

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A2001	\$214.56	1/1/22	
A2002	\$9.47	1/1/22	
A2004	\$9.47	1/1/22	
A2005	\$1.44	1/1/22	
A2006	\$80.93	1/1/22	
A2007	\$9.47	1/1/22	
A2008	\$13.31	1/1/22	
A2009	\$28.71	1/1/22	
A2010	\$9.47	1/1/22	
A2011	\$218.79	4/1/22	
A2012	\$0.56	4/1/22	
A2013	\$9.47	4/1/22	
A2014	\$1.45	10/1/22	
A2015	\$9.47	10/1/22	
A2016	\$28.71	10/1/22	
A2017	\$13.31	10/1/22	
A2018	\$13.31	10/1/22	
A2019	\$57.31	4/1/23	
A2020	\$14.94	4/1/23	
A2021	\$9.47	4/1/23	
A2022	\$214.56	10/1/23	
A2023	\$214.56	10/1/23	
A2024	\$9.47	10/1/23	
A2025	\$160.30	10/1/23	
A4100	\$182.60	4/1/22	
A4216	\$0.43	4/1/16	
A4217	\$3.47	4/1/16	
A4221	\$19.40	4/1/16	
A4222	\$36.79	4/1/16	
A4224	\$19.40	1/1/17	
A4225	\$2.60	1/1/17	
A4226	\$1.57	1/1/20	
A4233	\$0.51	4/1/16	
A4234	\$2.36	4/1/16	
A4235	\$1.00	4/1/16	
A4236	\$1.16	4/1/16	
A4238	\$141.29	4/1/22	
A4239	\$296.72	1/1/23	
A4253	\$8.32	4/1/16	
A4255	\$4.32	4/1/16	
A4256	\$3.38	4/1/16	
A4257	\$14.10	4/1/16	
A4258	\$2.12	4/1/16	
A4259	\$1.42	4/1/16	
A4265	\$3.76	4/1/16	
A4287	\$0.50	1/1/24	
A4310	\$7.26	4/1/16	
A4311	\$14.23	4/1/16	
A4312	\$19.94	4/1/16	
A4313	\$20.48	4/1/16	
A4314	\$27.95	4/1/16	
A4315	\$28.42	4/1/16	
A4316	\$31.39	4/1/16	
A4320	\$5.02	4/1/16	
A4322	\$3.12	4/1/16	
A4326	\$11.93	4/1/16	
A4327	\$49.31	4/1/16	
A4328	\$9.81	4/1/16	
A4330	\$7.84	4/1/16	
A4331	\$3.52	4/1/16	
A4332	\$0.13	4/1/16	
A4333	\$2.44	4/1/16	
A4334	\$5.44	4/1/16	
A4336	\$1.59	4/1/16	
A4338	\$13.56	4/1/16	
A4340	\$35.10	4/1/16	
A4341	\$324.50	4/1/23	
A4342	\$819.36	4/1/23	
A4344	\$15.05	4/1/16	
A4346	\$18.40	4/1/16	
A4349	\$2.23	4/1/16	
A4351	\$2.01	4/1/16	
A4352	\$7.06	4/1/16	
A4353	\$7.73	4/1/16	
A4354	\$13.05	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A4355	\$9.86	4/1/16	
A4356	\$42.87	4/1/16	
A4357	\$9.12	4/1/16	
A4358	\$6.23	4/1/16	
A4360	\$0.46	4/1/16	
A4361	\$20.31	4/1/16	
A4362	\$3.55	4/1/16	
A4363	\$2.62	4/1/16	
A4364	\$2.99	4/1/16	
A4366	\$1.43	4/1/16	
A4367	\$7.53	4/1/16	
A4368	\$0.28	4/1/16	
A4369	\$2.68	4/1/16	
A4371	\$4.03	4/1/16	
A4372	\$4.64	4/1/16	
A4373	\$6.93	4/1/16	
A4375	\$18.99	4/1/16	
A4376	\$52.61	4/1/16	
A4377	\$4.75	4/1/16	
A4378	\$33.98	4/1/16	
A4379	\$16.60	4/1/16	
A4380	\$41.26	4/1/16	
A4381	\$5.11	4/1/16	
A4382	\$27.21	4/1/16	
A4383	\$31.16	4/1/16	
A4384	\$10.63	4/1/16	
A4385	\$5.64	4/1/16	
A4387	\$2.48	4/1/16	
A4388	\$4.83	4/1/16	
A4389	\$6.87	4/1/16	
A4390	\$10.62	4/1/16	
A4391	\$7.82	4/1/16	
A4392	\$9.04	4/1/16	
A4393	\$10.00	4/1/16	
A4394	\$2.86	4/1/16	
A4395	\$0.05	4/1/16	
A4396	\$44.75	4/1/16	
A4397	\$5.29	4/1/16	12/31/21
A4398	\$13.27	4/1/16	
A4399	\$11.53	4/1/16	
A4400	\$54.02	4/1/16	
A4402	\$1.77	4/1/16	
A4404	\$1.86	4/1/16	
A4405	\$3.77	4/1/16	
A4406	\$6.33	4/1/16	
A4407	\$9.68	4/1/16	
A4408	\$10.91	4/1/16	
A4409	\$6.87	4/1/16	
A4410	\$10.00	4/1/16	
A4411	\$5.64	4/1/16	
A4412	\$2.99	4/1/16	
A4413	\$6.09	4/1/16	
A4414	\$5.44	4/1/16	
A4415	\$6.62	4/1/16	
A4416	\$3.05	4/1/16	
A4417	\$4.11	4/1/16	
A4418	\$2.01	4/1/16	
A4419	\$1.92	4/1/16	
A4422	\$0.13	4/1/16	
A4423	\$2.06	4/1/16	
A4424	\$5.26	4/1/16	
A4425	\$3.96	4/1/16	
A4426	\$3.02	4/1/16	
A4427	\$3.08	4/1/16	
A4428	\$7.20	4/1/16	
A4429	\$9.12	4/1/16	
A4430	\$9.41	4/1/16	
A4431	\$6.87	4/1/16	
A4432	\$3.97	4/1/16	
A4433	\$3.70	4/1/16	
A4434	\$4.15	4/1/16	
A4435	\$6.38	4/1/16	
A4436	\$23.46	1/1/22	
A4437	\$23.46	1/1/22	
A4450	\$0.12	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A4452	\$0.44	4/1/16	
A4453	\$240.50	10/1/21	
A4455	\$1.34	4/1/16	
A4456	\$0.27	4/1/16	
A4457	\$1.50	1/1/24	
A4461	\$3.64	4/1/16	
A4463	\$14.72	4/1/16	
A4468	\$6,732.40	1/1/24	
A4481	\$0.41	4/1/16	
A4540	\$242.01	1/1/24	
A4541	\$39.32	1/1/24	
A4542	\$504.41	1/1/24	
A4556	\$13.43	4/1/16	
A4557	\$11.35	4/1/16	
A4558	\$5.13	4/1/16	
A4559	\$0.11	4/1/16	
A4560	\$492.90	4/1/23	
A4563	\$128.34	1/1/19	
A4565	\$8.51	4/1/16	
A4595	\$11.49	4/1/16	
A4596	\$795.00	10/1/22	
A4602	\$4.11	4/1/16	
A4604	\$43.72	4/1/16	
A4605	\$18.13	4/1/16	
A4608	\$55.41	4/1/16	
A4614	\$26.29	4/1/16	
A4615	\$0.80	4/1/16	
A4616	\$0.07	4/1/16	
A4617	\$3.43	4/1/16	
A4618	\$8.36	4/1/16	
A4619	\$1.96	4/1/16	
A4620	\$0.66	4/1/16	
A4623	\$6.18	4/1/16	
A4624	\$2.91	4/1/16	
A4625	\$7.66	4/1/16	
A4626	\$3.00	4/1/16	
A4628	\$4.05	4/1/16	
A4629	\$5.13	4/1/16	
A4630	\$6.90	4/1/16	
A4633	\$45.36	4/1/16	
A4635	\$4.81	4/1/16	
A4636	\$2.93	4/1/16	
A4637	\$1.63	4/1/16	
A4639	\$31.76	4/1/16	
A4640	\$56.75	4/1/16	
A5051	\$2.28	4/1/16	
A5052	\$1.64	4/1/16	
A5053	\$1.81	4/1/16	
A5054	\$1.99	4/1/16	
A5055	\$1.54	4/1/16	
A5056	\$5.16	4/1/16	
A5057	\$10.62	4/1/16	
A5061	\$3.90	4/1/16	
A5062	\$2.30	4/1/16	
A5063	\$2.99	4/1/16	
A5071	\$6.64	4/1/16	
A5072	\$3.80	4/1/16	
A5073	\$3.52	4/1/16	
A5081	\$3.11	4/1/16	
A5082	\$13.15	4/1/16	
A5083	\$0.71	4/1/16	
A5093	\$2.16	4/1/16	
A5102	\$24.78	4/1/16	
A5105	\$45.07	4/1/16	
A5112	\$32.53	4/1/16	
A5113	\$4.43	4/1/16	
A5114	\$9.90	4/1/16	
A5120	\$0.27	4/1/16	
A5121	\$7.89	4/1/16	
A5122	\$12.07	4/1/16	
A5126	\$1.45	4/1/16	
A5131	\$17.53	4/1/16	
A5200	\$12.48	4/1/16	
A5500	\$70.29	4/1/16	
A5501	\$210.83	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A5503	\$34.55	4/1/16	
A5504	\$34.55	4/1/16	
A5505	\$34.55	4/1/16	
A5506	\$34.55	4/1/16	
A5507	\$34.55	4/1/16	
A5512	\$28.67	4/1/16	
A5513	\$42.79	4/1/16	
A5514	\$44.56	1/1/19	
A6010	\$34.24	4/1/16	
A6011	\$2.52	4/1/16	
A6021	\$23.24	4/1/16	
A6022	\$23.24	4/1/16	
A6023	\$210.39	4/1/16	
A6024	\$6.84	4/1/16	
A6154	\$15.41	4/1/16	
A6196	\$8.13	4/1/16	
A6197	\$18.17	4/1/16	
A6199	\$5.85	4/1/16	
A6203	\$3.72	4/1/16	
A6204	\$6.88	4/1/16	
A6207	\$8.11	4/1/16	
A6209	\$8.26	4/1/16	
A6210	\$22.03	4/1/16	
A6211	\$32.47	4/1/16	
A6212	\$10.73	4/1/16	
A6214	\$11.37	4/1/16	
A6216	\$0.05	4/1/16	
A6219	\$1.06	4/1/16	
A6220	\$2.86	4/1/16	
A6222	\$2.35	4/1/16	
A6223	\$2.68	4/1/16	
A6224	\$3.99	4/1/16	
A6229	\$3.99	4/1/16	
A6231	\$5.16	4/1/16	
A6232	\$7.59	4/1/16	
A6233	\$21.20	4/1/16	
A6234	\$7.23	4/1/16	
A6235	\$18.59	4/1/16	
A6236	\$30.13	4/1/16	
A6237	\$8.75	4/1/16	
A6238	\$25.20	4/1/16	
A6240	\$13.54	4/1/16	
A6241	\$2.84	4/1/16	
A6242	\$6.70	4/1/16	
A6243	\$13.62	4/1/16	
A6244	\$43.43	4/1/16	
A6245	\$8.03	4/1/16	
A6246	\$10.98	4/1/16	
A6247	\$26.29	4/1/16	
A6248	\$17.96	4/1/16	
A6251	\$2.20	4/1/16	
A6252	\$3.60	4/1/16	
A6253	\$7.00	4/1/16	
A6254	\$1.33	4/1/16	
A6255	\$3.36	4/1/16	
A6257	\$1.70	4/1/16	
A6258	\$4.77	4/1/16	
A6259	\$12.10	4/1/16	
A6266	\$2.13	4/1/16	
A6402	\$0.13	4/1/16	
A6403	\$0.47	4/1/16	
A6407	\$2.08	4/1/16	
A6410	\$0.43	4/1/16	
A6441	\$0.75	4/1/16	
A6442	\$0.18	4/1/16	
A6443	\$0.31	4/1/16	
A6444	\$0.62	4/1/16	
A6445	\$0.36	4/1/16	
A6446	\$0.45	4/1/16	
A6447	\$0.75	4/1/16	
A6448	\$1.28	4/1/16	
A6449	\$1.94	4/1/16	
A6450	\$1.94	4/1/16	
A6451	\$1.94	4/1/16	
A6452	\$6.53	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A6453	\$0.69	4/1/16	
A6454	\$0.86	4/1/16	
A6455	\$1.54	4/1/16	
A6456	\$1.40	4/1/16	
A6457	\$1.26	4/1/16	
A6460	\$2.24	1/1/19	
A6461	\$3.67	1/1/19	
A6520	\$119.54	1/1/24	
A6521	\$474.33	1/1/24	
A6522	\$290.47	1/1/24	
A6523	\$689.17	1/1/24	
A6524	\$362.39	1/1/24	
A6525	\$731.60	1/1/24	
A6526	\$655.18	1/1/24	
A6527	\$1,204.80	1/1/24	
A6528	\$630.00	1/1/24	
A6529	\$995.50	1/1/24	
A6531	\$47.83	4/1/16	
A6532	\$67.39	4/1/16	
A6545	\$94.17	4/1/16	
A6550	\$26.15	4/1/16	
A6552	\$54.81	1/1/24	
A6553	\$214.01	1/1/24	
A6554	\$75.36	1/1/24	
A6555	\$214.01	1/1/24	
A6556	\$293.29	1/1/24	
A6557	\$293.29	1/1/24	
A6558	\$302.67	1/1/24	
A6559	\$7.50	1/1/24	
A6560	\$40.50	1/1/24	
A6561	\$79.51	1/1/24	
A6562	\$959.88	1/1/24	
A6563	\$959.88	1/1/24	
A6564	\$1,034.00	1/1/24	
A6565	\$165.86	1/1/24	
A6566	\$240.83	1/1/24	
A6567	\$756.68	1/1/24	
A6568	\$157.17	1/1/24	
A6569	\$895.00	1/1/24	
A6570	\$107.09	1/1/24	
A6571	\$643.63	1/1/24	
A6572	\$99.37	1/1/24	
A6573	\$235.80	1/1/24	
A6574	\$300.61	1/1/24	
A6575	\$97.42	1/1/24	
A6576	\$184.50	1/1/24	
A6577	\$152.70	1/1/24	
A6578	\$75.20	1/1/24	
A6579	\$296.14	1/1/24	
A6580	\$293.96	1/1/24	
A6581	\$69.00	1/1/24	
A6582	\$46.02	1/1/24	
A6583	\$151.38	1/1/24	
A6584	\$98.96	1/1/24	
A6585	\$179.24	1/1/24	
A6586	\$528.06	1/1/24	
A6587	\$69.17	1/1/24	
A6588	\$230.54	1/1/24	
A6589	\$91.01	1/1/24	
A6590	\$354.00	4/1/23	
A6591	\$84.58	4/1/23	
A6593	\$0.00	1/1/24	
A6594	\$33.14	1/1/24	
A6595	\$32.59	1/1/24	
A6596	\$0.17	1/1/24	
A6597	\$1.47	1/1/24	
A6598	\$0.71	1/1/24	
A6599	\$1.61	1/1/24	
A6600	\$2.90	1/1/24	
A6601	\$3.26	1/1/24	
A6602	\$4.76	1/1/24	
A6603	\$2.23	1/1/24	
A6604	\$1.30	1/1/24	
A6605	\$1.49	1/1/24	
A6606	\$4.42	1/1/24	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
A6607	\$1.18	1/1/24	
A6608	\$4.92	1/1/24	
A6609	\$0.00	1/1/24	
A6610	\$214.01	1/1/24	
A7000	\$8.69	4/1/16	
A7001	\$31.08	4/1/16	
A7002	\$3.60	4/1/16	
A7003	\$1.66	4/1/16	
A7004	\$1.35	4/1/16	
A7005	\$13.02	4/1/16	
A7006	\$7.73	4/1/16	
A7007	\$3.40	4/1/16	
A7008	\$10.34	4/1/16	
A7009	\$43.16	4/1/16	
A7010	\$16.54	4/1/16	
A7012	\$3.01	4/1/16	
A7013	\$0.60	4/1/16	
A7014	\$3.50	4/1/16	
A7015	\$1.36	4/1/16	
A7016	\$7.21	4/1/16	
A7017	\$123.99	4/1/16	
A7018	\$0.35	4/1/16	
A7020	\$15.42	4/1/16	
A7023	\$6.38	1/1/24	
A7025	\$48.09	4/1/16	
A7026	\$31.78	4/1/16	
A7027	\$130.44	4/1/16	
A7028	\$36.68	4/1/16	
A7029	\$16.79	4/1/16	
A7030	\$98.00	4/1/16	
A7031	\$37.28	4/1/16	
A7032	\$20.79	4/1/16	
A7033	\$16.88	4/1/16	
A7034	\$61.02	4/1/16	
A7035	\$20.15	4/1/16	
A7036	\$11.49	4/1/16	
A7037	\$13.32	4/1/16	
A7038	\$2.31	4/1/16	
A7039	\$6.66	4/1/16	
A7044	\$89.91	4/1/16	
A7045	\$13.23	4/1/16	
A7046	\$14.42	4/1/16	
A7047	\$133.66	4/1/16	
A7049	\$88.66	4/1/23	
A7501	\$116.10	4/1/16	
A7502	\$55.19	4/1/16	
A7503	\$12.54	4/1/16	
A7504	\$0.75	4/1/16	
A7505	\$5.18	4/1/16	
A7506	\$0.37	4/1/16	
A7507	\$2.75	4/1/16	
A7508	\$3.17	4/1/16	
A7509	\$1.56	4/1/16	
A7520	\$52.49	4/1/16	
A7521	\$52.00	4/1/16	
A7522	\$49.93	4/1/16	
A7524	\$85.58	4/1/16	
A7525	\$2.28	4/1/16	
A7526	\$3.74	4/1/16	
A7527	\$3.96	4/1/16	
A8000	\$169.54	4/1/16	
A8001	\$169.54	4/1/16	
A9286	\$0.00	4/1/18	
B4105	\$52.79	1/1/19	
B4148	\$9.13	10/1/23	
C1052	\$11.99	1/1/21	
C1600	\$0.00	1/1/24	
C1601	\$20.24	1/1/24	
C1602	\$0.00	1/1/24	
C1603	\$0.00	1/1/24	
C1604	\$0.00	1/1/24	
C1747	\$20.24	1/1/23	
C1748	\$20.24	7/1/20	
C1761	\$0.00	7/1/21	
C1823	\$0.00	1/1/19	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
C1825	\$0.00	1/1/21	
C1826	\$6,187.13	1/1/23	
C1827	\$6,187.13	1/1/23	
C1831	\$0.00	10/1/21	
C1832	\$3.19	1/1/22	
C1833	\$525.00	1/1/22	
C1834	\$0.00	10/1/22	3/31/23
C1849	\$182.60	7/1/20	12/31/22
C1890	\$0.00	1/1/19	
E0100	\$21.66	4/1/16	
E0105	\$52.77	4/1/16	
E0110	\$78.90	4/1/16	
E0111	\$50.04	4/1/16	
E0112	\$40.91	4/1/16	
E0113	\$20.25	4/1/16	
E0114	\$45.52	4/1/16	
E0116	\$26.08	4/1/16	
E0117	\$21.29	4/1/16	
E0130	\$52.13	4/1/16	
E0135	\$47.46	4/1/16	
E0140	\$29.52	4/1/16	
E0141	\$82.59	4/1/16	
E0143	\$51.23	4/1/16	
E0144	\$25.41	4/1/16	
E0147	\$409.73	4/1/16	
E0148	\$88.25	4/1/16	
E0149	\$12.52	4/1/16	
E0153	\$76.71	4/1/16	
E0154	\$51.44	4/1/16	
E0155	\$22.26	4/1/16	
E0156	\$16.75	4/1/16	
E0157	\$59.00	4/1/16	
E0158	\$22.90	4/1/16	
E0159	\$15.55	4/1/16	
E0160	\$30.63	4/1/16	
E0161	\$24.64	4/1/16	
E0162	\$136.92	4/1/16	
E0163	\$57.36	4/1/16	
E0165	\$13.10	4/1/16	
E0167	\$11.54	4/1/16	
E0168	\$125.70	4/1/16	
E0170	\$173.23	4/1/16	
E0171	\$31.97	4/1/16	
E0175	\$73.23	4/1/16	
E0181	\$16.83	4/1/16	
E0182	\$21.99	4/1/16	
E0183	\$12.81	10/1/22	
E0184	\$172.50	4/1/16	
E0185	\$181.98	4/1/16	
E0186	\$19.81	4/1/16	
E0187	\$22.54	4/1/16	
E0188	\$24.84	4/1/16	
E0189	\$52.28	4/1/16	
E0191	\$10.35	4/1/16	
E0193	\$735.13	4/1/16	
E0194	\$3,278.64	4/1/16	
E0196	\$33.51	4/1/16	
E0197	\$19.40	4/1/16	
E0198	\$20.83	4/1/16	
E0199	\$32.42	4/1/16	
E0200	\$87.65	4/1/16	
E0202	\$69.22	4/1/16	
E0205	\$214.54	4/1/16	
E0210	\$30.68	4/1/16	
E0215	\$78.32	4/1/16	
E0217	\$548.86	4/1/16	
E0225	\$429.65	4/1/16	
E0235	\$19.07	4/1/16	
E0236	\$48.91	4/1/16	
E0239	\$497.29	4/1/16	
E0249	\$110.12	4/1/16	
E0250	\$68.81	4/1/16	
E0251	\$61.41	4/1/16	
E0255	\$72.33	4/1/16	
E0256	\$63.68	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E0260	\$66.55	4/1/16	
E0261	\$64.49	4/1/16	
E0265	\$136.08	4/1/16	
E0266	\$118.41	4/1/16	
E0271	\$131.85	4/1/16	
E0272	\$149.02	4/1/16	
E0275	\$14.83	4/1/16	
E0276	\$12.75	4/1/16	
E0277	\$206.55	4/1/16	
E0280	\$33.18	4/1/16	
E0290	\$61.35	4/1/16	
E0291	\$46.96	4/1/16	
E0292	\$68.26	4/1/16	
E0293	\$59.91	4/1/16	
E0294	\$73.41	4/1/16	
E0295	\$71.04	4/1/16	
E0296	\$106.17	4/1/16	
E0297	\$93.70	4/1/16	
E0300	\$236.59	4/1/16	
E0301	\$174.95	4/1/16	
E0302	\$508.10	4/1/16	
E0303	\$173.91	4/1/16	
E0304	\$515.17	4/1/16	
E0305	\$11.44	4/1/16	
E0310	\$119.18	4/1/16	
E0316	\$184.68	4/1/16	
E0325	\$9.69	4/1/16	
E0326	\$10.42	4/1/16	
E0371	\$288.92	4/1/16	
E0372	\$269.46	4/1/16	
E0373	\$385.95	4/1/16	
E0424	\$86.61	4/1/16	
E0431	\$19.19	4/1/16	
E0433	\$42.16	4/1/16	
E0434	\$19.19	4/1/16	
E0439	\$86.61	4/1/16	
E0441	\$58.42	4/1/16	
E0442	\$58.42	4/1/16	
E0443	\$52.96	4/1/16	
E0444	\$52.96	4/1/16	
E0447	\$92.54	1/1/19	
E0462	\$322.15	4/1/16	
E0465	\$1,055.23	4/1/16	
E0466	\$1,055.23	4/1/16	
E0467	\$1,292.10	1/1/19	
E0470	\$117.00	4/1/16	
E0471	\$290.89	4/1/16	
E0472	\$432.17	4/1/16	
E0480	\$48.58	4/1/16	
E0482	\$475.40	4/1/16	
E0483	\$1,175.30	4/1/16	
E0484	\$40.83	4/1/16	
E0490	\$119.05	10/1/23	
E0491	\$98.32	10/1/23	
E0492	\$731.80	1/1/24	
E0493	\$731.80	1/1/24	
E0500	\$121.34	4/1/16	
E0530	\$35.54	1/1/24	
E0550	\$55.42	4/1/16	
E0560	\$163.42	4/1/16	
E0561	\$77.55	4/1/16	
E0562	\$149.74	4/1/16	
E0565	\$45.27	4/1/16	
E0570	\$6.35	4/1/16	
E0572	\$30.62	4/1/16	
E0574	\$44.51	4/1/16	
E0575	\$113.62	4/1/16	
E0580	\$127.47	4/1/16	
E0585	\$30.24	4/1/16	
E0600	\$50.62	4/1/16	
E0601	\$44.66	4/1/16	
E0602	\$32.63	4/1/16	
E0605	\$29.22	4/1/16	
E0606	\$22.25	4/1/16	
E0607	\$73.86	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E0610	\$262.95	4/1/16	
E0615	\$529.32	4/1/16	
E0617	\$373.20	4/1/16	
E0618	\$263.46	4/1/16	
E0620	\$96.65	4/1/16	
E0621	\$89.10	4/1/16	
E0627	\$278.71	4/1/16	
E0629	\$299.25	4/1/16	
E0630	\$63.32	4/1/16	
E0635	\$125.14	4/1/16	
E0636	\$1,052.44	4/1/16	
E0639	\$123.32	4/1/16	
E0640	\$123.32	4/1/16	
E0650	\$772.71	4/1/16	
E0651	\$1,015.31	4/1/16	
E0652	\$5,860.79	4/1/16	
E0655	\$115.58	4/1/16	
E0656	\$63.88	4/1/16	
E0657	\$60.01	4/1/16	
E0660	\$176.60	4/1/16	
E0665	\$151.45	4/1/16	
E0666	\$152.67	4/1/16	
E0667	\$357.93	4/1/16	
E0668	\$488.50	4/1/16	
E0669	\$192.43	4/1/16	
E0670	\$1,389.68	4/1/16	
E0671	\$459.18	4/1/16	
E0672	\$356.77	4/1/16	
E0673	\$296.46	4/1/16	
E0675	\$425.12	4/1/16	
E0677	\$76.85	4/1/23	
E0678	\$44.18	1/1/24	
E0679	\$23.75	1/1/24	
E0680	\$723.36	1/1/24	
E0681	\$125.31	1/1/24	
E0682	\$60.29	1/1/24	
E0691	\$993.40	4/1/16	
E0692	\$1,247.44	4/1/16	
E0693	\$1,537.74	4/1/16	
E0694	\$4,894.46	4/1/16	
E0705	\$51.80	4/1/16	
E0711	\$7.50	4/1/23	
E0720	\$85.92	4/1/16	
E0730	\$78.93	4/1/16	
E0731	\$99.30	4/1/16	
E0732	\$47.72	1/1/24	
E0733	\$47.72	1/1/24	
E0734	\$429.24	1/1/24	
E0735	\$47.72	1/1/24	
E0740	\$57.82	4/1/16	
E0744	\$86.05	4/1/16	
E0745	\$98.96	4/1/16	
E0747	\$4,329.25	4/1/16	
E0748	\$4,301.21	4/1/16	
E0749	\$314.37	4/1/16	
E0760	\$3,574.23	4/1/16	
E0762	\$103.32	4/1/16	
E0764	\$1,223.43	4/1/16	
E0765	\$93.01	4/1/16	
E0776	\$134.53	4/1/16	
E0779	\$17.87	4/1/16	
E0780	\$11.36	4/1/16	
E0781	\$231.95	4/1/16	
E0782	\$4,234.23	4/1/16	
E0783	\$8,988.73	4/1/16	
E0784	\$418.23	4/1/16	
E0785	\$522.36	4/1/16	
E0786	\$8,509.77	4/1/16	
E0787	\$4,588.70	1/1/20	
E0791	\$275.56	4/1/16	
E0840	\$68.84	4/1/16	
E0849	\$56.98	4/1/16	
E0850	\$116.13	4/1/16	
E0855	\$54.65	4/1/16	
E0856	\$17.01	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E0860	\$36.21	4/1/16	
E0870	\$128.59	4/1/16	
E0880	\$123.01	4/1/16	
E0890	\$133.10	4/1/16	
E0900	\$130.39	4/1/16	
E0910	\$11.82	4/1/16	
E0911	\$44.97	4/1/16	
E0912	\$87.21	4/1/16	
E0920	\$51.02	4/1/16	
E0930	\$50.50	4/1/16	
E0935	\$25.14	4/1/16	
E0940	\$22.34	4/1/16	
E0941	\$47.98	4/1/16	
E0942	\$21.94	4/1/16	
E0944	\$43.10	4/1/16	
E0945	\$41.65	4/1/16	
E0946	\$55.60	4/1/16	
E0947	\$569.88	4/1/16	
E0948	\$551.21	4/1/16	
E0950	\$99.05	4/1/16	
E0951	\$15.38	4/1/16	
E0952	\$16.06	4/1/16	
E0953	\$95.62	1/1/18	
E0954	\$55.56	1/1/18	
E0955	\$19.28	4/1/16	
E0956	\$93.92	4/1/16	
E0957	\$131.43	4/1/16	
E0958	\$43.71	4/1/16	
E0959	\$46.49	4/1/16	
E0960	\$86.69	4/1/16	
E0961	\$21.54	4/1/16	
E0966	\$74.05	4/1/16	
E0967	\$72.58	4/1/16	
E0968	\$19.81	4/1/16	
E0969	\$157.56	4/1/16	
E0971	\$31.90	4/1/16	
E0973	\$93.12	4/1/16	
E0974	\$76.98	4/1/16	
E0978	\$39.49	4/1/16	
E0980	\$34.23	4/1/16	
E0981	\$38.19	4/1/16	
E0982	\$49.09	4/1/16	
E0983	\$276.31	4/1/16	
E0984	\$211.20	4/1/16	
E0985	\$22.44	4/1/16	
E0986	\$537.76	4/1/16	
E0988	\$318.20	4/1/16	
E0990	\$106.97	4/1/16	
E0992	\$84.30	4/1/16	
E0994	\$16.56	4/1/16	
E0995	\$24.62	4/1/16	
E1002	\$386.19	4/1/16	
E1003	\$418.43	4/1/16	
E1004	\$463.93	4/1/16	
E1005	\$502.17	4/1/16	
E1006	\$615.11	4/1/16	
E1007	\$832.91	4/1/16	
E1008	\$832.97	4/1/16	
E1010	\$108.99	4/1/16	
E1012	\$108.99	4/1/16	
E1014	\$40.38	4/1/16	
E1015	\$124.69	4/1/16	
E1016	\$125.13	4/1/16	
E1020	\$23.18	4/1/16	
E1028	\$19.67	4/1/16	
E1029	\$35.20	4/1/16	
E1030	\$111.03	4/1/16	
E1031	\$44.91	4/1/16	
E1035	\$617.84	4/1/16	
E1036	\$897.96	4/1/16	
E1037	\$112.15	4/1/16	
E1038	\$15.35	4/1/16	
E1039	\$34.60	4/1/16	
E1050	\$110.58	4/1/16	
E1060	\$139.36	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E1070	\$118.47	4/1/16	
E1083	\$73.99	4/1/16	
E1084	\$108.45	4/1/16	
E1087	\$139.88	4/1/16	
E1088	\$166.68	4/1/16	
E1092	\$142.08	4/1/16	
E1093	\$122.18	4/1/16	
E1100	\$114.75	4/1/16	
E1110	\$112.38	4/1/16	
E1150	\$90.18	4/1/16	
E1160	\$69.10	4/1/16	
E1161	\$261.57	4/1/16	
E1170	\$98.75	4/1/16	
E1171	\$88.61	4/1/16	
E1172	\$108.30	4/1/16	
E1180	\$112.03	4/1/16	
E1190	\$129.43	4/1/16	
E1195	\$138.88	4/1/16	
E1200	\$96.19	4/1/16	
E1221	\$52.53	4/1/16	
E1222	\$71.64	4/1/16	
E1223	\$81.82	4/1/16	
E1224	\$89.71	4/1/16	
E1225	\$39.50	4/1/16	
E1226	\$399.14	4/1/16	
E1227	\$260.76	4/1/16	
E1228	\$30.98	4/1/16	
E1230	\$2,308.33	4/1/16	
E1232	\$236.42	4/1/16	
E1233	\$244.95	4/1/16	
E1234	\$213.26	4/1/16	
E1235	\$205.36	4/1/16	
E1236	\$181.16	4/1/16	
E1237	\$182.75	4/1/16	
E1238	\$181.16	4/1/16	
E1240	\$113.89	4/1/16	
E1270	\$87.27	4/1/16	
E1280	\$145.10	4/1/16	
E1295	\$134.28	4/1/16	
E1296	\$462.00	4/1/16	
E1297	\$98.30	4/1/16	
E1298	\$398.11	4/1/16	
E1301	\$200.00	1/1/24	
E1310	\$2,373.97	4/1/16	
E1353	\$31.31	4/1/16	
E1355	\$23.59	4/1/16	
E1372	\$130.73	4/1/16	
E1390	\$86.61	4/1/16	
E1391	\$86.61	4/1/16	
E1392	\$42.16	4/1/16	
E1405	\$116.85	4/1/16	
E1406	\$92.96	4/1/16	
E1629	\$28.42	1/1/22	
E1700	\$32.41	4/1/16	
E1701	\$11.19	4/1/16	
E1702	\$21.21	4/1/16	
E1800	\$117.45	4/1/16	
E1801	\$142.62	4/1/16	
E1802	\$361.29	4/1/16	
E1805	\$118.73	4/1/16	
E1806	\$117.10	4/1/16	
E1810	\$119.08	4/1/16	
E1811	\$148.27	4/1/16	
E1812	\$95.06	4/1/16	
E1815	\$119.08	4/1/16	
E1816	\$150.62	4/1/16	
E1818	\$153.76	4/1/16	
E1820	\$90.37	4/1/16	
E1821	\$116.35	4/1/16	
E1825	\$118.73	4/1/16	
E1830	\$118.73	4/1/16	
E1831	\$70.25	4/1/16	
E1840	\$423.09	4/1/16	
E1841	\$500.78	4/1/16	
E1905	\$0.00	4/1/23	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E2000	\$57.30	4/1/16	
E2001	\$62.47	1/1/24	
E2100	\$604.38	4/1/16	
E2101	\$208.45	4/1/16	
E2102	\$346.21	4/1/22	
E2103	\$312.09	1/1/23	
E2120	\$313.44	4/1/16	
E2201	\$321.90	4/1/16	
E2202	\$464.30	4/1/16	
E2203	\$437.90	4/1/16	
E2204	\$764.16	4/1/16	
E2205	\$36.11	4/1/16	
E2206	\$39.75	4/1/16	
E2207	\$47.92	4/1/16	
E2208	\$113.19	4/1/16	
E2209	\$102.11	4/1/16	
E2210	\$6.23	4/1/16	
E2211	\$35.48	4/1/16	
E2212	\$6.48	4/1/16	
E2213	\$31.00	4/1/16	
E2214	\$33.83	4/1/16	
E2215	\$10.61	4/1/16	
E2219	\$39.32	4/1/16	
E2220	\$26.81	4/1/16	
E2221	\$27.69	4/1/16	
E2222	\$23.10	4/1/16	
E2224	\$92.14	4/1/16	
E2225	\$19.24	4/1/16	
E2226	\$41.06	4/1/16	
E2227	\$198.84	4/1/16	
E2228	\$99.06	4/1/16	
E2231	\$144.64	4/1/16	
E2310	\$111.49	4/1/16	
E2311	\$225.75	4/1/16	
E2312	\$273.43	4/1/16	
E2313	\$34.06	4/1/16	
E2321	\$246.66	4/1/16	
E2322	\$261.19	4/1/16	
E2323	\$65.91	4/1/16	
E2324	\$41.75	4/1/16	
E2325	\$128.34	4/1/16	
E2326	\$33.09	4/1/16	
E2327	\$378.16	4/1/16	
E2328	\$472.15	4/1/16	
E2329	\$168.28	4/1/16	
E2330	\$326.06	4/1/16	
E2340	\$396.17	4/1/16	
E2341	\$594.30	4/1/16	
E2342	\$495.25	4/1/16	
E2343	\$792.41	4/1/16	
E2351	\$665.69	4/1/16	
E2359	\$185.09	4/1/16	
E2360	\$119.37	4/1/16	
E2361	\$132.89	4/1/16	
E2362	\$101.69	4/1/16	
E2363	\$177.24	4/1/16	
E2364	\$119.37	4/1/16	
E2365	\$106.88	4/1/16	
E2366	\$251.19	4/1/16	
E2367	\$399.31	4/1/16	
E2368	\$49.22	4/1/16	
E2369	\$42.89	4/1/16	
E2370	\$76.50	4/1/16	
E2371	\$143.63	4/1/16	
E2373	\$115.31	4/1/16	
E2374	\$50.90	4/1/16	
E2375	\$81.60	4/1/16	
E2376	\$127.90	4/1/16	
E2377	\$46.27	4/1/16	
E2378	\$56.34	4/1/16	
E2381	\$72.58	4/1/16	
E2382	\$19.78	4/1/16	
E2383	\$144.72	4/1/16	
E2384	\$77.10	4/1/16	
E2385	\$47.17	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
E2386	\$143.40	4/1/16	
E2387	\$61.87	4/1/16	
E2388	\$48.00	4/1/16	
E2389	\$26.08	4/1/16	
E2390	\$40.77	4/1/16	
E2391	\$19.52	4/1/16	
E2392	\$51.33	4/1/16	
E2394	\$73.15	4/1/16	
E2395	\$51.97	4/1/16	
E2396	\$53.86	4/1/16	
E2397	\$457.83	4/1/16	
E2398	\$196.95	1/1/20	
E2402	\$711.68	4/1/16	
E2500	\$432.30	4/1/16	
E2502	\$1,321.96	4/1/16	
E2504	\$1,743.84	4/1/16	
E2506	\$2,557.00	4/1/16	
E2508	\$3,953.96	4/1/16	
E2510	\$7,482.35	4/1/16	
E2601	\$58.27	4/1/16	
E2602	\$113.76	4/1/16	
E2603	\$144.43	4/1/16	
E2604	\$179.53	4/1/16	
E2605	\$256.48	4/1/16	
E2606	\$400.13	4/1/16	
E2607	\$276.18	4/1/16	
E2608	\$331.67	4/1/16	
E2611	\$297.62	4/1/16	
E2612	\$402.61	4/1/16	
E2613	\$374.51	4/1/16	
E2614	\$518.29	4/1/16	
E2615	\$430.98	4/1/16	
E2616	\$579.88	4/1/16	
E2619	\$48.89	4/1/16	
E2620	\$521.86	4/1/16	
E2621	\$547.66	4/1/16	
E2622	\$315.83	4/1/16	
E2623	\$401.89	4/1/16	
E2624	\$318.43	4/1/16	
E2625	\$403.11	4/1/16	
E2626	\$638.04	4/1/16	
E2627	\$1,095.69	4/1/16	
E2628	\$727.69	4/1/16	
E2629	\$975.22	4/1/16	
E2630	\$730.46	4/1/16	
E2631	\$292.20	4/1/16	
E2632	\$185.79	4/1/16	
E2633	\$157.59	4/1/16	
E3000	\$234.41	1/1/24	
K0001	\$24.97	4/1/16	
K0002	\$42.97	4/1/16	
K0003	\$37.71	4/1/16	
K0004	\$46.80	4/1/16	
K0005	\$2,043.83	4/1/16	
K0006	\$68.19	4/1/16	
K0007	\$95.48	4/1/16	
K0009	\$79.01	4/1/16	
K0010	\$400.29	4/1/16	
K0011	\$628.76	4/1/16	
K0012	\$359.21	4/1/16	
K0015	\$17.31	4/1/16	
K0017	\$48.69	4/1/16	
K0018	\$27.20	4/1/16	
K0019	\$15.58	4/1/16	
K0020	\$44.27	4/1/16	
K0037	\$45.89	4/1/16	
K0038	\$23.13	4/1/16	
K0039	\$51.33	4/1/16	
K0040	\$71.15	4/1/16	
K0041	\$50.42	4/1/16	
K0042	\$34.72	4/1/16	
K0043	\$18.60	4/1/16	
K0044	\$15.86	4/1/16	
K0045	\$53.95	4/1/16	
K0046	\$18.60	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
K0047	\$72.87	4/1/16	
K0050	\$29.28	4/1/16	
K0051	\$50.12	4/1/16	
K0052	\$88.09	4/1/16	
K0053	\$97.20	4/1/16	
K0056	\$105.14	4/1/16	
K0065	\$49.14	4/1/16	
K0069	\$110.48	4/1/16	
K0070	\$20.27	4/1/16	
K0071	\$120.77	4/1/16	
K0072	\$72.71	4/1/16	
K0073	\$36.99	4/1/16	
K0077	\$65.07	4/1/16	
K0098	\$25.17	4/1/16	
K0105	\$109.92	4/1/16	
K0195	\$11.53	4/1/16	
K0455	\$292.81	4/1/16	
K0552	\$2.60	4/1/16	
K0553	\$248.38	7/1/17	12/31/22
K0554	\$261.29	7/1/17	12/31/22
K0601	\$1.18	4/1/16	
K0602	\$6.66	4/1/16	
K0603	\$0.60	4/1/16	
K0604	\$6.42	4/1/16	
K0605	\$15.34	4/1/16	
K0606	\$2,783.98	4/1/16	
K0607	\$23.84	4/1/16	
K0608	\$148.79	4/1/16	
K0609	\$989.39	4/1/16	
K0730	\$190.59	4/1/16	
K0733	\$28.78	4/1/16	
K0738	\$42.16	4/1/16	
K0800	\$885.51	4/1/16	
K0801	\$1,617.27	4/1/16	
K0802	\$2,133.61	4/1/16	
K0806	\$1,293.35	4/1/16	
K0807	\$2,004.37	4/1/16	
K0808	\$3,098.43	4/1/16	
K0813	\$276.79	4/1/16	
K0814	\$291.32	4/1/16	
K0815	\$285.23	4/1/16	
K0816	\$298.65	4/1/16	
K0820	\$285.23	4/1/16	
K0821	\$299.22	4/1/16	
K0822	\$320.10	4/1/16	
K0823	\$299.69	4/1/16	
K0824	\$457.57	4/1/16	
K0825	\$423.15	4/1/16	
K0826	\$764.05	4/1/16	
K0827	\$665.51	4/1/16	
K0828	\$940.13	4/1/16	
K0829	\$906.70	4/1/16	
K0835	\$332.32	4/1/16	
K0836	\$344.68	4/1/16	
K0837	\$426.23	4/1/16	
K0838	\$377.79	4/1/16	
K0839	\$566.18	4/1/16	
K0840	\$869.28	4/1/16	
K0841	\$374.49	4/1/16	
K0842	\$373.95	4/1/16	
K0843	\$443.92	4/1/16	
K0848	\$755.28	4/1/16	
K0849	\$726.16	4/1/16	
K0850	\$876.10	4/1/16	
K0851	\$842.37	4/1/16	
K0852	\$1,012.27	4/1/16	
K0853	\$1,039.86	4/1/16	
K0854	\$1,377.59	4/1/16	
K0855	\$1,301.34	4/1/16	
K0856	\$810.71	4/1/16	
K0857	\$826.96	4/1/16	
K0858	\$1,005.86	4/1/16	
K0859	\$959.28	4/1/16	
K0860	\$1,436.99	4/1/16	
K0861	\$1,045.98	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
K0862	\$1,005.86	4/1/16	
K0863	\$1,436.99	4/1/16	
K0864	\$1,710.03	4/1/16	
K1001	\$731.80	1/1/20	12/31/23
K1002	\$0.00	1/1/20	12/31/23
K1003	\$200.00	1/1/20	12/31/23
K1004	\$591.90	1/1/20	
K1005	\$0.00	1/1/20	12/31/23
K1006	\$0.00	10/1/20	12/31/23
K1007	\$77,000.00	10/1/20	
K1009	\$346.21	10/1/20	12/31/23
K1010	\$20.11	10/1/20	3/31/21
K1011	\$12.00	10/1/20	3/31/21
K1012	\$12.00	10/1/20	3/31/21
K1013	\$1.50	4/1/21	12/31/23
K1014	\$1,536.20	4/1/21	12/31/23
K1015	\$42.41	4/1/21	12/31/23
K1016	\$130.37	4/1/21	12/31/23
K1017	\$22.07	4/1/21	12/31/23
K1018	\$130.37	4/1/21	12/31/23
K1019	\$22.07	4/1/21	12/31/23
K1020	\$97.74	4/1/21	12/31/23
K1021	\$6,732.40	10/1/21	12/31/23
K1022	\$365.73	10/1/21	12/31/23
K1023	\$242.01	10/1/21	12/31/23
K1024	\$442.62	10/1/21	12/31/23
K1025	\$86.76	10/1/21	12/31/23
K1026	\$6.38	10/1/21	12/31/23
K1027	\$117.75	10/1/21	
K1028	\$731.80	4/1/22	12/31/23
K1029	\$731.80	4/1/22	12/31/23
K1030	\$948.85	4/1/22	
K1031	\$442.62	4/1/22	12/31/23
K1032	\$86.76	4/1/22	12/31/23
K1033	\$86.76	4/1/22	12/31/23
K1035	\$42.31	4/1/23	
K1036	\$591.90	10/1/23	
L2006	\$2,249.61	1/1/20	
L3161	\$42.41	1/1/24	
L8033	\$21.55	1/1/20	
L8608	\$0.00	1/1/19	
L8678	\$14.08	4/1/23	
L8698	\$0.00	1/1/19	
L8701	\$0.00	1/1/19	
L8702	\$0.00	1/1/19	
Q4001	\$48.38	4/1/16	
Q4002	\$182.80	4/1/16	
Q4003	\$34.74	4/1/16	
Q4004	\$120.26	4/1/16	
Q4005	\$12.81	4/1/16	
Q4006	\$28.86	4/1/16	
Q4007	\$6.41	4/1/16	
Q4008	\$14.42	4/1/16	
Q4009	\$8.56	4/1/16	
Q4010	\$19.25	4/1/16	
Q4011	\$4.26	4/1/16	
Q4012	\$9.63	4/1/16	
Q4013	\$15.57	4/1/16	
Q4014	\$26.25	4/1/16	
Q4015	\$7.80	4/1/16	
Q4016	\$13.12	4/1/16	
Q4017	\$9.00	4/1/16	
Q4018	\$14.34	4/1/16	
Q4019	\$4.51	4/1/16	
Q4020	\$7.19	4/1/16	
Q4021	\$6.66	4/1/16	
Q4022	\$12.02	4/1/16	
Q4023	\$3.35	4/1/16	
Q4024	\$6.02	4/1/16	
Q4025	\$37.34	4/1/16	
Q4026	\$116.60	4/1/16	
Q4027	\$18.68	4/1/16	
Q4028	\$58.33	4/1/16	
Q4029	\$28.56	4/1/16	
Q4030	\$75.18	4/1/16	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
Q4031	\$14.27	4/1/16	
Q4032	\$37.59	4/1/16	
Q4033	\$26.64	4/1/16	
Q4034	\$66.25	4/1/16	
Q4035	\$13.32	4/1/16	
Q4036	\$33.14	4/1/16	
Q4037	\$16.24	4/1/16	
Q4038	\$40.71	4/1/16	
Q4039	\$8.14	4/1/16	
Q4040	\$20.35	4/1/16	
Q4041	\$19.76	4/1/16	
Q4042	\$33.73	4/1/16	
Q4043	\$9.89	4/1/16	
Q4044	\$16.87	4/1/16	
Q4045	\$11.47	4/1/16	
Q4046	\$18.45	4/1/16	
Q4047	\$5.72	4/1/16	
Q4048	\$9.23	4/1/16	
Q4049	\$2.09	4/1/16	
Q4155	\$0.00	7/1/18	
Q4183	\$7.16	1/1/19	
Q4184	\$7.16	1/1/19	
Q4186	\$218.79	1/1/19	
Q4187	\$218.79	1/1/19	
Q4188	\$7.16	1/1/19	
Q4190	\$252.12	1/1/19	
Q4191	\$7.16	1/1/19	
Q4193	\$7.16	1/1/19	
Q4194	\$7.16	1/1/19	
Q4195	\$134.40	1/1/19	
Q4196	\$134.40	1/1/19	
Q4197	\$134.40	1/1/19	
Q4198	\$7.16	1/1/19	
Q4199	\$10.23	1/1/22	
Q4200	\$7.16	1/1/19	
Q4201	\$7.16	1/1/19	
Q4203	\$7.16	1/1/19	
Q4204	\$7.16	1/1/19	
Q4205	\$10.23	10/1/19	
Q4208	\$218.79	10/1/19	
Q4209	\$7.16	10/1/19	
Q4210	\$10.23	10/1/19	
Q4211	\$10.23	10/1/19	
Q4214	\$218.79	10/1/19	
Q4216	\$218.79	10/1/19	
Q4217	\$10.23	10/1/19	
Q4218	\$218.79	10/1/19	
Q4219	\$7.16	10/1/19	
Q4220	\$92.48	10/1/19	
Q4221	\$10.23	10/1/19	
Q4222	\$10.23	10/1/19	
Q4224	\$7.16	4/1/22	
Q4225	\$7.16	4/1/22	
Q4226	\$10.23	10/1/19	
Q4227	\$7.16	7/1/20	
Q4228	\$7.16	7/1/20	9/30/21
Q4229	\$7.16	7/1/20	
Q4232	\$218.79	7/1/20	
Q4234	\$7.16	7/1/20	
Q4235	\$212.65	7/1/20	
Q4236	\$7.16	7/1/20	9/30/21
Q4236	\$7.16	1/1/23	
Q4237	\$218.79	7/1/20	
Q4238	\$92.48	7/1/20	
Q4239	\$7.16	7/1/20	
Q4247	\$7.16	7/1/20	
Q4248	\$7.16	7/1/20	
Q4249	\$7.16	10/1/20	
Q4250	\$212.65	10/1/20	
Q4251	\$7.16	10/1/21	
Q4252	\$7.16	10/1/21	
Q4253	\$7.16	10/1/21	
Q4254	\$218.79	10/1/20	
Q4255	\$10.23	10/1/20	
Q4256	\$92.48	4/1/22	

2016 Hospital Durable Medical Equipment Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	Contract Base Rate	Effective Date	End Date
Q4257	\$92.48	4/1/22	
Q4258	\$92.48	4/1/22	
Q4259	\$7.16	7/1/22	
Q4260	\$7.16	7/1/22	
Q4261	\$7.16	7/1/22	
Q4262	\$7.16	1/1/23	
Q4263	\$7.16	1/1/23	
Q4264	\$7.16	1/1/23	
Q4265	\$7.16	4/1/23	
Q4266	\$7.16	4/1/23	
Q4267	\$218.79	4/1/23	
Q4268	\$7.16	4/1/23	
Q4269	\$7.16	4/1/23	
Q4270	\$92.48	4/1/23	
Q4271	\$92.48	4/1/23	
Q4272	\$7.16	7/1/23	
Q4273	\$7.16	7/1/23	
Q4274	\$7.16	7/1/23	
Q4275	\$7.16	7/1/23	
Q4276	\$7.16	7/1/23	
Q4277	\$7.16	7/1/23	
Q4278	\$7.16	7/1/23	
Q4279	\$7.16	1/1/24	
Q4280	\$7.16	7/1/23	
Q4281	\$7.16	7/1/23	
Q4282	\$7.16	7/1/23	
Q4283	\$7.16	7/1/23	
Q4284	\$7.16	7/1/23	
Q4285	\$218.79	10/1/23	
Q4286	\$92.48	10/1/23	
Q4287	\$7.16	1/1/24	
Q4288	\$7.16	1/1/24	
Q4289	\$7.16	1/1/24	
Q4290	\$10.23	1/1/24	
Q4291	\$7.16	1/1/24	
Q4292	\$7.16	1/1/24	
Q4293	\$7.16	1/1/24	
Q4294	\$7.16	1/1/24	
Q4295	\$7.16	1/1/24	
Q4296	\$9,899.90	1/1/24	
Q4297	\$9,899.90	1/1/24	
Q4298	\$9,899.90	1/1/24	
Q4299	\$9,899.90	1/1/24	
Q4300	\$7.16	1/1/24	
Q4301	\$7.16	1/1/24	
Q4302	\$7.16	1/1/24	
Q4303	\$7.16	1/1/24	
Q4304	\$214.56	1/1/24	
S1091	\$11.41	4/1/21	
S9432	\$3.39	10/1/21	
T4545	\$12.00	1/1/19	
V2524	\$0.00	10/1/20	
V2525	\$233.03	4/1/22	
V2526	\$0.00	10/1/23	
V5171	\$0.00	1/1/19	
V5172	\$0.00	1/1/19	
V5181	\$0.00	1/1/19	
V5211	\$0.00	1/1/19	
V5212	\$0.00	1/1/19	
V5213	\$0.00	1/1/19	
V5214	\$0.00	1/1/19	
V5215	\$0.00	1/1/19	
V5221	\$0.00	1/1/19	