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 July 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 July 2020 Quarter 3 DMEPOS Fee Schedule update.

Medicare Data Source and Incorporation by Reference

Effective for services rendered on or after July 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 July 2020, contained in the electronic file “[DME20-C (Updated 06/29/2020) (ZIP)](https://www.cms.gov/medicaremedicare-fee-service-paymentdmeposfeescheddmepos-fee-schedule/dme20-c),” 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 files (DMEPOS20\_JUL and DMEPEN20\_JUL) each set forth two columns for California labelled: “CA (NR)” [California Non-Rural] and “CA (R)” [California Rural]. For the services on or after July 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\_Q32020 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-C (Updated 06/29/2020) (ZIP)](https://www.cms.gov/medicaremedicare-fee-service-paymentdmeposfeescheddmepos-fee-schedule/dme20-c) includes the following documents which are incorporated by reference:

DMEBACK July2020

DMEPEN20\_JUL

DMEPOS20\_JUL

DMEREAD July2020

DMERuralZip\_Q32020

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 10168, Change Request 11810](https://www.cms.gov/files/document/r10168cp.pdf), June 5, 2020 sets forth the third quarter changes and is relied upon in adopting this update Order.

This Order shall be published on the Division of Workers’ Compensation [DMEPOS webpage](https://www.dir.ca.gov/dwc/OMFS9904.htm#3).

**IT IS SO ORDERED.**

Dated: June 29, 2020 /S/ GEORGE P. PARISOTTO\_\_\_\_\_\_\_

GEORGE P. PARISOTTO

Administrative Director of the

Division of Workers’ Compensation