
Charlotte-Concord-Gastonia, NC	E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$73.55
Charlotte-Concord-Gastonia, NC	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$74.70
Charlotte-Concord-Gastonia, NC	E0301	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$193.10
Charlotte-Concord-Gastonia, NC	E0302	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$650.00
Charlotte-Concord-Gastonia, NC	E0303	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$198.95
Charlotte-Concord-Gastonia, NC	E0304	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$499.52
Chester, Lancaster & York Counties, SC	E0260	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$59.45
Chester, Lancaster & York Counties, SC	E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$57.82
Chester, Lancaster & York Counties, SC	E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$65.73
Chester, Lancaster & York Counties, SC	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$62.18
Chester, Lancaster & York Counties, SC	E0301	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$174.40
Chester, Lancaster & York Counties, SC	E0302	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$460.00
Chester, Lancaster & York Counties, SC	E0303	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$180.90
Chester, Lancaster & York Counties, SC	E0304	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$489.18
Cincinnati, OH	E0260	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$59.32
Cincinnati, OH	E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$65.00
Cincinnati, OH	E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$75.76
Cincinnati, OH	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$70.96

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
	50004	POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				\$40
incinnati, OH	E0301		RR			\$18
	50000	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				* 4 F
incinnati, OH	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$45
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
	E0202	POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				¢40
incinnati, OH	E0303		RR			\$18
	50004	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				***
incinnati, OH	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$51
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
leveland-Elyria, OH	E0260	WITH MATTRESS	RR			\$6
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
leveland-Elyria, OH	E0261	WITHOUT MATTRESS	RR			\$6
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
leveland-Elyria, OH	E0294	MATTRESS	RR			\$7
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
leveland-Elyria, OH	E0295	WITHOUT MATTRESS	RR			\$7
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
leveland-Elyria, OH	E0301	MATTRESS	RR			\$17
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
leveland-Elyria, OH	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$47
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
leveland-Elyria, OH	E0303	MATTRESS	RR			\$17
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
leveland-Elyria, OH	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$50
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
ovington-Florence-Newport, KY	E0260	WITH MATTRESS	RR			\$5
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
ovington-Florence-Newport, KY	E0261	WITHOUT MATTRESS	RR			\$!
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
ovington-Florence-Newport, KY	E0294	MATTRESS	RR			\$7
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
ovington-Florence-Newport, KY	E0295	WITHOUT MATTRESS	RR			\$7
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
ovington-Florence-Newport, KY	E0301	MATTRESS	RR			\$18
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
ovington-Florence-Newport, KY	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$48
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
ovington-Florence-Newport, KY	E0303	MATTRESS	RR			\$18
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
ovington-Florence-Newport, KY	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$5 ⁻
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
allas-Fort Worth-Arlington, TX	E0260	WITH MATTRESS	RR			\$
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
allas-Fort Worth-Arlington, TX	E0261	WITHOUT MATTRESS	RR			\$!
, , , , , , , , , , , , , , , , ,		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
	1	MATTRESS	RR			\$

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dallas-Fort Worth-Arlington, TX	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$63.7
	L0295	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350	nn			φ03.7
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
Dallas-Fort Worth-Arlington, TX	E0301	MATTRESS	RR			\$162.8
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Dallas-Fort Worth-Arlington, TX	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$422.0
5		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
Dallas-Fort Worth-Arlington, TX	E0303	MATTRESS	RR			\$169.4
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Dallas-Fort Worth-Arlington, TX	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$434.7
Dearborn, Franklin, Ohio & Union		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Counties, IN	E0260	WITH MATTRESS	RR			\$56.7
Dearborn, Franklin, Ohio & Union		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				.
Counties, IN	E0261	WITHOUT MATTRESS	RR			\$60.7
Dearborn, Franklin, Ohio & Union	E 0004	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				A A
Counties, IN	E0294		RR			\$77.9
Dearborn, Franklin, Ohio & Union Counties, IN	FOODE	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			¢70.00
Counties, in	E0295		ĸĸ			\$70.96
Dearborn, Franklin, Ohio & Union		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
Counties, IN	E0301	MATTRESS	RR			\$174.17
Dearborn, Franklin, Ohio & Union	20001	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				ψ17-4.17
Counties, IN	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$473.44
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				••
Dearborn, Franklin, Ohio & Union		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
Counties, IN	E0303	MATTRESS	RR			\$181.2
Dearborn, Franklin, Ohio & Union		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Counties, IN	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$507.14
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Kansas City, MO	E0260	WITH MATTRESS	RR			\$59.89
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Kansas City, MO	E0261	WITHOUT MATTRESS	RR			\$64.00
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
Kansas City, MO	E0294	MATTRESS	RR			\$75.00
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
Kansas City, MO	E0295	WITHOUT MATTRESS	RR			\$70.00
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
Kanaga City MO	E0004	POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT	DD			¢470.04
Kansas City, MO	E0301	MATTRESS HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600	RR			\$170.00
Kansas City, MO	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$480.00
Railsas City, MO	E0302	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350	nn			φ 4 00.00
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
Kansas City, MO	E0303	MATTRESS	RR			\$175.0
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				<i>w</i> ., 0.00
Kansas City, MO	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$500.0
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
KS	E0260	WITH MATTRESS	RR			\$65.90
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
KS	E0261	WITHOUT MATTRESS	RR			\$64.7

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
KS	E0294	MATTRESS	RR			\$77.02
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
KS	E0295	WITHOUT MATTRESS	RR			\$74.25
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
Kansas City-Overland Park-Ottawa,		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
KS	E0301	MATTRESS	RR			\$173.15
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
KS	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$487.60
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
Kansas City-Overland Park-Ottawa,		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
KS	E0303	MATTRESS	RR			\$178.20
Kansas City-Overland Park-Ottawa,		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
KS	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$505.00
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Beach, FL	E0260	WITH MATTRESS	RR			\$65.20
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Beach, FL	E0261	WITHOUT MATTRESS	RR			\$61.75
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
Beach, FL	E0294	MATTRESS	RR			\$65.25
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
Beach, FL	E0295	WITHOUT MATTRESS	RR			\$64.25
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
Miami-Fort Lauderdale-West Palm		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
Beach, FL	E0301	MATTRESS	RR			\$151.23
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Beach, FL	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$423.59
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
Miami-Fort Lauderdale-West Palm		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
Beach, FL	E0303	MATTRESS	RR			\$164.84
Miami-Fort Lauderdale-West Palm		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Beach, FL	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$450.00
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Orlando-Kissimmee-Sanford, FL	E0260	WITH MATTRESS	RR			\$67.19
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				
Orlando-Kissimmee-Sanford, FL	E0261	WITHOUT MATTRESS	RR			\$63.00
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH				
Orlando-Kissimmee-Sanford, FL	E0294	MATTRESS	RR			\$69.06
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS,				
Orlando-Kissimmee-Sanford, FL	E0295	WITHOUT MATTRESS	RR			\$67.31
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT				
Orlando-Kissimmee-Sanford, FL	E0301	MATTRESS	RR			\$163.09
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Orlando-Kissimmee-Sanford, FL	E0302	POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$449.37
		HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350				
		POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH				
Orlando-Kissimmee-Sanford, FL	E0303	MATTRESS	RR			\$171.65
		HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600				
Orlando-Kissimmee-Sanford, FL	E0304	POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$479.23
		HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS,				\$110.20
Pittsburgh, PA	E0260	WITH MATTRESS	RR			\$59.19
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CBA Name	HCPCS Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Pittsburgh, PA	E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$63.45
Pittsburgh, PA	E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$72.67
Pittsburgh, PA	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$67.51
Pittsburgh, PA	E0301	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$163.42
Pittsburgh, PA	E0302	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$485.04
Pittsburgh, PA	E0303	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$168.83
Pittsburgh, PA	E0304	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$484.20
Riverside-San Bernardino-Ontario, CA	E0260	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$62.87
Riverside-San Bernardino-Ontario, CA	E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$65.61
Riverside-San Bernardino-Ontario, CA	E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	RR			\$74.95
Riverside-San Bernardino-Ontario, CA	E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	RR			\$74.42
Riverside-San Bernardino-Ontario, CA	E0301	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$159.99
Riverside-San Bernardino-Ontario, CA	E0302	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	RR			\$516.66
Riverside-San Bernardino-Ontario, CA	E0303	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$166.34
Riverside-San Bernardino-Ontario, CA	E0304	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	RR			\$500.00

Single Payment Amounts General Home Equipment and Related Supplies and Accessories

Hospital Bed Accessories

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0271	MATTRESS, INNERSPRING	NU		incumor o	\$132.87
Charlotte-Concord-Gastonia, NC	E0271	MATTRESS, INNERSPRING	RR			\$13.29
Charlotte-Concord-Gastonia, NC	E0271	MATTREES, INNERSPRING	UE			\$99.65
Charlotte-Concord-Gastonia, NC	E0271		NU			\$160.00
,		MATTRESS, FOAM RUBBER	RR			
Charlotte-Concord-Gastonia, NC	E0272	MATTRESS, FOAM RUBBER				\$16.00
Charlotte-Concord-Gastonia, NC	E0272	MATTRESS, FOAM RUBBER	UE			\$120.00
Charlotte-Concord-Gastonia, NC	E0280	BED CRADLE, ANY TYPE	NU			\$30.00
Charlotte-Concord-Gastonia, NC	E0280	BED CRADLE, ANY TYPE	RR			\$3.00
Charlotte-Concord-Gastonia, NC	E0280	BED CRADLE, ANY TYPE	UE			\$22.50
Charlotte-Concord-Gastonia, NC	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$11.43
Charlotte-Concord-Gastonia, NC	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$113.86
Charlotte-Concord-Gastonia, NC	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$11.39
Charlotte-Concord-Gastonia, NC	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$85.40
Charlotte-Concord-Gastonia. NC	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.30
,,		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				••••••
Charlotte-Concord-Gastonia, NC	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$44.90
· · · · · · · · · · · · · · · · · · ·		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Charlotte-Concord-Gastonia, NC	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$89.67
Charlotte-Concord-Gastonia, NC	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$20.45
Chester, Lancaster & York						
Counties, SC	E0271	MATTRESS, INNERSPRING	NU			\$120.00
Chester, Lancaster & York						
Counties, SC	E0271	MATTRESS, INNERSPRING	RR			\$12.00
Chester, Lancaster & York						
Counties, SC	E0271	MATTRESS, INNERSPRING	UE			\$90.00
Chester, Lancaster & York	F0070					* 4 40 00
Counties, SC	E0272	MATTRESS, FOAM RUBBER	NU			\$146.00
Chester, Lancaster & York Counties, SC	E0272	MATTRESS, FOAM RUBBER	RR			\$14.60
Counties, SC Chester, Lancaster & York	E0272	MATTRESS, FOAM RUBBER	ĸĸ			\$14.60
Counties, SC	E0272	MATTRESS, FOAM RUBBER	UE			\$109.50
Chester, Lancaster & York	20212		0L			<i>Q</i>100.00
Counties. SC	E0280	BED CRADLE, ANY TYPE	NU			\$31.00
Chester, Lancaster & York						
Counties, SC	E0280	BED CRADLE, ANY TYPE	RR			\$3.10
Chester, Lancaster & York						
Counties, SC	E0280	BED CRADLE, ANY TYPE	UE			\$23.25
Chester, Lancaster & York						
Counties, SC	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$13.75
Chester, Lancaster & York						
Counties, SC	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$110.00
Chester, Lancaster & York	E0240		RR			644.00
Counties, SC	E0310	BED SIDE RAILS, FULL LENGTH	ĸκ			\$11.00

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Chester, Lancaster & York						
Counties, SC	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$82.50
Chester, Lancaster & York						
Counties, SC	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$10.42
Chester, Lancaster & York Counties, SC	E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	RR			\$44.00
Chester, Lancaster & York Counties, SC	E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$83.00
Chester, Lancaster & York	F0040		DD			¢40.00
Counties, SC	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$19.30
Cincinnati, OH	E0271	MATTRESS, INNERSPRING	NU			\$131.89
Cincinnati, OH	E0271	MATTRESS, INNERSPRING	RR			\$13.19
Cincinnati, OH	E0271	MATTRESS, INNERSPRING	UE			\$98.92
Cincinnati, OH	E0272	MATTRESS, FOAM RUBBER	NU			\$132.50
Cincinnati, OH	E0272	MATTRESS, FOAM RUBBER	RR			\$13.25
Cincinnati, OH	E0272	MATTRESS, FOAM RUBBER	UE			\$99.38
Cincinnati, OH	E0280	BED CRADLE, ANY TYPE	NU			\$28.78
Cincinnati, OH	E0280	BED CRADLE, ANY TYPE	RR			\$2.88
Cincinnati, OH	E0280	BED CRADLE, ANY TYPE	UE			\$21.59
Cincinnati, OH	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.88
Cincinnati, OH	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$102.28
Cincinnati, OH	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$10.23
Cincinnati, OH	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$76.71
Cincinnati, OH	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$12.75
Cincinnati, OH	E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	RR			\$39.11
Cincinnati, OH	E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$85.78
Cincinnati, OH	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$20.33
Cleveland-Elyria, OH	E0271	MATTRESS, INNERSPRING	NU			\$119.04
Cleveland-Elyria, OH	E0271	MATTRESS, INNERSPRING	RR			\$11.90
Cleveland-Elyria, OH	E0271	MATTRESS, INNERSPRING	UE			\$89.28
Cleveland-Elyria, OH	E0272	MATTRESS, FOAM RUBBER	NU			\$130.14
Cleveland-Elyria, OH	E0272	MATTRESS, FOAM RUBBER	RR			\$13.01
Cleveland-Elyria, OH	E0272	MATTRESS, FOAM RUBBER	UE			\$97.61
Cleveland-Elyria, OH	E0280	BED CRADLE, ANY TYPE	NU			\$29.26
Cleveland-Elyria, OH	E0280	BED CRADLE, ANY TYPE	RR			\$2.93
Cleveland-Elyria, OH	E0280	BED CRADLE, ANY TYPE	UE			\$21.95
Cleveland-Elyria, OH	E0200	BED SIDE RAILS, HALF LENGTH	RR			\$10.83
Cleveland-Elyria, OH	E0303	BED SIDE RAILS, FULL LENGTH	NU			\$10.83
•		-				
Cleveland-Elyria, OH	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$11.23
Cleveland-Elyria, OH	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$84.23
Cleveland-Elyria, OH	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$12.62
Cleveland-Elyria, OH	E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	RR			\$36.57
Cleveland-Elyria, OH	E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$77.91

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Cleveland-Elyria, OH	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$21.01
Covington-Florence-Newport, KY	E0271	MATTRESS, INNERSPRING	NU			\$133.78
Covington-Florence-Newport, KY	E0271	MATTRESS, INNERSPRING	RR			\$13.38
Covington-Florence-Newport, KY	E0271	MATTRESS, INNERSPRING	UE			\$100.34
Covington-Florence-Newport, KY	E0272	MATTRESS, FOAM RUBBER	NU			\$136.00
Covington-Florence-Newport, KY	E0272	MATTRESS, FOAM RUBBER	RR			\$13.60
Covington-Florence-Newport, KY	E0272	MATTRESS, FOAM RUBBER	UE			\$102.00
Covington-Florence-Newport, KY	E0280	BED CRADLE, ANY TYPE	NU			\$29.52
Covington-Florence-Newport, KY	E0280	BED CRADLE, ANY TYPE	RR			\$2.95
Covington-Florence-Newport, KY	E0280	BED CRADLE, ANY TYPE	UE			\$22.14
Covington-Florence-Newport, KY	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.90
Covington-Florence-Newport, KY	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$102.60
Covington-Florence-Newport, KY	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$10.26
Covington-Florence-Newport, KY	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$76.95
Covington-Florence-Newport, KY	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.74
Covington-Florence-Newport, KY	E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	RR			\$38.14
Covington-Florence-Newport, KY	E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$77.70
Covington-Florence-Newport, KY	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$20.15
Dallas-Fort Worth-Arlington, TX	E0271	MATTRESS, INNERSPRING	NU			\$109.62
Dallas-Fort Worth-Arlington, TX	E0271	MATTRESS, INNERSPRING	RR			\$10.96
Dallas-Fort Worth-Arlington, TX	E0271	MATTRESS, INNERSPRING	UE			\$82.22
Dallas-Fort Worth-Arlington, TX	E0272	MATTRESS, FOAM RUBBER	NU			\$115.96
Dallas-Fort Worth-Arlington, TX	E0272	MATTRESS, FOAM RUBBER	RR			\$11.60
Dallas-Fort Worth-Arlington, TX	E0272	MATTRESS, FOAM RUBBER	UE			\$86.97
Dallas-Fort Worth-Arlington, TX	E0280	BED CRADLE, ANY TYPE	NU			\$34.65
Dallas-Fort Worth-Arlington, TX	E0280	BED CRADLE, ANY TYPE	RR			\$3.47
Dallas-Fort Worth-Arlington, TX	E0280	BED CRADLE, ANY TYPE	UE			\$25.99
Dallas-Fort Worth-Arlington, TX	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.45
Dallas-Fort Worth-Arlington, TX	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$98.04
Dallas-Fort Worth-Arlington, TX	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$9.80
Dallas-Fort Worth-Arlington, TX	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$73.53
Dallas-Fort Worth-Arlington, TX	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$10.55
Dallas-Fort Worth-Arlington, TX	E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	RR			\$39.41
Dallas-Fort Worth-Arlington, TX	E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$74.11
Dallas-Fort Worth-Arlington, TX	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$19.73
Dearborn, Franklin, Ohio & Union Counties, IN	E0271	MATTRESS, INNERSPRING	NU			\$133.78
Dearborn, Franklin, Ohio & Union Counties, IN	E0271	MATTRESS, INNERSPRING	RR			\$13.38
Dearborn, Franklin, Ohio & Union Counties, IN	E0271	MATTRESS, INNERSPRING	UE			\$100.34
Dearborn, Franklin, Ohio & Union Counties, IN	E0272	MATTRESS, FOAM RUBBER	NU			\$137.20

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dearborn, Franklin, Ohio & Union		•				
Counties, IN	E0272	MATTRESS, FOAM RUBBER	RR			\$13.72
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0272	MATTRESS, FOAM RUBBER	UE			\$102.90
Dearborn, Franklin, Ohio & Union	F0000		NU I			¢00.00
Counties, IN Dearborn, Franklin, Ohio & Union	E0280	BED CRADLE, ANY TYPE	NU			\$29.90
Counties, IN	E0280	BED CRADLE, ANY TYPE	RR			\$2.99
Dearborn, Franklin, Ohio & Union	L0200					ψ2.55
Counties, IN	E0280	BED CRADLE, ANY TYPE	UE			\$22.43
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$10.15
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$103.32
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$10.33
Dearborn, Franklin, Ohio & Union Counties, IN	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$77.49
Dearborn, Franklin, Ohio & Union	E0310	DED SIDE RAILS, FOLL LENGTH	UE			Φ 11.49
Counties, IN	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$12.37
Dearborn, Franklin, Ohio & Union	20010	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				<i>Q</i>12.07
Counties, IN	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$41.07
Dearborn, Franklin, Ohio & Union		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Counties, IN	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$77.25
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$20.25
Kansas City, MO	E0271	MATTRESS, INNERSPRING	NU			\$121.03
Kansas City, MO	E0271	MATTRESS, INNERSPRING	RR			\$12.10
Kansas City, MO	E0271	MATTRESS, INNERSPRING	UE			\$90.77
Kansas City, MO	E0272	MATTRESS, FOAM RUBBER	NU			\$130.40
Kansas City, MO	E0272	MATTRESS, FOAM RUBBER	RR			\$13.04
Kansas City, MO	E0272	MATTRESS, FOAM RUBBER	UE			\$97.80
Kansas City, MO	E0280	BED CRADLE, ANY TYPE	NU			\$35.00
Kansas City, MO	E0280	BED CRADLE, ANY TYPE	RR			\$3.50
Kansas City, MO	E0280	BED CRADLE, ANY TYPE	UE			\$26.25
Kansas City, MO	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$11.51
Kansas City, MO	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$113.00
Kansas City, MO	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$11.30
Kansas City, MO	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$84.75
Kansas City, MO	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.02
	20010	TRAFEZE BARS, ANA FATIENT HELPER, ATTACHED TO BED, WITT GRAB BAR TRAFEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS.				ψ11.02
Kansas City, MO	E0911	ATTACHED TO BED. WITH GRAB BAR	RR			\$43.30
		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Kansas City, MO	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$87.45
Kansas City, MO	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$21.80
Kansas City-Overland Park-Ottawa,						
KS	E0271	MATTRESS, INNERSPRING	NU			\$130.38
Kansas City-Overland Park-Ottawa,						
KS	E0271	MATTRESS, INNERSPRING	RR			\$13.04

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City-Overland Park-Ottawa,						0
KS	E0271	MATTRESS, INNERSPRING	UE			\$97.79
Kansas City-Overland Park-Ottawa,						
KS	E0272	MATTRESS, FOAM RUBBER	NU			\$132.55
Kansas City-Overland Park-Ottawa,						
KS	E0272	MATTRESS, FOAM RUBBER	RR			\$13.26
Kansas City-Overland Park-Ottawa,						
KS	E0272	MATTRESS, FOAM RUBBER	UE			\$99.41
Kansas City-Overland Park-Ottawa,						
KS	E0280	BED CRADLE, ANY TYPE	NU			\$30.36
Kansas City-Overland Park-Ottawa,						
KS	E0280	BED CRADLE, ANY TYPE	RR			\$3.04
Kansas City-Overland Park-Ottawa,						• • • • • •
KS	E0280	BED CRADLE, ANY TYPE	UE			\$22.77
Kansas City-Overland Park-Ottawa,	E0005					* 44.00
KS	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$11.66
Kansas City-Overland Park-Ottawa,	50040		NU 1			\$445 OO
KS	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$115.92
Kansas City-Overland Park-Ottawa,	50040					¢44.50
KS	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$11.59
Kansas City-Overland Park-Ottawa, KS	E0210		UE			¢96.04
	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$86.94
Kansas City-Overland Park-Ottawa, KS	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$12.46
Kansas City-Overland Park-Ottawa,	20910	TRAPEZE BARS, ANA FATIENT HELFER, ATTACHED TO BED, WITT GRAB BAR TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				\$12.40
KS	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$41.40
Kansas City-Overland Park-Ottawa,	20011	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
KS	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$88.10
Kansas City-Overland Park-Ottawa,						
KS	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$21.90
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0271	MATTRESS, INNERSPRING	NU			\$112.98
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0271	MATTRESS, INNERSPRING	RR			\$11.30
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0271	MATTRESS, INNERSPRING	UE			\$84.74
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0272	MATTRESS, FOAM RUBBER	NU			\$113.75
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0272	MATTRESS, FOAM RUBBER	RR			\$11.38
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0272	MATTRESS, FOAM RUBBER	UE			\$85.31
Miami-Fort Lauderdale-West Palm	E0000		NUL			¢00.00
Beach, FL	E0280	BED CRADLE, ANY TYPE	NU			\$26.00
Miami-Fort Lauderdale-West Palm Beach, FL	E0280	BED CRADLE, ANY TYPE	RR			\$2.60
Beach, FL Miami-Fort Lauderdale-West Palm	EU20U	DED UNADLE, ANT ITTE				\$2.60
Beach, FL	E0280	BED CRADLE, ANY TYPE	UE			\$19.50
Miami-Fort Lauderdale-West Palm	LU200					φ19.50 ⁻
Beach, FL	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.29
Boatin, I E	20000					ψ 0 .20

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$100.00
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$10.00
Miami-Fort Lauderdale-West Palm Beach, FL	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$75.00
Miami-Fort Lauderdale-West Palm	20310					φ <i>1</i> 5.00
Beach, FL	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$10.73
Miami-Fort Lauderdale-West Palm		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Beach, FL	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$34.90
Miami-Fort Lauderdale-West Palm	50040	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,	55			A77.00
Beach, FL Miami-Fort Lauderdale-West Palm	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$77.08
Beach, FL	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$18.24
Orlando-Kissimmee-Sanford, FL	E0271	MATTRESS, INNERSPRING	NU			\$117.36
Orlando-Kissimmee-Sanford, FL	E0271	MATTRESS, INNERSPRING	RR			\$11.74
Orlando-Kissimmee-Sanford, FL	E0271	MATTRESS, INNERSPRING	UE			\$88.02
Orlando-Kissimmee-Sanford, FL	E0272	MATTRESS, FOAM RUBBER	NU			\$118.75
Orlando-Kissimmee-Sanford, FL	E0272	MATTRESS, FOAM RUBBER	RR			\$11.88
Orlando-Kissimmee-Sanford, FL	E0272	MATTRESS, FOAM RUBBER	UE			\$89.06
Orlando-Kissimmee-Sanford, FL	E0272	BED CRADLE. ANY TYPE	NU			\$26.55
Orlando-Kissimmee-Sanford, FL	E0280	BED CRADLE, ANY TYPE	RR			\$2.66
Orlando-Kissimmee-Sanford, FL	E0280	BED CRADLE, ANY TYPE	UE			\$19.91
Orlando-Kissimmee-Sanford, FL	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.90
Orlando-Kissimmee-Sanford, FL	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$102.39
Orlando-Kissimmee-Sanford, FL	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$10.24
Orlando-Kissimmee-Sanford, FL	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$76.79
Orlando-Kissimmee-Sanford, FL	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.74
		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				•••••
Orlando-Kissimmee-Sanford, FL	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$36.00
		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Orlando-Kissimmee-Sanford, FL	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$78.00
Orlando-Kissimmee-Sanford, FL	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$19.35
Pittsburgh, PA	E0271	MATTRESS, INNERSPRING	NU			\$128.40
Pittsburgh, PA	E0271	MATTRESS, INNERSPRING	RR			\$12.84
Pittsburgh, PA	E0271	MATTRESS, INNERSPRING	UE			\$96.30
Pittsburgh, PA	E0272	MATTRESS, FOAM RUBBER	NU			\$137.28
Pittsburgh, PA	E0272	MATTRESS, FOAM RUBBER	RR			\$13.73
Pittsburgh, PA	E0272	MATTRESS, FOAM RUBBER	UE			\$102.96
Pittsburgh, PA	E0280	BED CRADLE, ANY TYPE	NU			\$29.52
Pittsburgh, PA	E0280	BED CRADLE, ANY TYPE	RR			\$2.95
Pittsburgh, PA	E0280	BED CRADLE, ANY TYPE	UE			\$22.14
Pittsburgh, PA	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$9.83
Pittsburgh, PA	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$99.48
Pittsburgh, PA	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$9.95
Pittsburgh, PA	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$74.61
Pittsburgh, PA	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.82

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CBA Name	HCPCS Code	HCPCS Code Description	Modifior 1	Modifier 2	Modifior 3	SPA
CBA Name	COUE	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,		Woumer 2	woulder 5	JFA
Pittsburgh, PA	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$42.18
		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				
Pittsburgh, PA	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$84.39
Pittsburgh, PA	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$21.06
Riverside-San Bernardino-Ontario,						
CA	E0271	MATTRESS, INNERSPRING	NU			\$124.30
Riverside-San Bernardino-Ontario, CA	E0271		RR			¢40.40
Riverside-San Bernardino-Ontario,	E0271	MATTRESS, INNERSPRING	ĸĸ			\$12.43
CA	E0271	MATTRESS, INNERSPRING	UE			\$93.23
Riverside-San Bernardino-Ontario,	20271		02			\$00.20
CA	E0272	MATTRESS, FOAM RUBBER	NU			\$141.50
Riverside-San Bernardino-Ontario,						
CA	E0272	MATTRESS, FOAM RUBBER	RR			\$14.15
Riverside-San Bernardino-Ontario,						
CA	E0272	MATTRESS, FOAM RUBBER	UE			\$106.13
Riverside-San Bernardino-Ontario,						
CA	E0280	BED CRADLE, ANY TYPE	NU			\$29.59
Riverside-San Bernardino-Ontario, CA	E0280	BED CRADLE, ANY TYPE	RR			\$2.96
Riverside-San Bernardino-Ontario,	L0200	BED GRADEE, ANT TIFE				φ2.90
CA	E0280	BED CRADLE, ANY TYPE	UE			\$22.19
Riverside-San Bernardino-Ontario,	20200		02			\$ 22110
CA	E0305	BED SIDE RAILS, HALF LENGTH	RR			\$10.43
Riverside-San Bernardino-Ontario,						
CA	E0310	BED SIDE RAILS, FULL LENGTH	NU			\$110.60
Riverside-San Bernardino-Ontario,						
CA	E0310	BED SIDE RAILS, FULL LENGTH	RR			\$11.06
Riverside-San Bernardino-Ontario,						A
CA	E0310	BED SIDE RAILS, FULL LENGTH	UE			\$82.95
Riverside-San Bernardino-Ontario, CA	E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	RR			\$11.79
Riverside-San Bernardino-Ontario,	20310	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				\$11.75
CA	E0911	ATTACHED TO BED, WITH GRAB BAR	RR			\$41.50
Riverside-San Bernardino-Ontario,		TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS,				÷
CA	E0912	FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$83.70
Riverside-San Bernardino-Ontario,						
CA	E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	RR			\$20.37

Single Payment Amount General Home Equipment and Related Supplies and Accessories

Patient Lifts

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$85.00
Charlotte-Concord-Gastonia, NC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$8.50
Charlotte-Concord-Gastonia, NC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$63.75
Charlotte-Concord-Gastonia, NC	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$61.00
Charlotte-Concord-Gastonia, NC	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			
Chanolle-Concord-Gastonia, NC	E0035		ĸĸ			\$125.74
Charlotte-Concord-Gastonia, NC	E0636	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	RR			\$1,032.54
Charlotte-Concord-Gastonia, NC	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$630.00
Charlotte-Concord-Gastonia. NC	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$906.46
Chester, Lancaster & York						•••••
Counties, SC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$88.72
Chester, Lancaster & York			-			
Counties, SC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$8.87
Chester, Lancaster & York						
Counties, SC	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$66.54
Chester, Lancaster & York						
Counties, SC	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$54.21
Chester, Lancaster & York						
Counties, SC	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$112.00
Chester, Lancaster & York		MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				
Counties, SC	E0636	CONTROLS	RR			\$955.00
Chester, Lancaster & York		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				
Counties, SC	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$593.80
Chester, Lancaster & York		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT,				
Counties, SC	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$880.00
Cincinnati, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$79.50
Cincinnati, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.95
Cincinnati, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$59.63
Cincinnati, OH	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$57.03
,	E0630	PATIENT LIFT, HTDRAOLIC OR MECHANICAL, INCLODES ANY SEAT, SLING, STRAF(S) OR PAD(S) PATIENT LIFT. ELECTRIC WITH SEAT OR SLING	RR			· · ·
Cincinnati, OH	E0635		ĸĸ			\$102.74
Cincinnati, OH	E0636	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	RR			\$992.63
		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				
Cincinnati, OH	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$583.62
		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT,				
Cincinnati, OH	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$830.00
Cleveland-Elyria, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$84.50
Cleveland-Elyria, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$8.45
Cleveland-Elyria, OH	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$63.38

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Cleveland-Elyria, OH	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$58.65
Cleveland-Elyria, OH	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$109.58
Cleveland-Elyria, OH	E0636	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	RR			\$1,024.85
Cleveland-Elyria, OH	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$606.60
Cleveland-Elyria, OH	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$903.23
Covington-Florence-Newport, KY	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$69.00
Covington-Florence-Newport, KY	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$6.90
Covington-Florence-Newport, KY	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$51.75
Covington-Florence-Newport, KY	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.00
Covington-Florence-Newport, KY	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$112.00
Covingion-Florence-Newport, KY	E0035	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE	ĸĸ			\$112.00
Covington-Florence-Newport, KY	E0636	CONTROLS	RR			\$1,053.46
Covington-Florence-Newport, KY	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$612.57
Covington-Florence-Newport, KY	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$906.46
Dallas-Fort Worth-Arlington, TX	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$79.46
Dallas-Fort Worth-Arlington, TX	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.95
Dallas-Fort Worth-Arlington, TX	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$59.60
Dallas-Fort Worth-Arlington, TX	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.00
Dallas-Fort Worth-Arlington, TX	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$105.05
Dallas-Fort Worth-Arlington, TX	E0636	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	RR			\$963.42
Dallas-Fort Worth-Arlington, TX	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$511.43
Dallas-Fort Worth-Arlington, TX	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$718.50
Dearborn, Franklin, Ohio & Union Counties, IN	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$78.24
Dearborn, Franklin, Ohio & Union Counties, IN	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.82
Dearborn, Franklin, Ohio & Union Counties, IN	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$58.68
Dearborn, Franklin, Ohio & Union Counties, IN	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.00
Dearborn, Franklin, Ohio & Union Counties, IN	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$114.59
Dearborn, Franklin, Ohio & Union		MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				
Counties, IN	E0636	CONTROLS	RR			\$1,122.99
Dearborn, Franklin, Ohio & Union Counties, IN	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$633.05
Dearborn, Franklin, Ohio & Union Counties, IN	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$920.48
Kansas City, MO	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$76.13

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City, MO	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.61
Kansas City, MO	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$57.10
Kansas City, MO	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$58.00
Kansas City, MO	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$112.00
		MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				*** *
Kansas City, MO	E0636	CONTROLS	RR			\$956.84
Kansas City, MO	E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$586.59
	L 1033	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT,				\$300.33
Kansas City, MO	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$858.70
Kansas City-Overland Park-Ottawa,						<u> </u>
KS	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$74.06
Kansas City-Overland Park-Ottawa,						
KS	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.41
Kansas City-Overland Park-Ottawa,						*** **
KS	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$55.55
Kansas City-Overland Park-Ottawa, KS	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$63.56
Kansas City-Overland Park-Ottawa,						ψ03.50
KS	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$114.80
Kansas City-Overland Park-Ottawa,		MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				<u> </u>
KS	E0636	CONTROLS	RR			\$1,087.30
Kansas City-Overland Park-Ottawa,		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				
KS	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$635.14
Kansas City-Overland Park-Ottawa,		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT,				¢040.54
KS Miami-Fort Lauderdale-West Palm	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$912.54
Beach, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$61.89
Miami-Fort Lauderdale-West Palm	20021					ψ01.00
Beach, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$6.19
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$46.42
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.00
Miami-Fort Lauderdale-West Palm	FOCOF	PATIENT LIFT. ELECTRIC WITH SEAT OR SLING	RR			¢06.44
Beach, FL Miami-Fort Lauderdale-West Palm	E0635	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE	ĸĸ			\$96.44
Beach, FL	E0636	CONTROLS	RR			\$810.28
Miami-Fort Lauderdale-West Palm		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				v o
Beach, FL	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$461.06
Miami-Fort Lauderdale-West Palm		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT,				
Beach, FL	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$684.34
Orlando-Kissimmee-Sanford, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$63.81
Orlando-Kissimmee-Sanford, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$6.38
Orlando-Kissimmee-Sanford, FL	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$47.86
Orlando-Kissimmee-Sanford, FL	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.48
Orlando-Kissimmee-Sanford, FL	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$99.80

CBA Name	HCPCS Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifior 3	SPA
CDA Name	Coue	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE	Woumer	Woumer 2	Woumer 5	
Orlando-Kissimmee-Sanford, FL	E0636	CONTROLS	RR			\$850.00
		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				• • • • • • •
Orlando-Kissimmee-Sanford, FL	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS MULTI-POSITIONAL PATIENT TRANSFER SYSTEM. EXTRA-WIDE. WITH INTEGRATED SEAT.	RR			\$494.78
Orlando-Kissimmee-Sanford, FL	E1036	OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$693.00
Pittsburgh, PA	E0621		NU			\$86.38
Pittsburgh, PA	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$8.64
Pittsburgh, PA	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$64.79
Pittsburgh, PA	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.86
Pittsburgh, PA	E0630	PATIENT LIFT, HTDRAOLIC OR MECHANICAL, INCLODES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$100.67
Fillsburgh, FA	E0035	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				\$100.07
Pittsburgh, PA	E0636	CONTROLS	RR			\$895.00
		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				
Pittsburgh, PA	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$517.74
Pittsburgh, PA	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$820.56
Riverside-San Bernardino-Ontario,						
CA	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	NU			\$79.85
Riverside-San Bernardino-Ontario,	F 0004					AT AA
CA Riverside-San Bernardino-Ontario.	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	RR			\$7.99
CA	E0621	SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	UE			\$59.89
Riverside-San Bernardino-Ontario,						
CA	E0630	PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	RR			\$55.26
Riverside-San Bernardino-Ontario, CA	E0635	PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	RR			\$127.38
Riverside-San Bernardino-Ontario.	20000	MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE				ψ121.00
CA	E0636	CONTROLS	RR			\$1,007.39
Riverside-San Bernardino-Ontario,		MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE				
CA	E1035	GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	RR			\$599.40
Riverside-San Bernardino-Ontario, CA	E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	RR			\$894.23

Single Payment Amounts General Home Equipment and Related Supplies and Accessories

Seat Lift Mechanisms

UPDATE: HCPCS E0628 (Separate Seat Lift Mechanism for Use with Patient Owned Furniture - Electric) is no longer effective for claims with dates of service on or after January 1, 2017.

	LICDCS					
CBA Name	HCPCS Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU		incunor c	\$250.00
Charlotte-Concord-Gastonia, NC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$25.00
Charlotte-Concord-Gastonia, NC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$187.50
Charlotte-Concord-Gastonia, NC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$265.87
Charlotte-Concord-Gastonia, NC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$26.59
Charlotte-Concord-Gastonia, NC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$199.40
Chester, Lancaster & York Counties, SC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$245.00
Chester, Lancaster & York Counties, SC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$24.50
Chester, Lancaster & York Counties, SC	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$183.75
Chester, Lancaster & York Counties, SC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$260.00
Chester, Lancaster & York Counties, SC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$26.00
Chester, Lancaster & York Counties, SC	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$195.00
Cincinnati, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$286.83
Cincinnati, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$28.68
Cincinnati, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$215.12
Cincinnati, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$294.33
Cincinnati, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$29.43
Cincinnati, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$220.75
Cleveland-Elyria, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$284.17
Cleveland-Elyria, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$28.42
Cleveland-Elyria, OH	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$213.13
Cleveland-Elyria, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$294.33
Cleveland-Elyria, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$29.43
Cleveland-Elyria, OH	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$220.75
Covington-Florence-Newport, KY	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$289.00

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Covington-Florence-Newport, KY	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$28.90
Covington-Florence-Newport, KY	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$216.75
Covington-Florence-Newport, KY	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$314.14
Covington-Florence-Newport, KY	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$31.41
Covington-Florence-Newport, KY	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$235.61
Dallas-Fort Worth-Arlington, TX	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$223.75
Dallas-Fort Worth-Arlington, TX	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$22.38
Dallas-Fort Worth-Arlington, TX	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$167.81
Dallas-Fort Worth-Arlington, TX	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$240.75
Dallas-Fort Worth-Arlington, TX	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$24.08
Dallas-Fort Worth-Arlington, TX	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$180.56
Dearborn, Franklin, Ohio & Union Counties, IN	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$306.98
Dearborn, Franklin, Ohio & Union Counties, IN	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$30.70
Dearborn, Franklin, Ohio & Union Counties, IN	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$230.24
Dearborn, Franklin, Ohio & Union Counties, IN	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$301.94
Dearborn, Franklin, Ohio & Union Counties, IN Dearborn, Franklin, Ohio & Union	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$30.19
Counties, IN	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$226.46
Kansas City, MO	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$250.00
Kansas City, MO	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$25.00
Kansas City, MO	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$187.50
Kansas City, MO	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$279.74
Kansas City, MO	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$27.97
Kansas City, MO	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$209.81
Kansas City-Overland Park-Ottawa, KS	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$256.25
Kansas City-Overland Park-Ottawa, KS	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$25.63
Kansas City-Overland Park-Ottawa, KS	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$192.19
Kansas City-Overland Park-Ottawa, KS	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$296.94
Kansas City-Overland Park-Ottawa, KS	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$29.69
Kansas City-Overland Park-Ottawa, KS	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$222.71

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$222.32
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$22.23
Miami-Fort Lauderdale-West Palm						• • • • • • •
Beach, FL	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$166.74
Miami-Fort Lauderdale-West Palm Beach. FL	E0629	SERVICE SEAT LIFT MECHANICALEON FOR USE WITH RATIENT OWNER FURNITURE NON FLEATRIC	NUL			\$240.00
	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$240.00
Miami-Fort Lauderdale-West Palm Beach. FL	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$24.00
Miami-Fort Lauderdale-West Palm	E0029	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FORNITURE-NON-ELECTRIC	κκ			\$24.00
Beach, FL	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	LIE			\$180.00
Orlando-Kissimmee-Sanford, FL	E0623	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$240.00
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Orlando-Kissimmee-Sanford, FL	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$24.00
Orlando-Kissimmee-Sanford, FL	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$180.00
Orlando-Kissimmee-Sanford, FL	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$240.00
Orlando-Kissimmee-Sanford, FL	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$24.00
Orlando-Kissimmee-Sanford, FL	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC				\$180.00
Pittsburgh, PA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$239.00
Pittsburgh, PA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$23.90
Pittsburgh, PA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$179.25
Pittsburgh, PA	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$263.38
Pittsburgh, PA	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$26.34
Pittsburgh, PA Riverside-San Bernardino-Ontario,	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$197.54
CA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	NU			\$280.83
Riverside-San Bernardino-Ontario, CA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	RR			\$28.08
Riverside-San Bernardino-Ontario, CA	E0627	SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM	UE			\$210.62
Riverside-San Bernardino-Ontario, CA	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	NU			\$296.56
Riverside-San Bernardino-Ontario, CA	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	RR			\$29.66
Riverside-San Bernardino-Ontario, CA	E0629	SEPARATE SEAT LIFT MECHANISM FOR USE WITH PATIENT OWNED FURNITURE-NON-ELECTRIC	UE			\$222.42

Single Payment Amounts General Home Equipment and Related Supplies and Accessories

Support Surfaces (Group 1 & 2)

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Charlotte-Concord-Gastonia, NC	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$51.00
Charlotte-Concord-Gastonia, NC	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$5.10
Charlotte-Concord-Gastonia, NC	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	UE			\$38.25
Charlotte-Concord-Gastonia, NC	E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	RR			\$16.84
Charlotte-Concord-Gastonia, NC	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$23.90
Charlotte-Concord-Gastonia, NC	E0184	DRY PRESSURE MATTRESS	NU			\$162.00
Charlotte-Concord-Gastonia, NC	E0184	DRY PRESSURE MATTRESS	RR			\$16.20
Charlotte-Concord-Gastonia, NC	E0184	DRY PRESSURE MATTRESS	UE			\$121.50
Charlotte-Concord-Gastonia, NC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$182.98
Charlotte-Concord-Gastonia, NC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$18.30
Charlotte-Concord-Gastonia, NC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$137.24
Charlotte-Concord-Gastonia, NC	E0186	AIR PRESSURE MATTRESS	RR			\$18.19
Charlotte-Concord-Gastonia, NC	E0187	WATER PRESSURE MATTRESS	RR			\$20.81
Charlotte-Concord-Gastonia, NC	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$26.21
Charlotte-Concord-Gastonia, NC	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.62
Charlotte-Concord-Gastonia, NC	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$19.66
Charlotte-Concord-Gastonia, NC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$56.52
Charlotte-Concord-Gastonia, NC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$5.65
Charlotte-Concord-Gastonia, NC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$42.39
Charlotte-Concord-Gastonia, NC	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$790.00
Charlotte-Concord-Gastonia, NC	E0196	GEL PRESSURE MATTRESS	RR			\$32.54
Charlotte-Concord-Gastonia, NC	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.50
Charlotte-Concord-Gastonia, NC	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$28.34
Charlotte-Concord-Gastonia, NC	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.83
Charlotte-Concord-Gastonia, NC	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$21.26
Charlotte-Concord-Gastonia, NC	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$239.05
		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
Charlotte-Concord-Gastonia, NC	E0371	MATTRESS LENGTH AND WIDTH	RR			\$400.00
Charlotte-Concord-Gastonia, NC	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$329.97
Charlotte-Concord-Gastonia, NC	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$550.00
Chester, Lancaster & York Counties, SC	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$58.00
Chester, Lancaster & York Counties, SC	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$5.80

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Chester, Lancaster & York		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				_
Counties, SC	A4640	OWNED BY PATIENT	UE			\$43.50
Chester, Lancaster & York		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Counties, SC	E0181	INCLUDES HEAVY DUTY	RR			\$14.60
Chester, Lancaster & York						
Counties, SC	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$24.00
Chester, Lancaster & York						
Counties, SC	E0184	DRY PRESSURE MATTRESS	NU			\$160.48
Chester, Lancaster & York						
Counties, SC	E0184	DRY PRESSURE MATTRESS	RR			\$16.05
Chester, Lancaster & York						
Counties, SC	E0184	DRY PRESSURE MATTRESS	UE			\$120.36
Chester, Lancaster & York						
Counties, SC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$152.00
Chester, Lancaster & York						
Counties, SC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.20
Chester, Lancaster & York						
Counties, SC	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$114.00
Chester, Lancaster & York						
Counties, SC	E0186	AIR PRESSURE MATTRESS	RR			\$18.77
Chester, Lancaster & York						
Counties, SC	E0187	WATER PRESSURE MATTRESS	RR			\$20.81
Chester, Lancaster & York						
Counties, SC	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$25.00
Chester, Lancaster & York						
Counties, SC	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.50
Chester, Lancaster & York						* • • * *
Counties, SC	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$18.75
Chester, Lancaster & York						AFF 00
Counties, SC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$55.00
Chester, Lancaster & York	50400					* 5 50
Counties, SC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$5.50
Chester, Lancaster & York	50400					* 44 oF
Counties, SC	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$41.25
Chester, Lancaster & York	E0102					¢600.00
Counties, SC	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$699.90
Chester, Lancaster & York Counties, SC	E0196	GEL PRESSURE MATTRESS	RR			\$20.04
· · · · · · · · · · · · · · · · · · ·	E0190	GEL FRESSURE MATTRESS	RŔ			\$30.04
Chester, Lancaster & York Counties, SC	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.50
	E0197	AIR FRESSURE FAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	κκ			\$15.50
Chester, Lancaster & York	E0100		NUL			\$20.00
Counties, SC Chester, Lancaster & York	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$29.00
Counties, SC	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.90
Chester, Lancaster & York	20133					ψ2.50
Counties, SC	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$21.75
Chester, Lancaster & York	20133					ψ21.73
Counties, SC	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$207.00
Chester, Lancaster & York	20211	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				φ207.00
Counties, SC	E0371	MATTRESS LENGTH AND WIDTH	RR			\$299.30
	20071					<i>\$</i> 200.00

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Chester, Lancaster & York						
Counties, SC	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$270.00
Chester, Lancaster & York	E0070					¢250.00
Counties, SC	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	RR			\$359.00
Cincinnati, OH	A4640	OWNED BY PATIENT	NU			\$46.56
Cincinitati, Ori	74040	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				ψ+0.50
Cincinnati, OH	A4640	OWNED BY PATIENT	RR			\$4.66
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Cincinnati, OH	A4640	OWNED BY PATIENT	UE			\$34.92
		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Cincinnati, OH	E0181	INCLUDES HEAVY DUTY	RR			\$16.59
Cincinnati, OH	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$19.00
Cincinnati, OH	E0184	DRY PRESSURE MATTRESS	NU			\$150.00
Cincinnati, OH	E0184	DRY PRESSURE MATTRESS	RR			\$15.00
Cincinnati, OH	E0184	DRY PRESSURE MATTRESS	UE			\$112.50
Cincinnati, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$163.64
Cincinnati, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$16.36
	50405					* • • • • • •
Cincinnati, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$122.73
Cincinnati, OH	E0186	AIR PRESSURE MATTRESS	RR			\$18.01
Cincinnati, OH	E0187	WATER PRESSURE MATTRESS	RR			\$20.80
Cincinnati, OH	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$27.04
Cincinnati, OH	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.70
Cincinnati, OH	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$20.28
Cincinnati, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$45.79
Cincinnati, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.58
Cincinnati, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$34.34
Cincinnati, OH	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$753.15
Cincinnati, OH	E0196	GEL PRESSURE MATTRESS	RR			\$32.02
Cincinnati, OH	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.25
Cincinnati, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$27.84
Cincinnati, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.78
Cincinnati, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$20.88
Cincinnati, OH	E0133	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$212.38
	LUZII	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				φ212.30
Cincinnati, OH	E0371	MATTRESS LENGTH AND WIDTH	RR			\$255.10
Cincinnati, OH	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$314.99
Cincinnati, OH	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$324.66
	20070	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				₩ 01-1.00
Cleveland-Elyria, OH	A4640	OWNED BY PATIENT	NU			\$46.50
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Cleveland-Elyria, OH	A4640	OWNED BY PATIENT	RR			\$4.65
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Cleveland-Elyria, OH	A4640	OWNED BY PATIENT	UE			\$34.88

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
	50404	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				* 40.04
Cleveland-Elyria, OH	E0181	INCLUDES HEAVY DUTY	RR			\$16.34
Cleveland-Elyria, OH	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$19.90
Cleveland-Elyria, OH	E0184	DRY PRESSURE MATTRESS	NU			\$150.00
Cleveland-Elyria, OH	E0184	DRY PRESSURE MATTRESS	RR			\$15.00
Cleveland-Elyria, OH	E0184	DRY PRESSURE MATTRESS	UE			\$112.50
Cleveland-Elyria, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$172.64
Cleveland-Elyria, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.26
Cleveland-Elyria, OH	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$129.48
Cleveland-Elyria, OH	E0186	AIR PRESSURE MATTRESS	RR			\$19.82
Cleveland-Elyria, OH	E0187	WATER PRESSURE MATTRESS	RR			\$21.83
Cleveland-Elyria, OH	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$27.00
Cleveland-Elyria, OH	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.70
Cleveland-Elyria, OH	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$20.25
Cleveland-Elyria, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$45.79
Cleveland-Elyria, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.58
Cleveland-Elyria, OH	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$34.34
Cleveland-Elyria, OH	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$801.25
Cleveland-Elyria, OH	E0196	GEL PRESSURE MATTRESS	RR			\$34.13
Cleveland-Elyria, OH	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$18.40
Cleveland-Elyria, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$27.90
Cleveland-Elyria, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.79
Cleveland-Elyria, OH	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$20.93
Cleveland-Elyria, OH	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$215.00
		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
Cleveland-Elyria, OH	E0371	MATTRESS LENGTH AND WIDTH	RR			\$262.12
Cleveland-Elyria, OH	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$343.49
Cleveland-Elyria, OH	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$357.81
Covington-Florence-Newport, KY	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$50.00
Covington-Florence-Newport, KY	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$5.00
Covington-Florence-Newport, KY	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	UE			\$37.50
Covington-Florence-Newport, KY	E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	RR			\$15.59
Covington-Florence-Newport, KY	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$20.00
Covington-Florence-Newport, KY	E0184	DRY PRESSURE MATTRESS	NU			\$150.00
Covington-Florence-Newport, KY	E0184	DRY PRESSURE MATTRESS	RR			\$15.00
Covington-Florence-Newport, KY	E0184	DRY PRESSURE MATTRESS	UE			\$112.50
Covington-Florence-Newport, KY	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$170.88
Covington-Florence-Newport, KY	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.09

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Covington-Florence-Newport, KY	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$128.16
Covington-Florence-Newport, KY	E0186	AIR PRESSURE MATTRESS	RR			\$18.19
Covington-Florence-Newport, KY	E0187	WATER PRESSURE MATTRESS	RR			\$20.81
Covington-Florence-Newport, KY	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$27.87
Covington-Florence-Newport, KY	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.79
Covington-Florence-Newport, KY	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$20.90
Covington-Florence-Newport, KY	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$49.03
Covington-Florence-Newport, KY	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.90
Covington-Florence-Newport, KY	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$36.77
Covington-Florence-Newport, KY	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$778.81
Covington-Florence-Newport, KY	E0196	GEL PRESSURE MATTRESS	RR			\$30.50
Covington-Florence-Newport, KY	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$16.72
Covington-Florence-Newport, KY	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$28.74
Covington-Florence-Newport, KY	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.87
Covington-Florence-Newport, KY	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$21.56
Covington-Florence-Newport, KY	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$205.22
Covington-Florence-Newport, KY	E0371	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$251.20
Covington-Florence-Newport, KY	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$329.97
Covington-Florence-Newport, KY	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$400.00
Dallas-Fort Worth-Arlington, TX	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$44.00
Dallas-Fort Worth-Arlington, TX	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$4.40
Dallas-Fort Worth-Arlington, TX	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	UE			\$33.00
Dallas-Fort Worth-Arlington, TX	E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	RR			\$14.53
Dallas-Fort Worth-Arlington, TX	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$15.42
Dallas-Fort Worth-Arlington, TX	E0184	DRY PRESSURE MATTRESS	NU			\$140.62
Dallas-Fort Worth-Arlington, TX	E0184	DRY PRESSURE MATTRESS	RR			\$14.06
Dallas-Fort Worth-Arlington, TX	E0184	DRY PRESSURE MATTRESS	UE			\$105.47
Dallas-Fort Worth-Arlington, TX	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$153.70
Dallas-Fort Worth-Arlington, TX	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.37
Dallas-Fort Worth-Arlington, TX	E0185		UE			\$115.28
Dallas-Fort Worth-Arlington, TX	E0186	AIR PRESSURE MATTRESS	RR			\$17.74
Dallas-Fort Worth-Arlington, TX	E0187	WATER PRESSURE MATTRESS	RR			\$20.73
Dallas-Fort Worth-Arlington, TX	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$23.17
Dallas-Fort Worth-Arlington, TX	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.32
Dallas-Fort Worth-Arlington, TX	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$17.38
Dallas-Fort Worth-Arlington, TX	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$55.48
Dallas-Fort Worth-Arlington, TX	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$5.55
Dallas-Fort Worth-Arlington, TX	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$41.61

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dallas-Fort Worth-Arlington, TX	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$620.03
Dallas-Fort Worth-Arlington, TX	E0196	GEL PRESSURE MATTRESS	RR			\$29.02
Dallas-Fort Worth-Arlington, TX	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.30
Dallas-Fort Worth-Arlington, TX	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$29.86
	E0199		RR			
Dallas-Fort Worth-Arlington, TX		DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH				\$2.99
Dallas-Fort Worth-Arlington, TX	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$22.40
Dallas-Fort Worth-Arlington, TX	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$201.15
Dallas-Fort Worth-Arlington, TX	E0371	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$272.03
Dallas-Fort Worth-Arlington, TX	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$238.80
Dallas-Fort Worth-Arlington, TX	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$324.11
Dearborn, Franklin, Ohio & Union Counties, IN	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$50.27
Dearborn, Franklin, Ohio & Union		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				ψυσι <u>π</u> ι
Counties, IN	A4640	OWNED BY PATIENT	RR			\$5.03
Dearborn, Franklin, Ohio & Union		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Counties, IN	A4640	OWNED BY PATIENT	UE			\$37.70
Dearborn, Franklin, Ohio & Union		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Counties, IN	E0181	INCLUDES HEAVY DUTY	RR			\$15.50
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$20.25
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0184	DRY PRESSURE MATTRESS	NU			\$154.05
Dearborn, Franklin, Ohio & Union						A.F. 44
Counties, IN	E0184	DRY PRESSURE MATTRESS	RR			\$15.41
Dearborn, Franklin, Ohio & Union Counties, IN	E0184	DRY PRESSURE MATTRESS	UE			\$115.54
Dearborn, Franklin, Ohio & Union	L0104		UL			φ11 5. 54
Counties, IN	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$159.81
Dearborn, Franklin, Ohio & Union	20100					<i>Q</i> 100101
Counties, IN	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.98
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$119.86
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0186	AIR PRESSURE MATTRESS	RR			\$18.65
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0187	WATER PRESSURE MATTRESS	RR			\$21.13
Dearborn, Franklin, Ohio & Union	50400					***
Counties, IN	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$28.04
Dearborn, Franklin, Ohio & Union	E0199		RR			¢2.00
Counties, IN Dearborn, Franklin, Ohio & Union	E0188	SYNTHETIC SHEEPSKIN PAD	NK .			\$2.80
Counties, IN	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$21.03
Dearborn, Franklin, Ohio & Union	20100					φ <u>2</u> 1.03
Counties, IN	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$48.02
Dearborn, Franklin, Ohio & Union						,
Counties, IN	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.80
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$36.02

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$821.09
Dearborn, Franklin, Ohio & Union Counties, IN	E0196	GEL PRESSURE MATTRESS	RR			\$34.26
Dearborn, Franklin, Ohio & Union	LOTSO					ψ34.20
Counties, IN	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$16.45
Dearborn, Franklin, Ohio & Union						
Counties, IN	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$28.74
Dearborn, Franklin, Ohio & Union	F0400		DD			¢0.07
Counties, IN Dearborn, Franklin, Ohio & Union	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.87
Counties, IN	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$21.56
Dearborn, Franklin, Ohio & Union	20100		02			Ψ11100
Counties, IN	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$210.29
Dearborn, Franklin, Ohio & Union		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
Counties, IN	E0371	MATTRESS LENGTH AND WIDTH	RR			\$255.22
Dearborn, Franklin, Ohio & Union	F0070		DD			¢000.07
Counties, IN Dearborn, Franklin, Ohio & Union	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$322.27
Counties, IN	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$380.99
	20070	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				<i>QUUTER</i>
Kansas City, MO	A4640	OWNED BY PATIENT	NU			\$48.00
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Kansas City, MO	A4640	OWNED BY PATIENT	RR			\$4.80
Kanaga City MO	44040	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	UE			¢20.00
Kansas City, MO	A4640	OWNED BY PATIENT POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,	UE			\$36.00
Kansas City, MO	E0181	INCLUDES HEAVY DUTY	RR			\$15.75
Kansas City, MO	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$20.00
Kansas City, MO	E0184	DRY PRESSURE MATTRESS	NU			\$165.00
Kansas City, MO	E0184	DRY PRESSURE MATTRESS	RR			\$16.50
Kansas City, MO	E0184	DRY PRESSURE MATTRESS	UE			\$123.75
Kansas City, MO	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$177.50
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Kansas City, MO	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.75
Kansas City, MO	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$133.13
Kansas City, MO	E0185	AIR PRESSURE MATTRESS	RR			\$133.13
Kansas City, MO	E0100	WATER PRESSURE MATTRESS	RR			\$21.50
Kansas City, MO	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$28.00
Kansas City, MO	E0188	SYNTHETIC SHEEP SKINT AD	RR			\$2.80
Kansas City, MO	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$21.00
Kansas City, MO	E0188	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$21.00
Kansas City, MO	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$5.50
Kansas City, MO	E0189 E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$5.50 \$41.25
Kansas City, MO	E0189 E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$658.68
Kansas City, MO	E0193 E0196	GEL PRESSURE MATTRESS	RR			\$058.08
			RR			
Kansas City, MO	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NR			\$18.74

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City, MO	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$29.95
Kansas City, MO	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$3.00
Kansas City, MO	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$22.46
Kansas City, MO	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$252.00
	50074	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD	55			*****
Kansas City, MO	E0371	MATTRESS LENGTH AND WIDTH	RR			\$272.46
Kansas City, MO	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$299.50
Kansas City, MO	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	RR			\$358.39
Kansas City-Overland Park-Ottawa, KS	A4640	OWNED BY PATIENT	NU			\$47.50
Kansas City-Overland Park-Ottawa, KS	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$4.75
Kansas City-Overland Park-Ottawa, KS	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	UE			\$35.63
Kansas City-Overland Park-Ottawa, KS	E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	RR			\$16.13
Kansas City-Overland Park-Ottawa, KS	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$19.87
Kansas City-Overland Park-Ottawa, KS	E0184	DRY PRESSURE MATTRESS	NU			\$166.00
Kansas City-Overland Park-Ottawa, KS	E0184	DRY PRESSURE MATTRESS	RR			\$16.60
Kansas City-Overland Park-Ottawa, KS	E0184	DRY PRESSURE MATTRESS	UE			\$124.50
Kansas City-Overland Park-Ottawa, KS	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$191.03
Kansas City-Overland Park-Ottawa, KS	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$19.10
Kansas City-Overland Park-Ottawa, KS	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$143.27
Kansas City-Overland Park-Ottawa, KS	E0186	AIR PRESSURE MATTRESS	RR			\$18.85
Kansas City-Overland Park-Ottawa, KS	E0187	WATER PRESSURE MATTRESS	RR			\$20.16
Kansas City-Overland Park-Ottawa, KS	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$27.10
Kansas City-Overland Park-Ottawa, KS	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.71
Kansas City-Overland Park-Ottawa, KS	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$20.33
Kansas City-Overland Park-Ottawa, KS	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$47.96
Kansas City-Overland Park-Ottawa, KS	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.80
Kansas City-Overland Park-Ottawa, KS	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$35.97
Kansas City-Overland Park-Ottawa, KS	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$694.43
Kansas City-Overland Park-Ottawa, KS	E0196	GEL PRESSURE MATTRESS	RR			\$30.25

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Kansas City-Overland Park-Ottawa,						0.7
KS	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.65
Kansas City-Overland Park-Ottawa,						
KS	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$27.80
Kansas City-Overland Park-Ottawa,	50400		DD			¢0.70
KS Kansas City-Overland Park-Ottawa,	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.78
Kansas City-Ovenand Fark-Ottawa,	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$20.85
Kansas City-Overland Park-Ottawa,						
KS	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$277.02
Kansas City-Overland Park-Ottawa,		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
KS	E0371	MATTRESS LENGTH AND WIDTH	RR			\$267.95
Kansas City-Overland Park-Ottawa, KS	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$306.99
Kansas City-Overland Park-Ottawa,	E0372	POWERED AIR OVERLAT FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH				\$300.99
KS	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$358.39
Miami-Fort Lauderdale-West Palm	20070	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				\$000.00
Beach, FL	A4640	OWNED BY PATIENT	NU			\$38.81
Miami-Fort Lauderdale-West Palm		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Beach, FL	A4640	OWNED BY PATIENT	RR			\$3.88
Miami-Fort Lauderdale-West Palm		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Beach, FL	A4640	OWNED BY PATIENT	UE			\$29.11
Miami-Fort Lauderdale-West Palm		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Beach, FL	E0181	INCLUDES HEAVY DUTY	RR			\$15.46
Miami-Fort Lauderdale-West Palm Beach, FL	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$15.04
Miami-Fort Lauderdale-West Palm	EUTOZ	POMP FOR ALTERNATING PRESSURE FAD, FOR REPLACEMENT ONLT				\$15.04
Beach, FL	E0184	DRY PRESSURE MATTRESS	NU			\$140.62
Miami-Fort Lauderdale-West Palm						•••••
Beach, FL	E0184	DRY PRESSURE MATTRESS	RR			\$14.06
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0184	DRY PRESSURE MATTRESS	UE			\$105.47
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$165.66
Miami-Fort Lauderdale-West Palm Beach, FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$16.57
Miami-Fort Lauderdale-West Palm	LUIUU	OLE ON OLE-LIKE TRESSORE TAD TOK WATTRESS, STANDARD WATTRESS LENGTH AND WIDTT				\$10.57
Beach. FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$124.25
Miami-Fort Lauderdale-West Palm						•••••
Beach, FL	E0186	AIR PRESSURE MATTRESS	RR			\$15.25
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0187	WATER PRESSURE MATTRESS	RR			\$15.25
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$17.50
Miami-Fort Lauderdale-West Palm Beach, FL	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$1.75
Miami-Fort Lauderdale-West Palm	20100					φ1.7 3
Beach, FL	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$13.13
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$39.23
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	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$3.92
Miami-Fort Lauderdale-West Palm	50400					¢00.40
Beach, FL Miami-Fort Lauderdale-West Palm	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$29.42
Beach, FL	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$522.17
Miami-Fort Lauderdale-West Palm	20100					4022
Beach, FL	E0196	GEL PRESSURE MATTRESS	RR			\$24.02
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$13.28
Miami-Fort Lauderdale-West Palm	50400					¢00.00
Beach, FL Miami-Fort Lauderdale-West Palm	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$23.20
Beach, FL	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.32
Miami-Fort Lauderdale-West Palm						V =.0-
Beach, FL	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$17.40
Miami-Fort Lauderdale-West Palm						
Beach, FL	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$224.68
Miami-Fort Lauderdale-West Palm	E0074	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				****
Beach, FL Miami-Fort Lauderdale-West Palm	E0371	MATTRESS LENGTH AND WIDTH	RR			\$233.60
Beach, FL	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$222.73
Miami-Fort Lauderdale-West Palm	20072					WLLLII O
Beach, FL	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$282.41
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Orlando-Kissimmee-Sanford, FL	A4640	OWNED BY PATIENT	NU			\$41.00
Orlanda Kingimman Conford Fl	44040	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	DD			¢4.40
Orlando-Kissimmee-Sanford, FL	A4640	OWNED BY PATIENT REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	RR			\$4.10
Orlando-Kissimmee-Sanford, FL	A4640	OWNED BY PATIENT	UE			\$30.75
		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Orlando-Kissimmee-Sanford, FL	E0181	INCLUDES HEAVY DUTY	RR			\$16.84
Orlando-Kissimmee-Sanford, FL	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$16.05
Orlando-Kissimmee-Sanford, FL	E0184	DRY PRESSURE MATTRESS	NU			\$143.43
Orlando-Kissimmee-Sanford, FL	E0184	DRY PRESSURE MATTRESS	RR			\$14.34
Orlando-Kissimmee-Sanford, FL	E0184	DRY PRESSURE MATTRESS	UE			\$107.57
Orlando-Kissimmee-Sanford, FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$185.00
Orlando-Kissimmee-Sanford, FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	DD			\$18.50
Onando-Rissimmee-Samord, FL	20105	GEL OK GEL-LIKE FRESSORE FAD FOR MATTRESS, STANDARD MATTRESS EENGTTAND WIDTT				\$10.50
Orlando-Kissimmee-Sanford, FL	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$138.75
Orlando-Kissimmee-Sanford, FL	E0186	AIR PRESSURE MATTRESS	RR			\$18.08
Orlando-Kissimmee-Sanford, FL	E0187	WATER PRESSURE MATTRESS	RR			\$17.46
Orlando-Kissimmee-Sanford, FL	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$20.79
Orlando-Kissimmee-Sanford, FL	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.08
Orlando-Kissimmee-Sanford, FL	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$15.59
Orlando-Kissimmee-Sanford, FL	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$48.00
Orlando-Kissimmee-Sanford, FL	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.80
Orlando-Kissimmee-Sanford, FL	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$36.00
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	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Orlando-Kissimmee-Sanford, FL	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$571.15
Orlando-Kissimmee-Sanford, FL	E0196	GEL PRESSURE MATTRESS	RR			\$27.50
Orlando-Kissimmee-Sanford, FL	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$14.16
Orlando-Kissimmee-Sanford, FL	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$25.26
Orlando-Kissimmee-Sanford, FL	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.53
Orlando-Kissimmee-Sanford, FL	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$18.95
Orlando-Kissimmee-Sanford, FL	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$272.41
		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
Orlando-Kissimmee-Sanford, FL	E0371	MATTRESS LENGTH AND WIDTH	RR			\$259.24
Orlando-Kissimmee-Sanford, FL	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$250.00
Orlando-Kissimmee-Sanford, FL	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$315.67
	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$50.00
Pittsburgh, PA	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD	NU			\$20.00
Pittsburgh, PA	A4640	OWNED BY PATIENT	RR			\$5.00
		REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD				
Pittsburgh, PA	A4640	OWNED BY PATIENT	UE			\$37.50
		POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP,				
Pittsburgh, PA	E0181	INCLUDES HEAVY DUTY	RR			\$16.51
Pittsburgh, PA	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$24.35
Pittsburgh, PA	E0184	DRY PRESSURE MATTRESS	NU			\$156.60
Pittsburgh, PA	E0184	DRY PRESSURE MATTRESS	RR			\$15.66
Pittsburgh, PA	E0184	DRY PRESSURE MATTRESS	UE			\$117.45
Pittsburgh, PA	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$159.52
Pittsburgh, PA	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$15.95
Pittsburgh, PA	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$119.64
Pittsburgh, PA	E0186	AIR PRESSURE MATTRESS	RR			\$18.88
Pittsburgh, PA	E0187	WATER PRESSURE MATTRESS	RR			\$21.23
Pittsburgh, PA	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$26.31
Pittsburgh, PA	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.63
Pittsburgh, PA	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$19.73
Pittsburgh, PA	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$47.50
Pittsburgh, PA	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$4.75
Pittsburgh, PA	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$35.63
Pittsburgh, PA	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$655.00
Pittsburgh, PA	E0196	GEL PRESSURE MATTRESS	RR			\$31.67
Pittsburgh, PA	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$18.50
Pittsburgh, PA	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$28.74
Pittsburgh, PA	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$2.87
Pittsburgh, PA	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$21.56
Pittsburgh, PA	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$227.00
Pittsburgh, PA	E0371	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$289.61
Pittsburgh, PA	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$299.50

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Pittsburgh, PA	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$391.04
Riverside-San Bernardino-Ontario, CA	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	NU			\$46.88
Riverside-San Bernardino-Ontario, CA	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	RR			\$4.69
Riverside-San Bernardino-Ontario, CA	A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING PRESSURE PAD OWNED BY PATIENT	UE			\$35.16
Riverside-San Bernardino-Ontario, CA	E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	RR			\$15.99
Riverside-San Bernardino-Ontario, CA	E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	RR			\$21.66
Riverside-San Bernardino-Ontario, CA	E0184	DRY PRESSURE MATTRESS	NU			\$157.93
Riverside-San Bernardino-Ontario, CA Riverside-San Bernardino-Ontario,	E0184	DRY PRESSURE MATTRESS	RR			\$15.79
CA Riverside-San Bernardino-Ontario,	E0184	DRY PRESSURE MATTRESS	UE			\$118.45
CA Riverside-San Bernardino-Ontario,	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$176.66
CA Riverside-San Bernardino-Ontario,	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$17.67
CA Riverside-San Bernardino-Ontario,	E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$132.50
СА	E0186	AIR PRESSURE MATTRESS	RR			\$19.70
Riverside-San Bernardino-Ontario, CA	E0187	WATER PRESSURE MATTRESS	RR			\$21.98
Riverside-San Bernardino-Ontario, CA	E0188	SYNTHETIC SHEEPSKIN PAD	NU			\$26.60
Riverside-San Bernardino-Ontario, CA	E0188	SYNTHETIC SHEEPSKIN PAD	RR			\$2.66
Riverside-San Bernardino-Ontario, CA	E0188	SYNTHETIC SHEEPSKIN PAD	UE			\$19.95
Riverside-San Bernardino-Ontario, CA Riverside-San Bernardino-Ontario,	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	NU			\$52.08
CA Riverside-San Bernardino-Ontario,	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	RR			\$5.21
CA Riverside-San Bernardino-Ontario,	E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	UE			\$39.06
CA Riverside-San Bernardino-Ontario,	E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	RR			\$739.35
CA Riverside-San Bernardino-Ontario,	E0196	GEL PRESSURE MATTRESS	RR			\$31.60
CA Riverside-San Bernardino-Ontario,	E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$18.19
CA Riverside-San Bernardino-Ontario,	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	NU			\$30.44
Riverside-San Bernardino-Ontario, CA Riverside-San Bernardino-Ontario,	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$3.04
CA	E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	UE			\$22.83

	HCPCS					
CBA Name	Code	HCPCS Code Description	Modifier 1	Modifier 2	Modifier 3	SPA
Riverside-San Bernardino-Ontario,						
CA	E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	RR			\$190.98
Riverside-San Bernardino-Ontario,		NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD				
CA	E0371	MATTRESS LENGTH AND WIDTH	RR			\$289.26
Riverside-San Bernardino-Ontario,						
CA	E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	RR			\$302.19
Riverside-San Bernardino-Ontario,						
CA	E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	RR			\$399.63