

Montana Healthcare Programs Durable Medical Equipment Fee Schedule Explanation

Proposed Effective January 1, 2023

This proposed fee schedule will be updated with new and deleted CPT/HCPCS codes and rates published in the Calendar Year 2023 Medicare Physician, Durable Medical Equipment, CLAB, and ASP fee schedules. As the Medicare changes are currently unknown, some rates may increase or decrease.

Definitions:

Modifier:

When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

Description:

Procedure code short description. You must refer to the appropriate official CPT-4 Professional, HCPCS or CDT coding manual for complete definitions to assure correct coding.

Effective

This is the first date of service for which the listed fee is applicable.

Method – Source of Fee Determination:

Note: If a valid, current code is not present, that code may be a non-covered service

Fee Sched: Medicaid fee; not determined using RBRVS payment schedule

Medicare: Medicare-prevailing fee.

MSRP: Manufacturers Suggested Retail Price (MSRP): Equals a percentage of billed charges based on MSRP or the provider acquisition cost (when no MSRP is available)

PA:

Prior Authorization

Y: Prior authorization is required by this code

*Prior authorization will be required if the item has a reimbursement amount equal to or greater than \$1,000.00 or the MSRP is greater than \$1,334.00 on certain codes.

Non-Rural Fee or Rural Fee:

The Medicare-prevailing fee that is applicable will be determined by the zip code in which the member resides.

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