## South Dakota Medicaid Durable Medical Equipment, Prosthetics, Orthotics and Supplies Fee Schedule

Effective July 1, 2023 Updated May 1, 2024

Providers must bill for services at the lesser of their usual and customary charge or MSRP. Providers may be required to submit documentation supporting the billed amount is MSRP or lower. Reimbursement is the lesser of the billed amount or the amount listed below. Providers must append applicable modifiers to procedure codes. A list of authorized modifiers and payment effects is available at: https://dss.sd.gov/docs/medicaid/modifiers.pdf.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: <a href="https://dss.sd.gov/medicaid/providers/billingmanuals/">https://dss.sd.gov/medicaid/providers/billingmanuals/</a>. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual.

As established in <u>ARSD 67:16:02:03</u>, when billed by a DME provider, the rate of payment for "Price by Report" is generally 75% of the lesser of the provider's usual and customary charge for medical equipment, orthotics, and prosthetics or MSRP and 90% of the lesser of the provider's usual and customary charge for supplies or MSRP. DME providers may not bill South Dakota Medicaid at a rate higher than MSRP.

Note: One unit per month is billable for capped rental items. The item is considered purchased after 12 units have been paid by South Dakota Medicaid without a break in rental payments of three or more consecutive months. **Changes to current fees are indicated in red.** 

Code	Description	Fee	Purchase or Rental
99601	Home Infusion Or Specialty Drug Administration, Per Visit, Hours Or Less	Price By Report	
99602	Home Infusion Or Specialty Drug Administration, Per Visit, Each Additional Hour	Price By Report	
A4206	Syringe With Needle, Sterile, 1 cc Or Less, Each	\$ 0.38	Purchase
A4207	Syringe With Needle, Sterile 2 cc, Each	\$ 0.38	Purchase
A4208	Syringe With Needle, Sterile 3 cc, Each	\$ 0.38	Purchase
A4209	Syringe With Needle, Sterile 5 cc Or Greater, Each	\$ 0.53	Purchase
A4210	Needle-Free Injection Device, Each	Price By Report	
A4211	Supplies For Self-Administered Injections	Price By Report	
A4212	Non-Coring Needle	\$ 17.77	Purchase
A4213	Syringe, Sterile, 20 cc Or Greater, Each	\$ 8.31	Purchase
A4215	Needle, Sterile, Any Size, Each	\$ 0.34	Purchase
A4216	Sterile Water, Saline And/Or Dextrose, Diluent/Flush, 10 Ml		Purchase
A4217	Sterile Water/Saline, 500 MI	\$ 3.91	Purchase
A4218	Sterile Saline Or Water, Metered Dose Dispenser, 10 MI		Purchase
A4220	Refill Kit For Implantable Infusion Pump	\$ 38.05	Purchase
A4221	Supplies For Maintenance Of Non-Insulin Drug Infusion Catheter, Per Week (List Drugs Separately)	\$ 25.25	Purchase
A4222	Infusion Supplies For External Drug Infusion Pump, Per Cassette Or Bag (List Drugs Separately)	\$ 50.12	Purchase
A4223	Infusion Supplies Not Used With External Infusion Pump, Per Cassette Or Bag (List Drugs Separately)	\$ 65.55	Purchase
A4224	Supplies For Maintenance Of Insulin Infusion Catheter, Per Week	\$ 24.05	Purchase
A4225	Supplies For External Insulin Infusion Pump, Syringe Type Cartridge, Sterile, Each	\$ 3.01	Purchase
A4226	Supplies For Maintenance Of Insulin Infusion Pump With Dosage Rate Adjustment Using Therapeutic Continuous Glucose Sensing, Per Week	Price By Report	
A4230	Infusion Set For External Insulin Pump, Non Needle Cannula Type	\$ 13.95	Purchase
A4231	Infusion Set For External Insulin Pump, Needle Type	Price By Report	
A4232	Syringe With Needle For External Insulin Pump, Sterile, 3cc	Price By Report	
A4233	Replacement Battery, Alkaline (Other Than J Cell), For Use With Medically Necessary Home Blood Glucose Monitor Owned By Patient, Each	\$ 0.54	Purchase
A4234	Replacement Battery, Alkaline, J Cell, For Use With Medically Necessary Home Blood Glucose Monitor Owned By Patient, Each	\$ 2.23	Purchase
A4235	Replacement Battery, Lithium, For Use With Medically Necessary Home Blood Glucose Monitor Owned By Patient, Each	\$ 0.95	Purchase
A4236	Replacement Battery, Silver Oxide, For Use With Medically Necessary Home Blood Glucose Monitor Owned By Patient, Each	\$ 1.09	Purchase
A4238	Adju cgm supply allowance	\$ 235.76	Purchase
A4239	Non-adju cgm supply allow	\$ 229.51	Purchase
A4244	Alcohol Or Peroxide, Per Pint	\$ 4.48	Purchase
A4245	Alcohol Wipes, Per Box	\$ 4.75	Purchase

Code	Description	Fee	Purchase or Rental
A4246	Betadine Or Phisohex Solution, Per Pint	\$ 5.23	Purchase
A4247	Betadine Or Iodine Swabs/Wipes, Per Box	<u>'</u>	Purchase
A4248	Chlorhexidine Containing Antiseptic, 1 MI	Price By Report	
A4250	Urine Test Or Reagent Strips Or Tablets (100 Tablets Or Strips)	\$ 0.82	Purchase
A4252	Blood Ketone Test Or Reagent Strip, Each	Price By Report	
A4253	Blood Glucose Test Or Reagent Strips For Home Blood Glucose Monitor, Per 50 Strips	\$ 37.73	Purchase
A4255	Platforms For Home Blood Glucose Monitor, 50 Per Box	\$ 4.92	Purchase
A4256	Normal, Low And High Calibrator Solution / Chips	\$ 3.55	Purchase
A4257	Replacement Lens Shield Cartridge For Use With Laser Skin Piercing Device, Each	\$ 15.27	Purchase
A4258	Spring-Powered Device For Lancet, Each	\$ 2.01	Purchase
A4259	Lancets, Per Box Of 100	\$ 1.49	Purchase
A4262	Temporary, Absorbable Lacrimal Duct Implant, Each	\$ 0.01	Purchase
A4263	Permanent, Long Term, Non-Dissolvable Lacrimal Duct Implant, Each	\$ 0.01	Purchase
A4265	Paraffin, Per Pound	\$ 4.08	Purchase
A4271	Integrated Lancing And Blood Sample Testing Cartridges For Home Blood Glucose Monitor, Per Month	Price By Report	
A4280	Adhesive Skin Support Attachment For Use With External Breast Prosthesis, Each	\$ 6.41	Purchase
A4281	Tubing For Breast Pump, Replacement	Price By Report	
A4282	Adapter For Breast Pump, Replacement	Price By Report	
A4283	Cap For Breast Pump Bottle, Replacement	Price By Report	
A4284	Breast Shield And Splash Protector For Use With Breast Pump, Replacement	Price By Report	
A4285	Polycarbonate Bottle For Use With Breast Pump, Replacement	Price By Report	
A4286	Locking Ring For Breast Pump, Replacement	Price By Report	
A4290	Sacral Nerve Stimulation Test Lead, Each	Price By Report	
A4300	Implantable Access Catheter, (E,G., Venous, Arterial, Epidural Subarachnoid, Or Peritoneal, Etc.) External Access	\$ 0.01	Purchase
A4301	Implantable Access Total Catheter, Port/Reservoir (E.G., Venous, Arterial, Epidural, Subarachnoid, Peritoneal, Etc.)	\$ 10.15	Purchase
A4305	Disposable Drug Delivery System, Flow Rate Of 50 Ml Or Greater Per Hour	\$ 16.34	Purchase
A4306	Disposable Drug Delivery System, Flow Rate Of Less Than 50 Ml Per Hour	Price By Report	
A4310	Insertion Tray Without Drainage Bag And Without Catheter (Accessories Only)	\$ 8.94	Purchase
A4311	Insertion Tray Without Drainage Bag With Indwelling Catheter, Foley Type, Two-Way Latex With Coating (Teflon, Silicone, Silicone Elastomer Or Hydrophilic, Etc.)	\$ 17.73	Purchase
A4312	Insertion Tray Without Drainage Bag With Indwelling Catheter, Foley Type, Two-Way, All Silicone	\$ 19.21	Purchase
A4313	Insertion Tray Without Drainage Bag With Indwelling Catheter, Foley Type	\$ 19.21	Purchase
A4314	Insertion Tray With Drainage Bag With Indwelling Catheter, Foley Type, Two-Way Latex With Coating (Teflon, Silicone, Silicone Elastomer Or Hydrophilic, Etc.)	\$ 29.23	Purchase
A4315	Insertion Tray With Drainage Bag With Indwelling Catheter, Foley Type, Two-Way, All Silicone	\$ 30.49	Purchase
A4316	Insertion Tray With Drainage Bag With Indwelling Catheter, Foley Type, Three-Way, For Continuous Irrigation	\$ 32.79	Purchase
A4320	Irrigation Tray With Bulb Or Piston Syringe, Any Purpose	\$ 6.18	Purchase
A4321	Therapeutic Agent For Urinary Catheter Irrigation		Purchase
A4322	Irrigation Syringe, Bulb Or Piston, Each		Purchase
A4326	Male External Catheter With Integral Collection Chamber, Any Type, Each		Purchase
A4327	Female External Urinary Collection Device; Meatal Cup, Each	\$ 53.39	Purchase
A4328	Female External Urinary Collection Device; Pouch, Each		Purchase
A4330	Perianal Fecal Collection Pouch With Adhesive, Each	\$ 8.58	Purchase
A4331	Extension Drainage Tubing, Any Type, Any Length, With Connector/Adaptor, For Use With Urinary Leg Bag Or Urostomy Pouch, Each	\$ 3.94	Purchase
A4332	Lubricant, Individual Sterile Packet, Each	\$ 0.15	Purchase
A4333	Urinary Catheter Anchoring Device, Adhesive Skin Attachment, Each	\$ 2.73	Purchase
A4334	Urinary Catheter Anchoring Device, Leg Strap, Each	\$ 6.09	Purchase
A4335	Incontinence Supply; Miscellaneous As Of 7/1/19 Dme Providers (Claim Type 9) Will Be Paid At 90% Of Billed Charges. All Other Claim Types Will Be Paid As Rate Indicates Below	\$ 1.13	Purchase
A4336	Incontinence Supply, Urethral Insert, Any Type, Each	\$ 1.72	Purchase
A4338	Indwelling Catheter; Foley Type, Two-Way Latex With Coating (Teflon, Silicone, Silicone Elastomer, Or Hydrophilic, Etc.), Each		Purchase
A4340	Indwelling Catheter; Specialty Type, Eg; Coude, Mushroom, Wing, Etc.), Each	\$ 36.71	Purchase
	Indwelling intraurethral drainage device with valve, patient inserted, replacement only,		
A4341	each	Price By Report	

Code	Description	Fee	Purchase or Rental
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only each	Price By Report	
A4344	Indwelling Catheter, Foley Type, Two-Way, All Silicone Or Polyurethane, Each	\$ 17.73	Purchase
A4346	Indwelling Catheter; Foley Type, Three Way For Continuous Irrigation, Each	\$ 23.44	Purchase
A4349	Male External Catheter, With Or Without Adhesive, Disposable, Each	\$ 2.58	Purchase
A4351	Intermittent Urinary Catheter; Straight Tip, With Or ithout Coating (Teflon, Silicone, Silicone Elastomer, Or Hydrophilic, Etc.), Each	\$ 1.79	Purchase
A4352	Intermittent Urinary Catheter; Coude (Curved) Tip, With Or Without Coating (Teflon, Silicone, Silicone Elastomeric, Or Hydrophilic, Etc.), Each	\$ 6.31	Purchase
A4353	Intermittent Urinary Catheter, With Insertion Supplies	\$ 8.65	Purchase
A4354	Insertion Tray With Drainage Bag But Without Catheter	\$ 13.37	Purchase
A4355	Irrigation Tubing Set For Continuous Bladder Irrigation Through A Three-Way Indwelling Foley Catheter, Each		Purchase
A4356	External Urethral Clamp Or Compression Device (Not To Be Used For Catheter Clamp), Each	\$ 52.75	Purchase
A4357	Bedside Drainage Bag, Day Or Night, With Or Without Anti-Reflux Device, With Or Without Tube, Each	\$ 11.22	Purchase
A4358	Urinary Drainage Bag, Leg Or Abdomen, Vinyl, With Or Without Tube, With Straps, Each	\$ 6.51	Purchase
A4361	Ostomy Faceplate, Each	\$ 18.68	Purchase
A4362	Skin Barrier; Solid, 4 X 4 Or Equivalent; Each	\$ 4.02	Purchase
A4364	Adhesive For Ostomy Or Catheter; Liquid (Spray, Brush, Etc.), Cement, Powder Or Paste; Any Composition (E.G. Silicone, Latex, Etc.); Per Oz.	\$ 2.89	Purchase
A4363	Ostomy Clamp, Any Type, Replacement Only, Each	\$ 2.91	Purchase
A4366	Ostomy Vent, Any Type, Each	\$ 1.55	Purchase
A4367	Ostomy Belt, Each	\$ 8.52	Purchase
A4368	Ostomy Filter, Any Type, Each	\$ 0.30	Purchase
A4369	Ostomy Skin Barrier, Liquid (Spray, Brush, Etc), Per Oz	\$ 2.54	Purchase
A4371	Ostomy Skin Barrier, Powder, Per Oz	\$ 4.46	Purchase
A4372	Ostomy Skin Barrier, Solid 4X4 Or Equivalent, Standard Wear, With Built-In Convexity, Each	\$ 5.02	Purchase
A4373	Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordian), With Built-In Convexity, Any Size, Each	\$ 7.74	Purchase
A4375	Ostomy Pouch, Drainable, With Faceplate Attached, Plastic, Each	•	Purchase
A4376	Ostomy Pouch, Drainable, With Faceplate Attached, Rubber, Each	•	Purchase
A4377	Ostomy Pouch, Drainable, For Use On Faceplate, Plastic, Each	\$ 5.13	Purchase
A4378	Ostomy Pouch, Drainable, For Use On Faceplate, Rubber, Each		Purchase
A4379	Ostomy Pouch, Urinary, With Faceplate Attached, Plastic, Each	\$ 17.97	Purchase
A4380	Ostomy Pouch, Urinary, With Faceplate Attached, Rubber, Each	\$ 44.69	Purchase
A4381	Ostomy Pouch, Urinary, For Use On Faceplate, Plastic, Each		Purchase
A4382	Ostomy Pouch, Urinary, For Use On Faceplate, Heavy Plastic, Each	\$ 29.47	Purchase
A4383	Ostomy Pouch, Urinary, For Use On Faceplate, Rubber, Each	•	Purchase
A4384	Ostomy Faceplate Equivalent, Silicone Ring, Each	\$ 11.50	Purchase
A4385	Ostomy Skin Barrier, Solid 4X4 Or Equivalent, Extended Wear, Without Built-In Convexity, Each	\$ 6.30	Purchase
A4387	Ostomy Pouch, Closed, With Barrier Attached, With Built-In Convexity (1 Piece), Each	\$ 2.69	Purchase
A4388	Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, (1 Piece), Each	\$ 5.40	Purchase
A4389	Ostomy Pouch, Drainable, With Barrier Attached, With Built-In Convexity (1 Piece), Each	\$ 7.68	Purchase
A4390	Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, With Built-In Convexity (1 Piece), Each	\$ 11.87	Purchase
A4391	Ostomy Pouch, Urinary, With Extended Wear Barrier Attached (1 Piece), Each	\$ 8.74	Purchase
A4392	Ostomy Pouch, Urinary, With Standard Wear Barrier Attached, With Built-In Convexity (1 Piece), Each	\$ 9.78	Purchase
A4393	Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, With Built-In Convexity (1 Piece), Each	\$ 10.82	Purchase
A4394	Ostomy Deodorant, With Or Without Lubricant, For Use In Ostomy Pouch, Per Fluid Ounce	\$ 3.20	Purchase
A4395	Ostomy Deodorant For Use In Ostomy Pouch, Solid, Per Tablet	\$ 0.05	Purchase
A4396	Ostomy Belt With Peristomal Hernia Support	\$ 50.05	Purchase
A4398	Ostomy Irrigation Supply; Bag, Each	\$ 14.65	Purchase
A4399	Ostomy Irrigation Supply; Cone/Catheter, With Or Without Brush		Purchase
A4400	Ostomy Irrigation Set	\$ 56.50	Purchase
A4402	Lubricant	\$ 1.85	Purchase
A4404	Ostomy Rings	\$ 1.76	Purchase

Code	Description	Fee	Purchase or Rental
A4405	Ostomy Skin Barrier, Non-Pectin Based, Paste, Per Ounce	\$ 4.21	Purchase
A4406	Ostomy Skin Barrier, Pectin-Based, Paste, Per Ounce	\$ 7.15	Purchase
A4407	Ostomy Skin Barrier, With Flange (Solid, Flexible, Or Accordion), Extended Wear, With Built-In Convexity, 4 X 4 Inches Or Smaller, Each	\$ 10.86	Purchase
A4408	Ostomy Skin Barrier, Wtih Flange (Solid, Flexible Or Accordion), Extended Wear, With Built-In Convexity, Larger Than 4 X 4 Inches, Each	\$ 12.19	Purchase
A4409	Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), Extended Wear, Without Built-In Convexity, 4 X 4 Inches Or Smaller, Each	\$ 7.68	Purchase
A4410	Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), Extended Wear, Without Built-In Convexity, Larger Than 4 X 4 Inches, Each	\$ 10.82	Purchase
A4411	Ostomy Skin Barrier, Solid 4X4 Or Equivalent, Extended Wear, With Built-In Convexity, Each	\$ 6.30	Purchase
A4412	Ostomy Pouch, Drainable, High Output, For Use On A Barrier With Flange (2 Piece System), Without Filter, Each	\$ 3.24	Purchase
A4413	Ostomy Pouch, Drainable, High Output, For Use On A Barrier With Flange (2 Piece System), With Filter, Each	\$ 6.80	Purchase
A4414	Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), Without Built-In Convexity, 4 X 4 Inches Or Smaller, Each	\$ 6.09	Purchase
A4415	Ostomy Skin Barrier, With Flange (Solid, Flexible Or Accordion), Without Built-In Convexity, Larger Than 4X4 Inches, Each	\$ 7.42	Purchase
A4416	Ostomy Pouch, Closed, With Barrier Attached, With Filter (1 Piece), Each	\$ 3.29	Purchase
A4417	Ostomy Pouch, Closed, With Barrier Attached, With Built-In Convexity, With Filter (1	\$ 4.46	Purchase
A4418	Piece), Each Ostomy Pouch, Closed; Without Barrier Attached, With Filter (1 Piece), Each	\$ 2.17	Purchase
	Ostomy Pouch, Closed; Without Barrier Attached, With Filter (1 Fleeb), Each Ostomy Pouch, Closed; For Use On Barrier With Non-Locking Flange, With Filter (2		
A4419	Piece), Each	-	Purchase
A4420	Ostomy Pouch, Closed; For Use On Barrier With Locking Flange (2 Piece), Each	Price By Report	
A4422	Ostomy Absorbent Material (Sheet/Pad/Crystal Packet) For Use In Ostomy Pouch To Thicken Liquid Stomal Output, Each	\$ 0.14	Purchase
A4423	Ostomy Pouch, Closed; For Use On Barrier With Locking Flange, With Filter (2 Piece), Each	\$ 2.22	Purchase
A4424	Ostomy Pouch, Drainable, With Barrier Attached, With Filter (1 Piece), Each	\$ 5.88	Purchase
A4425	Ostomy Pouch, Drainable; For Use On Barrier With Non-Locking Flange, With Filter (2 Piece System), Each	\$ 4.43	Purchase
A4426	Ostomy Pouch, Drainable; For Use On Barrier With Locking Flange (2 Piece System), Each	\$ 3.38	Purchase
A4427	Ostomy Pouch, Drainable; For Use On Barrier With Locking Flange, With Filter (2 Piece System), Each	\$ 3.44	Purchase
A4428	Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, With Faucet-Type Tap With Valve (1 Piece), Each	\$ 8.05	Purchase
A4429	Ostomy Pouch, Urinary, With Barrier Attached, With Built-In Convexity, With Faucet-Type Tap With Valve (1 Piece), Each	\$ 9.87	Purchase
A4430	Ostomy Pouch, Urinary, With Extended Wear Barrier Attached, With Built-In Convexity, With Faucet-Type Tap With Valve (1 Piece), Each	\$ 10.52	Purchase
A4431	Ostomy Pouch, Urinary; With Barrier Attached, With Faucet-Type Tap With Valve (1 Piece), Each	\$ 7.68	Purchase
A4432	Ostomy Pouch, Urinary; For Use On Barrier With Non-Locking Flange, With Faucet-Type Tap With Valve (2 Piece), Each	\$ 4.44	Purchase
A4433	Ostomy Pouch, Urinary; For Use On Barrier With Locking Flange (2 Piece), Each	\$ 4.01	Purchase
A4434	Ostomy Pouch, Urinary; For Use On Barrier With Locking Flange, With Faucet-Type Tap With Valve (2 Piece), Each	\$ 4.50	Purchase
A4435	Ostomy Pouch, Drainable, High Output, With Extended Wear Barrier (One-Piece System), With Or Without Filter, Each		Purchase
A4436	Irrigation Supply; Sleeve, Reusable, Per Month	\$ 6.85	Purchase
A4437	Irrigation Supply; Sleeve, Disposable, Per Month	\$ 6.85	Purchase
A4438	Adhesive Clip Applied To The Skin To Secure External Electrical Nerve Stimulator Controller, Each	Price By Report	
A4450	Tape, Non-Waterproof, Per 18 Square Inches	\$ 0.09	Purchase
A4452 A4453	Tape, Waterproof, Per 18 Square Inches  Rectal Catheter For Use With The Manual Pump-Operated Enema System,	\$ 0.42 Price By Report	Purchase
	Replacement Only  Adhesive Remover Or Selvent (For Tape, Coment Or Other Adhesive)	, ,	Durchase
A4455 A4456	Adhesive Remover Or Solvent (For Tape, Cement Or Other Adhesive)  Adhesive Remover, Wipes, Any Type, Each		Purchase Purchase
A4458	Enema Bag With Tubing, Reusable	\$ 2.86	Purchase
A4459	Manual Pump-Operated Enema System, Includes Balloon, Catheter And All Accessories,	Price By Report	
	Reusable, Any Type	, , ,	

Code	Description	Fee	Purchase or Rental
A4461	Surgical Dressing Holder, Non-Reusable, Each	\$ 3.95	Purchase of Rental
A4463	Surgical Dressing Holder, Reusable, Each		Purchase
A4465	Non-Elastic Binder For Extremity	'	Purchase
A4467	Belt, Strap, Sleeve, Garment, Or Covering, Any Type	Price By Report	i dicilasc
A4470	Graylee Jet Washer	Price By Report	
A4480	Vabra Aspirator	Price By Report	
A4481	Thracheostoma Filter, Any Type, Any Size, Each	\$ 0.44	Purchase
A4483	Moisture Exchanger, Disposable, For Use With Invasive Mechanical Ventilation		Purchase
A4490	Surgical Stockings Above Knee Length, Each		Purchase
A4495	Surgical Stockings Thigh Length, Each	\$ 27.05	Purchase
A4500	Surgical Stockings Below Knee Length, Each		Purchase
A4510	Surgical Stockings Full Length, Each	\$ 63.98	Purchase
A4541	Monthly Supplies For Use Of Device Coded At E0733	\$ 34.81	Purchase
A4542	Supplies And Accessories For External Upper Limb Tremor Stimulator Of The Peripheral Nerves Of The Wrist	\$ 453.97	Purchase
A4550	Surgical Trays	\$ 0.01	Purchase
A 4555	Electrode/Transducer For Use With Electrical Stimulation Device Used For Cancer	Dries Dr. Denest	
A4555	Treatment, Replacement Only	Price By Report	
A4556	Electrodes, (E.G., Apnea Monitor), Per Pair	\$ 15.10	Purchase
A4557	Lead Wires, (E.G., Apnea Monitor), Per Pair	<u>'</u>	Purchase
A4559	Coupling Gel Or Paste, For Use With Ultrasound Device, Per Oz	\$ 0.12	Purchase
A4560	Neuromuscular electrical stimulator (nmes), disposable, replacement only	Price By Report	
A4561	Pessary, Rubber, Any Type		Purchase
A4562	Pessary, Non Rubber, Any Type	\$ 63.62	Purchase
A4563	Rectal Control System For Vaginal Insertion, For Long Term Use, Includes Pump And All Supplies And Accessories, Any Type Each	\$ 1,429.71	Purchase
A4564	Pessary, Disposable, Any Type	Price By Report	
A4565	Slings	\$ 9.89	Purchase
A4566	Shoulder Sling Or Vest Design, Abduction Restrainer, With Or Without Swathe Control, Prefabricated, Includes Fitting And Adjustment	Price By Report	
A4570	Splint	\$ 28.63	Purchase
A4580	Cast Supplies (E.G. Plaster)	\$ 34.46	Purchase
A4595	Electrical Stimulator Supplies, 2 Lead, Per Month, (E.G. Tens, Nmes)	\$ 21.98	Purchase
A4600	Sleeve For Intermittent Limb Compression Device, Replacement Only, Each	Price By Report	
A4601	Lithium Ion Battery, Rechargeable, For Non-Prosthetic Use, Replacement	Price By Report	
A4602	Replacement Battery For External Infusion Pump Owned By Patient, Lithium, 1.5 Volt, Each	\$ 4.31	Purchase
A4604	Tubing With Integrated Heating Element For Use With Positive Airway Pressure Device	\$ 61.47	Purchase
A4605	Tracheal Suction Catheter, Closed System, Each	\$ 20.28	Purchase
A4606	Oxygen Probe For Use With Oximeter Device, Replacement	\$ 72.02	Purchase
A4608	Transtracheal Oxygen Catheter, Each	\$ 60.00	Purchase
A4611	Battery, Heavy Duty; Replacement For Patient Owned Ventilator		Purchase
A4612	Battery Cables; Replacement For Patient-Owned Ventilator	<u>'</u>	Purchase
A4613	Battery Charger; Replacement For Patient-Owned Ventilator	\$ 136.87	Purchase
A4614	Peak Expiratory Flow Rate Meter, Hand Held	\$ 27.50	Purchase
A4615	Cannula, Nasal	\$ 0.89	Purchase
A4616	Tubing (Oxygen), Per Foot	\$ 0.06	Purchase
A4617	Mouth Piece	\$ 3.71	Purchase
A4618	Breathing Circuits	\$ 10.28	Purchase
A4619	Face Tent	\$ 2.17	Purchase
A4620	Variable Concentration Mask	\$ 0.78	Purchase
A4623	Tracheostomy, Inner Cannula  Tracheol System Catheter Apy Type Other Than Closed System Each	\$ 7.58	Purchase
A4624 A4625	Tracheal Suction Catheter, Any Type Other Than Closed System, Each Tracheostomy Care Or Cleaning Starter Kit	\$ 2.89 \$ 6.80	Purchase Purchase
A4626	Tracheostomy Cleaning Starter Nit	\$ 3.14	Purchase
A4627	Spacer, Bag Or Reservoir, With Or Without Mask, For Use With Metered Dose Inhaler	\$ 19.80	Purchase
A4628	Oropharyngeal Suction Catheter, Each	\$ 4.53	Purchase
A4629 A4630	Tracheostomy Care Kit For Established Tracheostomy  Replacement Batteries, Medically Necessary, Transcutaneous Electrical Stimulator,	\$ 5.72 \$ 7.46	Purchase Purchase
	Owned By Patient		
A4633	Replacement Bulb/Lamp For Ultraviolet Light Therapy System, Each	\$ 49.12	Purchase
A4634	Replacement Bulb For Therapeutic Light Box, Tabletop Model	Price By Report	Dunahaa
A4635	Underarm Pad, Crutch, Replacement, Each	\$ 6.11	Purchase
A4636	Replacement, Handgrip, Cane, Crutch, Or Walker, Each	\$ 3.49	Purchase

Code	Description	Fee	Purchase or Rental
A4637	Replacement, Tip, Cane, Crutch, Walker, Each.	\$ 2.02	Purchase
A4638	Replacement Battery For Patient-Owned Ear Pulse Generator, Each	Price By Report	
A4640	Replacement Pad For Use With Medically Necessary Alternating Pressure Pad Owned By Patient	\$ 67.82	Purchase
A4641	Supply Of Radiopharmaceutical Diagnostic Imaging Agent	\$ 277.85	Purchase
A4642	Supply Of Satumomab Pendetide, Radiopharmaceutical Diagnostic Imaging Agent, Per Dose	Price By Report	
A4649	Surgical Supply; Miscellaneous	Price By Report	
A4651	Calibrated Microcapillary Tube, Each	Price By Report	
A4652	Microcapillary Tube Sealant	Price By Report	
A4653	Peritoneal Dialysis Catheter Anchoring Device, Belt, Each	Price By Report	
A4657	Syringe, With Or Without Needle, Each	\$ 0.51	Purchase
A4660	Sphygmomanometer/Blood Pressure Apparatus With Cuff And Stethoscope	\$ 45.40	Purchase
A4663	Blood Pressure Cuff Only	\$ 26.52	Purchase
A4670	Automatic Blood Pressure Monitor	\$ 66.71	Purchase
A4671	Disposable Cycler Set Used With Cycler Dialysis Machine, Each	Price By Report	
A4672	Drainage Extension Line, Sterile, For Dialysis, Each	Price By Report	
A4673	Extension Line With Easy Lock Connectors, Used With Dialysis	Price By Report	
A4674	Chemicals/Antiseptics Solution Used To Clean/Sterilize Dialysis Equipment, Per 8 Oz	Price By Report	
A4680	Activated Carbon Filter For Hemodialysis, Each	Price By Report	
A4690	Dialyzer (Artificial Kidneys), All Types, All Sizes, For Hemodialysis, Each	Price By Report	
A4706	Bicarbonate Concentrate, Solution, For Hemodialysis, Per Gallon	Price By Report	
A4707	Bicarbonate Concentrate, Powder, For Hemodialysis, Per Packet	Price By Report	
A4708	Acetate Concentrate Solution, For Hemodialysis, Per Gallon	Price By Report	
A4709	Acid Concentrate, Solution, For Hemodialysis, Per Gallon	Price By Report	
A4714	Treated Water (Deionized, Distilled, Or Reverse Osmosis) For Peritoneal Dialysis, Per Gallon	Price By Report	
A4719	Y Set Tubing For Peritoneal Dialysis	Price By Report	
A4720	Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 249 cc, But Less Than Or Equal To 999 Cc, For Peritoneal Dialysis	Price By Report	
A4721	Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 999 cc But Less Than Or Equal To 1999 Cc, For Peritoneal Dialysis	Price By Report	
A4722	Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 1999 cc But Less Than Or Equal To 2999 Cc, For Peritoneal Dialysis	Price By Report	
A4723	Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 2999 cc	Price By Report	
A4724	But Less Than Or Equal To 3999 Cc, For Peritoneal Dialysis  Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 3999 cc	Price By Report	
A4725	But Less Than Or Equal To 4999 Cc, For Peritoneal Dialysis  Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 4999 cc But Less Than Or Equal To 5999 Cc, For Peritoneal Dialysis	Price By Report	
A4726	Dialysate Solution, Any Concentration Of Dextrose, Fluid Volume Greater Than 5999 cc, For Peritoneal Dialysis	Price By Report	
A4728	Dialysate Solution, Non-Dextrose Containing, 500 MI	Price By Report	
A4730	Fistula Cannulation Set For Hemodialysis, Each	Price By Report	
A4736	Topical Anesthetic, For Dialysis, Per Gram	Price By Report	
A4737	Injectable Anesthetic, For Dialysis, Per 10 MI	Price By Report	
A4740	Shunt Accessory, For Hemodialysis, Any Type, Each	Price By Report	
A4750	Blood Tubing, Arterial Or Venous, For Hemodialysis, Each	\$ 7.61	Purchase
A4755	Blood Tubing, Arterial And Venous Combined, For Hemodialysis, Each	Price By Report	
A4760	Dialysate Solution Test Kit, For Peritoneal Dialysis, Any Type, Each	Price By Report	
A4765	Dialysate Concentrate, Powder, Additive For Peritoneal Dialysis, Per Packet	Price By Report	
A4766	Dialysate Concentrate, Solution, Additive For Peritoneal Dialysis, Per 10 MI	Price By Report	
A4770	Blood Collection Tube, Vacuum, For Dialysis, Per 50	Price By Report	
A4771	Serum Clotting Time Tube, For Dialysis, Per 50	Price By Report	
A4772	Blood Glucose Test Strips, For Dialysis, Per 50		Purchase
A4773	Occult Blood Test Strips, For Dialysis, Per 50	Price By Report	
A4774	Ammonia Test Strips, For Dialysis, Per 50	Price By Report	
A4802	Protamine Sulfate, For Hemodialysis, Per 50 Mg	Price By Report	
A4860	Disposable Catheter Tips For Peritoneal Dialysis, Per 10	Price By Report	
A4870	Plumbing And/Or Electrical Work For Home Hemodialysis Equipment	Price By Report	
A4890	Contracts, Repair And Maintenance, For Hemodialysis Equipment	Price By Report	
A4911	Drain Bag/Bottle, For Dialysis, Each	Price By Report	
A4913	Miscellaneous Dialysis Supplies, Not Otherwise Specified	Price By Report	
A4918	Venous Pressure Clamp, For Hemodialysis, Each	Price By Report	
A4927	Gloves, Non-Sterile, Per 100	\$ 9.66	Purchase

Code	Description	Fee	Purchase or Rental
A4929	Tourniquet For Dialysis, Each	Price By Report	
A4930	Gloves, Sterile, Per Pair		Purchase
A4932	Rectal Thermometer, Reusable, Any Type, Each	Price By Report	
A5051	Ostomy Pouch, Closed; With Barrier Attached (1 Piece), Each		Purchase
A5052	Ostomy Pouch, Closed; Without Barrier Attached (1 Piece), Each	* -	Purchase
A5053	Ostomy Pouch, Closed; For Use On Faceplate, Each	'	Purchase
A5054	Ostomy Pouch, Closed; For Use On Barrier With Flange (2 Piece), Each	'	Purchase
A5055	Stoma Cap	\$ 1.69	Purchase
A5056	Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, With Filter, (1 Piece), Each	\$ 5.78	Purchase
A5057	Ostomy Pouch, Drainable, With Extended Wear Barrier Attached, With Built In Convexity, With Filter, (1 Piece), Each	\$ 11.87	Purchase
A5061	Pouch, Drainable; With Barrier Attached (1 Piece)	\$ 4.08	Purchase
A5062	Ostomy Pouch, Drainable; Without Barrier Attached (1 Piece), Each	\$ 2.40	Purchase
A5063	Ostomy Pouch, Drainable; For Use On Barrier With Flange (2 Piece System), Each	\$ 3.13	Purchase
A5071	Ostomy Pouch, Urinary; With Barrier Attached (1 Piece), Each	\$ 6.95	Purchase
A5072	Ostomy Pouch, Urinary; Without Barrier Attached (1 Piece), Each		Purchase
A5073	Ostomy Pouch, Urinary; For Use On Barrier With Flange (2 Piece), Each		Purchase
A5081	Stoma Plug Or Seal, Any Type		Purchase
A5082	Continent Device; Catheter For Continent Stoma		Purchase
A5083	Continent Device, Stoma Absorptive Cover For Continent Stoma	\$ 0.77	Purchase
A5093	Ostomy Accessory; Convex Insert	•	Purchase
A5102	Bedside Drainage Bottle With Or Without Tubing, Rigid Or Expandable, Each		Purchase
A5105	Urinary Suspensory With Leg Bag, With Or Without Tube, Each		Purchase
A5112	Urinary Drainage Bag, Leg Or Abdomen, Latex, With Or Without Tube, With Straps, Each		Purchase
A5113	Leg Strap; Latex, Replacement Only, Per Set	\$ 4.80	Purchase
A5114	Leg Strap; Foam Or Fabric, Replacement Only, Per Set	•	Purchase
A5114	Skin Barrier, Wipes Or Swabs, Each		Purchase
A5120	Skin Barrier; Wipes Of Swabs, Each Skin Barrier; Solid, 6 X 6 Or Equivalent, Each		Purchase
A5121	Skin Barrier; Solid, 8 X 8 Or Equivalent, Each		Purchase
A5122 A5126	Adhesive Or Non-Adhesive; Disk Or Foam Pad	·	Purchase
A5120 A5131	Appliance Cleaner, Incontinence And Ostomy Appliances, Per 16 Oz.	\$ 18.97	Purchase
A5200	Percutaneous Catheter/Tube Anchoring Device, Adhesive Skin Attachment	\$ 14.06	Purchase
A5500	For Diabetics Only, Fitting (Including Follow-Up), Custom Preparation And Supply Of Off-The-Shelf Depth-Inlay Shoe Manufactured To Accommodate Multi- Density Insert(S), Per Shoe.	·	Purchase
A5501	For Diabetics Only, Fitting (Including Follow-Up), Custom Preparation And Supply Of Shoe Molded From Cast(S) Of Patient's Foot (Custom Molded Shoe), Per Shoe	\$ 228.27	Purchase
A5503	For Diabetics Only, Modification (Including Fitting) Of Off-The-Shelf Depth-Inlay Shoe Or Custom-Molded Shoe With Roller Or Rigid Rocker Bottom, Per Shoe	\$ 38.75	Purchase
A5504	For Diabetics Only, Modification (Including Fitting) Of Off-The-Shelf Depth-Inlay Shoe Or Custom-Molded Shoe With Wedge(S), Per Shoe	\$ 38.75	Purchase
A5505	For Diabetics Only, Modification (Including Fitting) Of Off-The-Shelf Depth-Inlay Shoe Or Custom-Molded Shoe With Metatarsal Bar, Per Shoe	\$ 38.75	Purchase
A5506	For Diabetics Only, Modification (Including Fitting) Of Off-The-Shelf Depth-Inlay Shoe Or Custom-Molded Shoe With Off-Set Heel(S), Per Shoe	\$ 38.75	Purchase
A5507	For Diabetics Only, Not Otherwise Specified Modification (Including Fitting) Of Off-The- Shelf Depth-Inlay Shoe Or Custom-Molded Shoe, Per Shoe	\$ 38.75	Purchase
A5508	For Diabetics Only, Deluxe Feature Of Off-The-Shelf Depth-Inlay Shoe Or Custom-Molded Shoe, Per Shoe	Price By Report	
A5510	For Diabetics Only, Direct Formed, Compression Molded To Patient'S Foot Without External Heat Source, Multiple-Density Insert(S) Prefabricated, Per Shoe	Price By Report	
A5512	For Diabetics Only, Multiple Density Insert, Direct Formed, Molded To Foot After External Heat Source Of 230 Degrees Fahrenheit Or Higher, Total Contact With Patient'S Foot, Including Arch, Base Layer Minimum Of 1/4 Inch Material Of Shore A 35 Durometer Or 3/16	\$ 32.07	Purchase
A5513	For Diabetics Only, Multiple Density Insert, Custom Molded From Model Of Patient's Foot, Total Contact With Patient's Foot, Including Arch, Base Layer Minimum Of 3/16 Inch Material Of Shore A 35 Durometer (Or Higher), Includes Arch Filler And Other Shapin	\$ 46.32	Purchase
A5514	For Diabetics Only, Multiple Density Insert, Made By Direct Carving With Cam Technology From A Rectified Cad Model Created From A Digitized Scan Of The Patient, Total Contact With Patient's Foot, Including Arch, Base Layer Minimum Of 3/16 Inch Material Of Sho	\$ 47.53	Purchase

Code	Description	Fee	Purchase or Rental
A6010	Collagen Based Wound Filler, Dry Form, Sterile, Per Gram Of Collagen	\$ 37.07	Purchase
A6011	Collagen Based Wound Filler, Gel/Paste, Per Gram Of Collagen	•	Purchase
A6021	Collagen Dressing, Sterile, Size 16 Sq. In. Or Less, Each	\$ 24.31	Purchase
A6022	Collagen Dressing, Sterile, Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Each		Purchase
A6023	Collagen Dressing, Sterile, Size More Than 48 Sq. In., Each	·	Purchase
A6024	Collagen Dressing Wound Filler, Sterile, Per 6 Inches	\$ 7.41	Purchase
A6025	Gel Sheet For Dermal Or Epidermal Application, (E.G., Silicone, Hydrogel, Other), Each	\$ 8.88	Purchase
A6154	Wound Pouch, Each	\$ 17.77	Purchase
A6196	Alginate Or Other Fiber Gelling Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, Each Dressing	\$ 9.08	Purchase
A6197	Alginate Or Other Fiber Gelling Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Each Dressing	\$ 20.44	Purchase
A6198	Alginate Or Other Fiber Gelling Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., Each Dressing	Price By Report	
A6199	Alginate Or Other Fiber Gelling Dressing, Wound Filler, Sterile, Per 6 Inches	\$ 6.53	Purchase
A6203	Composite Dressing, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 3.90	Purchase
A6204	Composite Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 7.44	Purchase
A6205	Composite Dressing, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	Price By Report	
A6206	Contact Layer, Sterile, 16 Sq. In. Or Less, Each Dressing	Price By Report	
A6207	Contact Layer, Sterile, More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Each Dressing	, ,	Purchase
A6208	Contact Layer, Sterile, More Than 48 Sq. In., Each Dressing	Price By Report	
A6209	Foam Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 8.64	Purchase
A6210	Foam Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 24.62	Purchase
A6211	Foam Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 37.73	Purchase
A6212	Foam Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 12.06	Purchase
A6213	Foam Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 9.11	Purchase
A6214	Foam Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 12.73	Purchase
A6215	Foam Dressing, Wound Filler, Sterile, Per Gram	Price By Report	
A6216	Gauze, Non-Impregnated, Non-Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 0.05	Purchase
A6217	Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	Price By Report	
A6218	Gauze, Non-Impregnated, Non-Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	Price By Report	
A6219	Gauze, Non-Impregnated, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 1.20	Purchase
A6220	Gauze, Non-Impregnated, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 2.99	Purchase
A6221	Gauze, Non-Impregnated, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	Price By Report	
A6222	Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 2.47	Purchase
A6223	Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Sterile, Pad Size More Than 16 Sq. In., But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 2.99	Purchase
A6224	Gauze, Impregnated With Other Than Water, Normal Saline, Or Hydrogel, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 4.31	Purchase
A6228	Gauze, Impregnated, Water Or Normal Saline, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	Price By Report	
A 6000	Gauze, Impregnated, Water Or Normal Saline, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 4.31	Purchase
A6229			
A6229 A6230	Gauze, Impregnated, Water Or Normal Saline, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing Gauze, Impregnated, Hydrogel, For Direct Wound Contact, Sterile, Pad Size 16 Sq. In.	Price By Report	

Code	Description	Fee	Purchase or Rental
A6232	Gauze, Impregnated, Hydrogel, For Direct Wound Contact, Sterile, Pad Size Greater	\$ 8.22	Purchase
A0232	Than 16 Sq. In., But Less Than Or Equal To 48 Sq. In., Each Dressing	Φ 0.22	Pulchase
A6233	Gauze, Impregnated, Hydrogel, For Direct Wound Contact, Sterile, Pad Size More Than 48 Sq. In., Each Dressing	\$ 22.95	Purchase
A6234	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 8.09	Purchase
A6235	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 20.78	Purchase
A6236	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 32.62	Purchase
A6237	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 9.86	Purchase
A6238	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 27.29	Purchase
A6239	Hydrocolloid Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	Price By Report	
A6240	Hydrocolloid Dressing, Wound Filler, Paste, Sterile, Per Ounce	\$ 15.14	Purchase
A6241	Hydrocolloid Dressing, Wound Filler, Dry Form, Sterile, Per Gram	\$ 3.08	Purchase
A6242	Hydrogel Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 7.25	Purchase
A6243	Hydrogel Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 14.75	Purchase
A6244	Hydrogel Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 47.02	Purchase
A6245	Hydrogel Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 8.70	Purchase
A6246	Hydrogel Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 11.89	Purchase
A6247	Hydrogel Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 28.47	Purchase
A6248	Hydrogel Dressing, Wound Filler, Gel, Per Fluid Ounce	\$ 20.08	Purchase
A6250	Skin Sealants, Protectants, Moisturizers, Ointments, Any Type, Any Size	\$ 7.79	Purchase
A6251	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 2.38	Purchase
A6252	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 3.76	Purchase
A6253	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 7.33	Purchase
A6254	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size 16 Sq. In. Or Less, With Any Size Adhesive Border, Each Dressing	\$ 1.43	Purchase
A6255	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., With Any Size Adhesive Border, Each Dressing	\$ 3.64	Purchase
A6256	Specialty Absorptive Dressing, Wound Cover, Sterile, Pad Size More Than 48 Sq. In., With Any Size Adhesive Border, Each Dressing	Price By Report	
A6257	Transparent Film, Sterile, 16 Sq. In. Or Less, Each Dressing	\$ 1.88	Purchase
A6258	Transparent Film, Sterile, More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Each Dressing	\$ 5.33	Purchase
A6259	Transparent Film, Sterile, More Than 48 Sq. In., Each Dressing	\$ 13.52	Purchase
A6260	Wound Cleansers, Any Type, Any Size	Price By Report	
A6261	Wound Filler, Gel/Paste, Per Fluid Ounce, Not Otherwise Specified	\$ 44.38	Purchase
A6262	Wound Filler, Dry Form, Per Gram, Not Otherwise Specified	Price By Report	
A6266	Gauze, Impregnated, Other Than Water, Normal Saline, Or Zinc Paste, Sterile, Any Width, Per Linear Yard	\$ 2.38	Purchase
A6402	Gauze, Non-Impregnated, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing	\$ 0.15	Purchase
A6403	Gauze, Non-Impregnated, Sterile, Pad Size More Than 16 Sq. In. Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 0.51	Purchase
A6404	Gauze, Non-Impregnated, Sterile, Pad Size More Than 48 Sq. In., Without Adhesive Border, Each Dressing	\$ 0.67	Purchase
A6407	Packing Strips, Non-Impregnated, Sterile, Up To 2 Inches In Width, Per Linear Yard	\$ 2.36	Purchase
A6410	Eye Pad, Sterile, Each	•	Purchase
A6411	Eye Pad, Non-Sterile, Each		Purchase
A6412	Eye Patch, Occlusive, Each		Purchase
A6413	Adhesive Bandage, First-Aid Type, Any Size, Each	Price By Report	

Padding Bandage, Non-Elastic, Non-WorenNon-Kritted, Width Creater Than Or Equal To These Inches And Less Than Five Inches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, Width Less Than Three Inches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, Width Greater Than Or Society Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, Width Greater Than Or Equal To Sinches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Non-Sterile, Width Creater Than Or Equal To Sinches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Rorell, Width Creater Than Or Equal To Sinches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Creater Than Or Equal To Sinches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal To To Three Inches, Per Yard Conforming Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To To Three Inches, Per Yard Conforming Bandage, Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches, Per Yard Conforming Bandage, Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches, Per Yard Conforming Bandage, Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches, Per Yard Conforming Bandage, Bandage, Elastic, Knitted/Woven, Load Resistance Or La25 To Variable Conforming Bandage, Bandage, Elastic, Knitted/Woven, Load Resistance Or Equal To Three Inches, Per Yard Conforming Bandage, Bandage, Elastic, Knitted/Woven, Load Resistance Greater Than Or Equal To Three Inches, Per Yard Service Conforming Bandage, Bandage, Elastic, Knitted/Woven, Load Resistance Greater Than Or Equal To Three Inches And Leas Than Five Inches, Per Yard Service Conforming Bandage, Bandage, Elastic, Knitted/Woven, Load Resistance Greater Than Or Equal To Three Inches And East Than Five Inches, Per Yard Service Conforming Bandage,	Code	Description	Fee	Purchase or Rental
AB442 Conforming Bandage, Non-Elastic, Kinited/Woven, Non-Sterile, Width Greater Than Or London, Per Yard Conforming Bandage, Non-Elastic, Kinited/Woven, Non-Sterile, Width Greater Than Or Society of Purchase Conforming Bandage, Non-Elastic, Kinited/Woven, Non-Sterile, Width Greater Than Or Equal To Three Inches And Lass Than Five Inches, Per Yard Conforming Bandage, Non-Elastic, Kinited/Woven, Non-Sterile, Width Greater Than Or Equal To Three Inches And Lass Than Five Inches, Per Yard Conforming Bandage, Non-Elastic, Kinited/Woven, Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Conforming Bandage, Non-Elastic, Kinited/Woven, Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To To Per Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches, Per Yard Sterile, Width Greater Than Or Equal To Three Inches And Lass Than Five Inches, Per Yard Sterile, Per Yard Sterile, Width Greater Than Or Equal To Three Inches And Lass Than Five Inches, Per Yard Sterile, Per Ya	A6441		\$ 0.82	Purchase
Inches, Per Yard  Act 433  Act 5443  Act 6453  Act 6454	7.0 1 1 1		Ψ 0.02	T dionaco
Squal To Three Inches And Less Than Five Inches, Per Yard  646446  64646	A6442	Inches, Per Yard	\$ 0.19	Purchase
Supplier	A6443		\$ 0.36	Purchase
Conforming Bandage, Non-Elastic, Knited/Woven, Sterile, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Sand-Address Per Sand Non-Elastic, Knited/Woven, Sterile, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Light Compression Bandage, Elastic, Knited/Woven, Width Less Than Three Inches And Less Than Five Inches, Per Yard Light Compression Bandage, Elastic, Knited-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Light Compression Bandage, Elastic, Knited-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Notice and Compression Bandage, Elastic, Knited-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Notice and Compression Bandage, Elastic, Knited-Woven, Width Greater Than Or Equal To Three Inches, Per Yard Sand All Lash Than Five Inches, Per Yard Sand All Lash Five Inches, Per Yard Sand All Lash Five Inches, Per Yard Sand All Lash Five Inches, Per Yard Sand Sand All Lash Five Inches, Per Yard Sand All Lash Five Inc	A6444		\$ 0.67	Purchase
Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal Conforming Bandage, Elastic, Knitted/Woven, Width Less Than Three Inches, Per Yard Light Compression Bandage, Elastic, Knitted/Woven, Width Less Than Three Inches, Per Yard Light Compression Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Light Compression Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches, Per Yard Robert Prevention, Per Yard Service, Per Service, Per Yard Service, Per Service, Per Yard Service, Per Service, Per Service, Per Service, Per Service, Pe	A6445	Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Less Than Three	\$ 0.41	Purchase
Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal To Five Inches, Per Vard Light Compression Bandage, Elastic, Knitted/Woven, Width Less Than Three Inches.   1.43 Purchase   1.44 Purchase   1.45 Purchase   1.44 Purchase   1.45 Purchase   1.44 Purchase   1.45 Purchase   1.45 Purchase   1.45 Purchase   1.46 Purchase   1.47 Purchase   1.48 Purcha	A6446	Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal	\$ 0.51	Purchase
Light Compression Bandage, Elastic, Knitted/Woven, Width Creater Than Or Equal To The Inches And Less Than Five Inches, Per Yard	A6447	Conforming Bandage, Non-Elastic, Knitted/Woven, Sterile, Width Greater Than Or Equal	\$ 0.82	Purchase
A6449   Upit Compression Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Moderate Compression Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To Five Inches, Per Yard Moderate Compression Bandage, Elastic, Knitted/Woven, Load Resistance Of 1.25 To 1.34 Foot Pounds At 50% Maximum Stretch, Width Greater Than Or Equal To Three Inches, Per Yard November And Less Than Five Inches, Per Yard Service Andrewer Moderater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service Adherence And Less Than Five Inches, Per Yard Service	A6448	Light Compression Bandage, Elastic, Knitted/Woven, Width Less Than Three Inches,	\$ 1.43	Purchase
Infree Inches And Less Inan Five Inches, Per Yard A6450	A6449	Light Compression Bandage, Elastic, Knitted/Woven, Width Greater Than Or Equal To	\$ 2.18	Purchase
Five Inches, Per Yard				
A6451 1.34 Foot Pounds At 50% Maximum Stretch, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  A6452 High Compression Bandage, Elastic, Knitted/Woven, Load Resistance Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  A6453 Inches, Per Yard Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Less Than Three Inches And Less Than Five Inches, Per Yard  A6454 Inches, Per Yard Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  A6455 Inches, Per Yard Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  A6456 Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Trive Inches And Less Than Five Inches, Per Yard  A6457 To Five Inches, Per Yard  A6457 Tubular Dressing With Or Without Elastic, Any Width, Per Linear Yard \$ 1.50 Purchase  A6460 Adhesive Border, Each Dressing  Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. Or Less, Without Achesive Border, Each Dressing  A6461 Than Or Equal To A Sg. In., Without Achesive Border, Each Dressing  A6501 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated  Price By Report  A6502 Compression Burn Garment, Glove To Wifst. Custom Fabricated  Price By Report  A6503 Compression Burn Garment, Glove To Wifst. Custom Fabricated  Price By Report  A6504 Compression Burn Garment, Glove To Stalla, Custom Fabricated  Price By Report  A6505 Compression Burn Garment, Facial Hood, Custom Fabricated  Price By Report  A6506 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  Price By Report  A6507 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  Compression Bur	70400		Ψ 2.23	i dichase
High Compression Bandage, Elastic, Knitted/Woven, Load Resistance Greater Than Or Equal To 135 Foot Pounds At 50% Maximum Stretch, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Less Than Three Inches, Per Yard  Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Creater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  Self-Adherent Bandage, Elastic, Ron-Elastic, Knitted/Woven, Width Greater Than Or Equal To Self To Vision University of the Vision Or Self To Vision University of the Vision Or Self To Vision University of the Vision Or Self To Vision University of Vision	A6451	1.34 Foot Pounds At 50% Maximum Stretch, Width Greater Than Or Equal To Three	\$ 2.10	Purchase
A6454   Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 0.97   Purchase   \$ 0.97   Purchase   \$ Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 1.67   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 1.50   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 1.50   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 1.42   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard   \$ 1.42   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Non-Elastic, Any Width, Per Linear Yard   \$ 1.42   Purchase   \$ 2   Zinc Paste Impregnated Bandage, Richard Spring Report   \$ 2   Zinc Paste Impregnated Bandage, Richard Spring Report   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Elastic, Any Width, Per Linear Yard   \$ 2   Zinc Bandage, Per	A6452	Equal To 1.35 Foot Pounds At 50% Maximum Stretch, Width Greater Than Or Equal To	\$ 7.07	Purchase
A6455 To Three Inches And Less Than Five Inches, Per Yard Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal 70 Five Inches, Per Yard Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal 70 Three Inches And Less Than Five Inches, Per Yard A6466 Equal To Three Inches And Less Than Five Inches, Per Yard A6467 Tubular Dressing With Or Without Elastic, Any Width, Per Linear Yard A6467 Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing A6461 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing A6501 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated A6502 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated A6503 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6505 Compression Burn Garment, Glove To Stalla, Custom Fabricated A6506 Compression Burn Garment, Glove To Mrist, Custom Fabricated A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated A6509 Compression Burn Garment, Thore Trunk To Waist Including Arm Openings (Vest), Custom Fabricated A6509 Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated A6610 Compression Burn Garment, Not Otherwise Classified A6611 Compression Burn Garment, Not Otherwise Classified A6612 Compression Burn Garment, Not Otherwise Classified A6613 Compression Burn Garment, Not Otherwise Classified A6614 Compression Garment, Arm, Padded, For Nighttime Use, Each A6615 Compression Garment, Glove, Padded, For Nighttime Use, Each A6616 Cardient Compression Garment, Glove, Padded, For Nighttime Use, Each A6617 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Each A6626 Gradient Compression Garment, L	A6453	<u>-</u>	\$ 0.77	Purchase
Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal To Five Inches, Per Yard A6456 Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard A6467 Tubular Dressing With Or Without Elastic, Any Width, Per Linear Yard A6467 Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing A6460 Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing A6461 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing A6501 Compression Burn Garment, Chin Strap, Custom Fabricated A6502 Compression Burn Garment, Chin Strap, Custom Fabricated A6503 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6505 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6506 Compression Burn Garment, Glove To Wrist, Custom Fabricated A6507 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated A6508 Compression Burn Garment, Foot To Tinigh Length, Custom Fabricated A6509 Compression Burn Garment, Foot To Tinigh Length, Custom Fabricated A6509 Compression Burn Garment, Foot To Waist Including Arm Openings (Vest), Custom Fabricated A6500 Compression Burn Garment, Trunk, Including Arm Doenings (Leotard), Custom Fabricated A6501 Compression Burn Garment, Trunk, Including Leg Openings (Panty), Custom Fabricated A6502 Compression Burn Garment, Trunk, Including Leg Openings (Panty), Custom Fabricated A6503 Compression Burn Garment, Trunk Provention After	A6454		\$ 0.97	Purchase
A6466 Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or Equal To Three Inches And Less Than Five Inches, Per Yard  A6467 Tubular Dressing With Or Without Elastic, Any Width, Per Linear Yard  Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing  A6460 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing  A6461 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing  A6501 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated  A6502 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated  A6503 Compression Burn Garment, Glove To Wist, Custom Fabricated  A6504 Compression Burn Garment, Glove To Wist, Custom Fabricated  A6505 Compression Burn Garment, Glove To To High Length, Custom Fabricated  A6506 Compression Burn Garment, Foot To Knee Length, Custom Fabricated  A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated  A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  A6509 Custom Fabricated  A6500 Compression Burn Garment, Trunk, Including Arm Openings (Vest), Custom Fabricated  A6500 Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated  A6510 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated  A6511 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated  A6512 Compression Burn Garment, Not Otherwise Classified  Compression Burn Garment, Not Otherwise Classified  A6513 Compression Burn Garment, Not Otherwise Classified  Compression Burn Garment, Not Otherwise Classified  A6514 Compression Garment, Glove, Padded, For Nighttime Use, Each  A6520 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Each  A6521 Gradient Compression Garment, Low	A6455	Self-Adherent Bandage, Elastic, Non-Knitted/Non-Woven, Width Greater Than Or Equal	\$ 1.67	Purchase
A6467 Tubular Dressing With Or Without Elastic, Any Width, Per Linear Yard  Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing  A6461 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing  A6501 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated  A6502 Compression Burn Garment, Chin Strap, Custom Fabricated  A6503 Compression Burn Garment, Chin Strap, Custom Fabricated  A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated  A6505 Compression Burn Garment, Glove To Wrist, Custom Fabricated  A6506 Compression Burn Garment, Glove To Libow, Custom Fabricated  A6507 Compression Burn Garment, Glove To Elbow, Custom Fabricated  A6508 Compression Burn Garment, Glove To Elbow, Custom Fabricated  A6509 Compression Burn Garment, Foot To Knee Length, Custom Fabricated  A6500 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated  A6500 Compression Burn Garment, Foot To To Waist Including Arm Openings (Vest), Custom Fabricated  Compression Burn Garment, Trunk, Including Arm Down To Leg Openings (Leotard), Custom Fabricated  A6510 Custom Fabricated  A6511 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated  A6512 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated  A6513 Compression Burn Garment, Not Otherwise Classified  Compression Burn Garment, Not Otherwise Classified  Price By Report  A6520 Gradient Compression Garment, Foot To Meck, Plastic Or Equal, Custom Fabricated  A6521 Compression Garment, Foot To Meck, Plastic Or Equal, Custom Fabricated  A6522 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Each  A6523 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Each  A6524 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Each  A6525 Gradient Compression Garment, Foot Foot Padded, For Nighttime Use, Each  A6526	A6456	Zinc Paste Impregnated Bandage, Non-Elastic, Knitted/Woven, Width Greater Than Or	\$ 1.50	Purchase
A6460 Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without Adhesive Border, Each Dressing Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing Price By Report Price By Report Compression Burn Garment, Endysuit (Head To Foot), Custom Fabricated Price By Report Price By Repo	A6457		\$ 1.42	Purchase
A6461 Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less Than Or Equal To 48 Sq. In., Without Adhesive Border, Each Dressing Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated Price By Report Price By R	A6460	Synthetic Resorbable Wound Dressing, Sterile, Pad Size 16 Sq. In. Or Less, Without	Price By Report	
A6501 Compression Burn Garment, Bodysuit (Head To Foot), Custom Fabricated Price By Report A6502 Compression Burn Garment, Chin Strap, Custom Fabricated Price By Report Price By Report A6503 Compression Burn Garment, Glove To Wrist, Custom Fabricated Price By Report A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated Price By Report A6505 Compression Burn Garment, Glove To Elbow, Custom Fabricated Price By Report A6506 Compression Burn Garment, Glove To Axilla, Custom Fabricated Price By Report A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6509 Compression Burn Garment, Trunk To Waist Including Arm Openings (Vest), Custom Fabricated Price By Report Custom Fabricated Price By Report Custom Fabricated Price By Report Price By Report Custom Fabricated Price By Report Price By Report Price By Report Custom Fabricated Price By Report Price B	A6461	Synthetic Resorbable Wound Dressing, Sterile, Pad Size More Than 16 Sq. In. But Less	Price By Report	
A6503 Compression Burn Garment, Facial Hood, Custom Fabricated Price By Report A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated Price By Report A6505 Compression Burn Garment, Glove To Elbow, Custom Fabricated Price By Report A6506 Compression Burn Garment, Glove To Axilla, Custom Fabricated Price By Report A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6509 Compression Burn Garment, Upper Trunk To Waist Including Arm Openings (Vest), Custom Fabricated Price By Report A6510 Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated Price By Report A6511 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated Price By Report A6512 Compression Burn Garment, Not Otherwise Classified Price By Report A6513 Compression Burn Garment, Not Otherwise Classified Price By Report A6514 Compression Burn Garment, Not Otherwise Classified Price By Report A6515 Compression Burn Garment, Not Otherwise Classified Price By Report A6516 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Each \$ 107.59 Purchase A6520 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Custom, Each \$ 261.42 Purchase A6521 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each \$ 326.15 Purchase A6523 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Each \$ 326.15 Purchase A6524 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Each \$ 326.15 Purchase A6526 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Each \$ 589.66 Purchase A6526 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each \$ 589.66 Purchase A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each \$ 108.43 Purchase	A6501		Price By Report	
A6504 Compression Burn Garment, Glove To Wrist, Custom Fabricated Price By Report A6505 Compression Burn Garment, Glove To Elbow, Custom Fabricated Price By Report A6506 Compression Burn Garment, Glove To Axilla, Custom Fabricated Price By Report A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6509 Compression Burn Garment, Upper Trunk To Waist Including Arm Openings (Vest), Custom Fabricated Price By Report A6500 Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated Price By Report A6510 Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated Price By Report A6511 Compression Burn Garment, Not Otherwise Classified Price By Report A6512 Compression Burn Garment, Not Otherwise Classified Price By Report A6513 Compression Burn Mask, Face And/Or Neck, Plastic Or Equal, Custom Fabricated Price By Report A6514 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Each \$ 107.59 Purchase A6521 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Custom, Each \$ 261.42 Purchase A6523 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each \$ 261.42 Purchase A6523 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each \$ 261.42 Purchase A6524 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Each \$ 326.15 Purchase A6526 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Each \$ 589.66 Purchase A6526 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each \$ 1084.32 Purchase A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each \$ 1084.32 Purchase A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each \$ 1084.32 Purchase A6527 Gradient Compre	A6502	Compression Burn Garment, Chin Strap, Custom Fabricated	Price By Report	
A6505 Compression Burn Garment, Glove To Elbow, Custom Fabricated Price By Report A6506 Compression Burn Garment, Glove To Axilla, Custom Fabricated Price By Report A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report Custom Fabricated Price By Report Price By Report Price By Report Custom Fabricated Price By Report Custom Fabricated Price By Report Price By Report Custom Fabricated Price By Report Custom Fabricated Price By Report Price By	A6503	Compression Burn Garment, Facial Hood, Custom Fabricated	Price By Report	
A6506 Compression Burn Garment, Glove To Axilla, Custom Fabricated Price By Report A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report A6509 Compression Burn Garment, Upper Trunk To Waist Including Arm Openings (Vest), Custom Fabricated A6510 Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated Compression Burn Garment, Lower Trunk Including Leg Openings (Panty), Custom Fabricated A6511 Compression Burn Garment, Not Otherwise Classified A6512 Compression Burn Garment, Not Otherwise Classified A6513 Compression Burn Mask, Face And/Or Neck, Plastic Or Equal, Custom Fabricated A6520 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Each A6521 Gradient Compression Garment, Glove, Padded, For Nighttime Use, Custom, Each A6522 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each A6523 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each A6524 Gradient Compression Garment, Arm, Padded, For Nighttime Use, Custom, Each A6525 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Custom, Each A6526 Gradient Compression Garment, Lower Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each A6527 Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Custom, Each	A6504	Compression Burn Garment, Glove To Wrist, Custom Fabricated	Price By Report	
A6507 Compression Burn Garment, Foot To Knee Length, Custom Fabricated Price By Report A6508 Compression Burn Garment, Foot To Thigh Length, Custom Fabricated Price By Report Price By Report Custom Fabricated Price By Report Price By Report Price By Report Price By Report Custom Fabricated Compression Burn Garment, Trunk, Including Arms Down To Leg Openings (Leotard), Custom Fabricated Price By Report Price By	A6505		Price By Report	
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Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use,	A6525	· · · · · · · · · · · · · · · · · · ·	\$ 658.44	Purchase
46577   1 108/132   Purchage	A6526	Gradient Compression Garment, Full Leg And Foot, Padded, For Nighttime Use, Each	\$ 589.66	Purchase
	A6527		\$ 1,084.32	Purchase

Code	Description	Fee	Purchase or Rental
A6528	Gradient Compression Garment, Bra, For Nighttime Use, Each	\$ 567.00	Purchase
A6529	Gradient Compression Garment, Bra, For Nighttime Use, Custom, Each	\$ 895.95	Purchase
A6530	Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Each	\$ 31.70	Purchase
	Gradient Compression Stocking, Below Knee, 30-40 Mmhg, Used As A Surgical		
A6531	Dressing, Each	\$ 52.12	Purchase
A6532	Gradient Compression Stocking, Below Knee, 40-50 Mmhg, Used As A Surgical Dressing, Each	\$ 73.44	Purchase
A6533	Gradient Compression Stocking, Thigh Length, 18-30 Mmhg, Each	\$ 49.41	Purchase
A6534	Gradient Compression Stocking, Thigh Length, 30-40 Mmhg, Each	\$ 58.86	Purchase
A6535	Gradient Compression Stocking, Thigh Length, 40-50 Mmhg, Each	Price By Report	
A6536	Gradient Compression Stocking, Full Length/Chap Style, 18-30 Mmhg, Each	\$ 51.35	Purchase
A6537	Gradient Compression Stocking, Full Length/Chap Style, 30-40 Mmhg, Each	Price By Report	
A6538	Gradient Compression Stocking, Full Length/Chap Style, 40-50 Mmhg, Each	Price By Report	
A6539	Gradient Compression Stocking, Waist Length, 18-30 Mmhg, Each	Price By Report	
A6540	Gradient Compression Stocking, Waist Length, 30-40 Mmhg, Each	Price By Report	
A6541	Gradient Compression Stocking, Waist Length, 40-50 Mmhg, Each	Price By Report	
A6544	Gradient Compression Stocking, Garter Belt	\$ 56.00	Purchase
A6545	Gradient Compression Wrap, Non-Elastic, Below Knee, 30-50 Mmhg, Used As A Surgical Dressing, Each	Price By Report	
A6549	Gradient Compression Stocking/Sleeve, Not Otherwise Specified	Price By Report	
	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All	, ,	Durchood
A6550	Supplies And Accessories	\$ 29.23	Purchase
A6552	Gradient Compression Stocking, Below Knee, 30-40 Mmhg, Each	\$ 49.33	Purchase
A6553	Gradient Compression Stocking, Below Knee, 30-40 Mmhg, Custom, Each	\$ 192.61	Purchase
A6554	Gradient Compression Stocking, Below Knee, 40 Mmhg Or Greater, Each	\$ 67.82	Purchase
A6555	Gradient Compression Stocking, Below Knee, 40 Mmhg Or Greater, Custom, Each	\$ 192.61	Purchase
A6556	Gradient Compression Stocking, Thigh Length, 18-30 Mmhg, Custom, Each	\$ 263.96	Purchase
A6557	Gradient Compression Stocking, Thigh Length, 30-40 Mmhg, Custom, Each	\$ 263.96	Purchase
A6558	Gradient Compression Stocking, Thigh Length, 40 Mmhg Or Greater, Custom, Each	\$ 272.40	Purchase
A6559	Gradient Compression Stocking, Full Length/Chap Style, 18-30 Mmhg, Custom, Each	Price By Report	
A6560	Gradient Compression Stocking, Full Length/Chap Style, 30-40 Mmhg, Custom, Each	Price By Report	
A6561	Gradient Compression Stocking, Full Length/Chap Style, 40 Mmhg Or Greater, Custom, Each	Price By Report	
A6562	Gradient Compression Stocking, Waist Length, 18-30 Mmhg, Custom, Each	\$ 863.89	Purchase
A6563	Gradient Compression Stocking, Waist Length, 30-40 Mmhg, Custom, Each	\$ 863.89	Purchase
A6564	Gradient Compression Stocking, Waist Length, 40 Mmhg Or Greater, Custom, Each	\$ 930.60	Purchase
A6565	Gradient Compression Gauntlet, Custom, Each	\$ 149.27	Purchase
A6566	Gradient Compression Garment, Neck/Head, Each		Purchase
A6567	Gradient Compression Garment, Neck/Head, Custom, Each		Purchase
A6568	Gradient Compression Garment, Torso And Shoulder, Each	\$ 141.45	Purchase
A6569	Gradient Compression Garment, Torso/Shoulder, Custom, Each	\$ 805.50	Purchase
A6570	Gradient Compression Garment, Genital Region, Each	\$ 96.38	Purchase
A6571	Gradient Compression Garment, Genital Region, Custom, Each	\$ 579.27	Purchase
A6572	Gradient Compression Garment, Toe Caps, Each	\$ 89.43	Purchase
A6573	Gradient Compression Garment, Toe Caps, Custom, Each	\$ 212.22	Purchase
A6574	Gradient Compression Arm Sleeve And Glove Combination, Custom, Each	\$ 270.55	Purchase
A6575	Gradient Compression Arm Sleeve And Glove Combination, Each	\$ 87.68	Purchase
A6576	Gradient Compression Arm Sleeve, Custom, Medium Weight, Each	\$ 166.05	Purchase
A6577	Gradient Compression Arm Sleeve, Custom, Heavy Weight, Each	\$ 137.43	Purchase
A6578	Gradient Compression Arm Sleeve, Each	\$ 67.68	Purchase
A6579	Gradient Compression Glove, Custom, Medium Weight, Each	\$ 266.53	Purchase
A6580	Gradient Compression Glove, Custom, Heavy Weight, Each	\$ 264.56	Purchase
A6581	Gradient Compression Glove, Each	\$ 62.10	Purchase
A6582	Gradient Compression Gauntlet, Each	\$ 41.42	Purchase
A6583	Gradient Compression Wrap With Adjustable Straps, Below Knee, 30-50 Mmhg, Each	\$ 136.24	Purchase
A6584	Gradient Compression Wrap With Adjustable Straps, Not Otherwise Specified	Price By Report	
A6585	Gradient Pressure Wrap With Adjustable Straps, Above Knee, Each	\$ 161.32	Purchase
A6586	Gradient Pressure Wrap With Adjustable Straps, Full Leg, Each	\$ 475.25	Purchase
A6587	Gradient Pressure Wrap With Adjustable Straps, Foot, Each	\$ 62.25	Purchase
A6588	Gradient Pressure Wrap With Adjustable Straps, Arm, Each	\$ 207.49	Purchase

Gradent Pressure Wrap With Adjustable Straps, Bin. Each   S   81,91   Purchase	Code	Description	Fee	Purchase or Rental
A6590 Vacuum Drainage Collection Unit And Tubing Kit, Including Al Supplies Needed For Vacuum Drainage Collection Unit And Tubing Kit, Including Al Supplies Needed For Vacuum Drainage Collection Unit And Tubing Kit, Including Al Supplies Needed For Collection Unit And Tubing Kit, Including Al Supplies Needed For Collection Unit Annape For Like With Implanted Catheder, Each Collection Unit Change, For Like With Implanted Catheder, Each Collection Unit Change, For Like With Implanted Catheder, Each Congression Bandaging Supply, Bandage Liner, Lower Externity, Any Size Of S 29.83 Purchase Cathering Congression Bandaging Supply, Bandage Liner, Lower Externity, Any Size Of S 29.83 Purchase Cathering, Each Compression Bandaging Supply, Bandage Liner, Lower Externity, Any Size Of S 29.83 Purchase Cathering, Each Compression Bandage Roll, Elastic Long Stretch, Linear Yard, Any Width, Each Gradient Compression Bandage Roll, Elastic Long Stretch, Linear Yard, Any Width, Each S 13.2 Purchase Cathering Compression Bandage Roll, Elastic Medium Stretch, Per Linear Yard, Any Size Of Stretch Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Size Of Stretch Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Size Of Stretch Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Size Of Stretch Compression Bandaging Supply, High Density Foam Roll For Bandage, Port Size Cathering Stretch Compression Bandaging Supply, High Density Foam Roll For Bandage, Port Size Cathering Stretch Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250 Size Cathering Stretch Part Any Width, Each Square Contrineity, Each Square Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each Square Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each Square Compression Bandaging Supply, Tubular Protective Absorption Layer, Port Sprayer Size Cath				
A6891 Octoberion Unit Change, For Use With Implanted Carlaterie, Equations Needed For Control Unit Change, For Use With Implanted Carlaterie, Equations (Control Unit Change, For Use With Implanted Carlaterie, Equations (Control Unit Change, For Use With Implanted Carlaterie, Equations (Control Unit Change)		Vacuum Drainage Collection Unit And Tubing Kit, Including All Supplies Needed For	Price By Report	
Otherwise Specified  Gradient Compression Bandaging Supply, Bandage Liner, Lower Extremity, Any Size Or Length, Each  Social Compression Bandaging Supply, Bandage Liner, Upper Extremity, Any Size Or Length, Each  Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  Social Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  A6598 Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  A6598 Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  A6598 Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square  Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square  Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square  Gradient Compression Bandaging Supply, High Density Foam Pad, Any Size Or Shape,  Gradient Compression Bandaging Supply, High Density Foam Roll For Bandagin, Per  Gradient Compression Bandaging Supply, High Density Foam Roll For Bandagin, Per  Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandagin, Per 250  Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandagin, Per 250  Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandaging Supply, Per 250  Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandaging Supply, Per 250  Gradient Compression Bandaging Supply, Low Density Foam, Per Linear Yard, Any Width,  Each  Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width,  Each  Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each  For Compression Bandaging Supply, Tubular Protective Absorption Padded Layer,  For Each Yard, Any Width, Each  For Compression Bandaging Supply, Not Cherwise Specified  Gradient Compression Bandaging Supply, Not Cherwise Specified  Gradient Compression Bandaging Supply, Not Cherwise Specified  Gradient Compression Bandaging Su	A6591	Vacuum Drainage Collection Unit And Tubing Kit, Including All Supplies Needed For Collection Unit Change, For Use With Implanted Catheter, Each	Price By Report	
Length, Each  A6595 Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  A6596 Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Width, Each  A6597 Gradient Compression Bandage Roll, Elastic Ung Stretch, Linear Yard, Any Width, Each  A6598 Gradient Compression Bandage Roll, Elastic Ung Stretch, Linear Yard, Any Width, Each  A6599 Gradient Compression Bandage Roll, Elastic Medium Stretch, Per Linear Yard, Any Width, Each  A6590 Gradient Compression Bandage Roll, Elastic Medium Stretch, Per Linear Yard, Any Width, Each  A6590 Gradient Compression Bandage Roll, Elastic Short Stretch, Per Linear Yard, Any Width, Each  A6600 Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Width, Each  A6600 Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250  Square Centimeters, Each  Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250  Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250  Gradient Compression Bandaging Supply, Low Density Rial Foam Sheet, Per 250  Square Centimeters, Each  Gradient Compression Bandaging Supply, Low Density Rial Foam Sheet, Per 250  Gradient Compression Bandaging Supply, Low Density Rial Foam Sheet, Per 250  Square Centimeters, Each  Gradient Compression Bandaging Supply, Low Density Rial Foam Sheet, Per 250  Square Centimeters, Each  Gradient Compression Bandaging Supply, Tubuliar Protective Absorption Padded Layer,  Per Linear Yard, Any Width, Each  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, Tubuliar Protective Absorption Padded Layer,  File Layer Yard, Any Width, Each  Gradient Compression Bandaging Supply, Tubuliar Protective Absorption Padded Layer,  File Layer Yard, Any Width,	A6593		Price By Report	
Length, Each  A6596 Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any Witth, Each  A6597 Gradient Compression Bandage Roll, Elastic Medium Stretch, Per Linear Yard, Any Witth, Each  A6598 Gradient Compression Bandage Roll, Elastic Medium Stretch, Per Linear Yard, Any Witth, Each  A6599 Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Witth, Each  A6690 Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any Witth, Each  A6690 Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square Centimeters, Each  A6691 Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per Linear Yard, Any Witth, Each  A6692 Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandage, Per Linear Yard, Any Witth, Each  A6693 Gradient Compression Bandaging Supply, Low Density Foam Roll For Bandage, Per Linear Yard, Any Witth, Each  A6694 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250  \$ 2.01 Purchase  A6695 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250  \$ 1.17 Purchase  A6696 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Witth, Each  A6697 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Witth, Each  A6698 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Witth, Each  A6699 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Witth, Each  A6690 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Witth, Each  A6690 Gradient Compression Bandaging Supply, Not Otherwise Specified  A	A6594		\$ 29.83	Purchase
Width, Each   S.   1.32   Purchase   S.   1.33   Purchase   S.   1.34   Purchase   S.   1.35   Purchase   S.   1	A6595		\$ 29.33	Purchase
Gradient Compression Bandage Roll, Elastic Long Stretch, Linear Yard, Any Width, Each  Gradient Compression Bandage Roll, Elastic Modium Stretch, Per Linear Yard, Any  Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any  Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any  Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any  Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any  Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square  Gradient Compression Bandaging Supply, High Density Foam Pad, Any Size Or Shape,  Each  Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250  Square Contimeters, Each  Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250  Square Contimeters, Each  Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250  Square Contimeters, Each  Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width,  Each  Gradient Compression Bandaging Supply, Padded Textle, Per Linear Yard, Any Width,  Each  Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per  Linear Yard, Any Width, Each  Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer,  Purchase  Gradient Compression Stocking, Below Knee, 18-30 Minhag, Custom, Each  Price By Report  Gradient Compression Stocking, Below Knee, 18-30 Minhag, Custom, Each  A70001  Canister, Non-Disposable, Used With Suction Pump, Each  A7001  Canister, Non-Disposable, Used With Suction Pump, Each  A7002  Tubing, Used With Suction Pump, Each  A7003  Administration Set, With Small Volume Nonflitered Pneumatic Nebulizer, Disposable  A7004  Administration Set, With Small Volume No	A6596	Gradient Compression Bandaging Supply, Conforming Gauze, Per Linear Yard, Any	\$ 0.15	Purchase
Width, Each   South	A6597	Gradient Compression Bandage Roll, Elastic Long Stretch, Linear Yard, Any Width, Each	\$ 1.32	Purchase
A6699 Width, Each A6600 Centimeters, Each A6601 Each A6601 Each A6601 Each A6601 Each A6601 Each A6602 Each A6603 Each A6602 Each A6603 Each A6604 Each A6606 Each A6607 Each A6607 Each A6607 Each A6607 Each A6607 Each A6607 Each A6608 Each A6	A6598	1	\$ 0.64	Purchase
A6600 Cardient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square   \$ 2.61 Purchase   A6601 Gradient Compression Bandaging Supply, High Density Foam Pad, Any Size Or Shape, Each   \$ 2.93 Purchase   A6602 Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per Linear Yard, Any Width, Each   \$ 2.01 Purchase   A6603 Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250 Square Centimeters, Each   \$ 2.01 Purchase   A6604 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250 Square Centimeters, Each   \$ 2.01 Purchase   A6605 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250 Square Centimeters, Each   \$ 2.01 Purchase   A6606 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each   \$ 2.01 Purchase   A6607 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each   \$ 2.01 Purchase   A6608 Per Linear Yard, Any Width, Each   \$ 1.06 Purchase   A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each   \$ 1.06 Purchase   A6600 Gradient Compression Bandaging Supply, Not Otherwise Specified   \$ 1.02 Purchase   A6600 Gradient Compression Bandaging Supply, Not Otherwise Specified   \$ 1.02 Purchase   A7000 Canister, Other Spossable, Used With Suction Pump, Each   \$ 1.02 Purchase   A7001 Canister, Non-Disposable, Used With Suction Pump, Each   \$ 1.02 Purchase   A7002 Tubing, Used With Suction Pump, Each   \$ 1.02 Purchase   A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable   \$ 2.09 Purchase   A7004 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer   \$ 9.31 Purchase   A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer   \$ 9.31 Purchase   A7007 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer   \$ 9.0 Purchase   A7008 Reservoir Bottle, Non-Disposable, Used With Large Volume Nebulizer   \$ 9.0 Purchase   A	A6599	Gradient Compression Bandage Roll, Inelastic Short Stretch, Per Linear Yard, Any	\$ 1.45	Purchase
A6601 Each Compression Bandaging Supply, High Density Foam Pad, Any Size Or Shape, Each Cardient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per Linear Yard, Any Width, Each Square Centimeters, Each	A6600	Gradient Compression Bandaging Supply, High Density Foam Sheet, Per 250 Square	\$ 2.61	Purchase
A6602 Linear Yard, Any Width, Each A6603 Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250 Square Centimeters, Each A6604 Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250 Square Centimeters, Each A6605 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250 Square Centimeters, Each A6606 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each A6607 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6608 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6600 Gradient Compression Bandaging Supply, Not Otherwise Specified A6600 Gradient Compression Stocking, Bolow Kniee, 15-30 Mmlng, Custom, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Non-Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7005 Administration Set, With Small Volume Filtered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer A7007 Large Volume Nebulizer, Disposable, Unrilled, Used With Aerosol Compressor A7008 Layer Volume Nebulizer, Disposable, Unrilled, Used With Aerosol Compressor A7001 Large Volume Nebulizer, Disposable, Unrilled, Used With Aerosol Compressor A7001 Large Volume Nebulizer, Disposable, Unrilled, Used With Aerosol Compressor A7001 Large Volume Nebulizer, Disposable, Unrilled, Used With Aerosol Compressor A7001 Canister, Disposable, Used With Aerosol	A6601	Gradient Compression Bandaging Supply, High Density Foam Pad, Any Size Or Shape,	\$ 2.93	Purchase
A6603 Square Centimeters, Each A6604 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250 Square Centimeters, Each A6605 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each A6606 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each A6607 Gradient Compression Bandaging Supply, Padded Fextile, Per Linear Yard, Any Width, Each A6608 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified Price By Report  A6600 Gradient Compression Bandaging Supply, Not Otherwise Specified Price By Report  A6600 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each \$ 192.61 Purchase  A7001 Canister, Disposable, Used With Suction Pump, Each \$ 9.9.11 Purchase  A7002 Tubing, Used With Suction Pump, Each \$ 4.75 Purchase  A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable \$ 2.69 Purchase  A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable \$ 2.70.1 Purchase  A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer  A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer  A7007 Large Volume Nebulizer, Disposable, Prefilled, Used With Aerosol Compressor \$ 4.70 Purchase  A7008 Reservoir Bottle, Non-Disposable, Prefilled, Used With Aerosol Compressor \$ 4.70 Purchase  A7009 Reservoir Bottle, Non-Disposable, Prefilled, Used With Aerosol Compressor \$ 4.70 Purchase  A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer  A7011 Velure Non-Disposable, Used With Large Volume Nebulizer  A7012 Water Collection Device, Used With Large Volume Nebulizer  A7013 Filter, Disposable, Used With Aerosol C	A6602	Gradient Compression Bandaging Supply, High Density Foam Roll For Bandage, Per	\$ 4.28	Purchase
A6604 Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250 S 1.17 Purchase A6605 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each A6606 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6607 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6608 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A6600 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Price By Report A7001 Canister, Non-Disposable, Used With Suction Pump, Each A7001 Layer Supplied With Suction Pump, Each A7002 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable S 2.69 Purchase A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable S 2.7.01 Purchase A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable S 2.7.01 Purchase A7007 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor S 1.3.50 Purchase A7008 Reservoir Bottle, Non-Disposable, Used With Ae	A6603	Gradient Compression Bandaging Supply, Low Density Channel Foam Sheet, Per 250	\$ 2.01	Purchase
A6606 Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width, Each A6607 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each A6607 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each A6608 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified A6609 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A6609 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A7000 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer, Non-Disposable A7007 Large Volume Nebulizer, Disposable, Prefilted, Used With Aerosol Compressor A7008 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer A7010 Corrugated Tubing, Disposable, Used With Large Volume Webulizer A7011 Water Collection Device, Used With Large Volume Nebulizer A7012 Water Collection Device, Used With Large Volume Nebulizer A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator A7014 Purchase A7015 Aerosol Mask,	A6604	Gradient Compression Bandaging Supply, Low Density Flat Foam Sheet, Per 250	\$ 1.17	Purchase
A6606 Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width, Each  A6607 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Width, Each  A6608 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each  A6609 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each  A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified  A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified  A6600 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each  A7000 Canister, Disposable, Used With Suction Pump, Each  A7001 Canister, Non-Disposable, Used With Suction Pump, Each  A7002 Tubing, Used With Suction Pump, Each  A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable  A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Disposable  A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer  A7006 Administration Set, With Small Volume Piltered Pneumatic Nebulizer  A7007 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor  A7008 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor  A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Nebulizer  A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer  A7011 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer  A7012 Water Collection Device, Used With Large Volume Nebulizer  A7013 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7015 Aerosol Mask, Used With Aerosol Compressor Or Ultrasonic Generator  A7016 Purchase  A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7018 Water, Distilled, Used With Large V	A6605	Gradient Compression Bandaging Supply, Padded Foam, Per Linear Yard, Any Width,	\$ 1.34	Purchase
A6607 Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per Linear Yard, Any Witch, Each A6608 Per Linear Yard, Any Witch, Each A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified A7000 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer A7007 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor A7008 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Nebulizer, Separation Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, Separation Corrugated Tubing, Disposable, Used With Large Volume Nebulizer A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, Separation Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, Separation S	A6606	Gradient Compression Bandaging Supply, Padded Textile, Per Linear Yard, Any Width,	\$ 3.98	Purchase
A6608 Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer, Per Linear Yard, Any Width, Each A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified A6610 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A7000 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer A7007 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor A7008 Large Volume Nebulizer, Disposable, Used With Large Volume Ultrasonic Nebulizer A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Nebulizer A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer A7011 Water Collection Device, Used With Aerosol Compressor A7012 Water Collection Device, Used With Aerosol Compressor A7013 Filter, Disposable, Used With Aerosol Compressor A7014 Filter, Disposable, Used With Aerosol Compressor A7015 Aerosol Mask, Used With Aerosol Compressor Or Ultrasonic Generator A7016 Aerosol Mask, Used With Aerosol Compressor Or Ultrasonic Generator A7017 Nebulizer, Disposable, Used With Demosol Compressor Or Ultrasonic Generator A7018 Filter, Disposable, Used With Demosol Compressor Or Ultrasonic Generator A7019 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen A7010 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen A7016 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Datent A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Patient Owned Equipment, Each A7026 High Fre	A6607	Gradient Compression Bandaging Supply, Tubular Protective Absorption Layer, Per	\$ 1.06	Purchase
A6609 Gradient Compression Bandaging Supply, Not Otherwise Specified A6610 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A7000 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Non-Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonflittered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonflittered Pneumatic Nebulizer, Disposable A7005 Administration Set, With Small Volume Nonflittered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Nonflittered Pneumatic Nebulizer, Non-Disposable A7007 Administration Set, With Small Volume Nonflittered Pneumatic Nebulizer, Non-Disposable A7008 Administration Set, With Small Volume Pontifitered Pneumatic Nebulizer A7009 Administration Set, With Small Volume Pontifitered Pneumatic Nebulizer A7009 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor A7008 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Nebulizer A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer A7011 Water Collection Device, Used With Large Volume Nebulizer A7012 Water Collection Device, Used With Aerosol Compressor Or Ultrasonic Generator A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator A7014 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator A7015 Aerosol Mask, Used With Device Nebulizer A7016 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Date A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml A7019 Purchase A7026 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airw	A6608	Gradient Compression Bandaging Supply, Tubular Protective Absorption Padded Layer,	\$ 4.43	Purchase
A6610 Gradient Compression Stocking, Below Knee, 18-30 Mmhg, Custom, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7001 Canister, Disposable, Used With Suction Pump, Each A7002 Tubing, Used With Suction Pump, Each A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Disposable A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7006 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable A7007 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor A7008 Large Volume Nebulizer, Disposable, Used With Aerosol Compressor A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet A7010 Water Collection Device, Used With Large Volume Nebulizer A7011 Water Collection Device, Used With Large Volume Nebulizer A7012 Water Collection Device, Used With Aerosol Compressor Or Ultrasonic Generator A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator A7015 Aerosol Mask, Used With Dame Nebulizer A7016 Aerosol Mask, Used With Dame Nebulizer A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml A7019 Purchase A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only A7020 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each A7020 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each A7020 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device, A7027 Combination Oral/Nasal Mask, Used With Cont	A6609		Price By Report	
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A7003 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Disposable \$ 2.69 Purchase A7004 Small Volume Nonfiltered Pneumatic Nebulizer, Disposable \$ 1.80 Purchase A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable \$ 27.01 Purchase A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer, Non-Disposable \$ 27.01 Purchase A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer \$ 9.81 Purchase A7007 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor \$ 4.70 Purchase A7008 Large Volume Nebulizer, Disposable, Prefilled, Used With Aerosol Compressor \$ 13.50 Purchase A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer \$ 11.64 Purchase A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet \$ 24.50 Purchase A7012 Water Collection Device, Used With Large Volume Nebulizer \$ 4.14 Purchase A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 0.87 Purchase A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 4.54 Purchase A7015 Aerosol Mask, Used With Dme Nebulizer \$ 1.97 Purchase A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen \$ 12.53 Capped Rental A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml \$ 0.41 Purchase A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only \$ 17.89 Purchase A7025 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each \$ 34.41 Purchase Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device, \$ 180.32 Purchase			<u>'</u>	
A7005 Administration Set, With Small Volume Nonfiltered Pneumatic Nebulizer, Non-Disposable \$ 27.01 Purchase A7006 Administration Set, With Small Volume Filtered Pneumatic Nebulizer \$ 9.81 Purchase A7007 Large Volume Nebulizer, Disposable, Unfilled, Used With Aerosol Compressor \$ 4.70 Purchase A7008 Large Volume Nebulizer, Disposable, Prefilled, Used With Aerosol Compressor \$ 13.50 Purchase A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer \$ 51.64 Purchase A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet \$ 24.50 Purchase A7012 Water Collection Device, Used With Large Volume Nebulizer \$ 4.14 Purchase A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 0.87 Purchase A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 4.54 Purchase A7015 Aerosol Mask, Used With David W				
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A7008 Large Volume Nebulizer, Disposable, Prefilled, Used With Aerosol Compressor  A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer  A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet  A7012 Water Collection Device, Used With Large Volume Nebulizer  A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7015 Aerosol Mask, Used With Dme Nebulizer  A7016 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7017 Nebulizer, Distilled, Used With Large Volume Nebulizer, 1000 Ml  A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml  A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only  A7025 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each  A7026 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  \$ 13.50 Purchase  \$ 1.64 Purchase  4.14 Purchase  4.54 Purchase  4.54 Purchase  4.57 Purchase  4.59 Purchase  4.69 Purchase		,		
A7009 Reservoir Bottle, Non-Disposable, Used With Large Volume Ultrasonic Nebulizer  A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet  A7012 Water Collection Device, Used With Large Volume Nebulizer  A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7015 Aerosol Mask, Used With Dme Nebulizer  A7016 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7017 Nebulizer, Distilled, Used With Large Volume Nebulizer, 1000 Ml  A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml  A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only  A7025 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each  A7026 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each  Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  A7028 Purchase				
A7010 Corrugated Tubing, Disposable, Used With Large Volume Nebulizer, 100 Feet \$ 24.50 Purchase A7012 Water Collection Device, Used With Large Volume Nebulizer \$ 4.14 Purchase A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 0.87 Purchase A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 4.54 Purchase A7015 Aerosol Mask, Used With Dme Nebulizer \$ 1.97 Purchase A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen \$ 12.53 Capped Rental A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml \$ 0.41 Purchase A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only \$ 17.89 Purchase A7025 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each A7026 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device, A7027 Purchase			·	
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A7013 Filter, Disposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator  A7015 Aerosol Mask, Used With Dme Nebulizer  A7016 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen  A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 Ml  A7019 Interface For Cough Stimulating Device, Includes All Components, Replacement Only  A7020 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each  A7021 Owned Equipment, Each  A7022 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  A7023 Purchase		ŭ ŭ		
A7014 Filter, Nondisposable, Used With Aerosol Compressor Or Ultrasonic Generator \$ 4.54 Purchase A7015 Aerosol Mask, Used With Dme Nebulizer \$ 1.97 Purchase A7017 Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, Not Used With Oxygen \$ 12.53 Capped Rental A7018 Water, Distilled, Used With Large Volume Nebulizer, 1000 MI \$ 0.41 Purchase A7020 Interface For Cough Stimulating Device, Includes All Components, Replacement Only \$ 17.89 Purchase A7025 High Frequency Chest Wall Oscillation System Vest, Replacement For Use With Patient Owned Equipment, Each A7026 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device, \$ 180.32 Purchase		•		
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A7025 Owned Equipment, Each  A7026 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each  A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  \$ 180.32 Purchase		-		
A7026 High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient Owned Equipment, Each  A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,  \$ 34.41 Purchase	A7025		\$ 502.93	Purchase
A7027 Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device,	A7026	High Frequency Chest Wall Oscillation System Hose, Replacement For Use With Patient	\$ 34.41	Purchase
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Code	Description	Fee	Purchase or Rental
A7028	Oral Cushion For Combination Oral/Nasal Mask, Replacement Only, Each	\$ 48.93	Purchase
A7029	Nasal Pillows For Combination Oral/Nasal Mask, Replacement Only, Pair	\$ 20.94	Purchase
A7030	Full Face Mask Used With Positive Airway Pressure Device, Each	\$ 159.20	Purchase
A7031	Face Mask Interface, Replacement For Full Face Mask, Each		Purchase
A7032	Cushion For Use On Nasal Mask Interface, Replacement Only, Each		Purchase
A7033	Pillow For Use On Nasal Cannula Type Interface, Replacement Only, Pair	\$ 25.27	Purchase
A7034	Nasal Interface (Mask Or Cannula Type) Used With Positive Airway Pressure Device, With Or Without Head Strap	\$ 99.38	Purchase
A7035	Headgear Used With Positive Airway Pressure Device		Purchase
A7036	Chinstrap Used With Positive Airway Pressure Device		Purchase
A7037	Tubing Used With Positive Airway Pressure Device		Purchase
A7038	Filter, Disposable, Used With Positive Airway Pressure Device	•	Purchase
A7039	Filter, Non Disposable, Used With Positive Airway Pressure Device	•	Purchase
A7040	One Way Chest Drain Valve		Purchase
A7041	Water Seal Drainage Container And Tubing For Use With Implanted Chest Tube		Purchase
A7044	Oral Interface Used With Positive Airway Pressure Device, Each	\$ 110.01	Purchase
A7045	Exhalation Port With Or Without Swivel Used With Accessories For Positive Airway Devices, Replacement Only	\$ 18.19	Purchase
A7046	Water Chamber For Humidifier, Used With Positive Airway Pressure Device, Replacement, Each	\$ 18.97	Purchase
A7047	Oral Interface Used With Respiratory Suction Pump, Each	\$ 144.71	Purchase
A7048	Vacuum Drainage Collection Unit And Tubing Kit, Including All Supplies Needed For Collection Unit Change, For Use With Implanted Catheter, Each	\$ 51.28	Purchase
A7501	Tracheostoma Valve, Including Diaphragm, Each	\$ 125.69	Purchase
A7502	Replacement Diaphragm/Faceplate For Tracheostoma Valve, Each	\$ 59.75	Purchase
A7503	Filter Holder Or Filter Cap, Reusable, For Use In A Tracheostoma Heat And Moisture Exchange System, Each	\$ 13.58	Purchase
A7504	Filter For Use In A Tracheostoma Heat And Moisture Exchange System, Each	\$ 0.82	Purchase
A7505	Housing, Reusable Without Adhesive, For Use In A Heat And Moisture Exchange System And/Or With A Tracheostoma Valve, Each		Purchase
A7506	Adhesive Disc For Use In A Heat And Moisture Exchange System And/Or With Tracheostoma Valve, Any Type Each	\$ 0.39	Purchase
A7507	Filter Holder And Integrated Filter Without Adhesive, For Use In A Tracheostoma Heat And Moisture Exchange System, Each	\$ 3.07	Purchase
A7508	Housing And Integrated Adhesive, For Use In A Tracheostoma Heat And Moisture Exchange System And/Or With A Tracheostoma Valve, Each	\$ 3.54	Purchase
A7509	Filter Holder And Integrated Filter Housing, And Adhesive, For Use As A Tracheostoma Heat And Moisture Exchange System, Each	\$ 1.68	Purchase
A7520	Tracheostomy/Laryngectomy Tube, Non-Cuffed, Polyvinylchloride (Pvc), Silicone Or Equal, Each	\$ 58.73	Purchase
A7521	Tracheostomy/Laryngectomy Tube, Cuffed, Polyvinylchloride (Pvc), Silicone Or Equal, Each		Purchase
A7522	Tracheostomy/Laryngectomy Tube, Stainless Steel Or Equal (Sterilizable And Reusable), Each	\$ 54.05	Purchase
A7523	Tracheostomy Shower Protector, Each	Price By Report	
A7524	Tracheostoma Stent/Stud/Button, Each	\$ 92.66	Purchase
A7525	Tracheostomy Mask, Each		Purchase
A7526	Tracheostomy Tube Collar/Holder, Each		Purchase
A7527	Tracheostomy/Laryngectomy Tube Plug/Stop, Each		Purchase
A8000	Helmet, Protective, Soft, Prefabricated, Includes All Components And Accessories	\$ 177.32	Purchase
A8001	Helmet, Protective, Hard, Prefabricated, Includes All Components And Accessories	\$ 183.56	Purchase
A8002	Helmet, Protective, Soft, Custom Fabricated, Includes All Components And Accessories	\$ 511.46	Purchase
A8003	Helmet, Protective, Hard, Custom Fabricated, Includes All Components And Accessories	\$ 511.46	Purchase
A8004	Soft Interface For Helmet, Replacement Only	Price By Report	
A9155	Artificial Saliva, 30 MI	Price By Report	
A9180	Pediculosis (Lice Infestation) Treatment, Topical, For Administration By Patient/Caretaker	Price By Report	
A9272	Wound Suction, Disposable, Includes Dressing, All Accessories And Components, Any Type, Each	Price By Report	
A9273	Cold Or Hot Fluid Bottle, Ice Cap Or Collar, Heat And/Or Cold Wrap, Any Type	Price By Report	
A9274	External Ambulatory Insulin Delivery System, Disposable, Each, Includes All Supplies And Accessories	Price By Report	
A9275	Home Glucose Disposable Monitor, Includes Test Strips	Price By Report	
	Monitoring Feature/Device, Stand-Alone Or Integrated, Any Type, Includes All	, .	Durchage
A9279	Accessories, Components And Electronics, Not Otherwise Classified	\$ 345.69	Purchase

Code	Description	Fee	Purchase or Rental
A9283	Description	Price By Report	Purchase of Rental
A9284			
A9285	Spirometer, Non-Electronic, Includes All Accessories Inversion/Eversion Correction Device	Price By Report	
A9999		Price By Report	
E0100	Miscellaneous Dme Supply Or Accessory, Not Otherwise Specified  Cane, Includes Canes Of All Materials, Adjustable Or Fixed, With Tip	Price By Report	Purchase
E0100			Pulchase
E0105	Cane, Quad Or Three Prong, Includes Canes Of All Materials, Adjustable Or Fixed, With Tips	\$ 56.66	Purchase
E0110	Crutches, Forearm, Includes Crutches Of Various Materials, Adjustable Or Fixed, Pair, Complete With Tips And Handgrips	\$ 95.28	Purchase
E0111	Crutch Forearm, Includes Crutches Of Various Materials, Adjustable Or Fixed, Each, With Tip And Handgrips	\$ 60.56	Purchase
E0112	Crutches Underarm, Wood, Adjustable Or Fixed, Pair, With Pads, Tips And Handgrips	\$ 44.35	Purchase
E0113	Crutch Underarm, Wood, Adjustable Or Fixed, Each, With Pad, Tip And Handgrip	\$ 25.97	Purchase
E0114	Crutches Underarm, Other Than Wood, Adjustable Or Fixed, Pair, With Pads, Tips And Handgrips	\$ 57.95	Purchase
E0116	Crutch, Underarm, Other Than Wood, Adjustable Or Fixed, With Pad, Tip, Handgrip, With Or Without Shock Absorber, Each	\$ 34.07	Purchase
E0117	Crutch, Underarm, Articulating, Spring Assisted, Each	\$ 236.52	Purchase
E0118	Crutch Substitute, Lower Leg Platform, With Or Without Wheels, Each	Price By Report	T GIOIGOO
E0130	Walker, Rigid (Pickup), Adjustable Or Fixed Height	, ,	Purchase
E0135	Walker, Folding (Pickup), Adjustable Or Fixed Height	\$ 69.98	Purchase
E0140	Walker, With Trunk Support, Adjustable Or Fixed Height, Any Type		Capped Rental
E0141	Walker, Rigid, Wheeled, Adjustable Or Fixed Height	\$ 88.59	Purchase
E0143	Walker, Folding, Wheeled, Adjustable Or Fixed Height	\$ 91.20	Purchase
E0144	Walker, Enclosed, Four Sided Framed, Rigid Or Folding, Wheeled With Posterior Seat		Purchase
E0147	Walker, Heavy Duty, Multiple Braking System, Variable Wheel Resistance	\$ 541.19	Durchasa
E0147 E0148	Walker, Heavy Duty, Multiple Braking System, Variable Wheel Resistance		Purchase
	Walker, Heavy Duty, Without Wheels, Rigid Or Folding, Any Type, Each		Purchase
E0149	Walker, Heavy Duty, Wheeled, Rigid Or Folding, Any Type		Purchase
E0153	Platform Attachment, Forearm Crutch, Each		Purchase
E0154	Platform Attachment, Walker, Each	\$ 65.51	Purchase
E0155 E0156	Wheel Attachment, Rigid Pick-Up Walker, Per Pair Seat Attachment, Walker	\$ 28.83 \$ 21.02	Purchase
E0156	Crutch Attachment, Walker, Each	·	Purchase
E0157	Leg Extensions For Walker, Per Set Of Four (4)		Purchase Purchase
E0159	Brake Attachment For Wheeled Walker, Replacement, Each		Purchase
E0160	Sitz Type Bath, Portable, Fits Over Commode Seat		Purchase
E0161	Sitz Type Bath, Portable, Fits Over Commode Seat, With Faucet Attachments	\$ 37.07 \$ 27.37	Purchase
E0163	Commode Chair, Mobile Or Stationary, With Fixed Arms		Purchase
E0165	Commode Chair, Mobile Or Stationary, With Pixed Arms  Commode Chair, Mobile Or Stationary, With Detachable Arms	\$ 185.22	Purchase
E0167	Pail Or Pan For Use With Commode Chair, Replacement Only		Purchase
	Commode Chair, Extra Wide And/Or Heavy Duty, Stationary Or Mobile, With Or Without	,	
E0168	Arms, Any Type, Each		Purchase
E0170	Commode Chair With Integrated Seat Lift Mechanism, Electric, Any Type	•	Capped Rental
E0171	Commode Chair With Integrated Seat Lift Mechanism, Non-Electric, Any Type		Capped Rental
E0172	Seat Lift Mechanism Placed Over Or On Top Of Toilet, Any Type	Price By Report	D I
E0175 E0181	Foot Rest, For Use With Commode Chair, Each Powered Pressure Reducing Mattress Overlay/Pad, Alternating, With Pump, Includes	·	Purchase  Capped Rental
E0182	Heavy Duty Pump For Alternating Pressure Pad, For Replacement Only		Capped Rental
E0183	Powered pressure reducing underlay/pad, alternating, with pump, includes heavy duty		Capped Rental
E0184	Dry Pressure Mattress	\$ 195.11	Purchase
E0185	Gel Or Gel-Like Pressure Pad For Mattress, Standard Mattress Length And Width		Purchase
E0186	Air Pressure Mattress Decubitus Ulcers		Purchase
E0187	Water Pressure Mattress	\$ 266.13	Purchase
E0188	Synthetic Sheepskin Pad	\$ 27.59	Purchase
E0189	Lambswool Sheepskin Pad, Any Size	\$ 54.24	Purchase
E0190	Positioning Cushion/Pillow/Wedge, Any Shape Or Size, Includes All Components And Accessories	Price By Report	-
E0191	Heel Or Elbow Protector, Each	\$ 12.27	Purchase
E0191	Powered Air Flotation Bed (Low Air Loss Therapy), Per Day		Capped Rental
E0194	Air Fluidized Bed	\$ 3,330.27	Capped Rental
E0196	Gel Pressure Mattress	\$ 383.58	Purchase
E0197	Air Pressure Mattress, Standard Mattress Length And Width		Purchase
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Code	Description	Fee	Purchase or Rental
E0198	Water Pressure Pad For Mattress, Standard Mattress Length And Width	\$ 272.16	Purchase
E0199	Dry Pressure Pad For Mattress, Standard Mattress Length And Width	\$ 37.39	Purchase
E0200	Heat Lamp, Without Stand (Table Model), Includes Bulb, Or Infrared Element		Purchase
E0202	Phototherapy (Bilirubin) Light With Photometer, Rental Per Day	\$ 68.10	Daily Rental
E0203	Therapeutic Lightbox, Minimum 10,000 Lux, Table Top Model	Price By Report	
E0205	Heat Lamp, With Stand, Includes Bulb, Or Infrared Element	\$ 19.86	Capped Rental
E0235	Paraffin Bath Unit, Portable (See Medical Supply Code A4265 For Paraffin)	\$ 15.01	Capped Rental
E0240	Bath/Shower Chair, With Or Without Wheels, Any Size	\$ 430.11	Purchase
E0244	Raised Toilet Seat		Purchase
E0245	Tub Stool Or Bench	\$ 74.39	Purchase
E0247	Transfer Bench For Tub Or Toilet With Or Without Commode Opening	Price By Report	
E0248	Transfer Bench, Heavy Duty, For Tub Or Toilet With Or Without Commode Opening	Price By Report	
E0249	Pad For Water Circulating Heat Unit, For Replacement Only	\$ 122.31	Purchase
E0250	Hospital Bed, Fixed Height, With Any Type Side Rails, With Mattress	\$ 66.09	Capped Rental
E0251	Hospital Bed, Fixed Height, With Any Type Side Rails, Without Mattress	•	Capped Rental
E0255	Hospital Bed, Variable Height, Hi-Lo, With Any Type Side Rails, With Mattress	\$ 79.51	Capped Rental
E0256	Hospital Bed, Variable Height, Hi-Lo, With Any Type Side Rails, Without Mattress	\$ 65.56	Capped Rental
E0260	Hospital Bed, Seimi-Electric (Head And Foot Adjustment), With Any Type Side Rails, With Mattress	\$ 91.64	Capped Rental
E0261	Hospital Bed, Semi-Electric (Head And Foot Adjustment), With Any Type Side Rails, Without Mattress	\$ 90.05	Capped Rental
E0265	Hospital Bed, Total Electric (Head, Foot And Height Adjustments), With Any Type Side Rails, With Mattress	\$ 153.38	Capped Rental
E0266	Hospital Bed, Total Electric (Head, Foot And Height Adjustments), With Any Type Side Rails, Without Mattress	\$ 135.08	Capped Rental
E0270	Hospital Bed, Institutional Type Includes: Oscillating, Circulating And Stryker Frame, With Mattress	Price By Report	
E0271	Mattress, Innerspring	\$ 189.37	Purchase
E0272	Mattress, Foam Rubber	\$ 188.62	Purchase
E0273	Bed Board	Price By Report	
E0275	Bed Pan, Standard, Metal Or Plastic	\$ 17.51	Purchase
E0276	Bed Pan, Fracture, Metal Or Plastic	\$ 15.15	Purchase
E0277	Powered Pressure-Reducing Air Mattress	\$ 403.47	Capped Rental
E0290	Hospital Bed, Fixed Height, Without Side Rails, With Mattress	\$ 60.58	Capped Rental
E0291	Hospital Bed, Fixed Height, Without Side Rails, Without Mattress		Capped Rental
E0292	Hospital Bed, Variable Height, Hi-Lo, Without Side Rails, With Mattress	\$ 66.20	Capped Rental
E0293	Hospital Bed, Variable Height, Hi-Lo, Without Side Rails, Without Mattress	\$ 58.76	Capped Rental
E0294	Hospital Bed, Semi-Electric (Head And Foot Adjustment), Without Side Rails, With Mattress	\$ 87.29	Capped Rental
E0295	Hospital Bed,Semi-Electric (Head And Foot Adjustment), Without Side Rails, Without Mattress	\$ 85.82	Capped Rental
E0296	Hospital Bed, Total Electric (Head, Foot And Height Adjustments). Without Side Rails, With Mattress	\$ 123.31	Capped Rental
E0297	Hospital Bed, Total Electric (Head, Foot And Height Adjustments), Without Side Rails, Without Mattress	\$ 106.95	Capped Rental
E0300	Pediatric Crib, Hospital Grade, Fully Enclosed, With Or Without Top Enclosure	\$ 238.59	Capped Rental
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	\$ 195.00	Capped Rental
E0302	Hospital Bed, Extra Heavy Duty, Extra Wide, With Weight Capacity Greater Than 600 Pounds, With Any Type Side Rails, Without Mattress	\$ 543.40	Capped Rental
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	\$ 210.74	Capped Rental
E0304	Hospital Bed, Extra Heavy Duty, Extra Wide, With Weight Capacity Greater Than 600 Pounds, With Any Type Side Rails, With Mattress	\$ 574.02	Capped Rental
E0305	Bed Side Rails, Half Length	\$ 12.50	Capped Rental
E0310	Bed Side Rails, Full Length	\$ 13.98	Capped Rental
E0316	Safety Enclosure Frame/Canopy For Use With Hospital Bed, Any Type	\$ 2,132.28	Purchase
E0325	Urinal; Male, Jug-Type, Any Material	\$ 10.57	Purchase
E0326	Urinal; Female, Jug-Type, Any Material	\$ 12.12	Purchase
E0328	Hospital Bed, Pediatric, Manual, 360 Degree Side Enclosures, Top Of Headboard, Footboard And Side Rails Up To 24 Inches Above The Spring, Includes Mattress	Price By Report	

Code	Description	Fee	Purchase or Rental
E0329	Hospital Bed, Pediatric, Electric Or Semi-Electric, 360 Degree Side Enclosures, Top Of Headboard, Footboard And Side Rails Up To 24 Inches Above The Spring, Includes Mattress	Price By Report	
E0350	Control Unit For Electronic Bowel Irrigation/Evacuation System	Price By Report	
E0352	Disposable Pack (Water Reservoir Bag, Speculum, Valving Mechanism And Collection Bag/Box) For Use With The Electronic Bowel Irrigation/Evacuation System	Price By Report	
E0370	Air Pressure Elevator For Heel	Price By Report	
E0371	Nonpowered Advanced Pressure Reducing Overlay For Mattress, Standard Mattress Length And Width	\$ 285.37	Capped Rental
E0372	Powered Air Overlay For Mattress, Standard Mattress Length And Width	\$ 326.50	Capped Rental
E0373	Nonpowered Advanced Pressure Reducing Mattress	\$ 360.44	Capped Rental
E0424	Stationary Compressed Gaseous Oxygen System, Rental; Includes Container, Contents, Regulator, Flowmeter, Humidifier, Nebulizer, Cannula Or Mask, And Tubing	\$ 152.06	Continuous Rental
E0425	Stationary Compressed Gas System, Purchase; Includes Regulator, Flowmeter, Humidifier, Nebulizer, Cannula Or Mask, And Tubing	Price By Report	
E0430	Portable Gaseous Oxygen System, Purchase; Includes Regulator, Flowmeter, Humidifier, Cannula Or Mask, And Tubing	\$ 379.20	Purchase
E0431	Portable Gaseous Oxygen System, Rental; Includes Portable Container, Regulator, Flowmeter, Humidifier, Cannula Or Mask, And Tubing	\$ 27.14	Continuous Rental
E0433	Portable Liquid Oxygen System, Rental; Home Liquefier Used To Fill Portable Liquid Oxygen Containers, Includes Portable Containers, Regulator, Flowmeter, Humidifier, Cannula Or Mask And Tubing, With Or Without Supply Reservoir And Contents Gauge	\$ 46.06	Continuous Rental
E0434	Portable Liquid Oxygen System, Rental; Includes Portable Container, Supply Reservoir, Humidifier, Flowmeter, Refill Adaptor, Contents Gauge, Cannula Or Mask, And Tubing	\$ 46.06	Continuous Rental
E0435	Portable Liquid Oxygen System, Purchase; Includes Portable Container, Supply Reservoir, Flowmeter, Humidifier, Contents Gauge, Cannula Or Mask, Tubing And Refill Adaptor	\$ 2,313.70	Purchase
E0439	Stationary Liquid Oxygen System, Rental; Includes Container, Contents, Regulator, Flowmeter, Humidifier, Nebulizer, Cannula Or Mask, & Tubing	\$ 152.06	Continuous Rental
E0440	Stationary Liquid Oxygen System, Purchase; Includes Use Of Reservoir, Contents Indicator, Regulator, Flowmeter, Humidifier, Nebulizer, Cannula Or Mask, And Tubing	\$ 4,214.40	Purchase
E0441	Stationary Oxygen Contents, Gaseous, 1 Month'S Supply = 1 Unit	\$ 66.43	Purchase
E0442	Stationary Oxygen Contents, Liquid, 1 Month'S Supply = 1 Unit	\$ 66.43	Purchase
E0443	Portable Oxygen Contents, Gaseous, 1 Month'S Supply = 1 Unit	\$ 63.51	Purchase
E0444	Portable Oxygen Contents, Liquid, 1 Month'S Supply = 1 Unit	\$ 63.51	Purchase
E0445	Oximeter Device For Measuring Blood Oxygen Levels Non-Invasively	\$ 243.17	Capped Rental
E0446	Topical Oxygen Delivery System, Not Otherwise Specified, Includes All Supplies And Accessories	Price By Report	
E0447	Portable Oxygen Contents, Liquid, 1 Month'S Supply = 1 Unit, Prescribed Amount At Rest Or Nighttime Exceeds 4 Liters Per Minute (Lpm)	\$ 96.42	Purchase
E0455	Oxygen Tent, Excluding Croup Or Pediatric Tents	Price By Report	
E0465	Home Ventilator, Any Type, Used With Invasive Interface, (E.G., Tracheostomy Tube)	, '	Continuous Rental
E0466	Home Ventilator, Any Type, Used With Non-Invasive Interface, (E.G., Mask, Chest Shell)	\$ 1,172.16	Continuous Rental
E0467	Home Ventilator, Multi-Function Respiratory Device, Also Performs Any Or All Of The Additional Functions Of Oxygen Concentration, Drug Nebulization, Aspiration, And Cough Stimulation, Includes All Accessories, Components And Supplies For All Functions	\$ 1,377.24	Continuous Rental
E0468	Home Ventilator, Dual-Function Respiratory Device, Also Performs Additional Function Of Cough Stimulation, Includes All Accessories, Components And Supplies For All Functions	Price By Report	
E0470	Respiratory Assist Device, Bi-Level Pressure Capability, Without Backup Rate Feature, Used With Noninvasive Interface, E.G., Nasal Or Facial Mask (Intermittent Assist Device With Continuous Positive Airway Pressure Device)	\$ 165.99	Capped Rental
E0471	Respiratory Assist Device, Bi-Level Pressure Capability, With Back-Up Rate Feature, Used With Noninvasive Interface, E.G., Nasal Or Facial Mask (Intermittent Assist Device With Continuous Positive Airway Pressure Device)	\$ 371.96	Capped Rental
E0472	Respiratory Assist Device, Bi-Level Pressure Capability, With Backup Rate Feature, Used With Invasive Interface, E.G., Tracheostomy Tube (Intermittent Assist Device With Continuous Positive Airway Pressure Device)	\$ 437.16	Capped Rental
E0480	Percussor, Electric Or Pneumatic, Home Model	\$ 44.98	Capped Rental
E0481	Intrapulmonary Percussive Ventilation System And Related Accessories	Price By Report	

Code	Description	Fee	Purchase or Rental
E0482	Cough Stimulating Device, Alternating Positive And Negative Airway Pressure	\$ 431.57	Capped Rental
E0483	High Frequency Chest Wall Oscillation System, Includes All Accessories And Supplies, Each	\$ 1,087.95	Capped Rental
E0484	Oscillatory Positive Expiratory Pressure Device, Non-Electric, Any Type, Each	\$ 45.36	Purchase
E0485	Oral Device/Appliance Used To Reduce Upper Airway Collapsibility, Adjustable Or Non-Adjustable, Prefabricated, Includes Fitting And Adjustment	Price By Report	
E0486	Oral Device/Appliance Used To Reduce Upper Airway Collapsibility, Adjustable Or Non-Adjustable, Custom Fabricated, Includes Fitting And Adjustment	Price By Report	
E0487	Spirometer, Electronic, Includes All Accessories	Price By Report	
E0500	Ippb Machine, All Types, With Built-In Nebulization; Manual Or Automatic Valves; Internal	\$ 112.33	Capped Rental
E0530	Or External Power Source Electronic Positional Obstructive Sleep Apnea Treatment, With Sensor, Includes All	\$ 31.99	Rental
E0550	Components And Accessories, Any Type Humidifier, Durable For Extensive Supplemental Humidification During Ippb Treatments	\$ 51.31	Capped Rental
E0555	Or Oxygen Delivery Humidifier, Durable, Glass Or Autoclavable Plastic Bottle Type, For Use With Regulator		Purchase
E0555	Or Flowmeter	\$ 44.26	Purchase
E0560	Humidifier, Durable For Supplemental Humidification During lppb Treatment Or Oxygen Delivery		Purchase
E0561	Humidifier, Non-Heated, Used With Positive Airway Pressure Device	\$ 99.06	Purchase
E0562	Humidifier, Heated, Used With Positive Airway Pressure Device	\$ 20.04	Capped Rental
E0565	Compressor, Air Power Source For Equipment Which Is Not Self- Contained Or Cylinder Driven	\$ 51.69	Capped Rental
E0570	Nebulizer, With Compressor	\$ 132.57	Purchase
E0572	Aerosol Compressor, Adjustable Pressure, Light Duty For Intermittent Use	\$ 33.22	Capped Rental
E0574	Ultrasonic/Electronic Aerosol Generator With Small Volume Nebulizer	\$ 40.61	Capped Rental
E0575	Nebulizer, Ultrasonic, Large Volume	\$ 105.18	Capped Rental
E0580	Nebulizer, Durable, Glass Or Autoclavable Plastic, Bottle Type, For Use With Regulator Or Flowmeter	\$ 11.82	Capped Rental
E0585	Nebulizer, With Compressor And Heater	\$ 29.04	Capped Rental
E0600	Respiratory Suction Pump, Home Model, Portable Or Stationary, Electric	\$ 45.95	Capped Rental
E0601	Continuous Positive Airway Pressure (Cpap) Device	\$ 69.41	Capped Rental
E0602	Breast Pump, Manual	\$ 36.24	Purchase
E0603	Breast Pump, Electric (Ac And/Or Dc), Any Type	\$ 135.43	Purchase
E0604	Breast Pump, Hospital Grade, Electric (Ac And / Or Dc), Any Type After 1 Month Must Have A Prior Authorization	\$ 63.44	Capped Rental
E0605	Vaporizer, Room Type	\$ 27.57	Purchase
E0607	Home Blood Glucose Monitor	\$ 82.05	Purchase
E0616	Implantable Cardiac Event Recorder With Memory, Activator And Programmer	Price By Report	
E0617	External Defibrillator With Integrated Electrocardiogram Analysis	\$ 311.13	Capped Rental
E0618	Apnea Monitor, Without Recording Feature	\$ 272.40	Capped Rental
E0619	Apnea Monitor, With Recording Feature	\$ 318.93	Capped Rental
E0620	Skin Piercing Device For Collection Of Capillary Blood, Laser, Each	\$ 1,073.61	Purchase
E0621	Sling Or Seat, Patient Lift, Canvas Or Nylon	\$ 98.72	Purchase
E0625	Patient Lift, Bathroom Or Toilet, Not Otherwise Classified	\$ 1,093.26	Purchase
E0627	Seat Lift Mechanism, Electric, Any Type	\$ 29.98	Capped Rental
E0629	Seat Lift Mechanism, Non-Electric, Any Type	\$ 353.95	Purchase
E0630	Patient Lift, Hydraulic Or Mechanical, Includes Any Seat, Sling, Strap(S) Or Pad(S)	\$ 80.60	Capped Rental
E0635	Patient Lift, Electric With Seat Or Sling	\$ 119.45	Capped Rental
E0636	Multipositional Patient Support System, With Integrated Lift, Patient Accessible Controls	\$ 1,018.07	Capped Rental
E0637	Combination Sit To Stand System, Any Size Including Pediatric, With Seatlift Feature, With Or Without Wheels	Price By Report	
E0638	Standing Frame/Table System, One Position (E.G. Upright, Supine Or Prone Stander), Any Size Including Pediatric, With Or Without Wheels	Price By Report	
E0639	Patient Lift, Moveable From Room To Room With Disassembly And Reassembly, Includes All Components/Accessories	\$ 114.16	Capped Rental
E0640	Patient Lift, Fixed System, Includes All Components/Accessories	\$ 114.16	Capped Rental
E0641	Standing Frame/Table System, Multi-Position (E.G. Three-Way Stander), Any Size Including Pediatric, With Or Without Wheels	Price By Report	
E0642	Standing Frame/Table System, Mobile (Dynamic Stander), Any Size Including Pediatric	Price By Report	
	<del> </del>	¢ 70.70	Capped Rental
	Pneumatic Compressor, Non-Segmental Home Model	a /3.70	
E0650 E0651	Pneumatic Compressor, Non-Segmental Home Model Pneumatic Compressor, Segmental Home Model Without Calibrated D Gradient Pressure	\$ 73.70 \$ 93.98	Capped Rental

Code	Description	Fee	Purchase or Rental
E0655	Non-Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Half Arm	\$ 132.54	Purchase
E0656	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Trunk	\$ 709.65	Purchase
E0657	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Chest	\$ 666.63	
E0660	Non-Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Full Leg	\$ 196.17	
E0665	Non-Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Full Arm	\$ 168.24	Purchase
E0666	Non-Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Half Leg	\$ 162.26	Purchase
E0667	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Full Leg	\$ 337.95	Purchase
E0668	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Full Arm		Purchase
E0669	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Half Leg	\$ 225.12	Purchase
E0670	Segmental Pneumatic Appliance For Use With Pneumatic Compressor, Integrated, 2 Full Leas And Trunk	\$ 1,312.11	Purchase
E0671	Segmental Gradient Pressure Pneumatic Appliance, Full Leg	\$ 510.06	Purchase
E0672	Segmental Gradient Pressure Pneumatic Appliance, Full Arm	\$ 396.30	
E0673	Segmental Gradient Pressure Pneumatic Appliance, Half Leg	\$ 329.30	Purchase
E0675	Pneumatic Compression Device, High Pressure, Rapid Inflation/Deflation Cycle, For Arterial Insufficiency (Unilateral Or Bilateral System)	\$ 393.52	Capped Rental
E0676	Intermittent Limb Compression Device (Includes All Accessories), Not Otherwise Specified	Price By Report	
E0677	Non-pneumatic sequential compression garment, trunk	\$ 70.97	Purchase
E0678	Non-Pneumatic Sequential Compression Garment, Full Leg	\$ 33.80	Rental
E0679	Non-Pneumatic Sequential Compression Garment, Half Leg	\$ 22.51	Rental
E0680	Non-Pneumatic Compression Controller With Sequential Calibrated Gradient Pressure	\$ 592.72	Rental
E0681	Non-Pneumatic Compression Controller Without Calibrated Gradient Pressure	\$ 112.78	Rental
E0682	Non-Pneumatic Sequential Compression Garment, Full Arm	\$ 46.13	Rental
E0691	Ultraviolet Light Therapy System, Includes Bulbs/Lamps, Timer And Eye Protection; Treatment Area 2 Square Feet Or Less	\$ 91.96	Capped Rental
E0692	Ultraviolet Light Therapy System Panel, Includes Bulbs/Lamps, Timer And Eye Protection, 4 Foot Panel	\$ 115.47	Capped Rental
E0693	Ultraviolet Light Therapy System Panel, Includes Bulbs/Lamps, Timer And Eye Protection, 6 Foot Panel	\$ 142.34	Capped Rental
E0694	Ultraviolet Multidirectional Light Therapy System In 6 Foot Cabinet, Includes Bulbs/Lamps, Timer And Eye Protection	\$ 453.07	Capped Rental
E0705	Transfer Device, Any Type, Each	\$ 55.64	Purchase
E0720	Transcutaneous Electrical Nerve Stimulation (Tens) Device, Two Lead, Localized Stimulation	\$ 22.05	Capped Rental
E0730	Transcutaneous Electrical Nerve Stimulation (Tens) Device, Four Or More Leads, For Multiple Nerve Stimulation	\$ 22.23	Capped Rental
E0733	Transcutaneous Electrical Nerve Stimulator For Electrical Stimulation Of The Trigeminal Nerve	\$ 45.14	Rental
E0734	External Upper Limb Tremor Stimulator Of The Peripheral Nerves Of The Wrist	\$ 386.32	
E0735	Non-Invasive Vagus Nerve Stimulator	\$ 45.14	Rental
E0736	Transcutaneous Tibial Nerve Stimulator	Price By Report	<u> </u>
E0740	Non-Implanted Pelvic Floor Electrical Stimulator, Complete System	\$ 625.85	
E0744	Neuromuscular Stimulator For Scoliosis	\$ 93.71	Capped Rental
E0745 E0747	Neuromuscular Stimulator, Electronic Shock Unit, Non-Clinical Model Osteogenesis Stimulator, Electrical, Non-Invasive, Other Than Spinal Applications	\$ 77.87 \$ 4,808.94	
E0748 E0760	Osteogenic Stimulator, Noninvasive, Spinal Applications Ostogenesis Stimulator, Low Intensity Ultrasound, Non-Invasive	\$ 4,777.80 \$ 330.86	
	Non-Thermal Pulsed High Frequency Radiowaves, High Peak Power Electromagnetic	,	Capped Relital
E0761	Energy Treatment Device	Price By Report	
in .	Transcutaneous Electrical Joint Stimulation Device System, Includes All Accessories	\$ 1,350.27	Purchase
E0762			1
E0762 E0764	Functional Neuromuscular Stimulation, Transcutaneous Stimulation Of Sequential Muscle Groups Of Ambulation With Computer Control, Used For Walking By Spinal Cord Injured, Entire System, After Completion Of Training Program	\$ 13,589.82	Purchase
	Muscle Groups Of Ambulation With Computer Control, Used For Walking By Spinal Cord	\$ 13,589.82 \$ 103.31	

Code	Description	Fee	Purchase or Rental
E0769	Electrical Stimulation Or Electromagnetic Wound Treatment Device, Not Otherwise	Price By Report	
	Classified	, = <b>,</b>	
E0770	Functional Electrical Stimulator, Transcutaneous Stimulation Of Nerve And/Or Muscle Groups, Any Type, Complete System, Not Otherwise Specified	Price By Report	
E0776	Iv Pole		Capped Rental
E0779	Ambulatory Infusion Pump, Mechanical, Reusable, For Infusion 8 Hours Or Greater	•	Capped Rental
E0780	Ambulatory Infusion Pump, Mechanical, Reusable, For Infusion Less Than 8 Hours	\$ 12.74	Purchase
E0781	Ambulatory Infusion Pump, Single Or Multiple Channels, Electric Or Battery Operated, With Administrative Equipment, Worn By Patient	\$ 242.57	Capped Rental
E0782	Infusion Pump, Implantable, Non-Programmable (Includes All Components, E.G., Pump, Catheter, Connectors, Etc.)	\$ 4,481.49	Purchase
E0783	Infusion Pump System, Implantable, Programmable (Includes All Components, E.G., Pump, Catheter, Connectors, Etc.)	\$ 712.13	Capped Rental
E0784	External Ambulatory Infusion Pump, Insulin	\$ 4,936.05	Purchase
E0785	Implantable Intraspinal (Epidural/Intrathecal) Catheter Used With Implantable Infusion Pump, Replacement	\$ 580.25	Purchase
E0786	Implantable Programmable Infusion Pump, Replacement (Excludes Implantable Intraspinal Catheter)	\$ 9,806.60	Purchase
E0787	External Ambulatory Infusion Pump, Insulin, Dosage Rate Adjustment Using Therapeutic Continuous Glucose Sensing	Price By Report	
E0791	Parenteral Infusion Pump, Stationary, Single Or Multi-Channel	\$ 267.80	Capped Rental
E0830	Ambulatory Traction Device, All Types, Each	Price By Report	-appeartental
E0840	Traction Frame, Attached To Headboard, Cervical Traction	\$ 6.37	Capped Rental
E0849	Traction Equipment, Cervical, Free-Standing Stand/Frame, Pneumatic, Applying Traction Force To Other Than Mandible		Rental
E0850	Traction Stand, Free Standing, Cervical Traction	\$ 10.75	Capped Rental
E0855	Cervical Traction Equipment Not Requiring Additional Stand Or Frame		Capped Rental
E0856	Cervical Traction Device, With Inflatable Air Bladder(S)		Purchase
E0860	Traction Equipment, Overdoor, Cervical	<u>'</u>	Purchase
E0870	Traction Frame, Attached To Footboard, Extremity Traction, (E.G. Buck'S)		Capped Rental
E0880	Traction Stand, Free Standing, Extremity Traction		Capped Rental
E0890	Traction Frame, Attached To Footboard, Pelvic Traction		Capped Rental
E0900	Traction Stand, Free Standing, Pelvic Traction, (E.G., Buck'S)		Capped Rental
E0910	Trapeze Bars, A/K/A Patient Helper, Attached To Bed, With Grab Bar		Capped Rental
E0911	Trapeze Bar, Heavy Duty, For Patient Weight Capacity Greater Than 250 Pounds, Attached To Bed, With Grab Bar		Purchase
E0912	Trapeze Bar, Heavy Duty, For Patient Weight Capacity Greater Than 250 Pounds, Free Standing, Complete With Grab Bar	\$ 1,080.45	Purchase
E0920	Fracture Frame, Attached To Bed, Includes Weights	\$ 47.24	Capped Rental
E0930	Fracture Frame, Free Standing, Includes Weights		Capped Rental
E0935	Continuous Passive Motion Exercise Device For Use On Knee Only		Daily Rental
E0936	Continuous Passive Motion Exercise Device For Use Other Than Knee		Purchase
E0940	Trapeze Bar, Free Standing, Complete With Grab Bar	<u>'</u>	Capped Rental
E0941	Gravity Assisted Traction Device, Any Type		Capped Rental
E0942	Cervical Head Harness/Halter		Purchase
E0944	Pelvic Belt/Harness/Boot		Purchase
E0945	Extremity Belt/Harness		Purchase
E0946	Fracture, Frame, Dual With Cross Bars, Attached To Bed, (E.G. Balken, 4 Poster)		Capped Rental
E0947	Fracture Frame, Attachments For Complex Pelvic Traction		Capped Rental
E0948	Fracture Frame, Attachments For Complex Cervical Traction	<u>'</u>	Capped Rental
E0950	Wheelchair Accessory, Tray, Each	<u>'</u>	Purchase
E0951	Heel Loop/Holder, Any Type, With Or Without Ankle Strap, Each		Purchase
E0952	Toe Loop/Holder, Any Type, Each	\$ 18.79	Purchase
E0953	Wheelchair Accessory, Lateral Thigh Or Knee Support, Any Type Including Fixed Mounting Hardware, Each		Purchase
E0954	Wheelchair Accessory, Foot Box, Any Type, Includes Attachment And Mounting Hardware, Each Foot	\$ 61.52	Purchase
E0955	Wheelchair Accessory, Headrest, Cushioned, Any Type, Including Fixed Mounting Hardware, Each	\$ 184.95	Purchase
E0956	Wheelchair Accessory, Lateral Trunk Or Hip Support, Any Type, Including Fixed Mounting Hardware, Each	\$ 95.92	Purchase
E0957	Wheelchair Accessory, Medial Thigh Support, Any Type, Including Fixed Mounting Hardware, Each	\$ 141.83	Purchase
E0958	Manual Wheelchair Accessory, One-Arm Drive Attachment, Each	\$ 469.80	Purchase
E0959	Manual Wheelchair Accessory, Adapter For Amputee, Each		Purchase

Code	Description	Fee	Purchase or Rental
E0960	Wheelchair Accessory, Shoulder Harness/Straps Or Chest Strap, Including Any Type		Purchase
	Mounting Hardware	·	
E0961	Manual Wheelchair Accessory, Wheel Lock Brake Extension (Handle), Each	\$ 29.98	Purchase
E0966	Manual Wheelchair Accessory, Headrest Extension, Each  Manual Wheelchair Accessory, Hand Rim With Projections, Any Type, Replacement	\$ 79.49	Purchase
E0967	Only, Each	\$ 6.61	Capped Rental
E0968	Commode Seat, Wheelchair		Purchase
E0969	Narrowing Device, Wheelchair		Capped Rental
E0970	No.2 Footplates, Except For Elevating Leg Rest	\$ 46.27	Purchase
E0971	Manual Wheelchair Accessory, Anti-Tipping Device, Each	\$ 43.94	Purchase
E0973	Wheelchair Accessory, Adjustable Height, Detachable Armrest, Complete Assembly, Each	\$ 87.64	Purchase
E0974	Manual Wheelchair Accessory, Anti-Rollback Device, Each		Purchase
E0978	Wheelchair Accessory, Positioning Belt/Safety Belt/Pelvic Strap, Each		Purchase
E0980	Safety Vest, Wheelchair	\$ 40.59	Purchase
E0981	Wheelchair Accessory, Seat Upholstery, Replacement Only, Each		Purchase
E0982	Wheelchair Accessory, Back Upholstery, Replacement Only, Each		Purchase
E0985	Wheelchair Accessory, Seat Lift Mechanism		Purchase
E0986	Manual Wheelchair Accessory, Push-Rim Activated Power Assist System		Purchase
E0988 E0990	Manual Wheelchair Accessory, Lever-Activated, Wheel Drive, Pair		Capped Rental
E0990	Wheelchair Accessory, Elevating Leg Rest, Complete Assembly, Each Solid Seat Insert	\$ 104.21	Capped Rental Purchase
E0994	Arm Rest, Each	\$ 18.41	Purchase
E0995	Wheelchair Accessory, Calf Rest/Pad, Replacement Only, Each	\$ 30.29	Purchase
E1002	Wheelchair Accessory, Power Seating System, Tilt Only	,	Purchase
E1003	Wheelchair Accessory, Power Seating System, Recline Only, Without Shear Reduction	\$ 4,505.40	Purchase
E1004	Wheelchair Accessory, Power Seating System, Recline Only, With Mechanical Shear Reduction	\$ 4,973.85	Purchase
E1005	Wheelchair Accessory, Power Seatng System, Recline Only, With Power Shear Reduction	\$ 5,412.15	Purchase
E1006	Wheelchair Accessory, Power Seating System, Combination Tilt And Recline, Without Shear Reduction	\$ 6,651.09	Purchase
E1007	Wheelchair Accessory, Power Seating System, Combination Tilt And Recline, With Mechanical Shear Reduction	\$ 8,631.54	Purchase
E1008	Wheelchair Accessory, Power Seating System, Combination Tilt And Recline, With Power Shear Reduction	\$ 8,737.92	Purchase
E1009	Wheelchair Accessory, Addition To Power Seating System, Mechanically Linked Leg Elevation System, Including Pushrod And Leg Rest, Each	Price By Report	
E1010	Wheelchair Accessory, Addition To Power Seating System, Power Leg Elevation System, Including Leg Rest, Pair	\$ 1,164.69	Purchase
E1011	Modification To Pediatric Size Wheelchair, Width Adjustment Package (Not To Be Dispensed With Initial Chair)	Price By Report	
E1012	Wheelchair Accessory, Addition To Power Seating System, Center Mount Power Elevating Leg Rest/Platform, Complete System, Any Type, Each	\$ 1,164.69	Purchase
E1014	Reclining Back, Addition To Pediatric Size Wheelchair	\$ 448.56	Purchase
E1015	Shock Absorber For Manual Wheelchair, Each		Purchase
E1016	Shock Absorber For Power Wheelchair, Each	\$ 133.46	Purchase
E1017	Heavy Duty Shock Absorber For Heavy Duty Or Extra Heavy Duty Manual Wheelchair, Each	Price By Report	
E1018	Heavy Duty Shock Absorber For Heavy Duty Or Extra Heavy Duty Power Wheelchair, Each	Price By Report	
E1020	Residual Limb Support System For Wheelchair, Any Type	\$ 225.27	Purchase
E1028	Wheelchair Accessory, Manual Swingaway, Retractable Or Removable Mounting Hardware For Joystick, Other Control Interface Or Positioning Accessory		Purchase
E1029	Wheelchair Accessory, Ventilator Tray, Fixed		Purchase
E1030	Wheelchair Accessory, Ventilator Tray, Gimbaled	\$ 1,202.13	Purchase
E1035	Multi-Positional Patient Transfer System, With Integrated Seat, Operated By Care Giver, Patient Weight Capacity Up To And Including 300 Lbs	\$ 595.20	Capped Rental
E1036	Multi-Positional Patient Transfer System, Extra-Wide, With Integrated Seat, Operated By Caregiver, Patient Weight Capacity Greater Than 300 Lbs	\$ 849.33	Capped Rental
E1050	Fully-Reclining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Leg Rests	\$ 1,250.73	Purchase
E1060	Fully-Reclining Wheelchair, Detachable Arms, Desk Or Full Length, Swing Away Detachable Elevating Legrests	\$ 1,548.00	Purchase

Fully-Reactining Wheelchair, Detachable Arms (Desk Or Full Langth ) Swing Away   5   1,345,14   Purchase	Code	Description	Fee	Purchase or Rental
Hemi-Wheelchair, Fixed Full Length Arms, Swing Away Detachable   Hemi-Wheelchair, Detachable Arms Desk Or Full Length Arms, Swing Away Detachable   Hemi-Wheelchair, Detachable Arms Desk Or Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Detachable Arms Desk Or Full Length, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable   High Strength Lightweight	E1070	Fully-Reclining Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away		
Elevating Leg Rests	E1083		\$ 966.87	Purchase
High Strength Lightweight Wheelchair, Fload Full Length Arms, Swing Away Detachable Elevating Leg Rests High Strength Lightweight Wheelchair, Detachable Arms Desk Of Full Length, Swing Away Detachable Elevating Leg Rests High Strength Lightweight Wheelchair, Fixed Length Arms, Swing Away Detachable Footrest Wride Heavy Duty Wheel Chair, Detachable Arms Desk Of Full Length, Swing Away Detachable Elevating Leg Rests Wride Heavy Duty Wheel Chair, Detachable Arms Desk Of Full Length, Swing Away Detachable Elevating Leg Rests Wride Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrests Sami-Redining Wheelchair, Detachable Arms Closk Or Full Length Arms, Swing Away Detachable Footrests Sami-Redining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Leg Rests Semi-Redining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests Semi-Redining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests Semi-Redining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests Semi-Redining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests High Strength Light Arms, Swing Away Detachable Elevating Legrests Semi-Redining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests Legr	E1084		\$ 1,179.81	Purchase
High Strength Lightweight Wheelchair, Detachable Arms Desk Of Full Length, Swing A High Strength Lightweight Wheelchair, Fixed Length Arms, Swing Away Detachable   \$ 1,128.72 Purchase   Floorest Wide Heavy Duty Wheel Chair, Detachable Arms Desk Of Full Length, Swing Away Detachable   \$ 1,128.72 Purchase   Floorest Wide Heavy Duty Wheelchair, Detachable Arms Desk Of Full Length Arms, Swing Away Detachable Elevating Leg Rests   \$ 1,357.20 Purchase   Floorest Wide Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Leg Rests   \$ 1,357.20 Purchase   Floorest Sami-Reclining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Leg Rests   \$ 1,248.21 Purchase   Floorest Sami-Reclining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Leg Rest   \$ 767.61 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Leg Rest   \$ 1,086.29 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating   \$ 1,086.29 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating   \$ 1,086.29 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable Floorests Or Leggest   \$ 1,027.60 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable   \$ 1,027.60 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable   \$ 1,027.60 Purchase   Floorest Wheelchair, Fixed Full Length Arms, Swing Away Detachable   \$ 1,097.82 Purchase   Floorest Stream	E1087	High Strength Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable	\$ 1,553.85	Purchase
High Strength Ughtweight Wheelchair, Fixed Length Arms, Swing Away Detachable   \$1,128.72   Purchase	E1088	High Strength Lightweight Wheelchair, Detachable Arms Desk Or Full Length, Swing	\$ 1,851.48	Purchase
Wide Heavy Duty Wheel Chair, Detachable Arms Desk Of Full Length, Swing Away   2	E1089	High Strength Lightweight Wheelchair, Fixed Length Arms, Swing Away Detachable	\$ 1,128.72	Purchase
Wide Heavy Duty Wheelchair, Detachable Arms Desk Or Full Length Arms, Swing Away   \$ 1,357.20   Purchase	E1092	Wide Heavy Duty Wheel Chair, Detachable Arms Desk Of Full Length, Swing Away	\$ 1,517.13	Purchase
Semi-Reclining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating   Semi-Reclining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Leg Rest   Purchase	E1093	Wide Heavy Duty Wheelchair, Detachable Arms Desk Or Full Length Arms, Swing Away	\$ 1,357.20	Purchase
Semi-Reclining Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Leg Rest   \$ 1,248.21   Purchase	E1100	Semi-Reclining Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating	\$ 1,274.67	Purchase
E1170 Manual Adult Size Wheelchair, Includes Tilt In Space Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating \$ 1,096.92 Purchase Legrests Amputee Wheelchair, Fixed Full Length Arms, Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Elevating Legrests E1190 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1191 Elevating Legrests E1192 Have Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Wheelchair With Detachable Arms, Footrests E11200 Wheelchair With Detachable Arms, Elevating Legrests E11201 Wheelchair Accessory, Manual Enrice Elevating Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Wall	E1110		\$ 1,248.21	Purchase
E1170 Manual Adult Size Wheelchair, Includes Tilt In Space Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating \$ 1,096.92 Purchase Legrests Amputee Wheelchair, Fixed Full Length Arms, Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests E1180 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Elevating Legrests E1190 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1191 Elevating Legrests E1192 Have Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E11200 Wheelchair With Detachable Arms, Footrests E11200 Wheelchair With Detachable Arms, Elevating Legrests E11201 Wheelchair Accessory, Manual Enrice Elevating Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E11201 Wheelchair Accessory, Manual Fully Reclining Back, (Wall	F1160	Wheelchair Fixed Full Length Arms Swing Away Detachable Fleyating Legrests	\$ 767.61	Purchase
Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Elevating Legrests E1195 E1195 E1195 E1195 E1195 E1195 E1195 E1196 E1197 E1197 E1197 E1198 E1198 E1199 E	E1161			
Amputee Wheelchair, Fixed Full Length Arms, Without Footrests Or Legrest   \$ 984.24   Purchase   Entrol Legrest   Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests   \$ 1,022.76   Purchase   Entrol Legrest   Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable   \$ 1,097.82   Purchase   Entrol Elevating Legrests   \$ 1,097.82   Purchase   Entrol Elevating Legrests   \$ 1,437.66   Purchase   Entrol Elevating Legrests   \$ 1,542.60   Purchase   Entrol Elevating Legrests   \$ 1,068.48   Purchase   Entrol Elevating Legrests   \$ 1,068.48   Purchase   Entrol Elevating Legrests   \$ 1,068.48   Purchase   Entrol Elevating Legrests   \$ 1,068.49   Purchase   Entrol Elevating Elevating Legrests   \$ 1,068.49   Purchase   Entrol Elevating Elevating Legrests   \$ 1,068.49   Purchase   Entrol Elevating Elevating Elegrests   \$ 1,068.49   Purchase   Entrol Elevating	E1170	Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating	,	
Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or Legrest Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests Fleuring Legrests Fleuring Height For Wheelchair Myth Detachable Arms, Footrests Fleuring Legrests Fleuring Legrests Fleuring Height Legrest Legrests Fleuring Height Legrest Legrests Fleuring Height Arms For Wheelchair Myth Peclining Back, (Recline Greater Than 15 Degrees) Fleuring Height Arms For Wheelchair Sepecified Fleuring Height Legrest Legrests Fleuring Height Legrest Legrests Fleuring Height Legrest Legrests Fleuring Height Legrest	F1171		\$ 984.24	Purchase
Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Footrests E1190 Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Elevating Legrests E1190 Elevaning Legrests E1190 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest E1201 Wheelchair, Specially Sized Or Constructed, (Indicate Brand Name, Model Number, If Any) And Justification E1202 Wheelchair With Fixed Arm, Footrests E1203 Wheelchair With Fixed Arm, Footrests E1204 Wheelchair With Detachable Arms, Footrests E1205 Wheelchair With Detachable Arms, Elevating Legrests E1206 Wheelchair With Detachable Arms, Elevating Legrests E1207 Wheelchair With Detachable Arms, Elevating Legrests E1208 Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees), But Less Than 80 Degrees), Each E1209 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E1200 Wheelchair, Pediatric Size, Not Otherwise Specified E1201 Wheelchair, Pediatric Size, Not Otherwise Specified E1202 Wheelchair, Pediatric Size, Not Otherwise Specified E1203 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System E1203 Wheelchair, Pediatric Size, Entit-In-Space, Folding, Adjustable, With Seating System E1204 Wheelchair, Pediatric Size, Entit-In-Space, Folding, Adjustable, Without Seating System E1206 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System E1207 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System E1208 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System E1208 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System E1209 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System E1200 Wheelchair, Pediatric Size, Endiding, Adjustable, Without Seating System	E1172	Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Without Footrests Or	·	
Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable Elevating Legrests E1195 Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1200 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1201 Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detach-Able Footrest E1202 Amyl And Justification E1212 Wheelchair, Specially Sized Or Constructed, (Indicate Brand Name, Model Number, If Any) And Justification E1221 Wheelchair With Fixed Arm, Footrests E1222 Wheelchair With Fixed Arm, Footrests E1223 Wheelchair With Detachable Arms, Footrests E1224 Wheelchair With Detachable Arms, Footrests E1225 Wheelchair With Detachable Arms, Elevating Legrests E1226 Wheelchair With Detachable Arms, Elevating Legrests E1227 Wheelchair With Detachable Arms, Elevating Legrests E1228 Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees, But Less Than 80 Degrees), Each E1226 Each E1227 Special Height Arms For Wheelchair E1228 Special Back Height For Wheelchair E1229 Wheelchair, Pediatric Size, Not Otherwise Specified E1229 Wheelchair, Pediatric Size, Not Otherwise Specified E1229 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1230 Wheelchair, Pediatric Size, Ending, Adjustable, With Seating System E1231 Wheelchair, Pediatric Size, Ending, Adjustable, Without Seating System E1233 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1233 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1233 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Ending, Adjustable, Without Seating System E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1	E1180	Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable	\$ 1,097.82	Purchase
Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detach- Able Footrest  Wheelchair, Specially Sized Or Constructed, (Indicate Brand Name, Model Number, If Any) And Justification  Wheelchair With Fixed Arm, Footrests  Separated Wheelchair With Fixed Arm, Footrests  Wheelchair With Detachable Arms, Elevating Legrests  Wheelchair With Detachable Arms, Elevating Legrests  Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees), But Less Than 80 Degrees), Each  Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each  E1226 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each  E1227 Special Height Arms For Wheelchair  Saudia Height Arms For Wheelchair  Saudia Height For Wheelchair  Saudia Height For Wheelchair  Saudia Wheelchair, Pediatric Size, Not Otherwise Specified  E1229 Wheelchair, Pediatric Size, Not Otherwise Specified  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  W	E1190	Amputee Wheelchair, Detachable Arms (Desk Or Full Length) Swing Away Detachable	\$ 1,437.66	Purchase
Amputee Wheelchair, Fixed Full Length Arms, Swing Away Detach- Able Footrest  Wheelchair; Specially Sized Or Constructed, (Indicate Brand Name, Model Number, If Any) And Justification  Price By Report  Any) And Justification  Wheelchair With Fixed Arm, Footrests  \$ 48.62 Capped Rental  Separate Responsibility Capped Rental  Wheelchair With Detachable Arms, Footrests  \$ 5.935 Capped Rental  E1223 Wheelchair With Detachable Arms, Footrests  \$ 75.74 Capped Rental  E1224 Wheelchair With Detachable Arms, Footrests  \$ 33.05 Capped Rental  E1225 Wheelchair With Detachable Arms, Footrests  \$ 83.05 Capped Rental  E1226 Wheelchair With Detachable Arms, Felevating Legrests  \$ 83.05 Capped Rental  E1227 Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees), But Less Than 80 Degrees), Each  Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), E1226 Each  E1227 Special Height Arms For Wheelchair  \$ 289.66 Purchase  E1228 Special Back Height For Wheelchair  \$ 344.16 Purchase  E1229 Wheelchair, Pediatric Size, Not Otherwise Specified  E1231 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1230 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1231 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1233 Wheelchair, Pediatric Size, Rigid,	E1195	Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating	\$ 1,542.60	Purchase
Any) And Justification	E1200	T T T T T T T T T T T T T T T T T T T	\$ 1,068.48	Purchase
E1221 Wheelchair With Fixed Arm, Footrests  \$ 48.62 Capped Rental E1222 Wheelchair With Fixed Arm, Elevating Legrests \$ 69.35 (apped Rental E1223 Wheelchair With Detachable Arms, Footrests \$ 75.74 Capped Rental E1224 Wheelchair With Detachable Arms, Footrests \$ 75.74 Capped Rental E1225 Wheelchair With Detachable Arms, Elevating Legrests  ##Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees, But Less Than 80 Degrees), Each ##Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each ###E1226 Special Height Arms For Wheelchair ###E1227 Special Height Arms For Wheelchair ###E1228 Special Back Height For Wheelchair ###E1229 Wheelchair, Pediatric Size, Not Otherwise Specified ####P1229 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System ###E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System ####E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System ####E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System ####E1235 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System #####E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System ####################################	E1220		Price By Report	
E1222 Wheelchair With Fixed Arm, Elevating Legrests \$ 69.35 Capped Rental E1223 Wheelchair With Detachable Arms, Footrests \$ 75.74 Capped Rental E1224 Wheelchair With Detachable Arms, Elevating Legrests \$ 83.05 Capped Rental E1225 Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees, But Less Than 80 Degrees), Each Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Solida Purchase E1227 Special Height Arms For Wheelchair \$ 289.66 Purchase E1228 Special Back Height For Wheelchair \$ 344.16 Purchase E1229 Wheelchair, Pediatric Size, Not Otherwise Specified Price By Report Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System Price By Report E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System \$ 2,626.20 Purchase E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System \$ 2,720.79 Purchase E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System \$ 2,368.80 Purchase E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System \$ 2,281.05 Purchase E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System \$ 2,012.40 Purchase E1237 Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System \$ 2,012.40 Purchase E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System \$ 2,012.40 Purchase E1239 Power Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest \$ 1,166.40 Purchase Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests \$ 1,611.81 Purchase	E1221		\$ 48.62	Capped Rental
E1223 Wheelchair With Detachable Arms, Footrests E1224 Wheelchair With Detachable Arms, Elevating Legrests E1225 Wheelchair With Detachable Arms, Elevating Legrests E1226 Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees), But Less Than 80 Degrees), Each E1226 Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each E1227 Special Height Arms For Wheelchair E1228 Special Back Height For Wheelchair E1229 Wheelchair, Pediatric Size, Not Otherwise Specified E1221 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1235 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1236 Wheelchair, Pediatric Size, Figid, Adjustable, With Seating System E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1230 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1230 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detac	E1222			
Wheelchair With Detachable Arms, Elevating Legrests   \$83.05   Capped Rental	E1223		\$ 75.74	
Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees, But Less Than 80 Degrees), Each Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each Special Height Arms For Wheelchair Special Back Height For Wheelchair Special Back Height For Wheelchair Special Back Height For Wheelchair Wheelchair, Pediatric Size, Not Otherwise Specified Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System Sunday Wheelchair, Pediatric Size, Not Otherwise Specified Price By Report Uprchase Uprc		· · · · · · · · · · · · · · · · · · ·		
Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees), Each  Special Height Arms For Wheelchair  Special Height Arms For Wheelchair  Special Back Height For Wheelchair  Wheelchair, Pediatric Size, Not Otherwise Specified  Fizum Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  Fizum Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away  Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating  Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  Purchase	E1225	Wheelchair Accessory, Manual Semi-Reclining Back, (Recline Greater Than 15 Degrees, But Less Than 80 Degrees). Each	\$ 480.15	
E1227 Special Height Arms For Wheelchair E1228 Special Back Height For Wheelchair E1229 Wheelchair, Pediatric Size, Not Otherwise Specified E1231 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System E1236 Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1230 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1230 Power Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1230 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1240 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1240 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1240 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1240 Purchase	E1226	Wheelchair Accessory, Manual Fully Reclining Back, (Recline Greater Than 80 Degrees),	\$ 501.53	Purchase
E1228 Special Back Height For Wheelchair E1229 Wheelchair, Pediatric Size, Not Otherwise Specified E1231 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System E1237 Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1230 Power Wheelchair, Pediatric Size, Not Otherwise Specified E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests E1280 Purchase	F1227		\$ 289.66	Purchase
Wheelchair, Pediatric Size, Not Otherwise Specified  Price By Report  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  Price By Report  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away  Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating  Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81  Purchase			·	
Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, With Seating System  E1232 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System  E1233 Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  E1234 Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  E1235 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  E1236 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  E1237 Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  E1238 Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  E1239 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  E1239 Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away  Detachable, Elevating Legrest  E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating  Legrests  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  E1280 Fixed Purchase  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  E1280 Fixed Purchase  E1280 Fixed Pur		•		
Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Lightweight Wheelchair, Pediatric Size, Not Otherwise Specified  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away  Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating  Legrests  Lightweight Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81 Purchase	E1231			
Wheelchair, Pediatric Size, Tilt-In-Space, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Lightweight Wheelchair, Pediatric Size, Not Otherwise Specified  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away  Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating  Legrests  Lightweight Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81 Purchase	E1232	Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, With Seating System	\$ 2,626,20	Purchase
Wheelchair, Pediatric Size, Rigid, Adjustable, With Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System  Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  E1270 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81 Purchase	E1233			
Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System \$2,012.40 Purchase  E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System \$2,029.86 Purchase  E1238 Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System \$2,012.40 Purchase  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified Price By Report  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest \$1,166.40 Purchase  E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests \$969.39 Purchase  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests \$1,611.81 Purchase	E1234	Wheelchair, Pediatric Size, Tilt-In-Space, Folding, Adjustable, Without Seating System	\$ 2,368.80	Purchase
Wheelchair, Pediatric Size, Folding, Adjustable, With Seating System \$2,012.40 Purchase  E1237 Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System \$2,029.86 Purchase  E1238 Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System \$2,012.40 Purchase  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified Price By Report  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest \$1,166.40 Purchase  E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests \$969.39 Purchase  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests \$1,611.81 Purchase	E1235	Wheelchair, Pediatric Size, Rigid. Adjustable. With Seating System	\$ 2,281.05	Purchase
Wheelchair, Pediatric Size, Rigid, Adjustable, Without Seating System \$2,029.86 Purchase  E1238 Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System \$2,012.40 Purchase  E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified Price By Report  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest \$1,166.40 Purchase  E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests \$969.39 Purchase  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests \$1,611.81 Purchase	E1236			
Wheelchair, Pediatric Size, Folding, Adjustable, Without Seating System  Power Wheelchair, Pediatric Size, Not Otherwise Specified  Price By Report  Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81  Purchase	E1237			
E1239 Power Wheelchair, Pediatric Size, Not Otherwise Specified  E1240 Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest  E1270 Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  Price By Report  \$ 1,166.40 Purchase  Purchase  \$ 969.39 Purchase	E1238			
Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away Detachable, Elevating Legrest  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81  Purchase	E1239			
Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating Legrests  September 1,611.81  Purchase  Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests  1,611.81  Purchase	E1240	Lightweight Wheelchair, Detachable Arms, (Desk Or Full Length) Swing Away		Purchase
E1280 Heavy Duty Wheelchair, Detachable Arms (Desk Or Full Length) Elevating Legrests \$ 1,611.81 Purchase	E1270	Lightweight Wheelchair, Fixed Full Length Arms, Swing Away Detachable Elevating	\$ 969.39	Purchase
E1285 Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest \$ 1,126.37 Purchase	E1280		\$ 1,611.81	Purchase
, , , , , , , , , , , , , , , , , , , ,	E1285	Heavy Duty Wheelchair, Fixed Full Length Arms, Swing Away Detachable Footrest	\$ 1,126.37	Purchase

Code	Description	Fee	Burchasa ar Bantal
E1295	Description   Heavy Duty Wheelchair, Fixed Full Length Arms, Elevating Legrest	\$ 1,491.57	Purchase or Rental Purchase
E1296	Special Wheelchair Seat Height From Floor		Purchase
E1297	Special Wheelchair Seat Height Hoff Hool Special Wheelchair Seat Depth, By Upholstery		Purchase
E1298	Special Wheelchair Seat Depth And/Or Width, By Construction		Purchase
E1301	Whirlpool Tub, Walk-In, Portable	Price By Report	T dicitase
E1310	Whirlpool, Non-Portable (Built-In Type)	\$ 2,637.03	Purchase
E1352	Oxygen Accessory, Flow Regulator Capable Of Positive Inspiratory Pressure	Price By Report	T dronasc
E1353	Regulator		Purchase
	Oxygen Accessory, Wheeled Cart For Portable Cylinder Or Portable Concentrator, Any		T drondoo
E1354	Type, Replacement Only, Each	Price By Report	
E1355	Stand/Rack	\$ 26.21	Purchase
	Oxygen Accessory, Battery Pack/Cartridge For Portable Concentrator, Any Type,		
E1356	Replacement Only, Each	Price By Report	
E1357	Oxygen Accessory, Battery Charger For Portable Concentrator, Any Type, Replacement	Price By Report	
E 1337	Only, Each	Frice by Report	
E1358	Oxygen Accessory, Dc Power Adapter For Portable Concentrator, Any Type,	Price By Report	
	Replacement Only, Each		
E1372	Immersion External Heater For Nebulizer	\$ 13.48	Capped Rental
E1390	Oxygen Concentrator, Single Delivery Port, Capable Of Delivering 85 Percent Or Greater	\$ 152.06	Continuous Rental
	Oxygen Concentration At The Prescribed Flow Rate	•	
E1391	Oxygen Concentrator, Dual Delivery Port, Capable Of Delivering 85 Percent Or Greater Oxygen Concentration At The Prescribed Flow Rate, Each	\$ 152.06	Rental
E1392		\$ 46.06	Continuous Bontol
E1392	Portable Oxygen Concentrator, Rental  Durable Medical Equipment, Miscellaneous	*	Continuous Rental
E1399	Oxygen And Water Vapor Enriching System With Heated Delivery	Price By Report	Rental
E1405	Oxygen And Water Vapor Enriching System With Heated Delivery  Oxygen And Water Vapor Enriching System Without Heated Delivery	\$ 186.91 \$ 165.32	Rental
E1500	Centrifuge, For Dialysis	*	Rental
E 1300	Kidney, Dialysate Delivery Syst Kidney Machine, Pump Recirculating, Air Removal Syst,	Price By Report	
E1510	Flowrate Meter, Power Off, Heater And Temperature Control With Alarm, I.V. Poles,	Price By Report	
21010	Pressure Gauge, Concentrate Container	T floo By Report	
E1520	Heparin Infusion Pump For Hemodialysis	Price By Report	
E1530	Air Bubble Detector For Hemodialysis, Each, Replacement	Price By Report	
E1540	Pressure Alarm For Hemodialysis, Each, Replacement	Price By Report	
E1550	Bath Conductivity Meter For Hemodialysis, Each	Price By Report	
E1560	Blood Leak Detector For Hemodialysis, Each, Replacement	Price By Report	
E1570	Adjustable Chair, For Esrd Patients	Price By Report	
E1580	Unipuncture Control System For Hemodialysis	Price By Report	
E1590	Hemodialysis Machine	Price By Report	
E1592	Automatic Intermittent Peritoneal Dialysis System	Price By Report	
E1594	Cycler Dialysis Machine For Peritoneal Dialysis	Price By Report	
E1600	Delivery And/Or Installation Charges For Hemodialysis Equipment	Price By Report	
E1610	Reverse Osmosis Water Purification System, For Hemodialysis	Price By Report	
E1615	Deionizer Water Purification System, For Hemodialysis	Price By Report	
E1620	Blood Pump For Hemodialysis, Replacement	Price By Report	
E1625	Water Softening System, For Hemodialysis	Price By Report	
E1629	Tablo Hemodialysis System For The Billable Dialysis Service	Price By Report	
E1630	Reciprocating Peritoneal Dialysis System	Price By Report	
E1632	Wearable Artificial Kidney, Each	Price By Report	
E1634	Peritoneal Dialysis Clamps, Each	Price By Report	
E1635	Compact (Portable) Travel Hemodialyzer System	Price By Report	
E1636	Sorbent Cartridges, For Hemodialysis, Per 10	Price By Report	
E1637	Hemostats, Each	Price By Report	
E1699	Dialysis Equipment, Not Otherwise Specified	Price By Report	
E1700	Jaw Motion Rehabilitation System	\$ 423.54	Purchase
E1701	Replacement Cushions For Jaw Motion Rehabilitation System, Pkg. Of 6	\$ 13.01	Purchase
E1702	Replacement Measuring Scales For Jaw Motion Rehabilitation System, Pkg. Of 200	\$ 27.70	Purchase
E1800	Dynamic Adjustable Elbow Extension/Flexion Device, Includes Soft Interface Material	\$ 125.36	Capped Rental
E1801	Static Progressive Stretch Elbow Device, Extension And/Or Flexion, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 129.52	Capped Rental
E1802	Dynamic Adjustable Forearm Pronation/Supination Device, Includes Soft Interface Material	\$ 334.44	Capped Rental
E1805	Dynamic Adjustable Wrist Extension / Flexion Device, Includes Soft Interface Material	\$ 129.30	Capped Rental

Code	Description	Fee	Purchase or Rental
E1806	Static Progressive Stretch Wrist Device, Flexion And/Or Extension, With Or Without	\$ 106.28	Capped Rental
	Range Of Motion Adjustment, Includes All Components And Accessories	Ψ 100.20	Оарреи Кептаг
E1810	Dynamic Adjustable Knee Extension / Flexion Device, Includes Soft Interface Material	\$ 127.50	Capped Rental
E1811	Static Progressive Stretch Knee Device, Extension And/Or Flexion, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 134.63	Capped Rental
E1812	Dynamic Knee, Extension/Flexion Device With Active Resistance Control	\$ 88.00	Capped Rental
E1815	Dynamic Adjustable Ankle Extension/Flexion Device, Includes Soft Interface Material	\$ 129.30	Capped Rental
E1816	Static Progressive Stretch Ankle Device, Flexion And/Or Extension, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 136.71	Capped Rental
E1818	Static Progressive Stretch Forearm Pronation / Supination Device, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 139.58	Capped Rental
E1820	Replacement Soft Interface Material, Dynamic Adjustable Extension/Flexion Device	\$ 94.70	Purchase
E1821	Replacement Soft Interface Material/Cuffs For Bi-Directional Static Progressive Stretch Device	\$ 129.23	Purchase
E1825	Dynamic Adjustable Finger Extension/Flexion Device, Includes Soft Interface Material	\$ 129.30	Capped Rental
E1830	Dynamic Adjustable Toe Extension/Flexion Device, Includes Soft Interface Material	\$ 129.30	Capped Rental
E1831	Static Progressive Stretch Toe Device, Extension And/Or Flexion, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 67.61	Capped Rental
E1840	Dynamic Adjustable Shoulder Flexion / Abduction / Rotation Device, Includes Soft Interface Material	\$ 391.65	Capped Rental
E1841	Static Progressive Stretch Shoulder Device, With Or Without Range Of Motion Adjustment, Includes All Components And Accessories	\$ 463.56	Capped Rental
E1902	Communication Board, Non-Electronic Augmentative Or Alternative Communication Device	Price By Report	
E2000	Gastric Suction Pump, Home Model, Portable Or Stationary, Electric	\$ 52.01	Capped Rental
E2001	Suction Pump, Home Model, Portable Or Stationary, Electric, Any Type, For Use With External Urine Management System	\$ 55.13	Rental
E2100	Blood Glucose Monitor With Integrated Voice Synthesizer	\$ 789.82	Purchase
E2101	Blood Glucose Monitor With Integrated Lancing/Blood Sample	\$ 231.54	Purchase
E2102	Adjunctive Continuous Glucose Monitor Or Receiver	\$ 206.13	Purchase
E2103	Non-adju cgm receiver/mon	\$ 259.60	Purchase
E2104	Home Blood Glucose Monitor For Use With Integrated Lancing/Blood Sample Testing Cartridge	Price By Report	
E2120	Pulse Generator System For Tympanic Treatment Of Inner Ear Endolymphatic Fluid	\$ 290.14	Capped Rental
E2201	Manual Wheelchair Accessory, Nonstandard Seat Frame, Width Greater Than Or Equal To 20 Inches And Less Than 24 Inches	\$ 404.37	Purchase
E2202	Manual Wheelchair Accessory, Nonstandard Seat Frame Width, 24-27 Inches	\$ 45.53	Capped Rental
E2203	Manual Wheelchair Accessory, Nonstandard Seat Frame Depth, 20 To Less Than 22 Inches	\$ 533.02	Purchase
E2204	Manual Wheelchair Accessory, Nonstandard Seat Frame Depth, 22 To 25 Inches	\$ 917.48	Purchase
E2205	Manual Wheelchair Accessory, Handrim Without Projections (Includes Ergonomic Or	\$ 39.44	Purchase
E2206	Contoured), Any Type, Replacement Only, Each  Manual Wheelchair Accessory, Wheel Lock Assembly, Complete, Replacement Only, Each	\$ 46.23	Purchase
E2207	Wheelchair Accessory, Crutch And Cane Holder, Each	\$ 52.10	Purchase
E2208	Wheelchair Accessory, Cylinder Tank Carrier, Each	\$ 105.34	Purchase
E2209	Arm Trough, With Or Without Hand Support, Each	\$ 103.27	Purchase
E2210	Wheelchair Accessory, Bearings, Any Type, Replacement Only, Each	\$ 6.50	Purchase
E2211	Manual Wheelchair Accessory, Pneumatic Propulsion Tire, Any Size, Each	\$ 44.44	Purchase
E2212	Manual Wheelchair Accessory, Tube For Pneumatic Propulsion Tire, Any Size, Each	\$ 7.08	Purchase
E2213	Manual Wheelchair Accessory, Insert For Pneumatic Propulsion Tire (Removable), Any Type, Any Size, Each	\$ 35.25	Purchase
E2214	Manual Wheelchair Accessory, Pneumatic Caster Tire, Any Size, Each	\$ 40.69	Purchase
E2215	Manual Wheelchair Accessory, Tube For Pneumatic Caster Tire, Any Size, Each	\$ 11.59	Purchase
E2216	Manual Wheelchair Accessory, Foam Filled Propulsion Tire, Any Size, Each	\$ 50.24	Purchase
E2217	Manual Wheelchair Accessory, Foam Filled Caster Tire, Any Size, Each	\$ 44.46	Purchase
E2218	Manual Wheelchair Accessory, Foam Propulsion Tire, Any Size, Each	\$ 50.24 \$ 44.46	Purchase
E2219	Manual Wheelchair Accessory, Foam Caster Tire, Any Size, Each  Manual Wheelchair Accessory, Solid (Rubber/Plastic) Propulsion Tire, Any Size,	<u> </u>	Purchase
E2220	Replacement Only, Each	\$ 31.74	Purchase

Code	Description	Fee	Purchase or Rental
E2221	Manual Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire (Removable), Any Size, Replacement Only, Each	\$ 30.53	Purchase
E2222	Manual Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire With Integrated Wheel, Any Size, Replacement Only, Each	\$ 25.55	Purchase
E2224	Manual Wheelchair Accessory, Propulsion Wheel Excludes Tire, Any Size, Replacement Only, Each	\$ 113.83	Purchase
E2225	Manual Wheelchair Accessory, Caster Wheel Excludes Tire, Any Size, Replacement Only, Each	\$ 21.33	Purchase
E2226	Manual Wheelchair Accessory, Caster Fork, Any Size, Replacement Only, Each	\$ 45.61	Purchase
E2227	Manual Wheelchair Accessory, Gear Reduction Drive Wheel, Each	\$ 2,297.34	Purchase
E2228	Manual Wheelchair Accessory, Wheel Braking System And Lock, Complete, Each	\$ 1,084.77	Purchase
E2231	Manual Wheelchair Accessory, Wheel Brating System And Eson, Complete, Each Manual Wheelchair Accessory, Solid Seat Support Base (Replaces Sling Seat), Includes Any Type Mounting Hardware	· · · · · · · · · · · · · · · · · · ·	Purchase
E2291 E2292	Back, Planar, For Pediatric Size Wheelchair Including Fixed Attaching Hardware Seat, Planar, For Pediatric Size Wheelchair Including Fixed Attaching Hardware	Price By Report Price By Report	
E2293	Back, Contoured, For Pediatric Size Wheelchair Including Fixed Attaching Hardware	Price By Report	
E2294	Seat, Contoured, For Pediatric Size Wheelchair Including Fixed Attaching Hardware	Price By Report	
E2295	Manual Wheelchair Accessory, For Pediatric Size Wheelchair, Dynamic Seating Frame, Allows Coordinated Movement Of Multiple Positioning Features	Price By Report	
E2298	Complex Rehabilitative Power Wheelchair Accessory, Power Seat Elevation System, Any Type	Price By Report	
E2300	Wheelchair Accessory, Power Seat Elevation System, Any Type	Price By Report	
E2310	Power Wheelchair Accessory, Electronic Connection Between Wheelchair Controller And One Power Seating System Motor, Including All Related Electronics, Indicator Feature, Mechanical Function Selection Switch, And Fixed Mounting Hardware	\$ 1,163.97	Purchase
E2311	Power Wheelchair Accessory, Electronic Connection Between Wheelchair Controller And Two Or More Power Seating System Motors, Including All Related Electronics, Indicator Feature, Mechanical Function Selection Switch, And Fixed Mounting Hardware	\$ 2,353.05	Purchase
E2312	Power Wheelchair Accessory, Hand Or Chin Control Interface, Mini-Proportional Remote Joystick, Proportional, Including Fixed Mounting Hardware	\$ 2,413.62	Purchase
E2313	Power Wheelchair Accessory, Harness For Upgrade To Expandable Controller, Including All Fasteners, Connectors And Mounting Hardware, Each	\$ 393.48	Purchase
E2321	Power Wheelchair Accessory, Hand Control Interface, Remote Joystick, Nonproportional, Including All Related Electronics, Mechanical Stop Switch, And Fixed Mounting Hardware	\$ 1,581.30	Purchase
E2322	Power Wheelchair Accessory, Hand Control Interface, Multiple Mechanical Switches, Nonproportional, Including All Related Electronics, Mechanical Stop Switch, And Fixed Mounting Hardware	\$ 1,446.84	Purchase
E2323	Power Wheelchair Accessory, Specialty Joystick Handle For Hand Control Interface, Prefabricated		Purchase
E2324	Power Wheelchair Accessory, Chin Cup For Chin Control Interface	\$ 46.38	Purchase
E2325	Power Wheelchair Accessory, Sip And Puff Interface, Nonproportional, Including All Related Electronics, Mechanical Stop Switch, And Manual Swingaway Mounting Hardware	\$ 1,382.40	Purchase
E2326	Power Wheelchair Accessory, Breath Tube Kit For Sip And Puff Interface	\$ 358.20	Purchase
E2327	Power Wheelchair Accessory, Head Control Interface, Mechanical, Proportional, Including All Related Electronics, Mechanical Direction Change Switch, And Fixed Mounting Hardware	\$ 2,692.53	Purchase
E2328	Power Wheelchair Accessory, Head Control Or Extremity Control Interface, Electronic, Proportional, Including All Related Electronics And Fixed Mounting Hardware	\$ 5,094.72	Purchase
E2329	Power Wheelchair Accessory, Head Control Interface, Contact Switch Mechanism, Nonproportional, Including All Related Electronics, Mechanical Stop Switch, Mechanical Direction Change Switch, Head Array, And Fixed Mounting Hardware	\$ 1,821.96	Purchase
E2330	Power Wheelchair Accessory, Head Control Interface, Proximity Switch Mechanism, Nonproportional, Including All Related Electronics, Mechanical Stop Switch, Mechanical Direction Change Switch, Head Array, And Fixed Mounting Hardware	\$ 3,525.30	Purchase
E2331	Power Wheelchair Accessory, Attendant Control, Proportional, Including All Related Electronics And Fixed Mounting Hardware	Price By Report	
E2340	Power Wheelchair Accessory, Nonstandard Seat Frame Width, 20-23 Inches	\$ 440.06	Purchase
E2341	Power Wheelchair Accessory, Nonstandard Seat Frame Width, 24-27 Inches		Purchase
E2342	Power Wheelchair Accessory, Nonstandard Seat Frame Depth, 20 Or 21 Inches		Purchase

Code	Description  Description  Description  Description	Fee	Purchase or Rental
E2343	Power Wheelchair Accessory, Nonstandard Seat Frame Depth, 22-25 Inches  Power Wheelchair Accessory, Electronic Interface To Operate Speech Generating	\$ 880.22	Purchase
E2351	Device Using Power Wheelchair Control Interface	\$ 739.71	Purchase
E2358	Power Wheelchair Accessory, Group 34 Non-Sealed Lead Acid Battery, Each Power Wheelchair Accessory, Group 34 Sealed Lead Acid Battery, Each (E.G. Gel Cell,	Price By Report	
E2359	Absorbed Glassmat)	\$ 202.01	Purchase
E2360	Power Wheelchair Accessory, 22 Nf Non-Sealed Lead Acid Battery, Each	\$ 137.96	Purchase
E2361	Power Wheelchair Accessory, 22Nf Sealed Lead Acid Battery, Each, (E.G. Gel Cell, Absorbed Glassmat)	\$ 138.16	Purchase
E2362	Power Wheelchair Accessory, Group 24 Non-Sealed Lead Acid Battery, Each	\$ 111.07	Purchase
E2363	Power Wheelchair Accessory, Group 24 Sealed Lead Acid Battery, Each (E.G. Gel Cell, Absorbed Glassmat)	\$ 179.69	Purchase
E2364	Power Wheelchair Accessory, U-1 Non-Sealed Lead Acid Battery, Each	\$ 134.07	Purchase
E2365	Power Wheelchair Accessory, U-1 Sealed Lead Acid Battery, Each (E.G. Gel Cell, Absorbed Glassmat)	\$ 102.09	Purchase
E2366	Power Wheelchair Accessory, Battery Charger, Single Mode, For Use With Only One	\$ 228.67	Purchase
E2367	Battery Type, Sealed Or Non-Sealed, Each Power Wheelchair Accessory, Battery Charger, Dual Mode, For Use With Either Battery	\$ 436.20	Purchase
	Type, Sealed Or Non-Sealed, Each		
E2368	Power Wheelchair Component, Drive Wheel Motor, Replacement Only	\$ 492.48	Purchase
E2369	Power Wheelchair Component, Drive Wheel Gear Box, Replacement Only	\$ 446.22	Purchase
E2370	Power Wheelchair Component, Integrated Drive Wheel Motor And Gear Box Combination, Replacement Only	\$ 707.22	Purchase
E2371	Power Wheelchair Accessory, Group 27 Sealed Lead Acid Battery, (E.G. Gel Cell, Absorbed Glassmat), Each	\$ 159.35	Purchase
E2372	Power Wheelchair Accessory, Group 27 Non-Sealed Lead Acid Battery, Each	Price By Report	
	Power Wheelchair Accessory, Hand Or Chin Control Interface, Compact Remote		B .
E2373	Joystick, Proportional, Including Fixed Mounting Hardware Power Wheelchair Accessory, Hand Or Chin Control Interface, Standard Remote	\$ 828.90	Purchase
E2374	Joystick (Not Including Controller), Proportional, Including All Related Electronics And	\$ 533.79	Purchase
	Fixed Mounting Hardware, Replacement Only	,	
E2375	Power Wheelchair Accessory, Non-Expandable Controller, Including All Related Electronics And Mounting Hardware, Replacement Only	\$ 815.13	Purchase
E2376	Power Wheelchair Accessory, Expandable Controller, Including All Related Electronics	\$ 1,333.98	Purchase
	And Mounting Hardware, Replacement Only  Power Wheelchair Accessory, Expandable Controller, Including All Related Electronics	Ψ .,σσσ.σσ	
E2377	And Mounting Hardware, Upgrade Provided At Initial Issue	\$ 488.16	Purchase
E2378	Power Wheelchair Component, Actuator, Replacement Only	\$ 610.02	Purchase
E2381	Power Wheelchair Accessory, Pneumatic Drive Wheel Tire, Any Size, Replacement Only, Each	\$ 74.30	Purchase
E2382	Power Wheelchair Accessory, Tube For Pneumatic Drive Wheel Tire, Any Size, Replacement Only, Each	\$ 20.49	Purchase
E2383	Power Wheelchair Accessory, Insert For Pneumatic Drive Wheel Tire (Removable), Any	\$ 151.78	Purchase
	Type, Any Size, Replacement Only, Each Power Wheelchair Accessory, Pneumatic Caster Tire, Any Size, Replacement Only,		
E2384	Each	\$ 77.08	Purchase
E2385	Power Wheelchair Accessory, Tube For Pneumatic Caster Tire, Any Size, Replacement Only, Each	\$ 49.03	Purchase
E2386	Power Wheelchair Accessory, Foam Filled Drive Wheel Tire, Any Size, Replacement Only, Each	\$ 136.65	Purchase
E2387	Power Wheelchair Accessory, Foam Filled Caster Tire, Any Size, Replacement Only, Each	\$ 61.79	Purchase
E2388	Power Wheelchair Accessory, Foam Drive Wheel Tire, Any Size, Replacement Only,	\$ 51.98	Purchase
E2389	Each Power Wheelchair Accessory, Foam Caster Tire, Any Size, Replacement Only, Each	\$ 28.64	Purchase
E2390	Power Wheelchair Accessory, Solid (Rubber/Plastic) Drive Wheel Tire, Any Size,	\$ 44.55	Purchase
	Replacement Only, Each Power Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire (Removable), Any Size,	•	
E2391	Replacement Only, Each Power Wheelchair Accessory, Solid (Rubber/Plastic) Caster Tire With Integrated Wheel,	\$ 20.89	Purchase
E2392	Any Size, Replacement Only, Each	\$ 52.53	Purchase
E2394	Power Wheelchair Accessory, Drive Wheel Excludes Tire, Any Size, Replacement Only, Each	\$ 73.76	Purchase
E2395	Power Wheelchair Accessory, Caster Wheel Excludes Tire, Any Size, Replacement Only, Each	\$ 53.68	Purchase
E2396	Power Wheelchair Accessory, Caster Fork, Any Size, Replacement Only, Each	\$ 60.29	Purchase
E2397	Power Wheelchair Accessory, Lithium-Based Battery, Each	\$ 507.58	Purchase

Code	Description	Fee		Purchase or Rental
E2398	Wheelchair Accessory, Dynamic Positioning Hardware For Back	\$	140.87	
E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	\$	1,076.18	Capped Rental
E2500	Speech Generating Device, Digitized Speech, Using Pre-Recorded Messages, Less Than Or Equal To 8 Minutes Recording Time	\$	480.20	Purchase
E2502	Speech Generating Device, Digitized Speech, Using Pre-Recorded Messages, Greater Than 8 Minutes But Less Than Or Equal To 20 Minutes Recording Time	\$	1,468.43	Purchase
E2504	Speech Generating Device, Digitized Speech, Using Pre-Recorded Messages, Greater Than 20 Minutes But Less Than Or Equal To 40 Minutes Recording Time	\$	1,937.08	Purchase
E2506	Speech Generating Device, Digitized Speech, Using Pre-Recorded Messages, Greater Than 40 Minutes Recording Time	\$	2,840.31	Purchase
E2508	Speech Generating Device, Synthesized Speech, Requiring Message Formulation By Spelling And Access By Physical Contact With The Device	\$	4,392.08	Purchase
E2510	Speech Generating Device, Synthesized Speech, Permitting Multiple Methods Of Message Formulation And Multiple Methods Of Device Access	\$	8,311.43	Purchase
E2511	Speech Generating Software Program, For Personal Computer Or Personal Digital Assistant	\$	32.43	Purchase
E2512	Accessory For Speech Generating Device, Mounting System	Price I	By Report	
E2599	Accessory For Speech Generating Device, Not Otherwise Classified		By Report	
E2601	General Use Wheelchair Seat Cushion, Width Less Than 22 Inches, Any Depth	\$	54.54	Purchase
E2602	General Use Wheelchair Seat Cushion, Width 22 Inches Or Greater, Any Depth	\$	111.02	Purchase
E2603	Skin Protection Wheelchair Seat Cushion, Width Less Than 22 Inches, Any Depth	\$	138.83	Purchase
E2604	Skin Protection Wheelchair Seat Cushion, Width 22 Inches Or Greater, Any Depth	\$	182.72	Purchase
E2605	Positioning Wheelchair Seat Cushion, Width Less Than 22 Inches, Any Depth	\$	262.07	Purchase
E2606	Positioning Wheelchair Seat Cushion, Width 22 Inches Or Greater, Any Depth	\$	414.05	Purchase
E2607	Skin Protection And Positioning Wheelchair Seat Cushion, Width Less Than 22 Inches, Any Depth	\$	269.21	Purchase
E2608	Skin Protection And Positioning Wheelchair Seat Cushion, Width 22 Inches Or Greater, Any Depth	\$	330.12	Purchase
E2609	Custom Fabricated Wheelchair Seat Cushion, Any Size	Price I	By Report	
E2610	Wheelchair Seat Cushion, Powered		By Report	
E2611	General Use Wheelchair Back Cushion, Width Less Than 22 Inches, Any Height, Including Any Type Mounting Hardware	\$	254.44	Purchase
E2612	General Use Wheelchair Back Cushion, Width 22 Inches Or Greater, Any Height, Including Any Type Mounting Hardware	\$	397.58	Purchase
E2613	Positioning Wheelchair Back Cushion, Posterior, Width Less Than 22 Inches, Any Height, Including Any Type Mounting Hardware	\$	384.06	Purchase
E2614	Positioning Wheelchair Back Cushion, Posterior, Width 22 Inches Or Greater, Any Height, Including Any Type Mounting Hardware	\$	547.62	Purchase
E2615	Positioning Wheelchair Back Cushion, Posterior-Lateral, Width Less Than 22 Inches, Any Height, Including Any Type Mounting Hardware	\$	440.19	Purchase
E2616	Positioning Wheelchair Back Cushion, Posterior-Lateral, Width 22 Inches Or Greater, Any Height, Including Any Type Mounting Hardware	\$	592.55	Purchase
E2617	Custom Fabricated Wheelchair Back Cushion, Any Size, Including Any Type Mounting Hardware	Price I	By Report	
E2619	Replacement Cover For Wheelchair Seat Cushion Or Back Cushion, Each	\$	53.23	Purchase
E2620	Positioning Wheelchair Back Cushion, Planar Back With Lateral Supports, Width Less Than 22 Inches, Any Height, Including Any Type Mounting Hardware	\$	505.10	Purchase
E2621	Positioning Wheelchair Back Cushion, Planar Back With Lateral Supports, Width 22 Inches Or Greater, Any Height, Including Any Type Mounting Hardware	\$	559.13	Purchase
E2622	Skin Protection Wheelchair Seat Cushion, Adjustable, Width Less Than 22 Inches, Any Depth	\$	340.79	Purchase
E2623	Skin Protection Wheelchair Seat Cushion, Adjustable, Width 22 Inches Or Greater Any Depth	\$	432.33	Purchase
E2624	Skin Protection And Positioning Wheelchair Seat Cushion, Adjustable, Width Less Than 22 Inches, Any Depth	\$	344.91	Purchase
E2625	Skin Protection And Positioning Wheelchair Seat Cushion, Adjustable, Width 22 Or Greater, Any Depth	\$	431.87	Purchase
E2626	Wheelchair Accessory, Shoulder Elbow, Mobile Arm Support Attached To Wheelchair, Balanced, Adjustable	\$	648.33	Purchase
E2627	Wheelchair Accessory, Shoulder Elbow, Mobile Arm Support Attached To Wheelchair, Balanced, Adjustable Rancho Type	\$	1,034.52	Purchase
E2628	Wheelchair Accessory, Shoulder Elbow, Mobile Arm Support Attached To Wheelchair, Balanced, Reclining	\$	779.35	Purchase
E2629	Wheelchair Accessory, Shoulder Elbow, Mobile Arm Support Attached To Wheelchair, Balanced, Friction Arm Support (Friction Dampening To Proximal And Distal Joints)	\$	986.25	Purchase

Code	Description  Wheelsheir Accessory Shoulder Elbow, Mobile Arm Support, Management Arm And	Fee	Purchase or Rental
E2630	Wheelchair Accessory, Shoulder Elbow, Mobile Arm Support, Monosuspension Arm And Hand Support, Overhead Elbow Forearm Hand Sling Support, Yoke Type Suspension Support	\$ 689.68	Purchase
E2631	Wheelchair Accessory, Addition To Mobile Arm Support, Elevating Proximal Arm	\$ 275.88	Purchase
E2632	Wheelchair Accessory, Addition To Mobile Arm Support, Offset Or Lateral Rocker Arm	\$ 175.42	Purchase
	With Elastic Balance Control	·	
E2633	Wheelchair Accessory, Addition To Mobile Arm Support, Supinator  Speech Volume Modulation System, Any Type, Including All Components And	\$ 148.80	Purchase
E3000	Accessories Gait Trainer, Pediatric Size, Posterior Support, Includes All Accessories And	\$ 210.97	Rental
E8000	Components	Price By Report	
E8001	Gait Trainer, Pediatric Size, Upright Support, Includes All Accessories And Components	Price By Report	
E8002	Gait Trainer, Pediatric Size, Anterior Support, Includes All Accessories And Components	Price By Report	
K0001	Standard Wheelchair	\$ 38.38	Capped Rental
K0002	Standard Hemi (Low Seat) Wheelchair	\$ 61.06	Capped Rental
K0003	Lightweight Wheelchair	\$ 62.52	Capped Rental
K0004	High Strength, Lightweight Wheelchair	\$ 88.92	Capped Rental
K0005	Ultralightweight Wheelchair	\$ 2,232.31	Purchase
K0006	Heavy Duty Wheelchair	\$ 94.66	Capped Rental
K0007	Extra Heavy Duty Wheelchair	\$ 132.11	Capped Rental
K0008	Custom Manual Wheelchair/Base	Price By Report	
K0009	Other Manual Wheelchair/Base	\$ 76.08	Capped Rental
K0010	Standard - Weight Frame Motorized/Power Wheelchair	\$ 435.93	Capped Rental
K0011	Standard - Weight Frame Motorized/Power Wheelchair With Programmable Control Parameters For Speed Adjustment, Tremor Dampening, Acceleration Control And Braking	\$ 524.21	Capped Rental
K0012	Lightweight Portable Motorized/Power Wheelchair	\$ 326.09	Capped Rental
K0013	Custom Motorized/Power Wheelchair Base	Price By Report	
K0014	Other Motorized/Power Wheelchair Base	Price By Report	
K0015	Detachable, Non-Adjustable Height Armrest, Replacement Only, Each	\$ 170.64	Purchase
K0017	Detachable, Adjustable Height Armrest, Base, Replacement Only, Each	\$ 51.69	Purchase
K0018	Detachable, Adjustable Height Armrest, Upper Portion, Replacement Only, Each	\$ 29.05	Purchase
K0019	Arm Pad, Replacement Only, Each	\$ 16.70	Purchase
K0020	Fixed, Adjustable Height Armrest, Pair	\$ 48.35	Purchase
K0037	High Mount Flip-Up Footrest, Each	\$ 43.88	Purchase
K0038	Leg Strap, Each	\$ 25.16	Purchase
K0039	Leg Strap, H Style, Each	\$ 54.97	Purchase
K0040	Adjustable Angle Footplate, Each		Purchase
K0041	Large Size Footplate, Each	\$ 53.30	Purchase
K0042	Standard Size Footplate, Replacement Only, Each	\$ 32.78	Purchase
K0043	Footrest, Lower Extension Tube, Replacement Only, Each	\$ 20.32	Purchase
K0044	Footrest, Upper Hanger Bracket, Replacement Only, Each	\$ 17.33	Purchase
K0045	Footrest, Complete Assembly, Replacement Only, Each	\$ 50.94	Purchase
K0046	Elevating Legrest, Lower Extension Tube, Replacement Only, Each	\$ 20.32	Purchase
K0047	Elevating Legrest, Upper Hanger Bracket, Replacement Only, Each	\$ 76.09	Purchase
K0050	Ratchet Assembly, Replacement Only	\$ 33.75	Purchase
K0051	Cam Release Assembly, Footrest Or Legrest, Replacement Only, Each	\$ 54.01	Purchase
K0052	Swingaway, Detachable Footrests, Replacement Only, Each	\$ 88.60	Purchase
K0053	Elevating Footrests, Articulating (Telescoping), Each	\$ 101.30	Purchase
K0056	Seat Height Less Than 17" Or Equal To Or Greater Than 21" For A High Strength, Lightweight, Or Ultralightweight Wheelchair	\$ 111.15	Purchase
K0065	Spoke Protectors, Each	\$ 53.57	Purchase
K0069	Rear Wheel Assembly, Complete, With Solid Tire, Spokes Or Molded, Replacement Only, Each	\$ 114.32	Purchase
K0070	Rear Wheel Assembly, Complete, With Pneumatic Tire, Spokes Or Molded, Replacement Only, Each	\$ 181.08	Purchase
K0071	Front Caster Assembly, Complete, With Pneumatic Tire, Replacement Only, Each	\$ 128.23	Purchase
K0072	Front Caster Assembly, Complete, With Semi-Pneumatic Tire, Replacement Only, Each	\$ 74.62	Purchase
K0073	Caster Pin Lock,Each	\$ 40.42	Purchase
110070		00.45	Donales
K0077	Front Caster Assembly, Complete, With Solid Tire, Replacement Only, Each	\$ 66.15	Purchase
K0077 K0098	Drive Belt For Power Wheelchair, Replacement Only	\$ 27.45	Purchase
K0077			

Code	Description	Fee	Purchase or Rental
K0195	Elevationg Leg Rests, Pair (Foruse With Capped Rental Wheelchair Base)	\$ 14.49	Capped Rental
K0455	Infusion Pump Used For Uninterrupted Parenteral Administration Of Medication, (E.G., Epoprostenol Or Treprostinol)	\$ 318.97	Continuous Rental
K0462	Temporary Replacement For Patient Owned Quipment Being Repaired, Any Type	Price By Report	
K0552	Supplies For External Non-Insulin Drug Infusion Pump, Syringe Type Cartridge, Sterile, Each	\$ 3.08	Purchase
K0601	Replacement Battery For External Infusion Pump Owned By Patient, Silver Oxide, 1.5 Volt, Each	\$ 1.35	Purchase
K0602	Replacement Battery For External Infusion Pump Owned By Patient, Silver Oxide, 3 Volt, Each	\$ 7.68	Purchase
K0603	Replacement Battery For External Infusion Pump Owned By Patient, Alkaline, 1.5 Volt, Each	\$ 0.68	Purchase
K0604	Replacement Battery For External Infusion Pump Owned By Patient, Lithium, 3.6 Volt, Each	\$ 7.37	Purchase
K0605	Replacement Battery For External Infusion Pump Owned By Patient, Lithium, 4.5 Volt, Each	\$ 17.67	Purchase
K0606	Automatic External Defibrillator, With Integrated Electrocardiogram Analysis, Garment Type	\$ 2,577.05	Capped Rental
K0607	Replacement Battery For Automated External Defibrillator, Garment Type Only, Each		Purchase
K0608	Replacement Garment For Use With Automated External Defibrillator, Each	\$ 148.84	Purchase
K0609	Replacement Electrodes For Use With Automated External Defibrillator, Garment Type Only, Each	\$ 989.87	Purchase
K0669	Wheelchair Accessory, Wheelchair Seat Or Back Cushion, Does Not Meet Specific Code Criteria Or No Written Coding Verification From Dme Pdac	Price By Report	
K0672	Addition To Lower Extremity Orthosis, Removable Soft Interface, All Components, Replacement Only, Each		Purchase
K0730	Controlled Dose Inhalation Drug Delivery System  Power Wheelchair Accessory, 12 To 24 Amp Hour Sealed Lead Acid Battery, Each	\$ 2,116.98	Purchase
K0733	(E.G., Gel Cell, Absorbed Glassmat)  Portable Gaseous Oxygen System, Rental; Home Compressor Used To Fill Portable	\$ 31.98	Purchase
K0738	Oxygen Cylinders; Includes Portable Containers, Regulator, Flowmeter, Humidifier, Cannula Or Mask, And Tubing	\$ 46.06	Continuous Rental
K0739	Repair Or Nonroutine Service For Durable Medical Equipment Other Than Oxygen Requiring The Skill Of A Technician, Labor Component, Per 15 Minutes	\$ 16.99	Purchase
K0740	Repair Or Nonroutine Service For Oxygen Equipment Requiring The Skill Of A Technician, Labor Componet, Per 15 Minutes	\$ 17.93	Purchase
K0743	Suction Pump, Home Model, Portable, For Use On Wounds	Price By Report	
K0744	Absorptive Wound Dressing For Use With Suction Pump, Home Model, Portable, Pad Size 16 Square Inches Or Less	Price By Report	
K0745	Absorptive Wound Dressing For Use With Suction Pump, Home Model, Portable, Pad Size More Than 16 Square Inches But Less Than Or Equal To 48 Square Inches	Price By Report	
K0746	Absorptive Wound Dressing For Use With Suction Pump, Home Model, Portable, Pad Size Greater Than 48 Square Inches	Price By Report	
K0813	Power Wheelchair, Group 1 Standard, Portable, Sling/Solid Seat And Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 2,285.52	Purchase
K0814	Power Wheelchair, Group 1 Standard, Portable, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 2,677.68	Purchase
K0815	Power Wheelchair, Group 1 Standard, Sling/Solid Seat And Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,012.12	Purchase
K0816	Power Wheelchair, Group 1 Standard, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 2,849.70	Purchase
K0820	Power Wheelchair, Group 2 Standard, Portable, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 2,400.00	Purchase
K0821	Power Wheelchair, Group 2 Standard, Portable, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 2,819.94	Purchase
K0822	Power Wheelchair, Group 2 Standard, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,265.68	Purchase
K0823	Power Wheelchair, Group 2 Standard, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds		Purchase
K0824	Power Wheelchair, Group 2 Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 4,212.36	Purchase
K0825	Power Wheelchair, Group 2 Heavy Duty, Captains Chair, Patient Weight Capacity 301 To 450 Pounds  Power Wheelchair, Group 2 Very Heavy Duty, Sling/Solid Seat/Back, Patient Weight	\$ 3,874.62	Purchase
	TROWER WITE PICTURE A VERY HEAVY LITTY STING/SOLID SEAT/BACK Patient Weight	\$ 6.110.82	Purchase

Code	Description	Fee	Purchase or Rental
K0827	Power Wheelchair, Group 2 Very Heavy Duty, Captains Chair, Patient Weight Capacity 451 To 600 Pounds	\$ 5,261.46	Purchase
K0828	Power Wheelchair, Group 2 Extra Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 601 Pounds Or More	\$ 7,117.32	Purchase
K0829	Power Wheelchair, Group 2 Extra Heavy Duty, Captains Chair, Patient Weight 601 Pounds Or More	\$ 6,714.36	Purchase
K0830	Power Wheelchair, Group 2 Standard, Seat Elevator, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 4,615.50	Purchase
K0831	Power Wheelchair, Group 2 Standard, Seat Elevator, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 4,615.50	Purchase
K0835	Power Wheelchair, Group 2 Standard, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,421.56	Purchase
K0836	Power Wheelchair, Group 2 Standard, Single Power Option, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,548.52	Purchase
K0837	Power Wheelchair, Group 2 Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 4,197.30	Purchase
K0838	Power Wheelchair, Group 2 Heavy Duty, Single Power Option, Captains Chair, Patient Weight Capacity 301 To 450 Pounds	\$ 3,741.36	Purchase
K0839	Power Wheelchair, Group 2 Very Heavy Duty, Single Power Option Sling/Solid Seat/Back, Patient Weight Capacity 451 To 600 Pounds	\$ 5,489.10	Purchase
K0840	Power Wheelchair, Group 2 Extra Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 601 Pounds Or More	\$ 8,359.98	Purchase
K0841	Power Wheelchair, Group 2 Standard, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,721.62	Purchase
K0842	Power Wheelchair, Group 2 Standard, Multiple Power Option, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 3,719.52	Purchase
K0843	Power Wheelchair, Group 2 Heavy Duty, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 4,454.04	Purchase
K0848	Power Wheelchair, Group 3 Standard, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 5,593.20	Purchase
K0849	Power Wheelchair, Group 3 Standard, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 5,377.44	Purchase
K0850	Power Wheelchair, Group 3 Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 6,487.74	Purchase
K0851	Power Wheelchair, Group 3 Heavy Duty, Captains Chair, Patient Weight Capacity 301 To 450 Pounds	\$ 6,238.08	Purchase
K0852	Power Wheelchair, Group 3 Very Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 451 To 600 Pounds	\$ 7,496.22	Purchase
K0853	Power Wheelchair, Group 3 Very Heavy Duty, Captains Chair, Patient Weight Capacity 451 To 600 Pounds	\$ 7,700.58	Purchase
K0854	Power Wheelchair, Group 3 Extra Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 601 Pounds Or More	\$ 10,201.56	Purchase
K0855	Power Wheelchair, Group 3 Extra Heavy Duty, Captains Chair, Patient Weight Capacity 601 Pounds Or More	\$ 9,636.84	Purchase
K0856	Power Wheelchair, Group 3 Standard, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 6,003.54	Purchase
K0857	Power Wheelchair, Group 3 Standard, Single Power Option, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	\$ 6,123.90	Purchase
K0858	Power Wheelchair, Group 3 Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight 301 To 450 Pounds	\$ 7,448.70	Purchase
K0859	Power Wheelchair, Group 3 Heavy Duty, Single Power Option, Captains Chair, Patient Weight Capacity 301 To 450 Pounds	\$ 7,103.76	Purchase
K0860	Power Wheelchair, Group 3 Very Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 451 To 600 Pounds	\$ 10,641.42	Purchase
K0861	Power Wheelchair, Group 3 Standard, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	\$ 6,013.20	Purchase
K0862	Power Wheelchair, Group 3 Heavy Duty, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 7,448.70	Purchase
K0863	Power Wheelchair, Group 3 Very Heavy Duty, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 451 To 600 Pounds	\$ 10,641.42	Purchase
K0864	Power Wheelchair, Group 3 Extra Heavy Duty, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 601 Pounds Or More	\$ 12,663.30	Purchase
K0868	Power Wheelchair, Group 4 Standard, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0869	Power Wheelchair, Group 4 Standard, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0870	Power Wheelchair, Group 4 Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	\$ 1,002.11	Purchase

Code	Description	Fee	Purchase or Rental
K0871	Power Wheelchair, Group 4 Very Heavy Duty, Sling/Solid Seat/Back, Patient Weight Capacity 451 To 600 Pounds	Price By Report	
K0877	Power Wheelchair, Group 4 Standard, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0878	Power Wheelchair, Group 4 Standard, Single Power Option, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0879	Power Wheelchair, Group 4 Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	Price By Report	
K0880	Power Wheelchair, Group 4 Very Heavy Duty, Single Power Option, Sling/Solid Seat/Back, Patient Weight 451 To 600 Pounds	Price By Report	
K0884	Power Wheelchair, Group 4 Standard, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0885	Power Wheelchair, Group 4 Standard, Multiple Power Option, Captains Chair, Patient Weight Capacity Up To And Including 300 Pounds	Price By Report	
K0886	Power Wheelchair, Group 4 Heavy Duty, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity 301 To 450 Pounds	Price By Report	
K0890	Power Wheelchair, Group 5 Pediatric, Single Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 125 Pounds	Price By Report	
K0891	Power Wheelchair, Group 5 Pediatric, Multiple Power Option, Sling/Solid Seat/Back, Patient Weight Capacity Up To And Including 125 Pounds	Price By Report	
K0898	Power Wheelchair, Not Otherwise Classified	Price By Report	
K0900	Customized Durable Medical Equipment, Other Than Wheelchair	Price By Report	
K1007	Bilateral Hip, Knee, Ankle, Foot Device, Powered, Includes Pelvic Component, Single Or Double Upright(S), Knee Joints Any Type, With Or Without Ankle Joints Any Type, Includes All Components And Accessories, Motors, Microprocessors, Sensors	Price By Report	
K1027	Oral Device/Appliance Used To Reduce Upper Airway Collapsibility, Without Fixed Mechanical Hinge, Custom Fabricated, Includes Fitting And Adjustment	Price By Report	
K1030	External Recharging System For Battery (Internal) For Use With Implanted Cardiac Contractility Modulation Generator, Replacement Only	Price By Report	
K1037	Docking Station For Use With Oral Device/Appliance Used To Reduce Upper Airway Collapsibility	Price By Report	
L0112	Cranial Cervical Orthosis, Congenital Torticollis Type, With Or Without Soft Interface Material, Adjustable Range Of Motion Joint, Custom Fabricated	\$ 1,460.41	Purchase
L0113	Cranial Cervical Orthosis, Torticollis Type, With Or Without Joint, With Or Without Soft Interface Material, Prefabricated, Includes Fitting And Adjustment	\$ 297.58	Purchase
L0120	Cervical, Flexible, Non-Adjustable, Prefabricated, Off-The-Shelf (Foam Collar)	\$ 24.74	Purchase
L0130	Cervical, Flexible, Thermoplastic Collar, Molded To Patient	\$ 157.46	Purchase
L0140	Cervical, Semi-Rigid, Adjustable (Plastic Collar)	\$ 67.38	Purchase
L0150	Cervical, Semi-Rigid, Adjustable Molded Chin Cup (Plastic Collar With Mandibular/Occipital Piece)	\$ 104.29	Purchase
L0160	Cervical, Semi-Rigid, Wire Frame Occipital/Mandibular Support, Prefabricated, Off-The-Shelf	\$ 151.15	Purchase
L0170	Cervical, Collar, Molded To Patient Model	\$ 622.40	Purchase
L0172	Cervical, Collar, Semi-Rigid Thermoplastic Foam, Two-Piece, Prefabricated, Off-The-Shelf	\$ 122.94	Purchase
L0174	Cervical, Collar, Semi-Rigid, Thermoplastic Foam, Two Piece With Thoracic Extension, Prefabricated, Off-The-Shelf	\$ 299.52	Purchase
L0180	Cervical, Multiple Post Collar, Occipital/Mandibular Supports, Adjustable	\$ 345.41	Purchase
L0190	Cervical, Multiple Post Collar, Occipital/Mandibular Supports, Adjustable Cervical Bars (Somi, Guilford, Taylor Types)	\$ 496.39	Purchase
L0200	Cervical, Multiple Post Collar, Occipital/Mandibular Supports, Adjustable Cervical Bars, And Thoracic Extension	\$ 520.75	Purchase
L0220	Thoracic, Rib Belt, Custom Fabricated	\$ 114.18	Purchase
L0450	Tlso, Flexible, Provides Trunk Support, Upper Thoracic Region, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Disks With Rigid Stays Or Panel(S), Includes Shoulder Straps And Closures, Prefabricated, Off-The-Shelf	\$ 145.82	Purchase
L0452	Tlso, Flexible, Provides Trunk Support, Upper Thoracic Region, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Disks With Rigid Stays Or Panel(S), Includes Shoulder Straps And Closures, Custom Fabricated	Price By Report	
L0454	Tlso Flexible, Provides Trunk Support, Extends From Sacrococcygeal Junction To Above T-9 Vertebra, Restricts Gross Trunk Motion In The Sagittal Plane, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Disks With Rigid Stays Or Panel(S), Inc	\$ 373.81	Purchase

Code	Description	Fee	Purchase or Rental
L0455	Tlso, Flexible, Provides Trunk Support, Extends From Sacrococcygeal Junction To Above T-9 Vertebra, Restricts Gross Trunk Motion In The Sagittal Plane, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Disks With Rigid Stays Or Panel(S), Inc	\$ 295.10	Purchase
L0456	Tlso, Flexible, Provides Trunk Support, Thoracic Region, Rigid Posterior Panel And Soft Anterior Apron, Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Restricts Gross Trunk Motion In The Sagittal Plane, Produces	\$ 1,071.99	Purchase
L0457	Tlso, Flexible, Provides Trunk Support, Thoracic Region, Rigid Posterior Panel And Soft Anterior Apron, Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Restricts Gross Trunk Motion In The Sagittal Plane, Produces	\$ 940.31	Purchase
L0458	Tlso, Triplanar Control, Modular Segmented Spinal System, Two Rigid Plastic Shells, Posterior Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Anterior Extends From The Symphysis Pubis To The Xiphoid, Soft Liner, Res	\$ 930.59	Purchase
L0460	Tlso, Triplanar Control, Modular Segmented Spinal System, Two Rigid Plastic Shells, Posterior Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Anterior Extends From The Symphysis Pubis To The Sternal Notch, Soft Line	\$ 1,081.96	Purchase
L0462	Tlso, Triplanar Control, Modular Segmented Spinal System, Three Rigid Plastic Shells, Posterior Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Anterior Extends From The Symphysis Pubis To The Sternal Notch, Soft Line	\$ 1,302.84	Purchase
L0464	Tlso, Triplanar Control, Modular Segmented Spinal System, Four Rigid Plastic Shells, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To The Sternal Notch, Soft Liner, R	\$ 1,602.12	Purchase
L0466	Tlso, Sagittal Control, Rigid Posterior Frame And Flexible Soft Anterior Apron With Straps, Closures And Padding, Restricts Gross Trunk Motion In Sagittal Plane, Produces Intracavitary Pressure To Reduce Load On Intervertebral Disks, Prefabricated Item That Has	\$ 376.73	Purchase
L0467	Tlso, Sagittal Control, Rigid Posterior Frame And Flexible Soft Anterior Apron With Straps, Closures And Padding, Restricts Gross Trunk Motion In Sagittal Plane, Produces Intracavitary Pressure To Reduce Load On Intervertebral Disks, Prefabricated, Off-The-Shelf	\$ 316.90	Purchase
L0468	Tlso, Sagittal-Coronal Control, Rigid Posterior Frame And Flexible Soft Anterior Apron With Straps, Closures And Padding, Extends From Sacrococcygeal Junction Over Scapulae, Lateral Strength Provided By Pelvic, Thoracic, And Lateral Frame Pieces, Restri	\$ 442.38	Purchase
L0469	Tlso, Sagittal-Coronal Control, Rigid Posterior Frame And Flexible Soft Anterior Apron With Straps, Closures And Padding, Extends From Sacrococcygeal Junction Over Scapulae, Lateral Strength Provided By Pelvic, Thoracic, And Lateral Frame Pieces, Restri	\$ 385.59	Purchase
L0470	Tlso, Triplanar Control, Rigid Posterior Frame And Flexible Soft Anterior Apron With Straps, Closures And Padding, Extends From Sacrococcygeal Junction To Scapula, Lateral Strength Provided By Pelvic, Thoracic, And Lateral Frame Pieces, Rotational Strength	\$ 615.29	Purchase
L0472	Tlso, Triplanar Control, Hyperextension, Rigid Anterior And Lateral Frame Extends From Symphysis Pubis To Sternal Notch With Two Anterior Components (One Pubic And One Sternal), Posterior And Lateral Pads With Straps And Closures, Limits Spinal Flexion, Restr	\$ 403.07	Purchase
L0480	Tlso, Triplanar Control, One Piece Rigid Plastic Shell Without Interface Liner, With Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal N	\$ 1,707.64	Purchase
L0482	Tlso, Triplanar Control, One Piece Rigid Plastic Shell With Interface Liner, Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal Notch, Ante	\$ 1,972.36	Purchase
L0484	Tlso, Triplanar Control, Two Piece Rigid Plastic Shell Without Interface Liner, With Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal N	\$ 2,128.74	Purchase
L0486	Tlso, Triplanar Control, Two Piece Rigid Plastic Shell With Interface Liner, Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal Notch, Late	\$ 2,088.06	Purchase

Code	Description	Fee	Purchase or Rental
L0488	Tlso, Triplanar Control, One Piece Rigid Plastic Shell With Interface Liner, Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates Just Inferior To Scapular Spine, Anterior Extends From Symphysis Pubis To Sternal Notch, Ante	\$ 1,047.46	Purchase
L0490	Tlso, Sagittal-Coronal Control, One Piece Rigid Plastic Shell, With Overlapping Reinforced Anterior, With Multiple Straps And Closures, Posterior Extends From Sacrococcygeal Junction And Terminates At Or Before The T-9 Vertebra, Anterior Extends From Symphysis Pubis	\$ 295.14	Purchase
L0491	Tlso, Sagittal-Coronal Control, Modular Segmented Spinal System, Two Rigid Plastic Shells, Posterior Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Anterior Extends From The Symphysis Pubis To The Xipho	\$ 801.38	Purchase
L0492	Tlso, Sagittal-Coronal Control, Modular Segmented Spinal System, Three Rigid Plastic Shells, Posterior Extends From The Sacrococcygeal Junction And Terminates Just Inferior To The Scapular Spine, Anterior Extends From The Symphysis Pubis To The Xipho	\$ 505.03	Purchase
L0621	Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support, Reduces Motion About The Sacroiliac Joint, Includes Straps, Closures, May Include Pendulous Abdomen Design, Prefabricated, Off-The-Shelf	\$ 97.05	Purchase
L0622	Sacroiliac Orthosis, Flexible, Provides Pelvic-Sacral Support, Reduces Motion About The Sacroiliac Joint, Includes Straps, Closures, May Include Pendulous Abdomen Design, Custom Fabricated	\$ 249.32	Purchase
L0623	Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With Rigid Or Semi-Rigid Panels Over The Sacrum And Abdomen, Reduces Motion About The Sacroiliac Joint, Includes Straps, Closures, May Include Pendulous Abdomen Design, Prefabricated, Off-The-Shelf	\$ 150.44	Purchase
L0624	Sacroiliac Orthosis, Provides Pelvic-Sacral Support, With Rigid Or Semi-Rigid Panels Placed Over The Sacrum And Abdomen, Reduces Motion About The Sacroiliac Joint, Includes Straps, Closures, May Include Pendulous Abdomen Design, Custom Fabricated	Price By Report	
L0625	Lumbar Orthosis, Flexible, Provides Lumbar Support, Posterior Extends From L-1 To Below L-5 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Pendulous Abdomen Design, Shoulder Straps, Sta	\$ 52.15	Purchase
L0626	Lumbar Orthosis, Sagittal Control, With Rigid Posterior Panel(S), Posterior Extends From L-1 To Below L-5 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Padding, Stays, Shoulder Str		Purchase
L0627	Lumbar Orthosis, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From L-1 To Below L-5 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Padding, Shoulde	\$ 443.92	Purchase
L0628	Lumbar-Sacral Orthosis, Flexible, Provides Lumbo-Sacral Support, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Stays, Shoulder	\$ 79.40	Purchase
L0629	Lumbar-Sacral Orthosis, Flexible, Provides Lumbo-Sacral Support, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Stays, Shoulder	Price By Report	
L0630	Lumbar-Sacral Orthosis, Sagittal Control, With Rigid Posterior Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Includ	\$ 174.89	Purchase
L0631	Lumbar-Sacral Orthosis, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, M	\$ 1,073.31	Purchase
L0632	Lumbar-Sacral Orthosis, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, M	Price By Report	
L0633	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Posterior Frame/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panels, Produces Intracavitary Pressure To Reduce Load On I	\$ 309.70	Purchase

Code	Description	Fee	Purchase or Rental
L0634	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Posterior Frame/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panel(S), Produces Intracavitary Pressure To Re	Price By Report	
L0635	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, Lumbar Flexion, Rigid Posterior Frame/Panel(S), Lateral Articulating Design To Flex The Lumbar Spine, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid L	\$ 923.76	Purchase
L0636	Lumbar Sacral Orthosis, Sagittal-Coronal Control, Lumbar Flexion, Rigid Posterior Frame/Panels, Lateral Articulating Design To Flex The Lumbar Spine, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid L	\$ 1,607.53	Purchase
L0637	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Anterior And Posterior Frame/Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panels, Produces Intracavitary Pressure To Re	\$ 1,117.87	Purchase
L0638	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Anterior And Posterior Frame/Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panels, Produces Intracavitary Pressure To Re	\$ 1,421.58	Purchase
L0639	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, Rigid Shell(S)/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Anterior Extends From Symphysis Pubis To Xyphoid, Produces Intracavitary Pressure To Reduce Load On The Intervert	\$ 1,082.21	Purchase
L0640	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, Rigid Shell(S)/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Anterior Extends From Symphysis Pubis To Xyphoid, Produces Intracavitary Pressure To Reduce Load On The Intervert	\$ 1,127.84	Purchase
L0641	Lumbar Orthosis, Sagittal Control, With Rigid Posterior Panel(S), Posterior Extends From L-1 To Below L-5 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Padding, Stays, Shoulder Str	\$ 73.78	Purchase
L0642	Lumbar Orthosis, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From L-1 To Below L-5 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Include Padding, Shoulde	\$ 389.11	Purchase
L0643	Lumbar-Sacral Orthosis, Sagittal Control, With Rigid Posterior Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, May Includ	\$ 137.96	Purchase
L0648	Lumbar-Sacral Orthosis, Sagittal Control, With Rigid Anterior And Posterior Panels, Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Produces Intracavitary Pressure To Reduce Load On The Intervertebral Discs, Includes Straps, Closures, M	\$ 971.79	Purchase
L0649	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Posterior Frame/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panels, Produces Intracavitary Pressure To Reduce Load On I	\$ 244.31	Purchase
L0650	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, With Rigid Anterior And Posterior Frame/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Lateral Strength Provided By Rigid Lateral Frame/Panel(S), Produces Intracavitary Pressure To Re	\$ 1,038.72	Purchase
L0651	Lumbar-Sacral Orthosis, Sagittal-Coronal Control, Rigid Shell(S)/Panel(S), Posterior Extends From Sacrococcygeal Junction To T-9 Vertebra, Anterior Extends From Symphysis Pubis To Xyphoid, Produces Intracavitary Pressure To Reduce Load On The Intervert	\$ 934.85	Purchase
L0700	Cervical-Thoracic-Lumbar-Sacral-Orthoses (Ctlso), Anterior-Posterior-Lateral Control, Molded To Patient Model, (Minerva Type)	\$ 1,973.80	Purchase
L0710	Ctlso, Anterior-Posterior-Lateral-Control, Molded To Patient Model, With Interface Material, (Minerva Type)	\$ 2,303.28	Purchase
L0810	Halo Procedure, Cervical Halo Incorporated Into Jacket Vest	\$ 2,600.67	Purchase
L0820	Halo Procedures, Cervical Halo Incorporated Into Plaster Body Jacket	\$ 2,249.90	Purchase
L0830	Halo Procedures, Cervical Halo Incorporated Into Milwaukee Type Orthosis	\$ 3,026.27	Purchase
L0859	Addition To Halo Procedure, Magnetic Resonance Image Compatible Systems, Rings And Pins, Any Material	\$ 1,567.58	Purchase
	Addition To Halo Procedure, Replacement Liner/Interface Material	\$ 224.90	Purchase
L0861 L0970	Tlso, Corset Front	\$ 147.07	Purchase

Code	Description	Fee	Purchase or Rental
L0974	Tiso, Full Corset	\$ 172.78	Purchase
L0976	Lso, Full Corset	\$ 195.79	Purchase
L0978	Axillary Crutch Extension	\$ 185.77	Purchase
L0980	Peroneal Straps, Prefabricated, Off-The-Shelf, Pair		Purchase
L0982	Stocking Supporter Grips, Prefabricated, Off-The-Shelf, Set Of Four (4)	\$ 15.71	Purchase
L0984	Protective Body Sock, Prefabricated, Off-The-Shelf, Each		Purchase
L0999	Addition To Spinal Orthosis, Not Otherwise Specified	\$ 378.49	Purchase
L1000	Cervical-Thoracic-Lumbar-Sacral (Ctlso) (Milwaukee), Inclusive Of Furnishing Initial Orthoses, Including Model	\$ 2,283.18	Purchase
L1001	Cervical Thoracic Lumbar Sacral Orthosis, Immobilizer, Infant Size, Prefabricated, Includes Fitting And Adjustment	Price By Report	
L1005	Tension Based Scoliosis Orthosis And Accessory Pads, Includes Fitting And Adjustment	\$ 3,339.69	Purchase
L1010	Additions To Cervical-Thoracic-Lumbar-Sacral Orthoses (Ctlso) Or Scoliosis Orthoses, Axilla Sling	\$ 64.77	Purchase
L1020	Additions To Ctlso Or Scoliosis Orthoses, Kyphosis Pad	\$ 83.42	Purchase
L1025	Addition To Ctlso Or Scoliosis Orthosis, Kyphosis Pad, Floating	\$ 120.34	Purchase
L1030	Additions To Ctlso Or Scoliosis Orthoses, Lumbar Bolster Pad	\$ 61.39	Purchase
L1040	Additions To Ctlso Or Scoliosis Orthoses, Lumbar Or Lumbar Rib Pad	\$ 72.72	Purchase
L1050	Additions To Ctlso Or Scoliosis Orthoses, Sternal Pad	•	Purchase
L1060	Additions To Ctlso Or Scoliosis Orthoses, Thoracic Pad		Purchase
L1070	Additions To Ctlso Or Scoliosis Orthoses, Trapeze Sling	\$ 86.84	Purchase
L1080	Additions To Ctlso Or Scoliosis Orthoses, Outrigger	\$ 68.62	Purchase
L1085	Addition To Ctlso Or Scoliosis Orthosis, Outrigger, Bilateral With Vertical Extensions	\$ 148.55	Purchase
L1090	Additions To Ctlso Or Scoliosis Orthoses, Lumbar Sling	\$ 95.55	Purchase
L1100	Additions To Ctlso Or Scoliosis Orthoses, Ring Flange, Plastic Or Leather	\$ 153.48	Purchase
L1110	Additions To Ctlso Or Scoliosis Orthoses, Ring Flange, Plastic Or Leather, Molded To Patient Model	\$ 246.48	Purchase
L1120	Additions To Ctlso Or Sio, Scoliosis Orthoses, Covers For Upright, Each	\$ 41.45	Purchase
L1200	Thoracic-Lumbar-Sacal-Orthoses (Tlso), Inclusive Of Furnishing Initial Orthosis Only		Purchase
L1210	Additions To Tlso, (Low Profile) Lateral Thoracic Extension	\$ 325.23	Purchase
L1210	Additions To Tiso, (Low Profile) Lateral Thoracic Extension  Additions To Tiso, (Low Profile) Anterior Thoracic Extension		Purchase
L1230	Additions To Tiso, (Low Profile) Milwaukee Type Superstructure	\$ 729.21	Purchase
L1230	Addition To Tiso (Low Profile), Lumbar Derotation Pad	\$ 72.39	Purchase
L1250	Addition To Tiso (Low Profile), Anterior Asis Pad		Purchase
L1260	· · ·		Purchase
L1200	Addition To Tlso (Low Profile), Anterior Thoracic Derotation Pad  Addition To Tlso (Low Profile), Abdominal Pad		Purchase
L1270	Addition To Tiso (Low Profile), Abdominal Pad  Addition To Tiso (Low Profile), Rib Gusset (Elastic), Each		Purchase
L1280	Addition To Tiso (Low Profile), Rib Gusset (Elastic), Each		Purchase
	· · ·	·	
L1300	Other Scoliosis Procedures, Body Jacket Molded To Patient Model		Purchase
L1310	Other Scoliosis Procedures, Post-Operative Body Jacket	\$ 2,121.46	Purchase
L1320	Thoracic, Pectus Carinatum Orthosis, Sternal Compression, Rigid Circumferential Frame With Anterior And Posterior Rigid Pads, Custom Fabricated	Price By Report	
L1499	Spinal Orthosis, Not Otherwise Specified	Price By Report	
L1600	Hip Orthosis, Abduction Control Of Hip Joints, Flexible, Frejka Type With Cover, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise	\$ 127.19	Purchase
L1610	Customized To Fit A Specific Patient By An Inidividual With Expertise  Hip Orthosis, Abduction Control Of Hip Joints, Flexible, (Frejka Cover Only),  Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise	\$ 42.37	Purchase
L1620	Customized To Fit A Specific Patient By An Individual With Expertise  Hip Orthosis, Abduction Control Of Hip Joints, Flexible, (Pavlik Harness), Prefabricated  Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To	\$ 124.90	Purchase
L1630	Fit A Specific Patient By An Individual With Expertise  Hip Orthosis, Abduction Control Of Hip Joints, Semi-Flexible (Von Rosen Type), Custom-Februard	\$ 163.53	Purchase
L1640	Fabricated  Hip Orthosis, Abduction Control Of Hip Joints, Static, Pelvic Band Or Spreader Bar, Thigh Cuffs, Custom Eabricated	\$ 546.37	Purchase
L1650	Thigh Cuffs, Custom-Fabricated  Hip Orthosis, Abduction Control Of Hip Joints, Static, Adjustable, (Ilfled Type),  Prefabricated, Includes Fitting And Adjustment	\$ 251.79	Purchase
L1652	Prefabricated, Includes Fitting And Adjustment  Hip Orthosis, Bilateral Thigh Cuffs With Adjustable Abductor Spreader Bar, Adult Size,  Prefabricated, Includes Fitting And Adjustment, Any Type	\$ 371.95	Purchase
1.4000	Prefabricated, Includes Fitting And Adjustment, Any Type  Hip Orthosis, Abduction Control Of Hip Joints, Static, Plastic, Prefabricated, Includes	ф 450.51	Durch o c
L1660	Fitting And Adjustment	\$ 159.54	Purchase

Code	Description	Fee	Purchase or Rental
L1680	Hip Orthosis, Abduction Control Of Hip Joints, Dynamic, Pelvic Control, Adjustable Hip Motion Control, Thigh Cuffs (Rancho Hip Action Type), Custom Fabricated	\$ 1,175.87	Purchase
	Hip Orthosis, Bilateral Hip Joints And Thigh Cuffs, Adjustable Flexion, Extension,		
L1681	Abduction Control Of Hip Joint, Postoperative Hip Abduction Type, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A	Price By Report	
	Specific Patient By An Individual With Expertise		
1.4605	Hip Orthosis, Abduction Control Of Hip Joint, Postoperative Hip Abduction Type, Custom	\$ 1,147.94	Durahasa
L1685	Fabricated  Hip Orthosis, Abduction Control Of Hip Joint, Postoperative Hip Abduction Type,	\$ 1,147.94	Purchase
L1686	Prefabricated, Includes Fitting And Adjustment	\$ 992.22	Purchase
L1690	Combination, Bilateral, Lumbo-Sacral, Hip, Femur Orthosis Providing Adduction And Internal Rotation Control, Prefabricated, Includes Fitting And Adjustment	\$ 2,084.24	Purchase
L1700	Legg Perthes Orthosis, (Toronto Type), Custom-Fabricated	\$ 1,473.78	Purchase
L1710	Legg Perthes Orthosis, (Newington Type), Custom Fabricated	\$ 1,725.21	Purchase
L1720	Legg Perthes Orthosis, Trilateral, (Tachdijan Type), Custom-Fabricated	\$ 1,271.69	Purchase
_1730	Legg Perthes Orthosis, (Scottish Rite Type), Custom-Fabricated	\$ 1,094.09	Purchase
L1755	Legg Perthes Orthosis, (Patten Bottom Type), Custom-Fabricated	\$ 1,527.95	Purchase
L1810	Knee Orthosis, Elastic With Joints, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 94.12	Purchase
L1812	Knee Orthosis, Elastic With Joints, Prefabricated, Off-The-Shelf	\$ 94.83	Purchase
L1820	Knee Orthosis, Elastic With Condylar Pads And Joints, With Or Without Patellar Control, Prefabricated, Includes Fitting And Adjustment	\$ 132.20	Purchase
L1830	Knee Orthosis, Immobilizer, Canvas Longitudinal, Prefabricated, Off-The-Shelf	\$ 89.03	Purchase
L1831	Knee Orthosis, Locking Knee Joint(S), Positional Orthosis, Prefabricated, Includes Fitting And Adjustment	\$ 307.11	Purchase
L1832	Knee Orthosis, Adjustable Knee Joints (Unicentric Or Polycentric), Positional Orthosis, Rigid Support, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 566.77	Purchase
L1833	Knee Orthosis, Adjustable Knee Joints (Unicentric Or Polycentric), Positional Orthosis, Rigid Support, Prefabricated, Off-The Shelf	\$ 612.13	Purchase
L1834	Knee Orthosis, Without Knee Joint, Rigid, Custom-Fabricated	\$ 791.36	Purchase
L1836	Knee Orthosis, Rigid, Without Joint(S), Includes Soft Interface Material, Prefabricated, Off-The-Shelf	\$ 128.92	Purchase
L1840	Knee Orthosis, Derotation, Medial-Lateral, Anterior Cruciate Ligament, Custom Fabricated	\$ 887.37	Purchase
L1843	Knee Orthosis, Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Prefabricated Item That Has Been Trimmed, Bent, Molded,	\$ 967.12	Purchase
L1844	Knee Orthosis, Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Custom Fabricated	\$ 1,732.28	Purchase
L1845	Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Prefabricated Item That Has Been Trimmed, Bent, Molded,	\$ 786.95	Purchase
L1846	Knee Orthosis, Double Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Custom Fabricated	\$ 1,046.30	Purchase
L1847	Knee Orthosis, Double Upright With Adjustable Joint, With Inflatable Air Support Chamber(S), Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 600.15	Purchase
L1848	Knee Orthosis, Double Upright With Adjustable Joint, With Inflatable Air Support Chamber(S), Prefabricated, Off-The-Shelf	\$ 600.15	Purchase
L1850	Knee Orthosis, Swedish Type, Prefabricated, Off-The-Shelf	\$ 265.14	Purchase
L1851	Knee Orthosis (Ko), Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Prefabricated, Off-The-Shelf	\$ 866.87	Purchase
L1852	Knee Orthosis (Ko), Double Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/Valgus Adjustment, Prefabricated, Off-The-Shelf	\$ 813.56	Purchase
L1860	Knee Orthosis, Modification Of Supracondylar Prosthetic Socket, Custom-Fabricated (Sk)	\$ 1,035.59	Purchase
L1900	Ankle Foot Orthosis, Spring Wire, Dorsiflexion Assist Calf Band, Custom-Fabricated	\$ 283.91	Purchase

Code	Description	Fee		Purchase or Rental
L1902	Ankle Orthosis, Ankle Gauntlet Or Similar, With Or Without Joints, Prefabricated, Off-The-Shelf	\$	74.42	Purchase
L1904	Ankle Orthosis, Ankle Gauntlet Or Similar, With Or Without Joints, Custom Fabricated	\$	453.82	Purchase
L1906	Ankle Foot Orthosis, Multiligamentous Ankle Support, Prefabricated, Off-The-Shelf	\$	149.48	Purchase
L1907	Ankle Orthosis, Supramalleolar With Straps, With Or Without Interface/Pads, Custom Fabricated	\$	606.46	Purchase
L1910	Ankle Foot Orthosis, Posterior, Single Bar, Clasp Attachment To Shoe Counter, Prefabricated, Includes Fitting And Adjustment	\$	260.92	Purchase
L1920	Ankle Foot Orthosis, Single Upright With Static Or Adjustable Stop (Phelps Or Perlstein Type), Custom-Fabricated	\$	424.35	Purchase
L1930	Ankle Foot Orthosis, Plastic Or Other Material, Prefabricated, Includes Fitting And Adjustment	\$	240.69	Purchase
L1932	Afo, Rigid Anterior Tibial Section, Total Carbon Fiber Or Equal Material, Prefabricated, Includes Fitting And Adjustment	\$	961.77	Purchase
L1940	Ankle Foot Orthosis, Plastic Or Other Material, Custom-Fabricated	\$	461.02	Purchase
L1945	Ankle Foot Orthosis, Plastic, Rigid Anterior Tibial Section (Floor Reaction), Custom- Fabricated	\$	887.91	Purchase
L1950	Ankle Foot Orthosis, Spiral, (Institute Of Rehabilitative Medicine Type), Plastic, Custom- Fabricated	\$	777.73	Purchase
L1951	Ankle Foot Orthosis, Spiral, (Institute Of Rehabilitative Medicine Type), Plastic Or Other Material, Prefabricated, Includes Fitting And Adjustment	\$	905.19	Purchase
L1960	Ankle Foot Orthosis, Posterior Solid Ankle, Plastic, Custom-Fabricated	\$	516.73	Purchase
L1970	Ankle Foot Orthosis, Plastic With Ankle Joint, Custom-Fabricated	\$	696.89	Purchase
L1971	Ankle Foot Orthosis, Plastic Or Other Material With Ankle Joint, Prefabricated, Includes Fitting And Adjustment	\$	505.22	Purchase
L1980	Ankle Foot Orthosis, Single Upright Free Plantar Dorsiflexion, Solid Stirrup, Calf Band/Cuff (Single Bar Ïbkï Orthosis), Custom-Fabricated	\$	381.89	Purchase
L1990	Ankle Foot Orthosis, Double Upright Free Plantar Dorsiflexion, Solid Stirrup, Calf Band/Cuff (Double Bar Ïbkï Orthosis), Custom-Fabricated	\$	430.18	Purchase
L2000	Knee Ankle Foot Orthosis, Single Upright, Free Knee, Free Ankle, Solid Stirrup, Thigh And Calf Bands/Cuffs (Single Bar Ïakï Orthosis), Custom-Fabricated	\$	1,014.20	Purchase
L2005	Knee Ankle Foot Orthosis, Any Material, Single Or Double Upright, Stance Control, Automatic Lock And Swing Phase Release, Any Type Activation, Includes Ankle Joint, Any Type, Custom Fabricated	\$	4,425.50	Purchase
L2006	Knee Ankle Foot Device, Any Material, Single Or Double Upright, Swing And Stance Phase Microprocessor Control With Adjustability, Includes All Components (E.G., Sensors, Batteries, Charger), Any Type Activation, With Or Without Ankle Joint(S), Custom Fabricated	\$	33,821.95	Purchase
L2010	Knee Ankle Foot Orthosis, Single Upright, Free Ankle, Solid Stirrup, Thigh And Calf Bands/Cuffs (Single Bar Ïakï Orthosis), Without Knee Joint, Custom-Fabricated	\$	1,044.06	Purchase
L2020	Knee Ankle Foot Orthosis, Double Upright, Free Ankle, Solid Stirrup, Thigh And Calf Bands/Cuffs (Double Bar Ïakï Orthosis), Custom-Fabricated	\$	1,126.87	Purchase
L2030	Knee Ankle Foot Orthosis, Double Upright, Free Ankle, Solid Stirrup, Thigh And Calf Bands/Cuffs, (Double Bar Ïakï Orthosis), Without Knee Joint, Custom Fabricated	\$	977.66	Purchase
L2034	Knee Ankle Foot Orthosis, Full Plastic, Single Upright, With Or Without Free Motion Knee, Medial Lateral Rotation Control, With Or Without Free Motion Ankle, Custom Fabricated	\$	2,243.24	Purchase
L2035	Knee Ankle Foot Orthosis, Full Plastic, Static (Pediatric Size), Without Free Motion Ankle, Prefabricated, Includes Fitting And Adjustment	\$	180.77	Purchase
L2036	Knee Ankle Foot Orthosis, Full Plastic, Double Upright, With Or Without Free Motion Knee, With Or Without Free Motion Ankle, Custom Fabricated	\$	1,898.58	Purchase
L2037	Knee Ankle Foot Orthosis, Full Plastic, Single Upright, With Or Without Free Motion Knee, With Or Without Free Motion Ankle, Custom Fabricated	\$	1,552.71	Purchase
L2038	Knee Ankle Foot Orthosis, Full Plastic, With Or Without Free Motion Knee, Multi-Axis Ankle, Custom Fabricated	\$	1,379.80	Purchase
L2040	Hip Knee Ankle Foot Orthosis, Torsion Control, Bilateral Rotation Straps, Pelvic Band/Belt, Custom Fabricated	\$	215.06	Purchase
L2050	Hip Knee Ankle Foot Orthosis, Torsion Control, Bilateral Torsion Cables, Hip Joint, Pelvic Band/Belt, Custom-Fabricated	\$	508.64	Purchase
L2060	Hip Knee Ankle Foot Orthosis, Torsion Control, Bilateral Torsion Cables, Ball Bearing Hip Joint, Pelvic Band/ Belt, Custom-Fabricated	\$	571.18	Purchase
L2070	Hip Knee Ankle Foot Orthosis, Torsion Control, Unilateral Rotation Straps, Pelvic Band/Belt, Custom Fabricated  Hip Knee Ankle Foot Orthosis, Torsion Control, Unilateral Torsion Cable, Hip Joint, Pelvic	\$	129.79	Purchase

Code	Description	Fee	Purchase or Rental
L2090	Hip Knee Ankle Foot Orthosis, Torsion Control, Unilateral Torsion Cable, Ball Bearing Hip Joint, Pelvic Band/ Belt, Custom-Fabricated	\$ 470.44	Purchase
L2106	Ankle Foot Orthosis, Fracture Orthosis, Tibial Fracture Cast Orthosis, Thermoplastic Type Casting Material, Custom-Fabricated	\$ 656.17	Purchase
L2108	Ankle Foot Orthosis, Fracture Orthosis, Tibial Fracture Cast Orthosis, Custom-Fabricated	\$ 1,174.20	Purchase
L2112	Ankle Foot Orthosis, Fracture Orthosis, Tibial Fracture Orthosis, Soft, Prefabricated, Includes Fitting And Adjustment	\$ 450.27	Purchase
L2114	Ankle Foot Orthosis, Fracture Orthosis, Tibial Fracture Orthosis, Semi-Rigid, Prefabricated, Includes Fitting And Adjustment	\$ 564.75	Purchase
L2116	Ankle Foot Orthosis, Fracture Orthosis, Tibial Fracture Orthosis, Rigid, Prefabricated, Includes Fitting And Adjustment	\$ 687.03	Purchase
L2126	Knee Ankle Foot Orthosis, Fracture Orthosis, Femoral Fracture Cast Orthosis, Thermoplastic Type Casting Material, Custom-Fabricated	\$ 1,297.76	Purchase
L2128	Knee Ankle Foot Orthosis, Fracture Orthosis, Femoral Fracture Cast Orthosis, Custom- Fabricated	\$ 1,654.85	Purchase
L2132	Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Soft, Prefabricated, Includes Fitting And Adjustment	\$ 1,006.63	Purchase
L2134	Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Semi-Rigid, Prefabricated, Includes Fitting And Adjustment	\$ 933.40	Purchase
L2136	Kafo, Fracture Orthosis, Femoral Fracture Cast Orthosis, Rigid, Prefabricated, Includes Fitting And Adjustment	\$ 1,282.80	Purchase
L2180	Addition To Lower Extremity Fracture Orthosis, Plastic Shoe Insert With Ankle Joints	\$ 147.18	Purchase
L2182	Addition To Lower Extremity Fracture Orthosis, Drop Lock Knee Joint	\$ 94.19	Purchase
L2184	Addition To Lower Extremity Fracture Orthosis, Limited Motion Knee Joint		Purchase
L2186	Addition To Lower Extremity Fracture Orthosis, Adjustable Motion Knee Joint, Lerman Type	\$ 173.97	
L2188	Addition To Lower Extremity Fracture Othosis, Quadrilateral Brim	\$ 289.03	Purchase
L2190	Addition To Lower Extremity Fracture Orthosis, Waist Belt	\$ 87.29	
L2192	Addition To Lower Extremity Fracture Orthosis, Hip Joint, Pelvic Band, Thigh Flange, And Pelvic Belt	\$ 344.11	
L2200	Additions To Lower Extremity, Limited Ankle Motion, Each Joint	\$ 59.09	Purchase
L2210	Addition To Lower Extremity, Dorsiflexion Assist (Plantar Flexion Resist), Each Joint	\$ 83.55	Purchase
L2220	Addition To Lower Extremity, Dorsiflexion And Plantar Flexion Assist/Resist, Each Joint	\$ 102.40	Purchase
L2230	Additions To Lower Extremity, Split Flat Caliper Stirrups And Plate Attachment	\$ 80.78	Purchase
L2232	Addition To Lower Extremity Orthosis, Rocker Bottom For Total Contact Ankle Foot Orthosis, For Custom Fabricated Orthosis Only	\$ 100.26	Purchase
L2240	Additions To Lower Extremity, Round Caliper And Plate Attach- Ment	\$ 80.72	Purchase
L2250	Additions To Lower Extremity, Foot Plate, Molded To Patient Model, Stirrup Attachment		Purchase
L2260	Additions To Lower Extremity, Reinforced Solid Stirrup (Scott-Craig Type)	\$ 221.22	Purchase
L2265	Addition To Lower Extremity, Long Tongue Stirrup		Purchase
L2270	Additions To Lower Extremity, Varus/Valgus Correction ("T") Strap, Padded/Lined Or Malleolus Pad	\$ 54.97	Purchase
L2275	Addition To Lower Extremity, Varus/Valgus Correction, Plastic Modification, Padded/Lined	\$ 138.87	Purchase
L2280	Additions To Lower Extremity, Molded Inner Boot	\$ 422.12	Purchase
L2300	Additions To Lower Extremity, Abduction Bar (Bilateral Hip Involvement), Jointed, Adjustable	\$ 250.99	Purchase
L2310	Additions To Lower Extremity, Abduction Bar-Straight	\$ 128.86	Purchase
L2320	Addition To Lower Extremity, Non-Molded Lacer, For Custom Fabricated Orthosis Only	\$ 253.40	Purchase
L2330	Addition To Lower Extremity, Lacer Molded To Patient Model, For Custom Fabricated Orthosis Only	\$ 403.46	Purchase
L2335	Addition To Lower Extremity, Anterior Swing Band	\$ 230.06	Purchase
L2340	Additions To Lower Extremity, Pre-Tibial Shell, Molded To Patient Model		Purchase
L2350	Additions To Lower Extremity, Prosthetic Type, (Bk) Socket, Molded To Patient Model, (Used For 'Ptb' 'Afo' Orthoses)	\$ 1,004.40	Purchase
L2360	Additions To Lower Extremity, Extended Steel Shank	\$ 55.49	Purchase
L2370	Addition To Lower Extremity, Patten Bottom	\$ 247.74	Purchase
L2375	Addition To Lower Extremity, Torsion Control, Ankle Joint And Half Solid Stirrup		Purchase
L2380	Addition To Lower Extremity, Torsion Control, Straight Knee Joint, Each Joint	\$ 158.42	Purchase
L2385	Addition To Lower Extremity, Straight Knee Joint, Heavy Duty, Each Joint	\$ 166.49	Purchase

Code	Description	Fee		Purchase or Rental
L2387	Addition To Lower Extremity, Polycentric Knee Joint, For Custom Fabricated Knee Ankle	\$	159.71	Purchase
L2390	Foot Orthosis, Each Joint  Addition To Lower Extremity, Offset Knee Joint, Each Joint	\$	140.86	Purchase
L2395	Addition To Lower Extremity, Offset Knee Joint, Learn Joint  Addition To Lower Extremity, Offset Knee Joint, Heavy Duty, Each Joint	\$	179.41	Purchase
L2397	Addition To Lower Extremity Orthosis, Suspension Sleeve	\$	120.05	Purchase
L2405	Addition To Knee Joint, Drop Lock, Each	\$	87.86	Purchase
L2415	Addition To Knee Lock With Integrated Release Mechanism (Bail, Cable, Or Equal), Any Material, Each Joint	\$	136.09	Purchase
L2425	Addition To Knee Joint, Disc Or Dial Lock For Adjustable Knee Flexion, Each Joint	\$	160.57	Purchase
L2430	Addition To Knee Joint, Ratchet Lock For Active And Progressive Knee Extension, Each	\$	149.60	Purchase
	Joint			
L2492	Addition To Knee Joint, Lift Loop For Drop Lock Ring	\$	123.23	Purchase
L2500	Additions To Lower Extremity, Thigh/Weight Bearing, Gulteal/ Ischial Weight Bearing, Ring	\$	304.46	Purchase
L2510	Additions To Lower Extremity, Thigh/Weight Bearing, Quadri- Lateral Brim, Molded To Patient Model	\$	701.01	Purchase
L2520	Additions To Lower Extremity, Thigh/Weight Bearing, Quadri- Lateral Brim, Custom Fitted	\$	475.81	Purchase
L2525	Addition To Lower Extremity, Thigh/Weight Bearing, Ischial Containment/Narrow M-L Brim Molded To Patient Model	\$	1,322.72	Purchase
L2526	Addition To Lower Extremity, Thigh/Weight Bearing, Ischial Containment/Narrow M-L Brim, Custom Fitted	\$	856.22	Purchase
L2530	Additions To Lower Extremity, Thigh-Weight Bearing, Lacer, Non-Molded	\$	302.34	Purchase
L2540	Additions To Lower Extremity, Thigh/Weight Bearing, Lacer, Molded To Patient Model	\$	463.10	Purchase
L2550	Additions To Lower Extremity, Thigh/Weight Bearing, High Roll Cuff	\$	369.57	Purchase
L2570	Addition To Lower Extremity, Pelvic Control, Hip Joint, Clevis Type Two Position Joint, Each	\$	459.68	Purchase
L2580	Addition To Lower Etremity, Pelvic Control, Pelvic Sling	\$	585.85	Purchase
L2600	Additions To Lower Extremity, Pelvic Control, Hip Joint, Clevis Type, Or Thrust Bearing, Free, Each	\$	215.23	Purchase
L2610	Additions To Lower Extremity, Pelvic Control, Hip Joint, Clevis Or Thrust Bearing, Lock, Each	\$	245.35	Purchase
L2620	Additions To Lower Extremity, Pelvic Control, Hip Joint, Heavy Duty, Each	\$	258.04	Purchase
L2622	Addition To Lower Extremity, Pelvic Control, Hip Joint, Adjustable Flexion, Each	\$	295.95	Purchase
L2624	Addition To Lower Extremity, Pelvic Control, Hip Joint, Adjustable Flexion, Extension, Abduction Control, Each	\$	319.58	Purchase
L2627	Addition To Lower Extremity, Pelvic Control, Plastic, Molded To Patient Model, Reciprocating Hip Joint And Cables	\$	2,205.90	Purchase
L2628	Addition To Lower Extremity, Pelvic Control, Metal Frame, Reciprocating Hip Joint And Cables	\$	2,155.83	Purchase
L2630	Additions To Lower Extremity, Pelvic Control, Band And Belt, Unilateral	\$	318.64	Purchase
L2640	Additions To Lower Extremity, Pelvic Control, Band And Belt, Bilateral	\$	313.28	Purchase
L2650	Additions To Lower Extremity, Pelvic And Thoracic Control, Gluteal Pad, Each	\$	115.81	Purchase
L2660	Additions To Lower Extremity, Thoracic Control, Thoracic Band	\$	239.82	Purchase
L2670	Additions To Lower Extremity, Thoracic Control, Paraspinal Uprights	\$	219.50	Purchase
L2680	Additions To Lower Extremity, Thoracic Control, Lateral Support Uprights	\$	201.36	Purchase
L2750 L2755	Addition To Lower Extremity Orthosis, Plating Chrome Or Nickel, Per Bar  Addition To Lower Extremity Orthosis, High Strength, Lightweight Material, All Hybrid Lamination/Prepreg Composite, Per Segment, For Custom Fabricated Orthosis Only	\$	131.66	Purchase Purchase
L2760	Additions To Lower Extremity Orthoses, Extension, Per Extension, Per Bar (For Lineal	\$	75.53	Purchase
	Adjustment For Growth)	· ·		
L2768 L2780	Orthotic Side Bar Disconnect Device, Per Bar Addition To Lower Extremity Orthosis, Non-Corrosive Finish, Per Bar	\$	140.45 63.09	Purchase Purchase
L2785	Addition To Lower Extremity Orthosis, Drop Lock Retainer, Each	\$	29.54	Purchase
L2795	Addition To Lower Extremity Orthosis, Knee Control, Full Kneecap	\$	79.21	Purchase
	Addition To Lower Extremity Orthosis, Knee Control, Knee Cap, Medial Or Lateral Pull,	\$	109.06	Purchase
L2800				
	For Use With Custom Fabricated Orthosis Only Addition To Lower Extremity Orthosis. Knee Control. Condylar Pad	\$	75.38	Purchase
L2800 L2810 L2820	Addition To Lower Extremity Orthosis, Knee Control, Condylar Pad Addition To Lower Extremity Orthosis, Soft Interface For Molded Plastic, Below Knee	\$ \$	75.38 107.94	Purchase Purchase
L2810	Addition To Lower Extremity Orthosis, Knee Control, Condylar Pad  Addition To Lower Extremity Orthosis, Soft Interface For Molded Plastic, Below Knee Section  Addition To Lower Extremity Orthosis, Soft Interface For Molded Plastic, Above Knee			
L2810 L2820	Addition To Lower Extremity Orthosis, Knee Control, Condylar Pad  Addition To Lower Extremity Orthosis, Soft Interface For Molded Plastic, Below Knee Section	\$	107.94	Purchase

Code	Description	Fee	Purchase or Rental
1.0064	Addition To Lower Extremity Joint, Knee Or Ankle, Concentric Adjustable Torsion Style	Drice Dr. Denert	
L2861	Mechanism For Custom Fabricated Orthotics Only, Each	Price By Report	
L2999	Lower Extremity Orthoses, Not Otherwise Specified	Price By Report	
L3000	Foot, Insert, Removable, Molded To Patient Model, "Ucb" Type, Berkeley Shell, Each	\$ 316.59	Purchase
L3001	Foot, Insert, Removable, Molded To Patient Model, Spenco, Each	\$ 138.01	Purchase
L3002	Foot, Insert, Removable, Molded To Patient Model, Plastazote Or Equal, Each	\$ 168.50	Purchase
L3003	Foot, Insert, Removable, Molded To Patient Model, Silicone Gel, Each	\$ 181.81	Purchase
L3010	Foot, Insert, Removable, Molded To Patient Model, Longitudinal Arch Support, Each	\$ 175.62	Purchase
L3020	Foot, Insert, Removable, Molded To Patient Model, Longitudinal/ Metatarsal Support, Each	\$ 199.96	Purchase
L3030	Foot, Insert, Removable, Formed To Patient Foot, Each	\$ 76.88	Purchase
L3031	Foot, Insert/Plate, Removable, Addition To Lower Extremity Orthosis, High Strength, Lightweight Material, All Hybrid Lamination/Prepreg Composite, Each	\$ 128.64	Purchase
L3040	Foot, Arch Support, Removable, Premolded, Longitudinal, Each	\$ 47.45	Purchase
L3050	Foot, Arch Support, Removable, Premolded, Metatarsal, Each	· ·	Purchase
L3060	Foot, Arch Support, Removable, Premolded, Longitudinal/ Metatarsal, Each	<del>  '                                   </del>	Purchase
L3070	Foot, Arch Support, Non-Removable Attached To Shoe, Longitudinal, Each	\$ 33.17	Purchase
L3080	Foot, Arch Support, Non-Removable Attached To Shoe, Metatarsal, Each	\$ 33.17	Purchase
L3090	Foot, Arch Support, Non-Removable Attached To Shoe, Longitudinal/Metatarsal, Each	ļ '	Purchase
L3100	Hallus-Valgus Night Dynamic Splint, Prefabricated, Off-The-Shelf	\$ 45.11	Purchase
L3140	Foot, Rotation Positioning Device, Including Shoe(S)		Purchase
L3150	Foot, Rotation Positioning Device, Without Shoe(S)	\$ 82.04	Purchase
L3160	Foot, Adjustable Shoe-Styled Positioning Device	Price By Report	i dionaso
L3161	Foot, Adductus Positioning Device, Adjustable	Price By Report	
L3170	Foot, Plastic, Silicone Or Equal, Heel Stabilizer, Prafabricated, Off-The-Shelf, Each	\$ 51.28	Purchase
L3201	Orthopedic Shoe, Oxford With Supinator Or Pronator, Infant	\$ 82.48	Purchase
L3201	Orthopedic Shoe, Oxford With Supinator Or Pronator, finant	\$ 102.77	Purchase
L3202	Orthopedic Shoe, Oxford With Supinator Or Pronator, Junior		ruiciiase
L3203 L3204	Orthopedic Shoe, Hightop With Supinator Or Pronator, Infant	Price By Report \$ 106.55	Purchase
L3204 L3206	Orthopedic Shoe, Hightop With Supinator Or Pronator, Child	\$ 72.08	Purchase
L3207	Orthopedic Shoe, Hightop With Supinator Or Pronator, United States Shoe, Hightop With Supinator Or Pronator, Junior	Price By Report	ruiciiase
L3207	Surgical Boot, Each, Infant	\$ 62.94	Purchase
L3209	Surgical Boot, Each, Child	\$ 38.40	Purchase
L3211	Surgical Boot, Each, Junior	Price By Report	i dicilase
L3211	Benesch Boot, Pair, Infant	\$ 98.99	Purchase
L3213	Benesch Boot, Pair, Child	ļ '	Purchase
L3214	Benesch Boot, Pair, Junior	\$ 98.99	Purchase
L3215	Orthopedic Footwear, Ladies Shoe, Oxford, Each	\$ 98.76	Purchase
L3216	Orthopedic Footwear, Ladies Shoe, Oxford, Lacif	· '	Purchase
L3217	Orthopedic Footwear, Ladies Shoe, Hightop, Depth Inlay, Each	Price By Report	i dicilase
L3217	Orthopedic Footwear, Mens Shoe, Oxford, Each	, , , , , , , , , , , , , , , , , , ,	Purchase
L3221	Orthopedic Footwear, Mens Shoe, Depth Inlay, Each		Purchase
L3222	Orthopedic Footwear, Mens Shoe, Hightop, Depth Inlay, Each		Purchase
L3224	Orthopedic Footwear, Woman'S Shoe, Oxford, Used As An Integral Part Of A Brace	\$ 59.01	Purchase
L3225	Orthosis) Orthopedic Footwear, Man'S Shoe, Oxford, Used As An Integral Part Of A Brace	\$ 76.07	Purchase
L3230	(Orthosis) Orthopedic Footwear, Custom Shoe, Depth Inlay, Each		Purchase
L3250	Orthopedic Footwear, Custom Molded Shoe, Removable Inner Mold, Prosthetic Shoe, Each	Price By Report	
L3251	Foot, Shoe Molded To Patient Model, Silicone Shoe, Each	Price By Report	
L3252	Foot, Shoe Molded To Patient Model, Plastazote (Or Similar), Custom Fabricated, Each	,	Purchase
L3253	Foot, Molded Shoe Plastazote (Or Similar) Custom Fitted, Each	\$ 61.88	Purchase
L3254	Non-Standard Size Or Width	Price By Report	
L3255	Non-Standard Size Or Length	Price By Report	
L3257	Orthopedic Footwear, Additional Charge For Split Size	\$ 226.13	Purchase
L3260	Surgical Boot/Shoe, Each	\$ 20.92	Purchase
L3265	Plastazote Sandal, Each	\$ 38.96	Purchase
L3300	Lift, Elevation, Heel, Tapered To Metatarsals, Per Inch	\$ 54.41	Purchase
	Lift Florestian Llock And Colo Niconrone Dev Inch	\$ 82.04	Purchase
L3310	Lift, Elevation, Heel And Sole, Neoprene, Per Inch	Ψ 02.0.	
L3310 L3320	Lift, Elevation, Heel And Sole, Neoprene, Per Inch		Purchase
			Purchase Purchase
L3320	Lift, Elevation, Heel And Sole, Cork, Per Inch	\$ 118.42	

Code	Description	Fee	Purchase or Rental
L3340	Heel Wedge, Sach	\$ 88.90	Purchase of Rental
L3350	Heel Wedge	\$ 23.04	Purchase
L3360	Sole Wedge, Outside Sole		Purchase
L3370	Sole Wedge, Between Sole		Purchase
L3380	Clubfoot Wedge		Purchase
L3390	Outflare Wedge		Purchase
L3400	Metatarsal Bar Wedge, Rocker		Purchase
L3410	Metatarsal Bar Wedge, Between Sole	\$ 96.91	Purchase
L3420	Full Sole And Heel Wedge, Between Sole	\$ 57.05	Purchase
L3430	Heel, Counter, Plastic Reinforced	\$ 167.22	Purchase
L3440	Heel, Counter, Leather Reinforced		Purchase
L3450	Heel, Sach Cushion Type	\$ 110.12	Purchase
L3455	Heel, New Leather, Standard	\$ 42.43	Purchase
L3460	Heel, New Rubber, Standard		Purchase
L3465	Heel, Thomas With Wedge	\$ 61.06	Purchase
L3470	Heel, Thomas Extended To Ball	\$ 65.06	Purchase
L3480	Heel, Pad And Depression For Spur	\$ 62.84	Purchase
L3485	Heel, Pad, Removable For Spur	\$ 13.38	Purchase
L3500	Orthopedic Shoe Addition, Insole, Leather	\$ 30.50	Purchase
L3510	Orthopedic Shoe Addition, Insole, Rubber	\$ 30.50	Purchase
L3520	Orthopedic Shoe Addition, Insole, Felt Covered With Leather	<u>'</u>	Purchase
L3530	Orthopedic Shoe Addition, Sole, Half	\$ 33.17	Purchase
L3540	Orthopedic Shoe Addition, Sole, Full	\$ 51.28	Purchase
L3550	Orthopedic Shoe Addition, Toe Tap Standard	\$ 9.32	Purchase
L3560	Orthopedic Shoe Addition, Toe Tap, Horseshoe	\$ 23.85	Purchase
L3570	Orthopedic Shoe Addition, Special Extension To Instep (Leather With Eyelets)	\$ 88.90	Purchase
L3580	Orthopedic Shoe Addition, Convert Instep To Velcro Closure	\$ 67.67	Purchase
L3590	Orthopedic Shoe Addition, Convert Firm Shoe Counter To Soft Counter		Purchase
L3595	Orthopedic Shoe Addition, March Bar	\$ 43.77	Purchase
L3600	Transfer Of An Orthosis From One Shoe To Another, Caliper Plate, Existing	\$ 79.60	Purchase
L3610	Transfer Of An Orthosis From One Shoe To Another, Caliper Plate, New	\$ 104.84	Purchase
L3620	Transfer Of An Orthosis From One Shoe To Another, Solid Stirrup, Existing	\$ 79.60	Purchase
L3630	Transfer Of An Orthosis From One Shoe To Another, Solid Stirrup, New	\$ 104.84	Purchase
L3640	Transfer Of An Orthosis From One Shoe To Another, Dennis Browne Splint (Riveton), Both Shoes	\$ 45.11	Purchase
L3649	Orthopedic Shoe, Modification, Addition Or Transfer, Not Otherwise Specified	Price By Report	
L3650	Shoulder Orthosis, Figure Of Eight Design Abduction Restrainer, Prefabricated, Off-The-Shelf	\$ 54.11	Purchase
L3660	Shoulder Orthosis, Figure Of Eight Design Abduction Restrainer, Canvas And Webbing, Prefabricated, Off-The-Shelf	\$ 122.38	Purchase
L3670	Shoulder Orthosis, Acromio/Clavicular (Canvas And Webbing Type), Prefabricated, Off-The-Shelf	\$ 103.15	Purchase
L3671	Shoulder Orthosis, Shoulder Joint Design, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 883.87	Purchase
L3674	Shoulder Orthosis, Abduction Positioning (Airplane Design), Thoracic Component And Support Bar, With Or Without Nontorsion Joint/Turnbuckle, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 1,122.53	Purchase
L3675	Shoulder Orthosis, Vest Type Abduction Restrainer, Canvas Webbing Type Or Equal, Prefabricated, Off-The-Shelf	\$ 172.14	Purchase
L3677	Shoulder Orthosis, Shoulder Joint Design, Without Joints, May Include Soft Interface, Straps, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	Price By Report	
L3678	Shoulder Orthosis, Shoulder Joint Design, Without Joints, May Include Soft Interface, Straps, Prefabricated, Off-The-Shelf	Price By Report	
L3702	Elbow Orthosis, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 283.24	Purchase
L3710	Elbow Orthosis, Elastic With Metal Joints, Prefabricated, Off-The-Shelf	\$ 116.74	Purchase
L3720	Elbow Orthosis, Double Upright With Forearm/Arm Cuffs, Free Motion, Custom-Fabricated	\$ 596.66	Purchase
L3730	Elbow Orthosis, Double Upright With Forearm/Arm Cuffs, Extension/ Flexion Assist, Custom-Fabricated	\$ 851.30	Purchase
L3740	Elbow Orthosis, Double Upright With Forearm/Arm Cuffs, Adjustable Position Lock With Active Control, Custom-Fabricated	\$ 1,009.30	Purchase
L3760	Elbow Orthosis (Eo), With Adjustable Position Locking Joint(S), Prefabricated, Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 458.75	Purchase

Code	Description	Fee	Purchase or Rental
L3761	Elbow Orthosis (Eo), With Adjustable Position Locking Joint(S), Prefabricated, Off-The-Shelf	\$ 474.25	Purchase
L3762	Elbow Orthosis, Rigid, Without Joints, Includes Soft Interface Material, Prefabricated, Off-The-Shelf	\$ 98.62	Purchase
L3763	Elbow Wrist Hand Orthosis, Rigid, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 658.93	Purchase
L3764	Elbow Wrist Hand Orthosis, Includes One Or More Nontorsion Joints, Elastic Bands, Turnbuckles, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 729.18	Purchase
L3765	Elbow Wrist Hand Finger Orthosis, Rigid, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 1,217.66	Purchase
L3766	Elbow Wrist Hand Finger Orthosis, Includes One Or More Nontorsion Joints, Elastic Bands, Turnbuckles, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 1,289.41	Purchase
L3806	Wrist Hand Finger Orthosis, Includes One Or More Nontorsion Joint(S), Turnbuckles, Elastic Bands/Springs, May Include Soft Interface Material, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 445.59	Purchase
L3807	Wrist Hand Finger Orthosis, Without Joint(S), Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 229.34	Purchase
L3808	Wrist Hand Finger Orthosis, Rigid Without Joints, May Include Soft Interface Material; Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 355.99	Purchase
L3809	Wrist Hand Finger Orthosis, Without Joint(S), Prefabricated, Off-The-Shelf, Any Type	\$ 247.71	Purchase
L3891	Addition To Upper Extremity Joint, Wrist Or Elbow, Concentric Adjustable Torsion Style Mechanism For Custom Fabricated Orthotics Only, Each	Price By Report	
L3900	Wrist Hand Finger Orthosis, Dynamic Flexor Hinge, Reciprocal Wrist Extension/ Flexion, Finger Flexion/Extension, Wrist Or Finger Driven, Custom-Fabricated	\$ 1,221.98	Purchase
L3901	Wrist Hand Finger Orthosis, Dynamic Flexor Hinge, Reciprocal Wrist Extension/ Flexion, Finger Flexion/Extension, Cable Driven, Custom-Fabricated	\$ 1,944.46	Purchase
L3904	Wrist Hand Finger Orthosis, External Powered, Electric, Custom-Fabricated	\$ 3,687.40	Purchase
L3905	Wrist Hand Orthosis, Includes One Or More Nontorsion Joints, Elastic Bands, Turnbuckles, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 972.77	Purchase
L3906	Wrist Hand Orthosis, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 373.04	Purchase
L3908	Wrist Hand Orthosis, Wrist Extension Control Cock-Up, Non Molded, Prefabricated, Off- The-Shelf	\$ 54.65	Purchase
L3912	Hand Finger Orthosis (Hfo), Flexion Glove With Elastic Finger Control, Prefabricated, Off- The-Shelf	\$ 86.52	Purchase
L3913	Hand Finger Orthosis, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 265.66	Purchase
L3915	Wrist Hand Orthosis, Includes One Or More Nontorsion Joint(S), Elastic Bands, Turnbuckles, May Include Soft Interface, Straps, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Indiv	\$ 504.81	Purchase
L3916	Wrist Hand Finger Orthosis, Includes One Or More Nontorsion Joint(S), Elastic Bands	\$ 526.66	Purchase
L3917	Hand Orthosis, Metacarpal Fracture Orthosis, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 103.59	Purchase
L3918	Hand Finger Orthosis, Metacarpal Fracture Orthosis, Prefabricated, Off-The- Shelf	\$ 104.62	Purchase
L3919	Hand Orthosis, Without Joints, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 265.66	Purchase
L3921	Hand Finger Orthosis, Includes One Or More Nontorsion Joints, Elastic Bands, Turnbuckles, May Include Soft Interface, Straps, Custom Fabricated, Includes Fitting And Adjustment	\$ 305.00	Purchase
L3923	Hand Finger Orthosis, Without Joints, May Include Soft Interface, Straps, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$ 79.35	Purchase
L3924	Hand Finger Orthosis, Without Joints, May Include Soft Interface, Straps, And Adjustable	\$ 85.70	Purchase
L3925	Finger Orthosis, Proximal Interphalangeal (Pip)/Distal Interphalangeal (Dip), Non Torsion Joint/Spring, Extension/Flexion, May Include Soft Interface Material, Prefabricated, Off-The-Shelf	\$ 48.14	Purchase
L3927	Finger Orthosis, Proximal Interphalangeal (Pip)/Distal Interphalangeal (Dip), Without Joint/Spring, Extension/Flexion (E.G. Static Or Ring Type), May Include Soft Interface Material, Prefabricated, Off-The-Shelf	\$ 34.30	Purchase

Hand Finger Orthosis, Includes One Or More Notrosion Join(S). Tumbuckles, Elastic 13929 Bandsörpings, May Includes Soft Interface Menieral, Straps, Prefabricated Item That Has 1391 Benn Trimmed, Bennt, Molded, Assembled, Or Otherwise Customized To Fit A Specific 1392 Prefabricated, Includes Printing, And Adjustment 13931 Prefabricated, Includes Printing, And Adjustment 13931 Elastic Bandsörpings, May Include Soft Interface Material, Straps, Prefabricated, Includes Fitting, And Adjustment 13932 Fitting And Adjustment 13933 Fitting And Adjustment 13933 Fitting And Adjustment 13935 Fitting And Adjustment 13935 Fitting And Adjustment 13936 Includes Fitting And Adjustment 13936 Shoulder Elbow With Hand Orthosis, Anticicino Positioning, Ariplane Design, 13940 Price By Report 13940 Shoulder Elbow With Hand Orthosis, Anticicino Positioning, Ariplane Design, 13940 Prefabricated, Includes Fitting And Adjustment 13940 Shoulder Elbow With Hand Orthosis, Anticicino Positioning, Eribs Palsey Design, 13940 Prefabricated, Includes Fitting And Adjustment 13940 Shoulder Elbow With Hand Orthosis, Anticicino Positioning, Eribs Palsey Design, 13940 Prefabricated Includes Fitting And Adjustment 13941 Notrobiosis of Straps, Custom Fabricated Includes Fitting And Adjustment 13941 Notrobiosis on John Support Barr, Without Joins, May Include Soft Interface, Straps, Custom 13947 Notrobiosis on Joine, Elastic Bands, Tumbuckles, May Include Soft Interface, Straps, Custom 13947 Notrobiosis on Joine, Elastic Bands, Tumbuckles, May Include Soft Interface, Straps, 13943 Shoulder Elbow With Hand Orthosis, Abduction Positioning (Airplane Design), Thoracic 13947 Notrobiosis on Joine, Elastic Bands, Tumbuckles, May Include Soft Interface, Straps, 13945 Shoulder Elbow With Hand Orthosis, Abduction Positioning (Airplane Design), 13945 Shoulder Elbow With Hand Orthosis, Abduction Positioning (Airplane Design), 13945 Shoulder Elbow With Ha	or Rental
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ETODO INODIADO METAL DANO NAIO-AIO, ORI O DISTA MICH	
L4100 Replace Leather Cuff Kafo, Proximal Thigh \$ 100.67 Purchase	

L4130 L4205 L4210	Replace Leather Cuff Kafo-Afo, Calf Or Distal Thigh Replace Pretibial Shell Repair Of Orthotic Device, Labor Component, Per 15 Minutes	\$ \$		Purchase Purchase
L4205 L4210	Repair Of Orthotic Device, Labor Component, Per 15 Minutes			
L4210		\$	22 51	
1.4250				Purchase
	Repair Of Orthotic Device, Repair Or Replace Minor Parts	\$	48.05	Purchase
	Ankle Control Orthosis, Stirrup Style, Rigid, Includes Any Type Interface (E.G., Pneumatic, Gel), Prefabricated, Off-The-Shelf	\$	83.33	Purchase
L4360	Walking Boot, Pneumatic And/Or Vacuum, With Or Without Joints, With Or Without Interface Material, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$	278.54	Purchase
	Walking Boot, Pneumatic And/Or Vacuum, With Or Without Joints, With Or Without Interface Material, Prefabricated, Off-The-Shelf	\$	300.85	Purchase
L4370	Pneumatic Full Leg Splint, Prefabricated, Off-The-Shelf	\$	199.84	Purchase
L4386	Walking Boot, Non-Pneumatic, With Or Without Joints, With Or Without Interface Material, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific Patient By An Individual With Expertise	\$	159.80	Purchase
	Walking Boot, Non-Pneumatic, With Or Without Joints, With Or Without Interface Material, Prefabricated, Off-The-Shelf	\$	172.58	Purchase
	Replacement, Soft Interface Material, Static Afo	\$	24.13	
L4394	Replace Soft Interface Material, Foot Drop Splint	\$	17.59	Purchase
L4396	Static Or Dynamic Ankle Foot Orthosis, Including Soft Interface Material, Adjustable For Fit, For Positioning, May Be Used For Minimal Ambulation, Prefabricated Item That Has Been Trimmed, Bent, Molded, Assembled, Or Otherwise Customized To Fit A Specific	\$	166.10	Purchase
	Static Or Dynamic Ankle Foot Orthosis, Including Soft Interface Material, Adjustable For Fit, For Positioning, May Be Used For Minimal Ambulation, Prefabricated, Off-The-Shelf	\$	179.40	Purchase
L4398	Foot Drop Splint, Recumbent Positioning Device, Prefabricated, Off-The-Shelf	\$	79.19	Purchase
4	Ankle Foot Orthosis, Walking Boot Type, Varus/Valgus Correction, Rocker Bottom, Anterior Tibial Shell, Soft Interface, Custom Arch Support, Plastic Or Other Material, Includes Straps And Closures, Custom Fabricated	\$	1,483.49	Purchase
L5000	Partial Foot, Shoe Insert With Longitudinal Arch, Toe Filler	\$	501.81	Purchase
	Partial Foot, Molded Socket, Ankle Height, With Toe Filler	\$		Purchase
	Partial Foot, Molded Socket, Tibial Tubercle Height, With Toe Filler	\$	2,327.36	Purchase
L5050	Ankle, Symes, Molded Socket, Sach Foot	\$	2,559.74	Purchase
L5060	Ankle, Symes, Metal Frame, Molded Leather Socket, Articulated Ankle/Foot	\$	3,469.52	Purchase
L5100	Below Knee, Molded Socket, Shin, Sach Foot	\$	2,308.28	Purchase
	Below Knee, Plastic Socket, Joints And Thigh Lacer, Sach Foot	\$	3,918.29	Purchase
L3130	Knee Disarticulation (Or Through Knee), Molded Socket, External Knee Joints, Shin, Sach Foot	\$	3,999.19	Purchase
	Knee Disarticulation (Or Through Knee), Molded Socket, Bent Knee Configuration, External Knee Joints, Shin, Sach Foot	\$	4,404.15	Purchase
	Above Knee, Molded Socket, Single Axis Constant Friction Knee, Shin, Sach Foot	\$	3,396.53	Purchase
L5210	Above Knee, Short Prosthesis, No Knee Joint ("Stubbies"), With Foot Blocks, No Ankle Joints, Each	\$	2,689.21	Purchase
L5220	Above Knee, Short Prosthesis, No Knee Joint ("Stubbies"), With Articulated Ankle/Foot, Dynamically Aligned, Each Above Knee, For Proximal Femoral Focal Deficiency, Constant Friction Knee, Shin, Sach	\$		Purchase
L5230	Foot Hip Disarticulation, Canadian Type; Molded Socket, Hip Joint, Single Axis Constant	\$	5,215.10	Purchase
L5250	Friction Knee, Shin, Sach Foot  Hip Disarticulation, Canadian Type; Molded Socket, Hip Joint, Single Axis Constant Friction Knee, Shin, Sach Foot  Hip Disarticulation, Tilt Table Type; Molded Socket, Locking Hip Joint, Single Axis	\$	6,700.98	Purchase
L5270	Constant Friction Knee, Shin, Sach Foot Hemipelvectomy, Canadian Type; Molded Socket, Hip Joint, Single Axis Constant	\$	6,112.51	Purchase
L5280	Friction Knee, Shin, Sach Foot	\$	-	Purchase
	Below Knee, Molded Socket, Shin, Sach Foot, Endoskeletal System	\$	2,501.67	Purchase
L5312	Knee Disarticulation (Or Through Knee), Molded Socket, Single Axis Knee, Pylon, Sach Foot, Endoskeletal System  Above Knee Molded Socket Open End. Sock Endoskeletal System. Single Axis	\$	3,749.81	Purchase
15321	Above Knee, Molded Socket, Open End, Sach Foot, Endoskeletal System, Single Axis Knee	\$	3,648.66	Purchase
	Hip Disarticulation, Canadian Type, Molded Socket, Endoskeletal System, Hip Joint,	\$	5,760.10	Purchase
L5331	Single Axis Knee, Sach Foot	,		
L5331 L5341	Single Axis Knee, Sach Foot Hemipelvectomy, Canadian Type, Molded Socket, Endoskeletal System, Hip Joint, Single Axis Knee, Sach Foot Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing, Including	\$	6,237.02	Purchase

Code	Description	Fee	Purchase or Rental
L5410	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing, Including Fitting, Alignment And Suspension, Below Knee, Each Additional Cast Change And Realignment	\$ 429.58	Purchase
L5420	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing, Including Fitting, Alignment And Sus- Pension And One Cast Change Ak Or Knee Disarticulation	\$ 1,757.65	Purchase
L5430	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing, Incl Fitting, Alignment And Supension, "Ak" Or Knee Disarticulation, Each Additional Cast Change And Realignment	\$ 517.39	Purchase
L5450	Immediate Post Surgical Or Early Fitting, Application Of Non- Weight Bearing Rigid Dressing, Below Knee	\$ 503.77	Purchase
L5460	Immediate Post Surgical Or Early Fitting, Application Of Non- Weight Bearing Rigid Dressing, Above Knee	\$ 590.02	Purchase
L5500	Initial, Below Knee "Ptb" Type Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Plaster Socket, Direct Formed	\$ 1,739.55	Purchase
L5505	Initial, Above Knee - Knee Disarticulation, Ischial Level Socket, 'Usmc' Or Equal Pylon, No Cover, Sach Foot Plaster Socket, Direct Formed	\$ 2,024.87	Purchase
L5510	Preparatory, Below Knee "Ptb" Type Socket, 'Usmc' Or Equal Pylon, No Cover, Sach Foot, Plaster Socket, Molded To Model	\$ 1,733.21	Purchase
L5520	Preparatory, Below Knee "Ptb" Type Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Thermoplastic Or Equal, Direct Formed	\$ 1,478.56	Purchase
L5530	Preparatory, Below Knee "Ptb" Type Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Thermoplastic Or Equal, Molded To Model	\$ 1,945.82	Purchase
L5535	Preparatory, Below Knee "Ptb" Type Socket, Usmc Or Equal Pylon, No Cover, Sach Foot, Prefabricated, Adjustable Open End Socket	\$ 1,743.58	Purchase
L5540	Preparatory, Below Knee "Ptb" Type Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Laminated Socket, Molded To Model	\$ 2,017.44	Purchase
L5560	Preparatory, Above Knee- Knee Disarticulation, Ischial Level Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Plaster Socket, Molded To Model	\$ 2,441.68	Purchase
L5570	Preparatory, Above Knee-Knee Disarticulation, Ischial Level Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Thermoplastic Or Equal, Direct Formed	\$ 2,642.33	Purchase
L5580	Preparatory, Above Knee-Knee Disarticulation Ischial Level Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Thermoplastic Or Equal, Molded To Model	\$ 2,866.97	Purchase
L5585	Preparatory, Above Knee-Knee Disarticulation, Ischial Level Socket, "Usmc" Or Equal Pylon, No Cover, Sach Foot, Prefabricated Adjustable Open End Socket	\$ 2,975.75	Purchase
L5590	Preparatory, Above Knee-Knee Disarticulation Ischial Level Socket, "Usmc" Or Equal Pylon No Cover, Sach Foot, Laminated Socket, Molded To Model	\$ 3,049.16	Purchase
L5595	Preparatory, Hip Disarticulation-Hemipelvectomy, Pylon, No Cover, Sach Foot, Thermoplastic Or Equal, Molded To Patient Model	\$ 4,139.91	Purchase
L5600	Preparatory, Hip Disarticulation-Hemipelvectomy, Pylon, No Cover, Sach Foot, Laminated Socket, Molded To Patient Model	\$ 4,571.71	Purchase
L5610	Additions To Lower Extremity, Above Knee, Hydracadence	\$ 2,756.69	Purchase
L5611	Addition To Lower Extremity, Above Knee-Knee Disarticulation, 4 Bar Linkage, With Friction Swing Phase Control	\$ 2,133.57	Purchase
L5613	Addition To Lower Extremity, Above Knee-Knee Disarticulation, 4 Bar Linkage, With Hydraulic Swing Phase Control	\$ 3,158.86	Purchase
L5614	Additions To Lower Extremity, Above Knee, Disarticulation, 4-Bar Link	\$ 1,764.22	Purchase
L5615	Addition, Endoskeletal Knee-Shin System, 4 Bar Linkage Or Multiaxial, Fluid Swing And Stance Phase Control		Purchase
L5616	Additions To Lower Extremity, Above Knee, Universal Multiplex System, Friction Swing Phase Control	\$ 1,833.61	Purchase
L5617	Addition To Lower Extremity, Quick Change Self-Aligning Unit, Above Knee Or Below Knee, Each	\$ 583.16	Purchase
L5618	Additions To Lower Extremity, Test Socket, Symes	\$ 279.32	Purchase
L5620	Additions To Lower Extremity, Test Socket, Below Knee	\$ 276.12	Purchase
L5622	Additions To Lower Extremity, Test Socket, Knee Disarticulat- Ion	\$ 372.74	Purchase
L5624	Additions To Lower Extremity, Test Socket, Above Knee	\$ 362.20	Purchase
L5626	Additions To Lower Extremity, Test Socket, Hip Disarticulation	\$ 490.21	Purchase
L5628	Additions To Lower Extremity, Test Socket, Hemipelvectomy	\$ 496.41	Purchase
L5629	Addition To Lower Extremity, Below Knee, Acrylic Socket	\$ 315.62	Purchase
L5630 L5631	Additions To Lower Extremity, Symes Type, Expandable Wall Socket  Addition To Lower Extremity, Above Knee Or Knee Disarticulation, Acrylic Socket	\$ 503.93 \$ 436.37	Purchase Purchase
	21		
L5632	Additions To Lower Extremity, Symes Type, "Ptb" Brim Design Socket	\$ 280.64	Purchase
L5634	Additions To Lower Extremity, Symes Type, Posterior Opening (Canadian) Socket	\$ 417.01	Purchase
L5636	Additions To Lower Extremity, Symes Type, Medial Opening Socket	\$ 349.30	Purchase
L5637	Addition To Lower Extremity, Below Knee, Total Contact  Additions To Lower Extremity, Below Knee, Leather Socket	\$ 286.91 \$ 667.15	Purchase Purchase

Code	Description	Fee		Purchase or Rental
L5639	Addition To Lower Extremity, Below Knee, Wood Socket	\$	1,537.01	Purchase
L5640	Additions To Lower Extremity, Knee Disarticulation, Leather Socket	\$		Purchase
L5642	Additions To Lower Extremity, Above Knee, Leather Socket	\$	849.36	Purchase
L5643	Addition To Lower Extremity, Hip Disarticulation, Flexible Inner Socket, External Frame	\$	2,133.71	Purchase
L5644	Additions To Lower Extremity, Above Knee, Wood Socket	\$	809.70	Purchase
L5645	Addition To Lower Extremity, Below Knee, Flexible Inner Socket, External Frame	\$		Purchase
L5646	Addition To Lower Extremity, Below Knee, Air, Fluid, Gel Or Equal, Cushion Socket	\$	729.68	Purchase
L5647	Addition To Lower Extremity, Below Knee Suction Socket	\$	964.61	Purchase
L5648	Addition To Lower Extremity, Above Knee, Air, Fluid, Gel Or Equal, Cushion Socket	\$	902.56	Purchase
L5649	Addition To Lower Extremity, Ischial Containment/Narrow M-L Socket	\$	2,105.51	Purchase
L5650	Additions To Lower Extremity, Total Contact, Above Knee Or Knee Disarticulation Socket	\$	646.46	Purchase
L5651	Addition To Lower Extremity, Above Knee, Flexible Inner Socket, External Frame	\$	1,590.29	Purchase
L5652	Additions To Lower Extremity, Suction Suspension, Above Knee Or Knee Disarticulation Socket	\$	597.68	Purchase
L5653	Additions To Lower Extremity, Knee Disarticulation, Expandable Wall Socket	\$	797.86	Purchase
L5654	Additions To Lower Extremity, Socket Insert, Symes, (Kemblo, Pelite, Aliplast, Plastazote Or Equal)	\$		Purchase
L5655	Additions To Lower Extremity, Socket Insert, Below Knee (Kemblo, Pelite, Aliplast, Plastazote Or Equal)	\$	272.71	Purchase
L5656	Addition To Lower Extremity, Socket Insert, Knee Disarticul- Ation, (Kemblo, Pelite, Aliplast, Plastazote Or Equal)	\$	393.57	Purchase
L5658	Additions To Lower Extremity, Socket Insert, Above Knee (Kemblo, Pelite, Aliplast, Plastazote Or Equal)	\$	428.50	Purchase
L5661	Addition To Lower Extremity, Socket Insert, Multi-Durometer Symes	\$	625.69	Purchase
L5665	Addition To Lower Extremity, Socket Insert, Multi-Durometer, Below Knee	\$	526.45	
L5666	Additions To Lower Extremity, Below Knee, Cuff Suspension	\$		Purchase
L5668	Additions To Lower Extremity, Below Knee, Molded Distal Cushion	\$		Purchase
L5670	Additions To Lower Extremity, Below Knee, Molded Supracondular Suspension ("Pts" Or Similar)	\$		Purchase
L5671	Addition To Lower Extremity, Below Knee / Above Knee Suspension Locking Mechanism (Shuttle, Lanyard Or Equal), Excludes Socket Insert	\$	658.70	Purchase
L5672	Additions To Lower Extremity, Below Knee, Removable Medial Brim Suspension	\$	408.78	Purchase
L5673	Addition To Lower Extremity, Below Knee/Above Knee, Custom Fabricated From Existing Mold Or Prefabricated, Socket Insert, Silicone Gel, Elastomeric Or Equal, For Use With Locking Mechanism	\$		Purchase
L5676	Additions To Lower Extremity, Below Knee, Knee Joints, Single Axis, Pair	\$	445.11	Purchase
L5677	Additions To Lower Extremity, Below Knee, Knee Joints, Polycentric, Pair	\$	506.94	
L5678	Additions To Lower Extremity, Below Knee, Joint Covers, Pair	\$		Purchase
L5679	Addition To Lower Extremity, Below Knee/Above Knee, Custom Fabricated From Existing Mold Or Prefabricated, Socket Insert, Silicone Gel, Elastomeric Or Equal, Not For Use With Locking Mechanism	\$		Purchase
L5680	Additions To Lower Extremity, Below Knee, Thigh Lacer, Non- Molded	\$	369.05	Purchase
L5681	Addition To Lower Extremity, Below Knee/Above Knee, Custom Fabricated Socket Insert For Congenital Or Atypical Traumatic Amputee, Silicone Gel, Elastomeric Or Equal, For Use With Or Without Locking Mechanism, Initial Only (For Other Than Initial, Use Code L5673	\$		Purchase
L5682	Additions To Lower Extremity, Below Knee, Thigh Lacer, Gluteal/Ischial, Molded	\$	643.01	Purchase
L5683	Addition To Lower Extremity, Below Knee/Above Knee, Custom Fabricated Socket Insert For Other Than Congenital Or Atypical Traumatic Amputee, Silicone Gel, Elastomeric Or Equal, For Use With Or Without Locking Mechanism, Initial Only (For Other Than Initial, Use	\$	1,377.98	Purchase
L5684	Additions To Lower Extremity, Below Knee, Fork Strap	\$	50.46	Purchase
L5685	Addition To Lower Extremity Prosthesis, Below Knee, Suspension/Sealing Sleeve, With	\$		
L0000	Or Without Valve, Any Material, Each		138.33	Purchase
L5686	Additions To Lower Extremity, Below Knee, Back Check (Extens- Ion Control)	\$	62.06	Purchase
L5688	Additions To Lower Extremity, Below Knee, Waist Belt, Webbing	\$	62.81	Purchase
L5690	Additions To Lower Extremity, Below Knee, Waist Belt, Padded And Lined	\$	100.61	Purchase
L5692	Additions To Lower Extremity, Above Knee, Pelvic Control Belt, Light	\$	141.38	Purchase
L5694	Additions To Lower Extremity, Above Knee, Pelvic Control Belt, Padded And Lined	\$	207.94	Purchase
L5695	Addition To Lower Extremity, Above Knee, Pelvic Control, Sleeve Suspension, Neoprene Or Equal, Each	\$	203.85	Purchase
L5696	Additions To Lower Extremity, Above Knee Or Knee Disarticulat- Ion, Pelvic Joint	\$	190.23	Purchase
L5697	Additions To Lower Extremity, Above Knee Or Knee Disarticulat- Ion, Pelvic Band	\$	89.94	Purchase
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Code	Description	Fee	Purchase or Rental
L5698	Additions To Lower Extremity, Above Knee Or Knee Disarticulat- Ion, Silesian Bandage	\$ 107.25	Purchase
L5699	All Lower Extremity Prosthesis, Shoulder Harness	\$ 191.71	Purchase
L5700	Replacement, Socket, Below Knee, Molded To Patient Model	\$ 2,818.24	Purchase
L5701	Replacement, Socket, Above Knee Disarticulation, Including Attachment	\$ 3,761.54	
L5702	Replacement, Socket, Hip Disarticulation, Including Hip Joint, Molded To	\$ 5,367.16	Purchase
L5703	Ankle, Symes, Molded To Patient Model, Socket Without Solid Ankle Cushion Heel (Sach) Foot, Replacement Only		Purchase
L5704	Custom Shaped Protective Cover, Below Knee	\$ 608.83	Purchase
L5705	Custom Shaped Protective Cover, Above Knee		Purchase
L5706	Custom Shaped Protective Cover, Knee Disarticulation	\$ 1,020.03	
L5707	Custom Shaped Protective Cover, Hip Disarticulation	\$ 1,407.32	Purchase
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L5710 L5711	Addition, Exoskeletal Knee-Shin System, Single Axis, Manual Lock Additions Exoskeletal Knee-Shin System, Single Axis, Manual Lock, Ultra-Light Material	\$ 436.35 \$ 536.87	Purchase Purchase
L3/11	Additions Exoskeletal Knee-Shin System, Single Axis, Manual Lock, Oltra-Light Material	Ф 556.67	Pulchase
L5712	Addition, Exoskeletal Knee-Shin System, Single Axis, Friction Swing And Stance Phase Control (Safety Knee)	\$ 443.03	Purchase
L5714	Addition, Exoskeletal Knee-Shin System, Single Axis, Variable Friction Swing Phase Control	\$ 521.84	Purchase
L5716	Addition, Exoskeletal Knee-Shin System, Polycentric, Mechanical Stance Phase Lock	\$ 999.15	Purchase
	Addition, Exoskeletal Knee-Shin System, Polycentric, Friction Swing And Stance Phase		
L5718	Control	\$ 1,248.84	Purchase
L5722	Addition, Exoskeletal Knee-Shin System, Single Axis, Pneumatic Swing, Friction Stance Phase Control	\$ 1,032.71	Purchase
L5724	Addition, Exoskeletal Knee-Shin System, Single Axis, Fluid Swing Phase Control	\$ 1,622.07	Purchase
L5726	Addition, Exoskeletal Knee-Shin System, Single Axis, External Joints Fluid Swing Phase Control	\$ 1,788.56	Purchase
L5728	Addition, Exoskeletal Knee-Shin System, Single Axis, Fluid Swing And Stance Phase Control	\$ 2,944.98	Purchase
L5780	Addition, Exoskeletal Knee-Shin System, Single Axis, Pneumatic/Hydra Pneumatic Swing Phase Control	\$ 1,181.70	Purchase
L5781	Addition To Lower Limb Prosthesis, Vacuum Pump, Residual Limb Volume Management And Moisture Evacuation System	\$ 4,183.16	Purchase
L5782	Addition To Lower Limb Prosthesis, Vacuum Pump, Residual Limb Volume Management And Moisture Evacuation System, Heavy Duty	\$ 4,409.98	Purchase
L5783	Addition To Lower Extremity, User Adjustable, Mechanical, Residual Limb Volume Management System	Price By Report	
L5785	Addition, Exoskeletal System, Below Knee, Ultra-Light Material (Titanium, Carbon Fiber	\$ 516.00	Purchase
L5790	Or Equal)  Addition, Exoskeletal System, Above Knee, Ultra-Light Material (Titanium, Carbon Fiber	\$ 739.28	Purchase
L5795	Or Equal) Addition, Exoskeletal System, Hip Disarticulation, Ultra-Light Material (Titanium, Carbon		Purchase
	Fiber Or Equal)  Addition, Endoskeletal Knee-Shin System, Single Axis, Manual Lock	·	
L5810 L5811	Addition, Endoskeletal Knee-Shin System, Single Axis, Manual Lock  Addition, Endoskeletal Knee-Shin System, Single Axis, Manual Lock, Ultra-Light Material	\$ 555.77 \$ 971.30	Purchase Purchase
	Addition, Endoskeletal Knee-Shin System, Single Axis, Manual Lock, Olira-Light Material Addition, Endoskeletal Knee-Shin System, Single Axis, Friction Swing And Stance Phase		
L5812	Control (Safety Knee)  Addition, Endoskeletal Knee-Shin System, Polycentric, Hydraulic Swing Phase Control,	\$ 690.64	Purchase
L5814	Mechanical Stance Phase Lock	\$ 4,010.75	Purchase
L5816	Addition, Endoskeletal Knee-Shin System, Polycentric, Mechanical Stance Phase Lock	\$ 1,165.87	Purchase
L5818	Addition, Endoskeletal Knee-Shin System, Polycentric, Friction Swing, And Stance Phase Control	\$ 1,316.49	Purchase
L5822	Addition, Endoskeletal Knee-Shin System, Single Axis, Pneumatic Swing, Friction Stance Phase Control	\$ 1,936.50	Purchase
L5824	Addition, Endoskeletal Knee-Shin System, Single Axis, Fluid Swing Phase Control	\$ 2,102.35	Purchase
L5826	Addition, Endoskeletal Knee-Shin System, Single Axis, Hydraulic Swing Phase Control, With Miniature High Activity Frame	\$ 3,264.96	Purchase
L5828	Addition, Endoskeletal Knee-Shin System, Single Axis, Fluid Swing And Stance Phase Control	\$ 3,153.87	Purchase
L5830	Addition, Endoskeletal Knee-Shin System, Single Axis, Pneumatic/ Swing Phase Control	\$ 1,950.98	Purchase
L5840	Addition, Endoskeletal Knee/Shin System, 4-Bar Linkage Or Multiaxial, Pneumatic Swing Phase Control	\$ 4,012.49	Purchase

Code	Description	Fee	
L5841	Addition, Endoskeletal Knee-Shin System, Polycentric, Pneumatic Swing, And Stance Phase Control	Price By Report	
L5845	Addition, Endoskeletal, Knee-Shin System, Stance Flexion Feature, Adjustable	\$ 1,935.64	Purchase
L5848	Addition To Endoskeletal Knee-Shin System, Fluid Stance Extension, Dampening	\$ 1,161.25	Purchase
20010	Feature, With Or Without Adjustability  Addition, Endoskeletal System, Above Knee Or Hip Disarticulation, Knee Extension	,	1 0101000
L5850	Assist	\$ 169.40	Purchase
L5855	Addition, Endoskeletal System, Hip Disarticulation, Mechanical Hip Extension Assist	\$ 420.96	Purchase
L5856	Addition To Lower Extremity Prosthesis, Endoskeletal Knee-Shin System, Microprocessor Control Feature, Swing And Stance Phase, Includes Electronic Sensor(S), Any Type	\$ 25,079.94	Purchase
L5857	Addition To Lower Extremity Prosthesis, Endoskeletal Knee-Shin System, Microprocessor Control Feature, Swing Phase Only, Includes Electronic Sensor(S), Any Type	\$ 8,887.91	Purchase
L5858	Addition To Lower Extremity Prosthesis, Endoskeletal Knee Shin System, Microprocessor Control Feature, Stance Phase Only, Includes Electronic Sensor(S), Any Type	\$ 19,430.42	Purchase
L5859	Addition To Lower Extremity Prosthesis, Endoskeletal Knee-Shin System, Powered And Programmable Flexion/Extension Assist Control, Includes Any Type Motor(S)	\$ 15,169.15	Purchase
L5910	Addition, Endoskeletal System, Below Knee, Alignable System	\$ 479.61	Purchase
L5920	Addition, Endoskeletal System, Above Knee Or Hip Disarticulation, Alignable System	\$ 697.79	Purchase
L5925	Addition, Endoskeletal System, Above Knee, Knee Disarticulation Or Hip Disarticulation,	\$ 444.96	Purchase
L5926	Manual Lock  Addition To Lower Extremity Prosthesis, Endoskeletal, Knee Disarticulation, Above Knee,  Lia Disarticulation, Positional Pateities Unit April Trans	\$ 636.30	Purchase
L5930	Hip Disarticulation, Positional Rotation Unit, Any Type  Addition, Endoskeletal System, High Activity Knee Control Frame	\$ 3,508.01	Purchase
	Addition, Endoskeletal System, Below Knee, Ultra-Light Material (Titanium, Carbon Fiber		
L5940	Or Equal)	·	Purchase
L5950 L5960	Material (Titaniu  Ra-Light Material	\$ 802.85 \$ 991.20	Purchase Purchase
	Addition, Endoskeletal System, Polycentric Hip Joint, Pneumatic Or Hydraulic Control,		
L5961	Rotation Control, With Or Without Flexion And/Or Extension Control	\$ 5,271.87	Purchase
L5962	Addition, Endoskeletal System, Below Knee, Flexible Proctective Outer Surface Covering System	\$ 769.90	Purchase
L5964	Addition, Endoskeletal System, Above Knee, Flexible Protective Outer Surface Covering System	\$ 1,088.02	Purchase
L5966	Addition, Endoskeletal System, Hip Disarticulation, Flexible Protective Outer Surface Covering System	\$ 1,383.60	Purchase
L5968	Addition To Lower Limb Prosthesis, Multiaxial Ankle With Swing Phase Active Dorsiflexion Feature	\$ 3,924.40	Purchase
L5969	Addition, Endoskeletal Ankle-Foot Or Ankle System, Power Assist, Includes Any Type Motor(S)	\$ 15,825.78	Purchase
L5970	All Lower Extremity Prostheses, Foot, External Keel, Sach Foot	\$ 233.45	Purchase
L5971	All Lower Extremity Prosthesis, Solid Ankle Cushion Heel (Sach) Foot, Replacement Only	\$ 233.45	Purchase
L5972	All Lower Extremity Prostheses, Foot, Flexible Keel	\$ 437.24	Purchase
L5973	Endoskeletal Ankle Foot System, Microprocessor Controlled Feature, Dorsiflexion	\$ 18,234.19	Purchase
L5974	And/Or Plantar Flexion Control, Includes Power Source  All Lower Extremity Prostheses, Foot, Single Axis Ankle/Foot	\$ 234.68	Purchase
L5975	All Lower Extremity Prosthesis, Combination Single Axis Ankle And Flexible Keel Foot	\$ 484.68	Purchase
L5976	All Lower Extremity Prostheses, Energy Storing Foot (Seattle Carbon Copy li Or Equal)	\$ 600.53	Purchase
L5978	All Lower Extremity Prostheses, Foot, Multiaxial Ankle/Foot	\$ 300.05	Purchase
L5979	All Lower Extremity Prosthesis, Multi-Axial Ankle, Dynamic Response Foot, One Piece System	\$ 2,743.18	Purchase
L5980	All Lower Extremity Prostheses, Flex Foot System	\$ 5,082.86	Purchase
L5981	All Lower Extremity Prostheses, Flex-Walk System Or Equal	\$ 3,208.47	Purchase
L3901	All Exoskeletal Lower Extremity Prostheses, Axial Rotation Unit	\$ 792.52	Purchase
L5982		i .	I
	All Endoskeletal Lower Extremity Prosthesis, Axial Rotation Unit, With Or Without Adjustability	\$ 620.17	Purchase
L5982 L5984 L5985	Adjustability All Endoskeletal Lower Extremity Protheses, Dynamic Prosthetic Pylon	\$ 294.27	Purchase
L5982 L5984	Adjustability		Purchase

Code	Description	Fee		Purchase or Rental
L5990	Addition To Lower Extremity Prosthesis, User Adjustable Heel Height	\$	1,896.71	Purchase
L5991	Addition To Lower Extremity Prostheses, Osseointegrated External Prosthetic Connector		By Report	
L5999	Lower Extremity Prosthesis, Not Otherwise Specified		By Report	
L6000	Partial Hand, Thumb Remaining	\$	1,319.62	Purchase
L6010	Partial Hand, Little And/Or Ring Finger Remaining	\$	1,618.55	Purchase
L6020	Partial Hand, No Finger Remaining	\$	1,440.91	Purchase
L6026	Transcarpal/Metacarpal Or Partial Hand Disarticulation Prosthesis, External Power, Self-Suspended, Inner Socket With Removable Forearm Section, Electrodes And Cables, Two Batteries, Charger, Myoelectric Control Of Terminal Device, Excludes Terminal Device(S)	\$	4,897.25	Purchase
L6050	Wrist Disarticulation, Molded Socket, Flexible Elbow Hinges, Triceps Pad	\$	2,101.87	Purchase
L6055	Wrist Disarticulation, Molded Socket With Expandable Interface, Flexible Elbow Hinges, Triceps Pad	\$	2,909.95	Purchase
L6100	Below Elbow, Molded Socket, Flexible Elbow Hinge, Triceps Pad	\$	2,080.42	Purchase
L6110	Below Elbow, Molded Socket, (Muenster Or Northwestern Sus- Pension Types)	\$	2,147.09	Purchase
L6120	Below Elbow, Molded Double Wall Split Socket, Step-Up Hinges, Half Cuff	\$	2,695.72	Purchase
L6130	Below Elbow, Molded Double Wall Split Socket, Stump Activated Locking Hinge, Half Cuff	\$	2,908.39	Purchase
L6200	Elbow Disarticulation, Molded Socket, Outside Locking Hinge, Forearm	\$	3.135.14	Purchase
L6205	Elbow Disarticulation, Molded Socket With Expandable Interface, Outside Locking	\$		Purchase
	Hinges, Forearm			
L6250	Above Elbow, Molded Double Wall Socket, Internal Locking Elbow, Forearm	\$	2,791.39	Purchase
L6300	Shoulder Disarticulation, Molded Socket, Shoulder Bulkhead, Humeral Section, Internal Locking Elbow, Forearm	\$	4,093.04	Purchase
L6310	Shoulder Disarticulation, Passive Restoration (Complete Pros- Thesis)	\$	3,120.08	Purchase
L6320	Shoulder Disarticulation, Passive Restoration (Shoulder Cap Only)	\$	1,873.21	Purchase
L6350	Interscapular Thoracic, Molded Socket, Shoulder Bulkhead, Humeral Section, Internal Locking Elbow, Forearm	\$	4,702.91	Purchase
L6360	Intersacpular Thoracic, Passive Restoration (Complete Pros- Thesis)	\$	3,274.90	Purchase
L6370	Interscapular Thoracic, Passive Restoration (Shoulder Cap Only)	\$	2,088.29	Purchase
L6380	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing, Including Fitting Alignment And Suspension Of Components, And One Cast Change, Wrist Disarticulation Or Below Elbow	\$	1,197.26	Purchase
L6382	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing Including Fitting Alignment And Suspension Of Components, And One Cast Change, Elbow Disarticulation Or Above Elbow	\$	1,627.25	Purchase
L6384	Immediate Post Surgical Or Early Fitting, Application Of Initial Rigid Dressing Including Fitting Alignment And Suspension Of Components, And One Cast Change, Shoulder Disarticulation Or Interscapular Thoracic	\$	2,256.54	Purchase
L6386	Immediate Post Surgical Or Early Fitting, Each Additional Cast Change And Realignment	\$	412.90	Purchase
L6388	Immediate Post Surgical Or Early Fitting, Application Of Rigid Dressing Only	\$	519.80	Purchase
L6400	Below Elbow, Molded Socket, Endoskeletal System, Including Soft Prosthetic Tissue Shaping	\$		Purchase
L6450	Elbow Disarticulation, Molded Socket, Endoskeletal System, Including Soft Prosthetic Tissue Shaping	\$	4,226.57	Purchase
L6500	Above Elbow, Molded Socket, Endoskeletal System, Including Soft Prosthetic Tissue Shaping	\$	4,156.32	Purchase
L6550	Shoulder Disarticulation, Molded Socket, Endoskeletal System, Including Soft Prosthetic Tissue Shaping	\$	5,198.76	Purchase
L6570	Interscapular Thoracic, Molded Socket, Endoskeletal System, Including Soft Prosthetic Tissue Shaping	\$	5,409.23	Purchase
L6580	Preparatory, Wrist Disarticulation Or Below Elbow, Single Wall Plastic Socket, Friction Wrist, Flexible Elbow Hinges, Figure Of Eight Harness, Humeral Cuff, Bowden Cable Control, Usmc Or Equal Pylon, No Cover, Molded To Patient Model	\$	1,934.10	Purchase
L6582	Preparatory, Wrist Disarticulation Or Below Elbow, Single Wall Socket, Friction Wrist, Flexible Elbow Hinges, Figure Of Eight Harness, Humeral Cuff, Bowden Cable Control, Usmc Or Equal Pylon, No Cover, Direct Formed	\$	1,886.77	Purchase
L6584	Preparatory, Elbow Disarticulation Or Above Elbow, Single Wall Plastic Socket, Friction Wrist, Locking Elbow, Figure Of Eight Harness, Fair Lead Cable Control, Usmc Or Equal Pylon, No Cover, Molded To Patient Model	\$	2,104.46	Purchase
L6586	Preparatory, Elbow Disarticulation Or Above Elbow, Single Wall Socket, Friction Wrist, Locking Elbow, Figure Or Eight Harness, Fair Lead Cable Control, Usmc Or Equal Pylon, No Cover, Direct Formed	\$	2,189.61	Purchase
L6588	Preparatory, Shoulder Disarticulation Or Interscapular Thoracic, Single Wall Plastic Socket, Shoulder Joint, Locking Elbow, Friction Wrist, Chest Strap,	\$	2,906.14	Purchase

Code	Description  Propagatory Shoulder Disarticulation Or Interseconder Thoracia Single Wall Socket	Fee		Purchase or Rental
L6590	Preparatory, Shoulder Disarticulation Or Interscapular Thoracic, Single Wall Socket, Shoulder Joint, Locking Elbow, Friction Wrist, Chest Strap, Fair Lead Cable Control,	\$	2,914.70	Purchase
L6600	Usmc Or Equal Pylon, No Cover, Direct Formed Upper Extremity Additions, Polycentric Hinge, Pair	\$	192.86	Purchase
L6605	Upper Extremity Additions, Single Pivot Hinge, Pair	\$		Purchase
L6610	Upper Extremity Additions, Flexible Metal Hinge, Pair	\$	174.28	Purchase
L6611	Addition To Upper Extremity Prosthesis, External Powered, Additional Switch, Any Type	\$	430.44	Purchase
L6615	Upper Extremity Additions, Disconnect Locking Wrist Unit	\$	200.74	Purchase
L6616	Upper Extremity Addition, Additional Disconnect Insert For Locking Wrist Unit, Each	\$	66.69	Purchase
L6620	Upper Extremity Addition, Flexion/Extension Wrist Unit, With Or Without Friction	\$	349.78	Purchase
L6621	Upper Extremity Prosthesis Addition, Flexion/Extension Wrist With Or Without Friction, For Use With External Powered Terminal Device	\$	2,391.34	Purchase
L6623	Upper Extremity Addition, Spring Assisted Rotational Wrist Unit With Latch Release	\$	659.53	Purchase
L6624	Upper Extremity Addition, Flexion/Extension And Rotation Wrist Unit	\$	3,937.39	Purchase
L6625	Upper Extremity Additions, Rotation Wrist Unit With Cable Lock	\$	546.83	Purchase
L6628	Upper Extremity Addition, Quick Disconnect Hook Adapter, Otto Bock Or Equal	\$	656.72	Purchase
L6629	Upper Extremity Addition, Quick Disconnect Lamination Collar With Coupling Piece, Otto Bock Or Equal	\$	188.46	Purchase
L6630	Upper Extremity Additions, Stainless Steel, Any Wrist	\$	221.59	Purchase
L6632	Upper Extremity Addition, Latex Suspension Sleeve, Each	\$	89.06	Purchase
L6635	Upper Extremity Addition, Lift Assist For Elbow	\$	212.99	Purchase
L6637	Upper Extremity Addition, Nudge Control Elbow Lock	\$	377.53	Purchase
L6638	Upper Extremity Addition To Prosthesis, Electric Locking Feature, Only For Use With Manually Powered Elbow	\$	2,614.47	Purchase
L6640	Upper Extremity Additions, Shoulder Abduction Joint, Pair	\$	301.58	Purchase
L6641	Upper Extremity Addition, Excursion Amplifier, Pulley Type	\$	165.97	Purchase
L6642	Upper Extremity Addition, Excursion Amplifier, Lever Type	\$	223.57	Purchase
L6645	Upper Extremity Additions, Shoulder Flexion-Abduction Joint, Each	\$	328.22	Purchase
L6646	Upper Extremity Addition, Shoulder Joint, Multipositional Locking, Flexion, Adjustable Abduction Friction Control, For Use With Body Powered Or External Powered System	\$	3,297.45	Purchase
L6647	Upper Extremity Addition, Shoulder Lock Mechanism, Body Powered Actuator	\$	542.91	Purchase
L6648	Upper Extremity Addition, Shoulder Lock Mechanism, External Powered Actuator	\$	3,400.84	Purchase
L6650	Upper Extremity Additions, Shoulder Universal Joint, Each	\$	348.02	Purchase
L6655	Upper Extremity Additions, Standard Control Cable, Extra	\$	77.24	Purchase
L6660	Upper Extremity Additions, Heavy Duty Control Cable	\$	96.64	Purchase
L6665	Upper Extremity Additions, Teflon, Or Equal, Cable Lining	\$	47.35	Purchase
L6670	Upper Extremity Additions, Hook To Hand, Cable Adapter	\$	49.31	Purchase
L6672	Upper Extremity Additions, Harness, Chest Or Shoulder, Saddle Type	\$	207.92	Purchase
L6675	Upper Extremity Addition, Harness, (E.G. Figure Of Eight Type), Single Cable Design	\$		Purchase
L6676	Upper Extremity Addition, Harness, (E.G. Figure Of Eight Type), Dual Cable Design	\$	145.58	Purchase
L6677	Upper Extremity Addition, Harness, Triple Control, Simultaneous Operation Of Terminal Device And Elbow	\$	310.14	Purchase
L6680	Upper Extremity Additions, Test Socket, Wrist Disarticulat- Ion Or Below Elbow	\$	252.63	Purchase
L6682	Upper Extremity Additions, Test Socket, Elbow Disarticulat- Ion Or Above Elbow	\$	275.40	Purchase
L6684	Upper Extremity Additions, Test Socket, Shoulder Dis- Articulation Or Interscapular Thoracic	\$	391.50	Purchase
L6686	Upper Extremity Addition, Suction Socket	\$	607.00	Purchase
L6687	Upper Extremity Addition, Frame Type Socket, Below Elbow Or Wrist Disarticulation	\$	790.75	Purchase
L6688	Upper Extremity Addition, Frame Type Socket, Above Elbow Or Elbow Disarticulation	\$	544.66	Purchase
L6689	Upper Extremity Addition, Frame Type Socket, Shoulder Disarticulation	\$	923.71	Purchase
L6690	Upper Extremity Addition, Frame Type Socket, Interscapular-Thoracic	\$	706.99	Purchase
L6691	Upper Extremity Addition, Removable Insert, Each	\$	354.91	Purchase
L6692	Upper Extremity Addition, Silicone Gel Insert Or Equal, Each	\$	719.41	Purchase
L6693	Upper Extremity Addition, Locking Elbow, Forearm Counterbalance	\$	2,968.11	Purchase
L6694	Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbow, Custom Fabricated From Existing Mold Or Prefabricated, Socket Insert, Silicone Gel, Elastomeric Or Equal,	\$	779.02	Purchase
L6695	For Use With Locking Mechanism  Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbow, Custom Fabricated From Existing Mold Or Prefabricated, Socket Insert, Silicone Gel, Elastomeric Or Equal, Not For Use With Locking Mechanism	\$	649.15	Purchase

Code	Description	Fee	Purchase or Rental
L6696	Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbow, Custom Fabricated Socket Insert For Congenital Or Atypical Traumatic Amputee, Silicone Gel, Elastomeric Or Equal, For Use With Or Without Locking Mechanism, Initial Only (For Other Than Initial	\$ 1,377	98 Purchase
L6697	Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbow, Custom Fabricated Socket Insert For Other Than Congenital Or Atypical Traumatic Amputee, Silicone Gel, Elastomeric Or Equal, For Use With Or Without Locking Mechanism, Initial Only (For	\$ 1,377	.98 Purchase
L6698	Addition To Upper Extremity Prosthesis, Below Elbow/Above Elbow, Lock Mechanism, Excludes Socket Insert	\$ 681	.90 Purchase
L6703	Terminal Device, Passive Hand/Mitt, Any Material, Any Size	\$ 380	
L6704	Terminal Device, Sport/Recreational/Work Attachment, Any Material, Any Size	\$ 740	.22 Purchase
L6706	Terminal Device, Hook, Mechanical, Voluntary Opening, Any Material, Any Size, Lined Or Unlined	\$ 475	.80 Purchase
L6707	Terminal Device, Hook, Mechanical, Voluntary Closing, Any Material, Any Size, Lined Or Unlined	\$ 1,469	.43 Purchase
L6708	Terminal Device, Hand, Mechanical, Voluntary Opening, Any Material, Any Size	\$ 1,023	.97 Purchase
L6709	Terminal Device, Hand, Mechanical, Voluntary Closing, Any Material, Any Size	\$ 1,587	.83 Purchase
L6711	Terminal Device, Hook, Mechanical, Voluntary Opening, Any Material, Any Size, Lined Or Unlined, Pediatric	\$ 702	.93 Purchase
L6712	Terminal Device, Hook, Mechanical, Voluntary Closing, Any Material, Any Size, Lined Or Unlined, Pediatric	\$ 1,294	.16 Purchase
L6713	Terminal Device, Hand, Mechanical, Voluntary Opening, Any Material, Any Size, Pediatric	\$ 1,633	.37 Purchase
L6714	Terminal Device, Hand, Mechanical, Voluntary Closing, Any Material, Any Size, Pediatric	\$ 1,383	.44 Purchase
L6715	Terminal Device, Hook, Dorrance, Or Equal, Model #5Xa	\$ 3,393	.32 Purchase
L6721	Terminal Device, Hook Or Hand, Heavy Duty, Mechanical, Voluntary Opening, Any Material, Any Size, Lined Or Unlined	\$ 2,458	.93 Purchase
L6722	Terminal Device, Hook Or Hand, Heavy Duty, Mechanical, Voluntary Closing, Any Material, Any Size, Lined Or Unlined	\$ 2,119	.81 Purchase
L6805	Addition To Terminal Device, Modifier Wrist Unit	\$ 366	.14 Purchase
L6810	Addition To Terminal Device, Precision Pinch Device	\$ 226	
L6880	Terminal Device, Hand, Bock, Vo	\$ 25,679	.82 Purchase
L6881	Automatic Grasp Feature, Addition To Upper Limb Electric Prosthetic Terminal Device	\$ 4,274	.14 Purchase
L6882	Microprocessor Control Feature, Addition To Upper Limb Prosthetic Terminal Device	\$ 3,242	.20 Purchase
L6883	Replacement Socket, Below Elbow/Wrist Disarticulation, Molded To Patient Model, For Use With Or Without External Power	\$ 1,762	.13 Purchase
L6884	Replacement Socket, Above Elbow/Elbow Disarticulation, Molded To Patient Model, For Use With Or Without External Power	\$ 2,295	.40 Purchase
L6885	Replacement Socket, Shoulder Disarticulation/Interscapular Thoracic, Molded To Patient Model, For Use With Or Without External Power	\$ 3,274	90 Purchase
L6890	Addition To Upper Extremity Prosthesis, Glove For Terminal Device, Any Material, Prefabricated, Includes Fitting And Adjustment	\$ 186	.86 Purchase
L6895	Addition To Upper Extremity Prosthesis, Glove For Terminal Device, Any Material, Custom Fabricated	\$ 586	.79 Purchase
L6900	Hand Restoration (Casts, Shading And Measurements Included), Partial Hand, With Glove, Thumb Or One Finger Remaining	\$ 1,553	.01 Purchase
L6905	Hand Restoration (Casts, Shading And Measurements, Included), Partial Hand, With Glove, Multiple Fingers Remaining	\$ 1,509	.57 Purchase
L6910	Hand Restoration (Casts, Shading And Measurements Included), Partial Hand, With Glove, No Fingers Remaining	\$ 1,470	.63 Purchase
L6915	Hand Restoration (Shading, And Measurements Included), Replacement Glove For Above	\$ 643	.65 Purchase
L6920	Wrist Disarticulation, External Power, Self-Suspended Inner Socket, Removable Forearm Shell, Otto Bock Or Equal, Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$ 8,340	.91 Purchase
L6925	Wrist Disarticulation, External Power, Self-Suspended Inner Socket, Removable Forearm Shell, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Terminal Device	\$ 8,996	.00 Purchase
L6930	Below Elbow, External Power, Self-Suspended Inner Socket, Removable Forearm Shell, Otto Bock Or Equal Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$ 8,763	79 Purchase
L6935	Below Elbow, External Power, Self-Suspended Inner Socket, Removable Forearm Shell, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Terminal Device	\$ 9,409	01 Purchase

Code	Description	Fee		Purchase or Rental
L6940	Elbow Disarticulation, External Power, Molded Inner Socket, Removable Humeral Shell, Outside Locking Hinges, Forearm, Otto Bock Or Equal Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$	12,027.83	Purchase
L6945	Elbow Disarticulation, External Power, Molded Inner Socket, Removable Humeral Shell, Outside Locking Hinges, Forearm, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Terminal Device	\$	13,992.98	Purchase
L6950	Above Elbow, External Power, Molded Inner Socket, Removable Humeral Shell, Internal Locking Elbow, Forearm, Otto Bock Or Equal Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$	13,671.32	Purchase
L6955	Above Elbow, External Power, Molded Inner Socket, Removable Humeral Shell, Internal Locking Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables Two Batteries And One Charger, Myoelectronic Control Of Terminal Device	\$	16,373.26	Purchase
L6960	Shoulder Disarticulation, External Power, Molded Inner Socket, Removable Shoulder Shell, Shoulder Bulkhead, Humeral Section, Mechanical Elbow, Forearm, Otto Bock Or Equal Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$	16,513.67	Purchase
L6965	Shoulder Disarticulation, External Power, Molded Inner Socket, Removable Shoulder Shell, Shoulder Bulkhead, Humeral Section, Mechanical Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Ter	\$	17,891.64	Purchase
L6970	Interscapular-Thoracic, External Power, Molded Inner Socket, Removable Shoulder Shell, Shoulder Bulkhead, Humeral Section, Mechanical Elbow, Forearm, Otto Bock Or Equal Switch, Cables, Two Batteries And One Charger, Switch Control Of Terminal Device	\$	18,112.53	Purchase
L6975	Interscapular-Thoracic, External Power, Molded Inner Socket, Removable Shoulder Shell, Shoulder Bulkhead, Humeral Section, Mechanical Elbow, Forearm, Otto Bock Or Equal Electrodes, Cables, Two Batteries And One Charger, Myoelectronic Control Of Terminal Device	\$	19,405.77	Purchase
L7007	Electric Hand, Switch Or Myoelectric Controlled, Adult	\$	3,537.99	Purchase
L7008	Electric Hand, Switch Or Myoelectric, Controlled, Pediatric	\$	5,953.82	Purchase
L7009	Electric Hook, Switch Or Myoelectric Controlled, Adult	\$	3,704.65	Purchase
L7040	Prehensile Actuator, Switch Controlled	\$	2,898.59	Purchase
L7045	Electric Hook, Switch Or Myoelectric Ontrolled, Pediatric	\$	1,661.86	Purchase
L7170	Electronic Elbow, Hosmer Or Equal, Switch Controlled	\$	6,325.52	Purchase
L7180	Electronic Elbow, Microprocessor Sequential Control Of Elbow And Terminal Device	\$	36,710.11	Purchase
L7181	Electronic Elbow, Microprocessor Simultaneous Control Of Elbow And Terminal Device	\$	41,890.35	Purchase
L7185	Electronic Elbow, Adolescent, Variety Village Or Equal, Switch Controlled	\$	6,562.61	Purchase
L7186	Electronic Elbow, Child, Variety Village Or Equal, Switch Controlled	\$	11,894.11	Purchase
L7190	Electronic Elbow, Adolescent, Variety Village Or Equal, Myoelectronically Controlled	\$	8,303.00	Purchase
L7191	Electronic Elbow, Child, Variety Village Or Equal, Myoelectronically Controlled	\$	12,186.39	Purchase
L7259	Electronic Wrist Rotator, Any Type	\$	3,964.82	Purchase
L7360	Six Volt Battery, Each	\$	233.80	Purchase
L7362	Battery Charger, Six Volt, Each	\$	343.48	Purchase
L7364	Twelve Volt Battery, Each	\$	409.71	Purchase
L7366	Battery Charger, Twelve Volt, Each	\$	551.88	Purchase
L7367	Lithium Ion Battery, Rechargeable, Replacement	\$	407.02	Purchase
L7368	Lithium Ion Battery Charger, Replacement Only	\$	545.06	Purchase
L7400	Addition To Upper Extremity Prosthesis, Below Elbow/Wrist Disarticulation, Ultralight Material (Titanium, Carbon Fiber Or Equal)	\$	320.44	Purchase
L7401	Addition To Upper Extremity Prosthesis, Above Elbow Disarticulation, Ultralight Material (Titanium, Carbon Fiber Or Equal)	\$	358.74	Purchase
L7402	Addition To Upper Extremity Prosthesis, Shoulder Disarticulation/Interscapular Thoracic, Ultralight Material (Titanium, Carbon Fiber Or Equal)	\$	387.38	Purchase
L7403	Addition To Upper Extremity Prosthesis, Below Elbow/Wrist Disarticulation, Acrylic Material	\$	385.01	Purchase
L7404	Addition To Upper Extremity Prosthesis, Above Elbow Disarticulation, Acrylic Material	\$	581.10	Purchase
L7405	Addition To Upper Extremity Prosthesis, Shoulder Disarticulation/Interscapular Thoracic, Acrylic Material	\$	759.97	Purchase
L7499	Upper Extremity Prosthesis, Not Otherwise Specified		y Report	
L7510	Repair Of Prosthetic Device, Repair Or Replace Minor Parts	\$	327.42	Purchase
L7520	Repair Prosthetic Device, Labor Component, Per 15 Minutes	\$	17.93	Purchase
L7600	Prosthetic Donning Sleeve, Any Material, Each		y Report	
L7700	Gasket Or Seal, For Use With Prosthetic Socket Insert, Any Type, Each	\$	122.93	Purchase

Code	Description	Fee	Purchase or Rental
L8000	Breast Prosthesis, Mastectomy Bra, Without Integrated Breast Prosthesis Form, Any Size, Any Type	\$ 37.37	Purchase
L8001	Breast Prosthesis, Mastectomy Bra, With Integrated Breast Prosthesis Form, Unilateral, Any Size, Any Type	\$ 131.13	Purchase
L8002	Breast Prosthesis, Mastectomy Bra, With Integrated Breast Prosthesis Form, Bilateral, Any Size, Any Type	\$ 172.49	Purchase
L8010	Breast Prosthesis, Mastectomy Sleeve	\$ 106.26	Purchase
L8015	External Breast Prosthesis Garment, With Mastectomy Form, Post Mastectomy	\$ 64.73	Purchase
L8020	Breast Prosthesis, Mastectomy Form		Purchase
L8030	Breast Prosthesis, Silicone Or Equal, Without Integral Adhesive	\$ 353.58	Purchase
L8031	Breast Prosthesis, Silicone Or Equal, With Integral Adhesive	\$ 366.03	Purchase
L8035	Custom Breast Prosthesis, Post Mastectomy, Molded To Patient Model	\$ 3,830.23	Purchase
L8039	Breast Prosthesis, Not Otherwise Specified	Price By Report	
L8040	Nasal Prosthesis, Provided By A Non-Physician	\$ 2,414.86	Purchase
L8041	Midfacial Prosthesis, Provided By A Non-Physician	<u> </u>	Purchase
L8042	Orbital Prosthesis, Provided By A Non-Physician		Purchase
L8043	Upper Facial Prosthesis, Provided By A Non-Physician	<u> </u>	Purchase
L8044	Hemi-Facial Prosthesis, Provided By A Non-Physician		Purchase
L8045	Auricular Prosthesis, Provided By A Non-Physician	<u> </u>	Purchase
L8046	Partial Facial Prosthesis, Provided By A Non-Physician	· · · · · · · · · · · · · · · · · · ·	Purchase
L8047	Nasal Septal Prosthesis, Provided By A Non-Physician	\$ 1,340.93	Purchase
L8048	Unspecified Maxillofacial Prosthesis, By Report, Provided By A Non-Physician	Price By Report	
L8049	Repair Or Modification Of Maxillofacial Prosthesis, Labor Component, 15 Minute Increments, Provided By A Non-Physician	Price By Report	
L8400	Prosthetic Sheath, Below Knee, Each	\$ 15.63	Purchase
L8410	Prosthetic Sheath, Above Knee, Each	\$ 22.51	Purchase
L8415	Prosthetic Sheath, Upper Limb, Each	\$ 24.34	Purchase
L8417	Prosthetic Sheath/Sock, Including A Gel Cushion Layer, Below Knee Or Above Knee, Each	\$ 81.21	Purchase
L8420	Prosthetic Sock, Multiple Ply, Below Knee, Each	\$ 19.32	Purchase
L8430	Prosthetic Sock, Multiple Ply, Above Knee, Each		Purchase
L8435	Prosthetic Sock, Multiple Ply, Upper Limb, Each		Purchase
L8440	Prosthetic Shrinker, Below Knee, Each	\$ 41.54	Purchase
L8460	Prosthetic Shrinker, Above Knee, Each	\$ 66.20	Purchase
L8465	Prosthetic Shrinker, Upper Limb, Each	\$ 50.15	Purchase
L8470	Prosthetic Sock, Single Ply, Fitting, Below Knee, Each	\$ 8.84	Purchase
L8480	Prosthetic Sock, Single Ply, Fitting, Above Knee, Each	\$ 12.19	Purchase
L8485	Prosthetic Sock, Single Ply, Fitting, Upper Limb, Each	\$ 13.71	Purchase
L8499	Unlisted Procedure For Miscellaneous Prosthetic Services	Price By Report	
L8500	Artificial Larynx, Any Type	\$ 655.45	Purchase
L8501	Tracheostomy Speaking Valve	\$ 119.97	Purchase
L8505	Artificial Larynx Replacement Battery / Accessory, Any Type	Price By Report	
L8507	Tracheo-Esophageal Voice Prosthesis, Patient Inserted, Any Type, Each	\$ 43.79	Purchase
L8509	Tracheo-Esophageal Voice Prosthesis, Inserted By A Licensed Health Care Provider, Any Type	\$ 114.16	Purchase
L8510	Voice Amplifier	\$ 264.18	Purchase
L8511	Insert For Indwelling Tracheoesophageal Prosthesis, With Or Without Valve, Replacement Only, Each	\$ 76.03	Purchase
L8512	Gelatin Capsules Or Equivalent, For Use With Tracheoesophageal Voice Prosthesis, Replacement Only, Per 10	\$ 2.28	Purchase
L8513	Cleaning Device Used With Tracheoesophageal Voice Prosthesis, Pipet, Brush, Or Equal, Replacement Only, Each	\$ 5.45	Purchase
L8514	Tracheoesophageal Puncture Dilator, Replacement Only, Each	\$ 98.59	Purchase
L8515	Gelatin Capsule, Application Device For Use With Tracheoesophageal Voice Prosthesis, Each	\$ 66.01	Purchase
L8600	Implantable Breast Prosthesis, Silicone Or Equal	\$ 856.04	Purchase
L8603	Injectable Bulking Agent, Collagen Implant, Urinary Tract, 2.5 MI Syringe, Includes Shipping And Necessary Supplies	\$ 450.23	Purchase
L8604	Injectable Bulking Agent, Dextranomer/Hyaluronic Acid Copolymer Implant, Urinary Tract,  1 MI, Includes Shipping And Necessary Supplies	Price By Report	
L8606	Injectable Bulking Agent, Synthetic Implant, Urinary Tract, 1 Ml Syringe, Includes Shipping And Necessary Supplies	\$ 234.37	Purchase
L8607	Injectable Bulking Agent For Vocal Cord Medialization, 0.1 Ml, Includes Shipping And Necessary Supplies	\$ 44.95	Purchase
1.0000	Miscellaneous External Component, Supply Or Accessory For Use With The Argus Ii	Division in	
L8608	Retinal Prosthesis System	Price By Report	

Code	Description	Fee	Purchase or Rental
L8610	Ocular Implant	\$ 802.40	Purchase
L8612	Aqueous Shunt	\$ 691.60	Purchase
L8613	Ossicula Implant	\$ 264.38	Purchase
L8614	Cochlear Device, Includes All Internal And External Components	\$ 19,961.56	Purchase
L8615	Headset/Headpiece For Use With Cochlear Implant Device Replacement	\$ 488.06	Purchase
L8616	Microphone For Use With Cochlear Implant Device, Replacement	\$ 113.64	Purchase
L8617	Transmitting Coil For Use With Cochlear Implant Device Replacement  Transmitter Cable For Use With Cochlear Implant Device Or Auditory Osseointegrated	\$ 96.10	Purchase
L8618	Device, Replacement	\$ 28.38	Purchase
L8619	Cochlear Implant, External Speech Processor And Controller, Integrated System, Replacement	\$ 8,851.76	Purchase
L8621	Zinc Air Battery For Use With Cochlear Implant Device And Auditory Osseointegrated Sound Processors, Replacement, Each	\$ 0.66	Purchase
L8622	Alkaline Battery For Use With Cochlear Implant Device Replacement	\$ 0.33	Purchase
L8623	Lithium Ion Battery For Use With Cochlear Implant Device Speech Processor, Other Than Ear Level, Replacement, Each	\$ 67.78	Purchase
L8624	Lithium Ion Battery For Use With Cochlear Implant Or Auditory Osseointegrated Device Speech Processor, Ear Level, Replacement, Each	\$ 174.49	Purchase
L8625	External Recharging System For Battery For Use With Cochlear Implant Or Auditory Osseointegrated Device, Replacement Only, Each	\$ 197.85	Purchase
L8627	Cochlear Implant, External Speech Processor, Component, Replacement	\$ 7,259.36	Purchase
L8628	Cochlear Implant, External Controller Component, Replacement	\$ 1,310.01	Purchase
L8629	Transmitting Coil And Cable, Integrated, For Use With Cochlear Implant Device,	\$ 187.56	Purchase
	Replacement		
L8630	Metacarpophalangeal Joint Implant	\$ 455.36	Purchase
L8631	Metacarpal Phalangeal Joint Replacement, Two Or More Pieces, Metal (E.G., Stainless Steel Or Cobalt Chrome), Ceramic-Like Material (E.G., Pyrocarbon), For Surgical Implantation (All Sizes, Includes Entire System)	\$ 2,269.62	Purchase
L8641	Metatarsal Joint Implant	\$ 479.88	Purchase
L8642	Hallux Implant	\$ 314.11	Purchase
L8658	Interphalangeal Joint Spacer, Silicone Or Equal, Each	\$ 418.40	Purchase
L8659	Interphalangeal Finger Joint Replacement, 2 Or More Pieces, Metal (E.G., Stainless Steel Or Cobalt Chrome), Ceramic-Like Material (E.G., Pyrocarbon) For Surgical Implantation, Any Size	\$ 2,021.48	Purchase
L8670	Vascular Graft Material, Synthetic, Implant	\$ 572.35	Purchase
L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month	Price By Report	
L8679	Implantable Neurostimulator, Pulse Generator, Any Type	\$ 8,835.83	Purchase
L8680	Implantable Neurostimulator Electrode (With Any Number Of Contact Points), Each	Price By Report	
L8681	Patient Programmer (External) For Use With Implantable Programmable Neurostimulator Pulse Generator, Replacement Only	\$ 1,109.19	Purchase
L8682	Implantable Neurostimulator Radiofrequency Receiver	\$ 6,313.07	Purchase
L8683	Radiofrequency Transmitter (External) For Use With Implantable Neurostimulator Radiofrequency Receiver	\$ 5,556.96	Purchase
L8684	Radiofrequency Transmitter (External) For Use With Implantable Sacral Root Neurostimulator Receiver For Bowel And Bladder Management, Replacement	\$ 821.61	Purchase
L8685	Implantable Neurostimulator Pulse Generator, Single Array, Rechargeable, Includes Extension	Price By Report	
L8686	Implantable Neurostimulator Pulse Generator, Single Array, Non-Rechargeable, Includes Extension	Price By Report	
L8687	Implantable Neurostimulator Pulse Generator, Dual Array, Rechargeable, Includes Extension	Price By Report	
L8688	Implantable Neurostimulator Pulse Generator, Dual Array, Non-Rechargeable, Includes Extension	Price By Report	
L8689	External Recharging System For Battery (Internal) For Use With Implantable Neurostimulator, Replacement Only	\$ 1,807.00	Purchase
L8690	Auditory Osseointegrated Device, Includes All Internal And External Componets	\$ 5,147.73	Purchase
L8691	Auditory Osseointegrated Device, External Sound Processor, Excludes Transducer/Actuator, Replacement Only, Each	\$ 1,936.31	Purchase
L8692	Auditory Osseointegrated Device, External Sound Processor, Used Without Osseointegration, Body Worn, Includes Headband Or Other Means Of External Attachment	Price By Report	
	Auditory Osseointegrated Device Abutment, Any Length, Replacement Only	\$ 1,588.46	Purchase
L8693	- · · · · · · · · · · · · · · · · · · ·	i .	
L8693 L8694	Auditory Osseointegrated Device, Transducer/Actuator, Replacement Only, Each	\$ 955.66	Purchase

Code	Description Control of the Control o	Fee	Purchase or Rental
L8696	Antenna (External) For Use With Implantable Diaphragmatic/Phrenic Nerve Stimulation Device, Replacement, Each	\$ 227.07	Purchase
L8698	Miscellaneous Component, Supply Or Accessory For Use With Total Artificial Heart System	Price By Report	
L8699	Prosthetic Implant, Not Otherwise Specified	Price By Report	
L8701	Powered Upper Extremity Range Of Motion Assist Device, Elbow, Wrist, Hand With Single Or Double Upright(S), Includes Microprocessor, Sensors, All Components And	Price By Report	
L8702	Accessories, Custom Fabricated  Powered Upper Extremity Range Of Motion Assist Device, Elbow, Wrist, Hand, Finger, Single Or Double Upright(S), Includes Microprocessor, Sensors, All Components And	Price By Report	
	Accessories, Custom Fabricated  Orthotic And Prosthetic Supply, Accessory, And/Or Service Component Of Another	, ,	
L9900	Hcpcs "L" Code	Price By Report	
Q0477	Power Module Patient Cable For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 812.75	Purchase
Q0478	Power Adapter For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Vehicle Type	\$ 192.50	Purchase
Q0479	Power Module For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 12,549.90	Purchase
Q0480	Driver For Use With Pneumatic Ventricular Assist Device, Replacement Only	\$ 94,348.98	Purchase
Q0481	Microprocessor Control Unit For Use With Electric Ventricular Assist Device, Replacement Only	\$ 15,222.12	Purchase
Q0482	Microprocessor Control Unit For Use With Electric/Pneumatic Combination Ventricular Assist Device, Replacement Only	\$ 4,767.85	Purchase
Q0483	Monitor/Display Module For Use With Electric Ventricular Assist Device, Replacement Only	\$ 19,641.41	Purchase
Q0484	Monitor/Display Module For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 3,814.25	Purchase
Q0485	Monitor Control Cable For Use With Electric Ventricular Assist Device, Replacement Only	\$ 368.29	Purchase
Q0486	Monitor Control Cable For Use With Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 306.49	Purchase
Q0487	Leads (Pneumatic/Electrical) For Use With Any Type Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 357.57	Purchase
Q0489	Power Pack Base For Use With Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 17,028.05	Purchase
Q0490	Emergency Power Source For Use With Electric Ventricular Assist Device, Replacement Only	\$ 736.53	Purchase
Q0491	Emergency Power Source For Use With Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 1,157.97	Purchase
Q0492	Emergency Power Supply Cable For Use With Electric Ventricular Assist Device, Replacement Only	\$ 93.29	Purchase
Q0493	Emergency Power Supply Cable For Use With Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 265.64	Purchase
Q0494	Emergency Hand Pump For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 224.78	Purchase
Q0495	Battery/Power Pack Charger For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 4,375.78	Purchase
Q0496	Battery, Other Than Lithium-Ion, For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 1,570.53	Purchase
Q0497	Battery Clips For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 490.44	Purchase
Q0498	Holster For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 538.09	Purchase
Q0499	Belt/Vest/Bag For Use To Carry External Peripheral Components Of Any Type Ventricular Assist Device, Replacement Only	\$ 174.83	Purchase
Q0500	Filters For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 31.98	Purchase
Q0501	Shower Cover For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 535.00	Purchase
Q0502	Mobility Cart For Pneumatic Ventricular Assist Device, Replacement Only	\$ 681.09	Purchase
Q0503	Battery For Pneumatic Ventricular Assist Device, Replacement Only, Each	\$ 1,362.24	Purchase
Q0504	Power Adapter For Pneumatic Ventricular Assist Device, Replacement Only, Vehicle Type	\$ 718.81	Purchase
Q0506	Battery, Lithium-Ion, For Use With Electric Or Electric/Pneumatic Ventricular Assist Device, Replacement Only	\$ 894.74	Purchase
Q0508	Miscellaneous Supply Or Accessory For Use With An Implanted Ventricular Assist Device	Price By Report	

Code	Description	Fee	Purchase or Rental
Q0509	Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist	Price By Report	
	Device For Which Payment Was Not Made Under Medicare Part A  Cranial Remolding Orthosis Pediatric, Rigid, With Soft Interface Material, Custom		
S1040	Fabricated	\$ 1,917.17	Purchase
	Home Infusion Therapy, Catheter Care/Maintenance, Simple(Single Lumen), Includes		
S5498	Administrative Services, Professional Pharmacy Services, Care Coordination And All		
	Necessary Supplies And Equipment, (Drugs And Nursing Visits Coded Separately),	\$ 73.23	
	Home Infusion Therapy, Catheter Care/Maintenance, Complex(More Than One Lumen),		
S5501	Includes Administrative Services, Professional Pharmacy Services, Care Coordination And All Necessary Supplies And Equipment, (Drugs And Nursing Visits Coded		
	Separately),	\$ 49.35	
	Home Infusion Therapy, Total Parenteral Nutrition(TPN); Adminisrative Services,	•	
S9364	Professional Pharmacy Services, Care Coordination, And All Necessary Supplies And		
	Equipment(Includes Standard TPN Formula-Lipids, Specialty Amino Acid Formulas,	Price By Report	
S9445	Drugs, And Nursing Visits Coded Separately) Patient Education, Not Otherwise Classified, Non-Physician Provider, Individual, Per	,	Purchase
	Session  Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 24	* *****	
	Hours; Administrative Services, Professional Pharmacy Services, Care Coordination,		
S9500	And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded	\$ 284.06	Purchase
	Separately), Pe		
	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 12 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination,		
S9501	And All Necessary Supplies And Equipment (Drugs And Nursing Visits Coded	\$ 301.82	Purchase
	Separately), Pe		
	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal Therapy; Once Every 8 Hours,		
S9502	Administrative Services, Professional Pharmacy Services, Care Coordination, And All	\$ 346.64	Purchase
	Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe		
	Hama Infrisian Thereny, Antihintia Antiviral Or Antifungal, Once Tyery C. Hayre		
S9503	Home Infusion Therapy, Antibiotic, Antiviral, Or Antifungal; Once Every 6 Hours; Administrative Services, Professional Pharmacy Services, Care Coordination, And All	\$ 538.62	Purchase
00000	Necessary Supplies And Equipment (Drugs And Nursing Visits Coded Separately), Pe	Ψ 000.02	i dionasc
T4521	Adult Sized Disposable Incontinence Product, Brief/Diaper, Small, Each	Price By Report	
T4522	Adult Sized Disposable Incontinence Product, Brief/Diaper, Medium, Each	Price By Report	
T4523	Adult Sized Disposable Incontinence Product, Brief/Diaper, Large, Each	Price By Report	
T4524	Adult Sized Disposable Incontinence Product, Brief/Diaper, Extra Large, Each	Price By Report	
T4525	Adult Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Small Size, Each	Price By Report	
T4526	Adult Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Medium Size, Each	Price By Report	
T4527	Adult Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Large Size, Each	Price By Report	
T4528	Adult Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Extra Large	Price By Report	
1 1020	Size, Each	Theo By Hopert	
T4529	Pediatric Sized Disposable Incontinence Product, Brief/Diaper, Small/Medium Size, Each	Price By Report	
T4530	Pediatric Sized Disposable Incontinence Product, Brief/Diaper, Large Size, Each	Price By Report	
T4531	Pediatric Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Small/Medium Size, Each	Price By Report	
T4532	Pediatric Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Large Size, Each	Price By Report	
T4533	Youth Sized Disposable Incontinence Product, Brief/Diaper, Each	Price By Report	
T4534	Youth Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Each	Price By Report	
T4535	Disposable Liner/Shield/Guard/Pad/Undergarment, For Incontinence, Each	Price By Report	
T4536	Incontinence Product, Protective Underwear/Pull-On, Reusable, Any Size, Each	Price By Report	
T4537 T4538	Incontinence Product, Protective Underpad, Reusable, Bed Size, Each	Price By Report	
T4538	Diaper Service, Reusable Diaper, Each Diaper Incontinence Product, Diaper/Brief, Reusable, Any Size, Each	Price By Report Price By Report	
T4539	Incontinence Product, Diaper/Brief, Reusable, Arry Size, Each  Incontinence Product, Protective Underpad, Reusable, Chair Size, Each	Price By Report	
	Incontinence Product, Disposable Underpad, Large, Each	Price By Report	
T4541	International Francis Biopocable Ortaorpaa, Earge, Each		
T4541 T4542	Incontinence Product, Disposable Underpad, Small Size, Each	Price By Report	

Code	Description	Fee	Purchase or Rental
T4544	Adult Sized Disposable Incontinence Product, Protective Underwear/Pull-On, Above Extra Large, Each	Price By Report	
T4545	Incontinence Product, Disposable, Penile Wrap, Each	Price By Report	
T5001	Positioning Seat For Persons With Special Orthopedic Needs, For Use In Vehicles The Usual Rate Of Payment Is Cost Invoice Plus 5%. Please See Prior Auth Paper Work.	Price By Report	
V5014	Repair/Modification Of A Hearing Aid	\$ 164.88	Purchase
V5050	Hearing Aid, Monaural, In The Ear	\$ 771.12	Purchase
V5060	Hearing Aid, Monaural, Behind The Ear	\$ 748.68	Purchase
V5130	Binaural, In The Ear	\$ 1,340.56	Purchase
V5140	Binaural, Behind The Ear	\$ 1,340.56	Purchase
V5171	Hearing Aid, Contralateral Routing Device, Monaural, In The Ear (Ite)	\$ 771.12	Purchase
V5172	Hearing Aid, Contralateral Routing Device, Monaural, In The Canal (Itc)	\$ 771.12	Purchase
V5181	Hearing Aid, Contralateral Routing Device, Monaural, Behind The Ear (Bte)	\$ 748.68	Purchase
V5211	Hearing Aid, Contralateral Routing System, Binaural, Ite/Ite	\$ 1,340.56	Purchase
V5212	Hearing Aid, Contralateral Routing System, Binaural, Ite/Itc	\$ 1,340.56	Purchase
V5213	Hearing Aid, Contralateral Routing System, Binaural, Ite/Bte	\$ 1,340.56	Purchase
V5214	Hearing Aid, Contralateral Routing System, Binaural, Itc/Itc	\$ 1,340.56	Purchase
V5215	Hearing Aid, Contralateral Routing System, Binaural, Itc/Bte	\$ 1,340.56	Purchase
V5221	Hearing Aid, Contralateral Routing System, Binaural, Bte/Bte	\$ 1,340.56	Purchase
V5256	Hearing Aid, Digital, Monaural, Ite	\$ 771.12	Purchase
V5257	Hearing Aid, Digital, Monaural, Bte	\$ 748.68	Purchase
V5260	Hearing Aid, Digital, Binaural, Ite	\$ 1,340.56	Purchase
V5261	Hearing Aid, Digital, Binaural, Bte	\$ 1,340.56	Purchase
V5264	Ear Mold/Insert, Not Disposable, Any Type	\$ 60.90	Purchase
V5266	Battery For Use In Hearing Device	\$ 1.88	Purchase
V5299	Hearing Service, Miscellaneous (For Sd Medicaid - Pocket Amplifier Only).	\$ 268.11	Purchase
W8680	Other EPSDT DME	Price By Report	