State of California

Department of Industrial Relations

DIVISION OF WORKERS’ COMPENSATION



**Order of the Administrative Director of the**

**Division of Workers’ Compensation**

**Official Medical Fee Schedule - Durable Medical Equipment,**

**Prosthetics, Orthotics, Supplies**

**Effective for Services Rendered on or after January 1, 2020**

Pursuant to Labor Code section 5307.1, subdivision (g)(2), the Administrative Director of the Division of Workers’ Compensation orders that the Durable Medical Equipment, Prosthetics, Orthotics, Supplies portion of the Official Medical Fee Schedule contained in title 8, California Code of Regulations, section 9789.60, is adjusted to conform to changes to the Medicare payment system that were adopted by the Centers for Medicare & Medicaid Services (CMS) in the calendar year 2020 annual DMEPOS Fee Schedule update.

Medicare Data Source and Incorporation by Reference

Effective for services rendered on or after January 1, 2020**,** the maximum reasonable fees for

Durable Medical Equipment, Prosthetics, Orthotics, Supplies shall not exceed 120% of the applicable California fees set forth in the Medicare calendar year 2020 “Durable Medical Equipment, Prosthetics/Orthotics, and Supplies (DMEPOS) Fee Schedule” revised effective January 2020, contained in the electronic file “[DME20-A (ZIP)](https://www.cms.gov/medicaremedicare-fee-service-paymentdmeposfeescheddmepos-fee-schedule/dme20a)” which is adopted and incorporated by reference, excluding the “Former CBA Fee Schedule File”, “Former CBA National Mail-Order DTS Fee Schedule File”, and “Former CBA Zip Code File”.

The fee schedule data file (DMEPOS\_JAN) sets forth two columns for California labeled: “CA (NR)” [California Non-Rural] and “CA (R)” [California Rural]. For the services on or after January 1, 2020, payment shall not exceed 120% of the fee set forth for the HCPCS code in the CA (NR) column, except the fee shall not exceed 120% of the fee set forth in the CA (R) column if the injured worker’s residence zip code appears on the DMERuralZip\_Q12020 file. Where column CA (NR) sets forth a fee for a code, but CA (R) for the code is listed as “0.00” the fee shall not exceed 120% of the CA (NR) fee, regardless of whether the injured worker’s address zip code is rural or non-rural.

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[DME20-A (ZIP)](https://www.cms.gov/medicaremedicare-fee-service-paymentdmeposfeescheddmepos-fee-schedule/dme20a) includes the following documents which are incorporated by reference:

DMEBACK Jan2020

DMEPEN\_JAN

DMEPOS\_JAN

DMEREAD 2020

DMERuralZip\_Q12020

Excluding:

Former CBA Fee Schedule File

Former CBA National Mail-Order DTS Fee Schedule File

Former CBA Zip Code File

[The CMS Manual System, Pub 100-4 Medicare Claims Processing, Transmittal 4470, Change Request 11570](https://www.cms.gov/files/document/r4470cp), December 6, 2019 sets forth the annual changes for 2020 and is relied upon in adopting this update Order.

The Medicare January 2020 DMEPOS Fee Schedule Information is available on the Centers for Medicare & Medicaid Services’ [DMEPOS Fee Schedule file webpage](https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSFeeSched/DMEPOS-Fee-Schedule.html).

This Order shall be published on the website of the Division of Workers’ Compensation:

<http://www.dir.ca.gov/dwc/OMFS9904.htm#3>.

**IT IS SO ORDERED.**

Dated: December 13, 2019 \_\_\_\_\_\_\_\_\_\_\_\_ /S/\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GEORGE P. PARISOTTO

Administrative Director of the

Division of Workers’ Compensation