

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2026117 JULY 14, 2026

IHCP to update rates for certain DME and medical supply items effective Jan. 1, 2026

As announced in *Indiana Health Coverage Programs (IHCP) Bulletin* [BT2025156](#), the IHCP will change the rates for select durable medical equipment (DME) and medical supply Healthcare Common Procedure Coding System (HCPCS) procedure codes effective for dates of service (DOS) on or after **Jan. 1, 2026**. These HCPCS procedure codes are subject to the *21st Century Cures Act*. The HCPCS procedure codes impacted by this change, as well as their respective rates, are shown in [Table 1](#).



To determine the Medicaid allowed amount for covered DME and medical supplies that are subject to the *21st Century Cures Act*, the IHCP will use the lowest non-zero 2026 Indiana Medicare Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Fee Schedule amount or competitive bidding single payment amount as the Medicaid allowed amount for DOS on or after Jan. 1, 2026. The 2026 DMEPOS Fee Schedule will be available on the [Centers for Medicare & Medicaid Services \(CMS\) website](#) at cms.gov.

The fee-for-service (FFS) claim-processing system has been updated with the new rates. Claims processed during the indicated time frame for the procedure codes in Table 1 will be mass adjusted, as appropriate. Providers should see adjusted claims on remittance advices (RAs) beginning Aug. 12, 2026, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check-related).

This information will be reflected in the next regular update to the Professional Fee Schedule, accessible from the [IHCP Fee Schedules](#) webpage.

Prior authorization (PA), billing and reimbursement information applies to services delivered under the FFS delivery system.

Individual managed care organizations (MCOs) establish and publish PA requirements, billing and reimbursement criteria within the managed care delivery system. Questions about managed care PA, billing and reimbursement should be directed to the MCO with which the member is enrolled.

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPCS code	Modifier (if applicable)*	Code description	Max fee
A5514		Mult den insert dir carv/cam	\$55.16
A7007	NU	Lg vol nebulizer disposable	\$4.37
A7017	NU	Nebulizer not used w oxygen	\$154.79
A7017	RR	Nebulizer not used w oxygen	\$15.48
E0100	NU	Cane adjust/fixed with tip	\$29.55
E0100	RR	Cane adjust/fixed with tip	\$8.44
E0105	NU	Cane adjust/fixed quad/3 pro	\$65.77
E0105	RR	Cane adjust/fixed quad/3 pro	\$12.64
E0110	NU	Crutch forearm pair	\$110.58
E0110	RR	Crutch forearm pair	\$19.36
E0111	NU	Crutch forearm each	\$75.88
E0111	RR	Crutch forearm each	\$10.22
E0112	NU	Crutch underarm pair wood	\$47.84
E0112	RR	Crutch underarm pair wood	\$12.04
E0113	NU	Crutch underarm each wood	\$25.61
E0113	RR	Crutch underarm each wood	\$6.22
E0114	NU	Crutch underarm pair no wood	\$67.26
E0114	RR	Crutch underarm pair no wood	\$10.38
E0116	NU	Crutch underarm each no wood	\$34.18
E0116	RR	Crutch underarm each no wood	\$6.56
E0130	NU	Walker rigid adjust/fixed ht	\$58.47
E0130	RR	Walker rigid adjust/fixed ht	\$5.85
E0135	NU	Walker folding adjust/fixed	\$58.69
E0135	RR	Walker folding adjust/fixed	\$5.87
E0140	NU	Walker w trunk support	\$380.50
E0140	RR	Walker w trunk support	\$38.05
E0141	NU	Rigid wheeled walker adj/fix	\$60.25
E0141	RR	Rigid wheeled walker adj/fix	\$6.03
E0143	NU	Walker folding wheeled w/o s	\$60.25
E0143	RR	Walker folding wheeled w/o s	\$6.03
E0147	NU	Walker variable wheel resist	\$512.47
E0147	RR	Walker variable wheel resist	\$51.25
E0148	NU	Heavyduty walker no wheels	\$105.41
E0148	RR	Heavyduty walker no wheels	\$10.54
E0149	NU	Heavy duty wheeled walker	\$149.90
E0149	RR	Heavy duty wheeled walker	\$14.99
E0160	NU	Sitz type bath or equipment	\$37.86
E0160	RR	Sitz type bath or equipment	\$3.79
E0161	NU	Sitz bath/equipment w/faucet	\$32.16
E0161	RR	Sitz bath/equipment w/faucet	\$3.22
E0163	NU	Commode chair with fixed arm	\$66.63
E0163	RR	Commode chair with fixed arm	\$6.66

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0165	NU	Commode chair with detacharm	\$155.90
E0165	RR	Commode chair with detacharm	\$15.59
E0167	NU	Commode chair pail or pan	\$14.45
E0167	RR	Commode chair pail or pan	\$1.45
E0168	NU	Heavyduty/wide commode chair	\$148.05
E0168	RR	Heavyduty/wide commode chair	\$14.80
E0170	NU	Commode chair electric	\$2,086.90
E0170	RR	Commode chair electric	\$208.69
E0171	NU	Commode chair non-electric	\$391.30
E0171	RR	Commode chair non-electric	\$39.13
E0181	NU	Press pad alternating w/ pum	\$192.90
E0181	RR	Press pad alternating w/ pum	19.29
E0183	NU	Press underlay alter w/pump	192.90
E0183	RR	Press underlay alter w/pump	\$19.29
E0184	NU	Dry pressure mattress	\$194.60
E0184	RR	Dry pressure mattress	\$19.46
E0185	NU	Gel pressure mattress pad	\$208.16
E0185	RR	Gel pressure mattress pad	\$20.82
E0186	NU	Air pressure mattress	\$240.40
E0186	RR	Air pressure mattress	\$24.04
E0188	NU	Synthetic sheepskin pad	\$32.51
E0188	RR	Synthetic sheepskin pad	\$3.25
E0189	NU	Lambswool sheepskin pad	\$61.19
E0189	RR	Lambswool sheepskin pad	\$6.12
E0196	NU	Gel pressure mattress	\$421.80
E0196	RR	Gel pressure mattress	\$42.18
E0197	NU	Air pressure pad for mattres	\$268.50
E0197	RR	Air pressure pad for mattres	\$26.85
E0199	NU	Dry pressure pad for mattres	\$36.43
E0199	RR	Dry pressure pad for mattres	\$3.64
E0210	NU	Electric heat pad standard	\$39.56
E0210	RR	Electric heat pad standard	\$3.73
E0235	NU	Paraffin bath unit portable	\$245.80
E0235	RR	Paraffin bath unit portable	\$24.58
E0250	NU	Hosp bed fixed ht w/ mattres	\$750.00
E0250	RR	Hosp bed fixed ht w/ mattres	\$75.00
E0251	NU	Hosp bed fixd ht w/o mattres	\$728.00
E0251	RR	Hosp bed fixd ht w/o mattres	\$72.80
E0255	NU	Hospital bed var ht w/ mattr	\$758.90
E0255	RR	Hospital bed var ht w/ mattr	\$75.89
E0256	NU	Hospital bed var ht w/o matt	\$734.00
E0256	RR	Hospital bed var ht w/o matt	\$73.40

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0260	NU	Hosp bed semi-electr w/ matt	\$758.90
E0260	RR	Hosp bed semi-electr w/ matt	\$75.89
E0261	NU	Hosp bed semi-electr w/o mat	\$758.90
E0261	RR	Hosp bed semi-electr w/o mat	\$75.89
E0265	NU	Hosp bed total electr w/ mat	\$1,840.10
E0265	RR	Hosp bed total electr w/ mat	\$184.01
E0277	NU	Powered pres-redu air mattrs	\$2,300.20
E0277	RR	Powered pres-redu air mattrs	\$230.02
E0290	NU	Hosp bed fx ht w/o rails w/m	\$719.70
E0290	RR	Hosp bed fx ht w/o rails w/m	\$71.97
E0291	NU	Hosp bed fx ht w/o rail w/o	\$551.00
E0291	RR	Hosp bed fx ht w/o rail w/o	\$55.10
E0292	NU	Hosp bed var ht no sr w/matt	\$745.20
E0292	RR	Hosp bed var ht no sr w/matt	\$74.52
E0293	NU	Hosp bed var ht no sr no mat	\$703.10
E0293	RR	Hosp bed var ht no sr no mat	\$70.31
E0294	NU	Hosp bed semi-elect w/ mattr	\$758.90
E0294	RR	Hosp bed semi-elect w/ mattr	\$75.89
E0295	NU	Hosp bed semi-elect w/o matt	\$758.90
E0295	RR	Hosp bed semi-elect w/o matt	\$75.89
E0300	NU	Enclosed ped crib hosp grade	\$3,199.10
E0300	RR	Enclosed ped crib hosp grade	\$319.91
E0301	NU	Hd hosp bed, 350-600 lbs	\$2,014.10
E0301	RR	Hd hosp bed, 350-600 lbs	\$201.41
E0302	NU	Ex hd hosp bed > 600 lbs	\$5,765.80
E0302	RR	Ex hd hosp bed > 600 lbs	\$576.58
E0303	NU	Hosp bed hvy dty xtra wide	\$2,050.10
E0303	RR	Hosp bed hvy dty xtra wide	\$205.01
E0304	NU	Hosp bed xtra hvy dty x wide	\$6,085.80
E0304	RR	Hosp bed xtra hvy dty x wide	\$608.58
E0371	NU	Nonpower mattress overlay	\$2,300.20
E0371	RR	Nonpower mattress overlay	\$230.02
E0372	NU	Powered air mattress overlay	\$2,300.20
E0372	RR	Powered air mattress overlay	\$230.02
E0373	NU	Nonpowered pressure mattress	\$2,300.20
E0373	RR	Nonpowered pressure mattress	\$230.02
E0424	RR	Stationary compressed gas O2	\$99.31
E0424	RR QB	Stationary compressed gas O2	\$99.31
E0424	RR QF	Stationary compressed gas O2	\$99.31
E0431	RR	Portable gaseous O2	\$22.12
E0431	RR QB	Portable gaseous O2	\$49.66
E0431	RR QF	Portable gaseous O2	\$49.66

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0433	RR	Portable liquid oxygen sys	\$46.28
E0433	RR QB	Portable liquid oxygen sys	\$49.66
E0433	RR QF	Portable liquid oxygen sys	\$49.66
E0434	RR	Portable liquid O2	\$46.28
E0434	RR QB	Portable liquid O2	\$49.66
E0434	RR QF	Portable liquid O2	\$49.66
E0439	RR	Stationary liquid O2	\$99.31
E0439	RR QB	Stationary liquid O2	\$99.31
E0439	RR QF	Stationary liquid O2	\$99.31
E0441		Stationary o2 contents, gas	\$67.56
E0442		Stationary o2 contents, liq	\$67.56
E0443		Portable O2 contents, gas	\$60.65
E0444		Portable O2 contents, liquid	\$60.65
E0465	RR	Home vent invasive interface	\$1,156.28
E0466	RR	Home vent non-invasive inter	\$1,156.28
E0467	RR	Home vent multi-function	\$1,368.33
E0468	RR	Home vent dual fnct incl all	\$1,258.42
E0469	NU	Lung expans high oscil neb	\$15,674.80
E0469	RR	Lung expans high oscil neb	\$1,567.48
E0470	NU	Rad w/o backup non-inv intrfc	\$1,366.70
E0470	RR	Rad w/o backup non-inv intrfc	\$136.67
E0471	NU	Rad w/backup non inv intrfc	\$3,440.30
E0471	RR	Rad w/backup non inv intrfc	\$344.03
E0472	NU	Rad w backup invasive intrfc	\$5,339.70
E0472	RR	Rad w backup invasive intrfc	\$533.97
E0482	NU	Cough stimulating device	\$6,128.60
E0482	RR	Cough stimulating device	\$612.86
E0483	NU	Hi freq chest wall oscil sys	\$15,151.20
E0483	RR	Hi freq chest wall oscil sys	\$1,515.12
E0500	RR	Ippb all types	\$149.03
E0570	NU	Nebulizer with compression	\$77.10
E0570	RR	Nebulizer with compression	\$7.71
E0572	NU	Aerosol compressor adjust pr	\$394.40
E0572	RR	Aerosol compressor adjust pr	\$39.44
E0574	NU	Ultrasonic generator w svneb	\$573.60
E0574	RR	Ultrasonic generator w svneb	\$57.36
E0585	NU	Nebulizer w/ compressor & he	\$385.00
E0585	RR	Nebulizer w/ compressor & he	\$38.50
E0600	NU	Suction pump portab hom modl	\$554.60
E0600	RR	Suction pump portab hom modl	\$55.46
E0601	NU	Cont airway pressure device	\$526.50
E0601	RR	Cont airway pressure device	\$52.65

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0607	NU	Blood glucose monitor home	\$95.23
E0607	RR	Blood glucose monitor home	\$9.52
E0617	NU	Automatic ext defibrillator	\$4,333.00
E0617	RR	Automatic ext defibrillator	\$433.30
E0617	NU KF	Automatic ext defibrillator	\$4,810.80
E0617	RR KF	Automatic ext defibrillator	\$481.08
E0620	NU	Cap bld skin piercing laser	\$1,245.90
E0620	RR	Cap bld skin piercing laser	\$124.59
E0627	NU	Seat lift mech, electric any	\$338.24
E0627	RR	Seat lift mech, electric any	\$33.82
E0629	NU	Seat lift mech, non-electric	\$334.26
E0629	RR	Seat lift mech, non-electric	\$33.43
E0630	NU	Patient lift hydraulic	\$741.80
E0630	RR	Patient lift hydraulic	\$74.18
E0635	NU	Patient lift electric	\$1,443.80
E0635	RR	Patient lift electric	\$144.38
E0636	NU	Pt support & positioning sys	\$12,469.80
E0636	RR	Pt support & positioning sys	\$1,246.98
E0639	NU	Moveable patient lift system	\$1,589.80
E0639	RR	Moveable patient lift system	\$158.98
E0640	NU	Fixed patient lift system	\$1,589.80
E0640	RR	Fixed patient lift system	\$158.98
E0650	NU	Pneuma compresor non-segment	\$1,026.39
E0650	RR	Pneuma compresor non-segment	\$126.66
E0651	NU	Pneum compressor segmental	\$1,146.81
E0651	RR	Pneum compressor segmental	\$133.71
E0652	NU	Pneum compres w/cal pressure	\$7,541.66
E0652	RR	Pneum compres w/cal pressure	\$746.69
E0680	NU	Non pneum comp control cal	\$7,541.70
E0680	RR	Non pneum comp control cal	\$754.17
E0683	NU	Non pneu peristaltic comp pmp	\$815.30
E0683	RR	Non pneu peristaltic comp pmp	\$81.53
E0691	NU	Uvl pnl 2 sq ft or less	\$1,280.61
E0691	RR	Uvl pnl 2 sq ft or less	\$128.05
E0692	NU	Uvl sys panel 4 ft	\$1,608.10
E0692	RR	Uvl sys panel 4 ft	\$160.78
E0693	NU	Uvl sys panel 6 ft	\$1,982.33
E0693	RR	Uvl sys panel 6 ft	\$198.25
E0694	NU	Uvl md cabinet sys 6 ft	\$6,309.58
E0694	RR	Uvl md cabinet sys 6 ft	\$630.95
E0720	NU	Tens two lead	\$91.39
E0730	NU	Tens four lead	\$92.34

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0740	NU	Non-implant pelv flr e-stim	\$745.20
E0740	RR	Non-implant pelv flr e-stim	\$74.52
E0745	NU	Neuromuscular stim for shock	\$1275.80
E0745	RR	Neuromuscular stim for shock	\$127.58
E0747	NU KF	Elec osteogen stim not spine	\$5416.30
E0747	RR KF	Elec osteogen stim not spine	\$541.59
E0748	NU KF	Elec osteogen stim spinal	\$5,544.80
E0748	RR KF	Elec osteogen stim spinal	\$554.44
E0760	NU KF	Osteogen ultrasound stimltor	\$4,607.62
E0760	RR KF	Osteogen ultrasound stimltor	\$460.76
E0779	NU	Amb infusion pump mechanical	\$238.30
E0779	RR	Amb infusion pump mechanical	\$23.83
E0780	NU	Mech amb infusion pump <8hrs	\$14.78
E0781	NU	External ambulatory infus pu	\$3,093.30
E0781	RR	External ambulatory infus pu	\$309.33
E0784	NU	Ext amb infusn pump insulin	\$5,577.50
E0784	RR	Ext amb infusn pump insulin	\$557.75
E0791	NU	Parenteral infusion pump sta	\$3,674.80
E0791	RR	Parenteral infusion pump sta	\$367.48
E0849	NU	Cervical pneum trac equip	\$734.50
E0849	RR	Cervical pneum trac equip	\$73.45
E0855	NU	Cervical traction equipment	\$716.30
E0855	RR	Cervical traction equipment	\$71.63
E0860	NU	Tract equip cervical tract	\$54.92
E0860	RR	Tract equip cervical tract	\$9.29
E0870	NU	Tract frame attach footboard	\$165.77
E0870	RR	Tract frame attach footboard	\$19.11
E0900	NU	Trac stand free stand pelvic	\$170.11
E0900	RR	Trac stand free stand pelvic	\$39.37
E0910	NU	Trapeze bar attached to bed	\$143.90
E0910	RR	Trapeze bar attached to bed	\$14.39
E0911	NU	Hd trapeze bar attach to bed	\$523.30
E0911	RR	Hd trapeze bar attach to bed	\$52.33
E0912	NU	Hd trapeze bar free standing	\$1,029.70
E0912	RR	Hd trapeze bar free standing	\$102.97
E0920	NU	Fracture frame attached to b	\$611.80
E0920	RR	Fracture frame attached to b	\$61.18
E0935	RR	Cont pas motion exercise dev	\$32.42
E0940	NU	Trapeze bar free standing	\$267.90
E0940	RR	Trapeze bar free standing	\$26.79
E0941	NU	Gravity assisted traction de	\$607.00
E0941	RR	Gravity assisted traction de	\$60.70

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E0948	NU	Fracture frame attached to b	\$710.56
E0948	RR	Fracture frame attached to b	\$71.03
E1031	NU	Rollabout chair with casters	\$537.60
E1031	RR	Rollabout chair with casters	\$53.76
E1035	NU	Patient transfer system <300	\$7,318.70
E1035	RR	Patient transfer system <300	\$731.87
E1036	NU	Patient transfer system >300	\$10,756.20
E1036	RR	Patient transfer system >300	\$1,075.62
E1037	NU	Transport chair, ped size	\$1,381.60
E1037	RR	Transport chair, ped size	\$138.16
E1038	NU	Transport chair pt wt<=300lb	\$178.90
E1038	RR	Transport chair pt wt<=300lb	\$17.89
E1039	NU	Transport chair pt wt >300lb	\$411.30
E1039	RR	Transport chair pt wt >300lb	\$41.13
E1161	NU	Manual adult wc w tiltinspac	\$3,371.90
E1161	RR	Manual adult wc w tiltinspac	\$337.19
E1232	NU	Folding ped wc tilt-in-space	\$3,047.80
E1232	RR	Folding ped wc tilt-in-space	\$304.78
E1233	NU	Rig ped wc tltnspc w/o seat	\$3,157.60
E1233	RR	Rig ped wc tltnspc w/o seat	\$315.76
E1234	NU	Fld ped wc tltnspc w/o seat	\$2,749.10
E1234	RR	Fld ped wc tltnspc w/o seat	\$274.91
E1235	NU	Rigid ped wc adjustable	\$2,647.20
E1235	RR	Rigid ped wc adjustable	\$264.72
E1236	NU	Folding ped wc adjustable	\$2,335.50
E1236	RR	Folding ped wc adjustable	\$233.55
E1237	NU	Rgd ped wc adjstabl w/o seat	\$2,355.70
E1237	RR	Rgd ped wc adjstabl w/o seat	\$235.57
E1238	NU	Fld ped wc adjstabl w/o seat	\$2,335.50
E1238	RR	Fld ped wc adjstabl w/o seat	\$233.55
E1390	RR	Oxygen concentrator	\$99.31
E1390	RR QB	Oxygen concentrator	\$99.31
E1390	RR QF	Oxygen concentrator	\$99.31
E1391	RR	Oxygen concentrator, dual	\$99.31
E1391	RR QB	Oxygen concentrator, dual	\$99.31
E1391	RR QF	Oxygen concentrator, dual	\$99.31
E1392	RR	Portable oxygen concentrator	\$46.28
E1392	RR QB	Portable oxygen concentrator	\$49.66
E1392	RR QF	Portable oxygen concentrator	\$49.66
E1800	NU	Adjust elbow ext/flex device	\$1,745.80
E1800	RR	Adjust elbow ext/flex device	\$174.58
E1801	NU	Sps elbow device	\$1,838.60

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E1801	RR	Sps elbow device	\$183.86
E1802	NU	Adjst forearm pro/sup device	\$4,657.75
E1802	RR	Adjst forearm pro/sup device	\$465.75
E1803	NU	Adjust elbow extension dev	\$1,745.80
E1803	RR	Adjust elbow extension dev	\$174.58
E1804	NU	Adjust elbow flexion dev	\$1,745.80
E1804	RR	Adjust elbow flexion dev	\$174.58
E1805	NU	Adjust wrist ext/flex device	\$1,800.70
E1805	RR	Adjust wrist ext/flex device	\$180.07
E1806	NU	Sps wrist device	\$1,509.70
E1806	RR	Sps wrist device	\$150.97
E1807	NU	Adjust wrist extension dev	\$1,800.70
E1807	RR	Adjust wrist extension dev	\$180.07
E1808	NU	Adjust wrist flexion device	\$1,800.70
E1808	RR	Adjust wrist flexion device	\$180.07
E1810	NU	Adjust knee ext/flex device	\$1,775.60
E1810	RR	Adjust knee ext/flex device	\$177.56
E1811	NU	Sps knee device	\$1,911.30
E1811	RR	Sps knee device	\$191.13
E1813	NU	Adjust knee extension dev	\$1,775.60
E1813	RR	Adjust knee extension dev	\$177.56
E1814	NU	Adjust knee flexion device	\$1,775.60
E1814	RR	Adjust knee flexion device	\$177.56
E1815	NU	Adjust ankle ext/flex device	\$1,800.70
E1815	RR	Adjust ankle ext/flex device	\$180.07
E1816	NU	Sps ankle device	\$1,941.70
E1816	RR	Sps ankle device	\$194.17
E1818	NU	Sps forearm device	\$1,982.10
E1818	RR	Sps forearm device	\$198.21
E1820	NU	Soft interface material	\$115.42
E1820	RR	Soft interface material	\$11.55
E1822	NU	Adjust ankle extension dev	\$1,800.70
E1822	RR	Adjust ankle extension dev	\$180.07
E1823	NU	Adjust ankle flexion device	\$1,800.70
E1823	RR	Adjust ankle flexion device	\$180.07
E1825	NU	Adjust finger ext/flex devc	\$1,800.70
E1825	RR	Adjust finger ext/flex devc	\$180.07
E1826	NU	Adjust finger extension dev	\$1,800.70
E1826	RR	Adjust finger extension dev	\$180.07
E1827	NU	Adjust finger flexion device	\$1,800.70
E1827	RR	Adjust finger flexion device	\$180.07
E1828	NU	Adjust toe extension device	\$1,800.70

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HCPCS code	Modifier (if applicable)*	Code description	Max fee
E1828	RR	Adjust toe extension device	\$180.07
E1829	NU	Adjust toe flexion device	\$1,800.70
E1829	RR	Adjust toe flexion device	\$180.07
E1830	NU	Adjust toe ext/flex device	\$1,800.70
E1830	RR	Adjust toe ext/flex device	\$180.07
E1831	NU	Static str toe dev ext/flex	\$941.50
E1831	RR	Static str toe dev ext/flex	\$94.15
E1840	NU	Adj shoulder ext/flex device	\$5,454.20
E1840	RR	Adj shoulder ext/flex device	\$545.42
E1841	NU	Static str shldr dev rom adj	\$6,455.70
E1841	RR	Static str shldr dev rom adj	\$645.57
E2000	NU	Gastric suction pump hme mdl	\$738.70
E2000	RR	Gastric suction pump hme mdl	\$73.87
E2100	NU	Bld glucose monitor w voice	\$779.12
E2100	RR	Bld glucose monitor w voice	\$77.94
E2101	NU	Bld glucose monitor w lance	\$268.71
E2101	RR	Bld glucose monitor w lance	\$26.88
E2102	NU KF	Adju cgm receiver/monitor	\$189.08
E2102	RR KF	Adju cgm receiver/monitor	\$18.92
E2103	NU	Non-adju cgm receiver/mon	\$256.09
E2103	RR	Non-adju cgm receiver/mon	\$25.61
E2103	NU KF	Non-adju cgm receiver/mon	\$284.30
E2103	RR KF	Non-adju cgm receiver/mon	\$28.43
E2402	NU	Neg press wound therapy pump	\$8,221.10
E2402	RR	Neg press wound therapy pump	\$822.11
E2500	NU	Sgd digitized pre-rec <=8min	\$557.30
E2500	RR	Sgd digitized pre-rec <=8min	\$55.73
E2506	NU	Sgd prerec msg > 40 min	\$3,296.27
E2506	RR	Sgd prerec msg > 40 min	\$329.61
E2508	NU	Sgd spelling phys contact	\$5,097.15
E2508	RR	Sgd spelling phys contact	\$509.71
E2510	NU	Sgd w multi methods msg/accs	\$9,645.69
E2510	RR	Sgd w multi methods msg/accs	\$964.56
K0001	NU	Standard wheelchair	\$295.90
K0001	RR	Standard wheelchair	\$29.59
K0002	NU	Stnd hemi (low seat) whlchr	\$499.90
K0002	RR	Stnd hemi (low seat) whlchr	\$49.99
K0003	NU	Lightweight wheelchair	\$434.70
K0003	RR	Lightweight wheelchair	\$43.47
K0004	NU	High strength ltwt whlchr	\$522.30
K0004	RR	High strength ltwt whlchr	\$52.23
K0005	NU	Ultralightweight wheelchair	\$2,634.76

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPCS code	Modifier (if applicable)*	Code description	Max fee
K0005	RR	Ultralightweight wheelchair	\$263.45
K0006	NU	Heavy duty wheelchair	\$769.20
K0006	RR	Heavy duty wheelchair	\$76.92
K0007	NU	Extra heavy duty wheelchair	\$1,094.40
K0007	RR	Extra heavy duty wheelchair	\$109.44
K0738	RR	Portable gas oxygen system	\$46.28
K0738	RR QB	Portable gas oxygen system	\$49.66
K0738	RR QF	Portable gas oxygen system	\$49.66
K0800	NU	Pov group 1 std up to 300lbs	\$1,021.32
K0800	RR	Pov group 1 std up to 300lbs	\$102.13
K0801	NU	Pov group 1 hd 301-450 lbs	\$1,845.02
K0801	RR	Pov group 1 hd 301-450 lbs	\$185.40
K0802	NU	Pov group 1 vhd 451-600 lbs	\$2,546.17
K0802	RR	Pov group 1 vhd 451-600 lbs	\$254.62
K0806	NU	Pov group 2 std up to 300lbs	\$1,748.83
K0806	RR	Pov group 2 std up to 300lbs	\$174.88
K0813	NU	Pwc gp 1 std port seat/back	\$2,182.86
K0813	RR	Pwc gp 1 std port seat/back	\$327.43
K0814	NU	Pwc gp 1 std port cap chair	\$2,167.13
K0814	RR	Pwc gp 1 std port cap chair	\$325.07
K0816	NU	Pwc gp 1 std cap chair	\$2,266.73
K0816	RR	Pwc gp 1 std cap chair	\$340.01
K0821	NU	Pwc gp 2 std port cap chair	\$2,289.33
K0821	RR	Pwc gp 2 std port cap chair	\$343.40
K0822	NU	Pwc gp 2 std seat/back	\$2,417.66
K0822	RR	Pwc gp 2 std seat/back	\$362.65
K0823	NU	Pwc gp 2 std cap chair	\$2,291.93
K0823	RR	Pwc gp 2 std cap chair	\$343.79
K0824	NU	Pwc gp 2 hd seat/back	\$3,452.59
K0824	RR	Pwc gp 2 hd seat/back	\$517.89
K0825	NU	Pwc gp 2 hd cap chair	\$3,150.99
K0825	RR	Pwc gp 2 hd cap chair	\$472.65
K0826	NU	Pwc gp 2 vhd seat/back	\$6,389.58
K0826	RR	Pwc gp 2 vhd seat/back	\$958.44
K0827	NU	Pwc gp vhd cap chair	\$5,507.79
K0827	RR	Pwc gp vhd cap chair	\$826.17
K0829	NU	Pwc gp 2 xtra hd cap chair	\$7,390.78
K0829	RR	Pwc gp 2 xtra hd cap chair	\$1,108.62
K0835	NU	Pwc gp2 std sing pow opt s/b	\$2,995.66
K0835	RR	Pwc gp2 std sing pow opt s/b	\$449.35
K0836	NU	Pwc gp2 std sing pow opt cap	\$3,107.13
K0836	RR	Pwc gp2 std sing pow opt cap	\$466.07

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPCS code	Modifier (if applicable)*	Code description	Max fee
K0837	NU	Pwc gp 2 hd sing pow opt s/b	\$3,842.26
K0837	RR	Pwc gp 2 hd sing pow opt s/b	\$576.34
K0838	NU	Pwc gp 2 hd sing pow opt cap	\$3,405.52
K0838	RR	Pwc gp 2 hd sing pow opt cap	\$510.83
K0839	NU	Pwc gp2 vhd sing pow opt s/b	\$5,103.92
K0839	RR	Pwc gp2 vhd sing pow opt s/b	\$765.59
K0840	NU	Pwc gp2 xhd sing pow opt s/b	\$7,836.05
K0840	RR	Pwc gp2 xhd sing pow opt s/b	\$1,175.41
K0841	NU	Pwc gp2 std mult pow opt s/b	\$3,375.86
K0841	RR	Pwc gp2 std mult pow opt s/b	\$506.38
K0842	NU	Pwc gp2 std mult pow opt cap	\$3,370.92
K0842	RR	Pwc gp2 std mult pow opt cap	\$505.64
K0843	NU	Pwc gp2 hd mult pow opt s/b	\$4,001.72
K0843	RR	Pwc gp2 hd mult pow opt s/b	\$600.26
K0848	NU	Pwc gp 3 std seat/back	\$6,491.05
K0848	RR	Pwc gp 3 std seat/back	\$973.66
K0849	NU	Pwc gp 3 std cap chair	\$6,240.72
K0849	RR	Pwc gp 3 std cap chair	\$936.11
K0850	NU	Pwc gp 3 hd seat/back	\$7,529.18
K0850	RR	Pwc gp 3 hd seat/back	\$1,129.38
K0851	NU	Pwc gp 3 hd cap chair	\$7,239.45
K0851	RR	Pwc gp 3 hd cap chair	\$1,085.92
K0853	NU	Pwc gp 3 vhd cap chair	\$8,936.71
K0853	RR	Pwc gp 3 vhd cap chair	\$1,340.51
K0856	NU	Pwc gp3 std sing pow opt s/b	\$6,967.25
K0856	RR	Pwc gp3 std sing pow opt s/b	\$1,045.09
K0857	NU	Pwc gp3 std sing pow opt cap	\$7,106.98
K0857	RR	Pwc gp3 std sing pow opt cap	\$1,066.05
K0858	NU	Pwc gp3 hd sing pow opt s/b	\$8,644.38
K0858	RR	Pwc gp3 hd sing pow opt s/b	\$1,296.66
K0859	NU	Pwc gp3 hd sing pow opt cap	\$8,244.18
K0859	RR	Pwc gp3 hd sing pow opt cap	\$1,236.63
K0860	NU	Pwc gp3 vhd sing pow opt s/b	\$12,349.70
K0860	EE	Pwc gp3 vhd sing pow opt s/b	\$1,852.46
K0861	NU	Pwc gp3 std mult pow opt s/b	\$6,978.52
K0861	RR	Pwc gp3 std mult pow opt s/b	\$1,046.78
K0862	NU	Pwc gp3 hd mult pow opt s/b	\$8,644.38

Table 1 – DME and medical supply procedure codes with updated rate, effective for DOS on or after Jan. 1, 2026

HCPSC code	Modifier (if applicable)*	Code description	Max fee
K0862	RR	Pwc gp3 hd mult pow opt s/b	\$1,296.66
K0863	NU	Pwc gp3 vhd mult pow opt s/b	\$12,349.70
K0863	RR	Pwc gp3 vhd mult pow opt s/b	\$1,852.46
K0864	NU	Pwc gp3 xhd mult pow opt s/b	\$14,696.10
K0864	RR	Pwc gp3 xhd mult pow opt s/b	\$2,204.42

*NU = New durable medical equipment purchase

RR = Rental of durable medical equipment

QB = Prescribed amounts of stationary oxygen for daytime use while at rest and nighttime use differ and the average of the two amounts exceeds four liters per minute (LPM) and portable oxygen is prescribed

QF = Prescribed amount of stationary oxygen while at rest exceeds four LPM and portable oxygen is prescribed

KF = Item designated by the U.S. Food and Drug Administration (FDA) as a Class III device

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