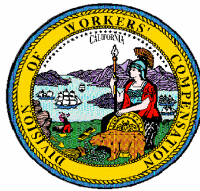


State of California
Department of Industrial Relations
DIVISION OF WORKERS' COMPENSATION



**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, 2016**

Pursuant to Labor Code section 5307.1(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 for calendar year 2016.

Medicare Data Source and Incorporation by Reference

Effective for services rendered on or after January 1, 2016, 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 2016 "Durable Medical Equipment, Prosthetics/Orthotics, and Supplies (DMEPOS) Fee Schedule" revised for January 2016, contained in the electronic file "[DME16-A \[ZIP, 2MB\]](#)" which is adopted and incorporated by reference. The fee schedule data files (DME2016_JAN_V1208 and DMEPEN_JAN_V1208) each set forth two columns for California labelled: "CA (NR)" [California Non-Rural] and "CA (R)" [California Rural]. For the services on or after January 1, 2016 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 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.

DME16-A includes the following documents:

- Copy of HCPCS Code Fee Revisions After 11_23_15
- DME2016_JAN_V1208
- DMEBACK 2016
- DMEPEN_JAN_V1208
- DMERead CY 2016 revised Jan 2016
- DMERuralZIP_Q12016_V1123

The update includes all changes identified in CR 9431. [The CMS Manual System, Pub 100-4 Medicare Claims Processing, Transmittal 3416, Change Request 9431](#), November 23, 2015 sets forth the changes and is relied upon in adopting this update Order. In addition, the administrative director relies upon the [CMS Manual System, Pub 100-4 Medicare Claims Processing, Transmittal 3350, Change Request 9239](#), September 11, 2015, and the Medicare Final Rule CMS-1614-F, "Medicare Program; End-Stage Renal

Disease Prospective Payment System, Quality Incentive Program, and Durable Medical Equipment, Prosthetics, Orthotics, and Supplies”, November 6, 2014, (79 Federal Register 66120.)

The fee schedule revision is available on the Internet at the website of the Centers for Medicare & Medicaid Services at:

<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 16, 2015

ORIGINAL SIGNED BY
DESTIE LEE OVERPECK
Administrative Director of the
Division of Workers’ Compensation