

## Payment Policies for Healthcare Services

### Provided to Injured Workers and Crime Victims

# Chapter 28: Supplies, Materials, and Bundled Services

Effective July 1, 2023



**Link:** Look for possible [updates and corrections](#) to these payment policies on L&I's website.



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## Definitions

**The following terms are utilized in this chapter and are defined as follows:**

**Acquisition cost:** The acquisition cost equals:

- The wholesale cost, *plus*
- Shipping and handling, *plus*
- Sales tax.

**By Report (BR):** A code listed in the fee schedule as BR doesn't have an established fee because the service is too unusual, variable, or new. When billing for the code, the provider must provide a report that defines or describes the services or procedures. The insurer will determine an appropriate fee based on the report.



**Link:** For the full legal definition of By Report, see [WAC 296-20-01002](#).

**Bundled codes:** Procedure codes that are not separately payable because they are accounted for and included in the payment of other procedure codes and services. Pharmacy and DME providers can bill HCPCS codes listed as bundled in the fee schedules. This is because, for these provider types, there isn't an office visit or a procedure into which supplies can be bundled.



**Link:** For the legal definition of Bundled codes, see [WAC 296-20-01002](#).

**Primary surgical dressings:** Therapeutic or protective coverings directly applied to wounds or lesions on the skin or caused by an opening on the skin. These dressings include items such as:

- Telfa,
- Adhesive strips for wound closure, *and*
- Petroleum gauze.

**Secondary surgical dressings:** Secondary surgical dressings serve a therapeutic or protective function and secure primary dressings. These dressings include items such as:

- Adhesive tape,
- Roll gauze,
- Binders, *and*
- Disposable compression material.

**Supplies:** Supplies include, but aren't limited to:

- Drugs administered in a provider's office,
- Medical and surgical supplies, *and*
- Prefabricated orthotics.



## Modifiers

**The following CPT®, HCPCS, and/or local code modifiers apply to this chapter:**

**–NU (New purchased DME)**

Use the –NU modifier when a new DME item is to be purchased.

**–RR (Rented DME)**

Use the –RR modifier when DME is to be rented.

**–1S (Surgical dressings for home use)**

Bill the appropriate HCPCS code for each dressing item using the –1S modifier for each item. Use this modifier to bill for surgical dressing supplies dispensed for home use.



## Payment policy: Acquisition cost policy

### General information

This policy doesn't apply to hospital bills. For the Hospital **acquisition cost** policy, see [Chapter 35: Hospitals](#).

### Requirements for billing

#### Billing acquisition cost

The total **acquisition cost** should be billed as 1 charge. The **acquisition cost** equals:

- The wholesale cost, *plus*
- Shipping and handling, *plus*
- Sales tax.

Sales tax and shipping and handling charges aren't paid separately and must be included in the total charge of the supply. An itemized statement showing total cost must be attached to bills. Bills without an itemized statement may be denied.

Supply codes without a fee listed will be paid at their **acquisition cost**.

#### Wholesale invoices

Providers must keep wholesale invoices for all **supplies** and materials in their office files for a minimum of 5 years.

A provider must submit a hard copy of the wholesale invoice to the insurer:

- When billing for a supply item that costs **\$150.00** or more, *or*
- Upon request.



**Note:** The insurer may delay payment of the provider's bill if the insurer hasn't received this invoice.



## Payment policy: Casting materials

### Services that can be billed

Bill for casting materials with HCPCS codes **Q4001-Q4051**.

### Services that aren't covered

No payment will be made for the use of a cast room. Use of a cast room is considered part of a provider's practice expense.



## Payment policy: Catheterization

### Services that can be billed

Separate payment is allowed for placement of a temporary indwelling catheter when treatment is:

- Performed in a provider's office, *and*
- Used to treat a temporary obstruction.



**Link:** For more information about catheterization to obtain specimen(s) for lab tests, see the Specimen collection and handling payment policy in [Chapter 23: Pathology and Laboratory Services](#).

### Payment limits

Separate payment isn't allowed when placement of a temporary indwelling catheter is performed:

- On the same day as a major surgical procedure, *or*
- During the postoperative period of a major surgical procedure that has a follow up period.



## Payment policy: Hot or cold therapy durable medical equipment (DME)

### Services that can be billed

Ice cap or collar (HCPCS code **A9273**) is payable for DME providers only and is **Bundled** for all other provider types.

### Services that aren't covered

Hot water bottles, heat and/or cold wraps aren't covered.

Hot or cold therapy DME isn't covered. For example, heat devices for home use, including heating pads. These devices either aren't covered or are **Bundled**.



**Link:** For more information, see [WAC 296-20-1102](#).

### Payment limits

Application of hot or cold packs (CPT® code **97010**) is **Bundled** for all providers.



**Link:** For more information, see the payment policy for Hot and cold therapy DME in [Chapter 9: Durable Medical Equipment](#).





## Payment policy: Miscellaneous supplies

### Services that can be billed

HCPCS billing code **E1399** can be billed for a miscellaneous supply that meets both of these criteria:

- The supply (or DME item) doesn't have a valid HCPCS code assigned, *and*
- The item must be appropriate relative to the injury or type of treatment being received by the worker.

### Services that aren't covered

The insurer won't pay CPT® code **99070**, which represents miscellaneous **supplies** and materials provided by the provider.

### Requirements for billing

All bills for **E1399** items must have:

- Either the **-NU** or **-RR** modifier, *and*
- A description must be on the paper bill or in the remarks section of the electronic bill.

These specific miscellaneous **supplies** must be billed using HCPCS code **E1399**:

- Therapy putty and tubing, *and*
- Anti-vibration gloves.



## Payment policy: Services and supplies

### General information

Services and **supplies** must be medically necessary and must be prescribed by an approved provider for the direct treatment of an accepted condition.

Providers must bill specific HCPCS or local codes for **supplies** and materials provided during an office visit or with other office services.

For covered medical and surgical **supplies** that pay **By Report**, providers must bill their usual and customary fees. To find out which codes pay **By Report**, see the Medical and Surgical Supplies section of the [Professional Services Fee Schedule](#).



**Links:** For more information on billing usual and customary fees, see [WAC 296-20-010\(2\)](#).

### Services that aren't covered

The insurer won't pay CPT® code **99070**, which represents miscellaneous **supplies** and materials provided by the provider.

### Payment limits

Under the fee schedules, some services and supply items are considered **Bundled** into the cost of other services (associated office visits or procedures) and won't be paid separately. These include:

- **Supplies** used in the course of an office visit, *and*
- Fitting fees, which are **Bundled** into the office visit or into the cost of any DME.

For medical and surgical **supplies** that pay **By Report** (except **E1399**) the insurer will pay 80% of the billed charge.

To see which billing codes are **Bundled**, see [L&I's Professional Services Fee Schedule](#); in the dollar value column, such items show the word **Bundled** (instead of a dollar amount).



## Payment policy: Supply Codes, Bundled

### Bundled CPT® supply codes

These CPT® service codes are **Bundled**:

- **99070**, *and*
- **99071**.

### Bundled HCPCS supply codes

In the following table, items with an asterisk (\*) are used as orthotics/prosthetics and may be paid separately **for permanent conditions** if they are provided in the physician's office.

If the condition is **acute or temporary**, these items aren't considered prosthetics.

For example:

- Foley catheters and accessories for permanent incontinence or ostomy **supplies** for permanent conditions may be paid separately when provided in the physician's office, *and*
- The Foley catheter used to obtain a urine specimen, used after surgery, or used to treat an acute obstruction wouldn't be paid separately because it is treating a temporary problem, *and*
- If a patient had an indwelling Foley catheter for permanent incontinence, and a problem developed which required the physician to replace the Foley, then the catheter would be considered a prosthetic/orthotic and would be paid separately.

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A0380</b>	Basic life support mileage
<b>A0382</b>	Basic support routine suppl
<b>A0384</b>	Bls defibrillation supplies
<b>A0390</b>	Advanced life support mileag
<b>A0392</b>	Als defibrillation supplies
<b>A0394</b>	Als IV drug therapy supplies
<b>A0396</b>	Als esophageal intub suppl
<b>A0398</b>	Als routine disposble suppl
<b>A0420</b>	Ambulance waiting 1/2 hr
<b>A0422</b>	Ambulance 02 life sustaining
<b>A0424</b>	Extra ambulance attendant
<b>A4206</b>	1 CC sterile syringe & needle
<b>A4207</b>	2 CC sterile syringe & needle
<b>A4208</b>	3 CC sterile syringe & needle
<b>A4209</b>	5+ CC sterile syringe & needle
<b>A4211</b>	Supp for self-adm injections
<b>A4212</b>	Non coring needle or stylet
<b>A4213</b>	20+ CC syringe only
<b>A4215</b>	Sterile needle
<b>A4216</b>	Sterile water/saline, 10 ml
<b>A4217</b>	Sterile water/saline, 500 ml
<b>A4218</b>	Sterile saline or water
<b>A4244</b>	Alcohol or peroxide per pint
<b>A4245</b>	Alcohol wipes per box
<b>A4246</b>	Betadine/phisohex solution
<b>A4247</b>	Betadine/iodine swabs/wipes
<b>A4248</b>	Chlorhexidine antisept
<b>A4250</b>	Urine reagent strips/tablets

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A4252</b>	Blood ketone test or strip
<b>A4253</b>	Blood glucose/reagent strips
<b>A4256</b>	Calibrator solution/chips
<b>A4257</b>	Replace Lensshield Cartridge
<b>A4258</b>	Lancet device each
<b>A4259</b>	Lancets per box
<b>A4262</b>	Temporary tear duct plug
<b>A4263</b>	Permanent tear duct plug
<b>A4265</b>	Paraffin
<b>A4270</b>	Disposable endoscope sheath
<b>A4300</b>	Cath impl vasc access portal
<b>A4301</b>	Implantable access syst perc
<b>A4305</b>	Drug delivery system >=50 ML
<b>A4306</b>	Drug delivery system <=5 ML
<b>A4310</b>	Insert tray w/o bag/cath
<b>A4311</b>	Catheter w/o bag 2-way latex
<b>A4312</b>	Cath w/o bag 2-way silicone
<b>A4313</b>	Catheter w/bag 3-way
<b>A4314</b>	Cath w/drainage 2-way latex
<b>A4315</b>	Cath w/drainage 2-way silcne
<b>A4316</b>	Cath w/drainage 3-way
<b>A4320</b>	Irrigation tray
<b>A4321</b>	Cath therapeutic irrig agent
<b>A4322</b>	Irrigation syringe
<b>A4326*</b>	Male external catheter
<b>A4327*</b>	Fem urinary collect dev cup
<b>A4328*</b>	Fem urinary collect pouch
<b>A4330</b>	Stool collection pouch

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A4331</b>	Extension drainage tubing
<b>A4332</b>	Lube sterile packet
<b>A4333</b>	Urinary cath anchor device
<b>A4334</b>	Urinary cath leg strap
<b>A4335*</b>	Incontinence supply
<b>A4336</b>	Urethral insert
<b>A4338*</b>	Indwelling catheter latex
<b>A4340*</b>	Indwelling catheter special
<b>A4344*</b>	Cath indw foley 2 way silicn
<b>A4346*</b>	Cath indw foley 3 way
<b>A4349</b>	Disposable male external cat
<b>A4351</b>	Straight tip urine catheter
<b>A4352</b>	Coude tip urinary catheter
<b>A4353</b>	Intermittent urinary cath
<b>A4354</b>	Cath insertion tray w/bag
<b>A4355</b>	Bladder irrigation tubing
<b>A4356*</b>	Ext ureth clmp or compr dvc
<b>A4357*</b>	Bedside drainage bag
<b>A4358*</b>	Urinary leg or abdomen bag
<b>A4360</b>	Disposable ext urethral dev
<b>A4361*</b>	Ostomy face plate
<b>A4362*</b>	Solid skin barrier
<b>A4363</b>	Ostomy clamp, replacement
<b>A4364*</b>	Adhesive, liquid or equal
<b>A4366*</b>	Ostomy vent
<b>A4367*</b>	Ostomy belt
<b>A4368*</b>	Ostomy filter
<b>A4369*</b>	Skin barrier liquid per oz

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A4371*</b>	Skin barrier powder per oz
<b>A4372*</b>	Skin barrier solid 4x4 equiv
<b>A4373*</b>	Skin barrier with flange
<b>A4375*</b>	Drainable plastic pch w fcpl
<b>A4376*</b>	Drainable rubber pch w fcplt
<b>A4377*</b>	Drainable plstic pch w/o fp
<b>A4378*</b>	Drainable rubber pch w/o fp
<b>A4379*</b>	Urinary plastic pouch w fcpl
<b>A4380*</b>	Urinary rubber pouch w fcplt
<b>A4381*</b>	Urinary plastic pouch w/o fp
<b>A4382*</b>	Urinary hvy plstc pch w/o fp
<b>A4383*</b>	Urinary rubber pouch w/o fp
<b>A4384*</b>	Ostomy faceplt/silicone ring
<b>A4385*</b>	Ost skn barrier sld ext wear
<b>A4387*</b>	Ost clsd pouch w att st barr
<b>A4388*</b>	Drainable pch w ex wear barr
<b>A4389*</b>	Drainable pch w st wear barr
<b>A4390*</b>	Drainable pch ex wear convex
<b>A4391*</b>	Urinary pouch w ex wear barr
<b>A4392*</b>	Urinary pouch w st wear barr
<b>A4393*</b>	Urine pch w ex wear bar conv
<b>A4394*</b>	Ostomy pouch liq deodorant
<b>A4395*</b>	Ostomy pouch solid deodorant
<b>A4396</b>	Peristomal hernia supprt blt
<b>A4398*</b>	Ostomy irrigation bag
<b>A4399*</b>	Ostomy irrig cone/cath w brs
<b>A4400*</b>	Ostomy irrigation set
<b>A4402*</b>	Lubricant per ounce

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A4404*</b>	Ostomy ring each
<b>A4405*</b>	Nonpectin based ostomy paste
<b>A4406*</b>	Pectin based ostomy paste
<b>A4407*</b>	Ext wear ost skn barr <=4sq
<b>A4408*</b>	Ext wear ost skn barr >4sq
<b>A4409*</b>	Ost skn barr w flng <=4 sq l
<b>A4410*</b>	Ost skn barr w flng >4sq
<b>A4411</b>	Ost skn barr extnd =4sq
<b>A4412</b>	Ost pouch drain high output
<b>A4413*</b>	2 pc drainable ost pouch
<b>A4414*</b>	Ostomy sknbarr w/o conv<=4sq in
<b>A4415*</b>	Ostomy skn barr w/o conv >4 sqi
<b>A4416*</b>	Ost pch clsd w barrier/filtr
<b>A4417*</b>	Ost pch w bar/bltinconv/fltr
<b>A4418*</b>	Ost pch clsd w/o bar w filtr
<b>A4419*</b>	Ost pch for bar w flange/flt
<b>A4420*</b>	Ost pch clsd for bar w lk fl
<b>A4421*</b>	Ostomy supply misc
<b>A4422*</b>	Ost pouch absorbent material
<b>A4423*</b>	Ost pch for bar w lk fl/fltr
<b>A4424*</b>	Ost pch drain w bar & filter
<b>A4425*</b>	Ost pch drain for barrier fl
<b>A4426*</b>	Ost pch drain 2 piece system
<b>A4427*</b>	Ost pch drain/barr lk flng/f
<b>A4428*</b>	Urine ost pouch w faucet/tap
<b>A4429*</b>	Urine ost pouch w bltinconv
<b>A4430*</b>	Ost urine pch w b/bltin conv
<b>A4431*</b>	Ost pch urine w barrier/tapv



This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A4432*</b>	Os pch urine w bar/fange/tap
<b>A4433*</b>	Urine ost pch bar w lock fln
<b>A4434*</b>	Ost pch urine w lock flng/ft
<b>A4435</b>	1pc ost pch drain hgh output
<b>A4450</b>	Non-waterproof tape
<b>A4452</b>	Waterproof tape
<b>A4455</b>	Adhesive remover per ounce
<b>A4456</b>	Adhesive remover, wipes
<b>A4458</b>	Reusable enema bag
<b>A4461</b>	Surgicl dress hold non-reuse
<b>A4463</b>	Surgical dress holder reuse
<b>A4465</b>	Non-elastic extremity binder
<b>A4470</b>	Gravlee jet washer
<b>A4480</b>	Vabra aspirator
<b>A4520</b>	Incontinence garment anytype
<b>A4550</b>	Surgical trays
<b>A4554</b>	Disposable underpads
<b>A4556</b>	Electrodes, pair
<b>A4557</b>	Lead wires, pair
<b>A4558</b>	Conductive paste or gel
<b>A4559</b>	Coupling gel or paste
<b>A4649</b>	Surgical supplies
<b>A4670</b>	Automatic bp monitor, dial
<b>A4930</b>	Sterile, gloves per pair
<b>A5051*</b>	Pouch clsd w barr attached
<b>A5052*</b>	Clsd ostomy pouch w/o barr
<b>A5053*</b>	Clsd ostomy pouch faceplate
<b>A5054*</b>	Clsd ostomy pouch w/flange

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A5055*</b>	Stoma cap
<b>A5061*</b>	Pouch drainable w barrier at
<b>A5062*</b>	Drnble ostomy pouch w/o barr
<b>A5063*</b>	Drain ostomy pouch w/flange
<b>A5071*</b>	Urinary pouch w/barrier
<b>A5072*</b>	Urinary pouch w/o barrier
<b>A5073*</b>	Urinary pouch on barr w/flng
<b>A5081*</b>	Stoma plug or seal, any type
<b>A5082*</b>	Continent stoma catheter
<b>A5083*</b>	Stoma absorptive cover
<b>A5093*</b>	Ostomy accessory convex inse
<b>A5102*</b>	Bedside drain btl w/wo tube
<b>A5105*</b>	Urinary suspensory
<b>A5112*</b>	Urinary leg bag
<b>A5113*</b>	Latex leg strap
<b>A5114*</b>	Foam/fabric leg strap
<b>A5120</b>	Skin barrier, wipe or swab
<b>A5121*</b>	Solid skin barrier 6x6
<b>A5122*</b>	Solid skin barrier 8x8
<b>A5126*</b>	Disk/foam pad +or- adhesive
<b>A5131*</b>	Appliance cleaner
<b>A6010</b>	Collagen based wound filler
<b>A6011</b>	Collagen gel/paste wound fil
<b>A6021</b>	Collagen dressing <=16 sq in
<b>A6022</b>	Collagen drsg>16<=48 sq in
<b>A6023</b>	Collagen dressing >48 sq in
<b>A6024</b>	Collagen dsg wound filler
<b>A6025</b>	Silicone gel sheet, each

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A6154</b>	Wound pouch each
<b>A6196</b>	Alginate dressing <=16 sq in
<b>A6197</b>	Alginate drsg >16 <=48 sq in
<b>A6198</b>	Alginate dressing > 48 sq in
<b>A6199</b>	Alginate drsg wound filler
<b>A6203</b>	Composite drsg <= 16 sq in
<b>A6204</b>	Composite drsg >16<=48 sq in
<b>A6205</b>	Composite drsg > 48 sq in
<b>A6206</b>	Contact layer <= 16 sq in
<b>A6207</b>	Contact layer >16<= 48 sq in
<b>A6208</b>	Contact layer > 48 sq in
<b>A6209</b>	Foam drsg <=16 sq in w/o bdr
<b>A6210</b>	Foam drg >16<=48 sq in w/o b
<b>A6211</b>	Foam drg > 48 sq in w/o brdr
<b>A6212</b>	Foam drg <=16 sq in w/border
<b>A6213</b>	Foam drg >16<=48 sq in w/bdr
<b>A6214</b>	Foam drg > 48 sq in w/border
<b>A6215</b>	Foam dressing wound filler
<b>A6216</b>	Non-sterile gauze<=16 sq in
<b>A6217</b>	Non-sterile gauze>16<=48 sq
<b>A6218</b>	Non-sterile gauze > 48 sq in
<b>A6219</b>	Gauze <= 16 sq in w/border
<b>A6220</b>	Gauze >16 <=48 sq in w/bordr
<b>A6221</b>	Gauze > 48 sq in w/border
<b>A6222</b>	Gauze <=16 in no w/sal w/o b
<b>A6223</b>	Gauze >16<=48 no w/sal w/o b
<b>A6224</b>	Gauze > 48 in no w/sal w/o b
<b>A6228</b>	Gauze <= 16 sq in water/sal

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A6229</b>	Gauze >16<=48 sq in watr/sal
<b>A6230</b>	Gauze > 48 sq in water/salne
<b>A6231</b>	Hydrogel dsq<=16 sq in
<b>A6232</b>	Hydrogel dsq>16<=48 sq in
<b>A6233</b>	Hydrogel dressing >48 sq in
<b>A6234</b>	Hydrocolld drg <=16 w/o bdr
<b>A6235</b>	Hydrocolld drg >16<=48 w/o b
<b>A6236</b>	Hydrocolld drg > 48 in w/o b
<b>A6237</b>	Hydrocolld drg <=16 in w/bdr
<b>A6238</b>	Hydrocolld drg >16<=48 w/bdr
<b>A6239</b>	Hydrocolld drg > 48 in w/bdr
<b>A6240</b>	Hydrocolld drg filler paste
<b>A6241</b>	Hydrocolloid drg filler dry
<b>A6242</b>	Hydrogel drg <=16 in w/o bdr
<b>A6243</b>	Hydrogel drg >16<=48 w/o bdr
<b>A6244</b>	Hydrogel drg >48 in w/o bdr
<b>A6245</b>	Hydrogel drg <= 16 in w/bdr
<b>A6246</b>	Hydrogel drg >16<=48 in w/b
<b>A6247</b>	Hydrogel drg > 48 sq in w/b
<b>A6248</b>	Hydrogel drsg gel filler
<b>A6250</b>	Skin seal protect moisturizr
<b>A6251</b>	Absorpt drg <=16 sq in w/o b
<b>A6252</b>	Absorpt drg >16 <=48 w/o bdr
<b>A6253</b>	Absorpt drg > 48 sq in w/o b
<b>A6254</b>	Absorpt drg <=16 sq in w/bdr
<b>A6255</b>	Absorpt drg >16<=48 in w/bdr
<b>A6256</b>	Absorpt drg > 48 sq in w/bdr
<b>A6257</b>	Transparent film <= 16 sq in

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A6258</b>	Transparent film >16<=48 in
<b>A6259</b>	Transparent film > 48 sq in
<b>A6260</b>	Wound cleanser any type/size
<b>A6261</b>	Wound filler gel/paste /oz
<b>A6262</b>	Wound filler dry form / gram
<b>A6266</b>	Impreg gauze no h20/sal/yard
<b>A6402</b>	Sterile gauze <= 16 sq in
<b>A6403</b>	Sterile gauze>16 <= 48 sq in
<b>A6404</b>	Sterile gauze > 48 sq in
<b>A6407</b>	Packing strips, non-impreg
<b>A6410</b>	Sterile eye pad
<b>A6411</b>	Non-sterile eye pad
<b>A6412</b>	Occlusive eye patch
<b>A6413</b>	Adhesive bandage, first-aid
<b>A6441</b>	Pad band w>=3 <5/yd
<b>A6442</b>	Conform band n/s w<3/yd
<b>A6443</b>	Conform band n/s w>=3<5/yd
<b>A6444</b>	Conform band n/s w>=5/yd
<b>A6445</b>	Conform band s w <3/yd
<b>A6446</b>	Conform band s w>=3 <5/yd
<b>A6447</b>	Conform band s w >=5/yd
<b>A6448</b>	Lt compres band <3/yd
<b>A6449</b>	Lt compres band >=3 <5/yd
<b>A6450</b>	Lt compres band >=5/yd
<b>A6451</b>	Mod compr band w>=3<5/yd
<b>A6452</b>	High compr band w>=3<5yd
<b>A6453</b>	Self-adher band w <3/yd
<b>A6454</b>	Self-adher band w>=3 <5/yd

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>A6455</b>	Self-adher band >=5/yd
<b>A6456</b>	Zinc paste band w >=3<5/yd
<b>A6457</b>	Tubular dressing
<b>A9150</b>	Misc/exper non-prescript dru
<b>A9273</b>	Hot/cold H2Obot/cap/col/wrap
<b>A9900</b>	Supply/accessory/service
<b>J3535</b>	Metered dose inhaler drug
<b>J7599</b>	Immunosuppressive drug noc
<b>J7699</b>	Inhalation solution for DME
<b>J7799</b>	Non-inhalation drug for DME
<b>J8498</b>	Antiemetic rectal/sup nos
<b>J8499</b>	Oral prescript drug non chemo
<b>J8597</b>	Antiemetic drug oral nos
<b>J8999</b>	Oral prescription drug chemo
<b>L8614</b>	Cochlear device
<b>T4521</b>	Adult size brief/diaper sm
<b>T4522</b>	Adult size brief/diaper med
<b>T4523</b>	Adult size brief/diaper lg
<b>T4524</b>	Adult size brief/diaper xl
<b>T4525</b>	Adult size pull-on sm
<b>T4526</b>	Adult size pull-on med
<b>T4527</b>	Adult size pull-on lg
<b>T4528</b>	Adult size pull-on xl
<b>T4533</b>	Youth size brief/diaper
<b>T4534</b>	Youth size pull-on
<b>T4535</b>	Disposable liner/shield/pad
<b>T4536</b>	Reusable pull-on any size
<b>T4537</b>	Reusable underpad bed size

This HCPCS supply code is bundled:	And it has this abbreviated description:
<b>T4539</b>	Reuse diaper/brief any size
<b>T4540</b>	Reusable underpad chair size
<b>T4541</b>	Large disposable underpad
<b>T4542</b>	Small disposable underpad
<b>T4544</b>	Adlt disp und/pull on abv xl



## Payment policy: Surgical dressings dispensed for home use

### Requirements for billing

Providers must bill the appropriate HCPCS code for each dressing item, along with the local billing code modifier **-1S** for each item.

### Payment limits

**Primary surgical dressings** and **secondary surgical dressings** dispensed for home use are payable at **acquisition cost** when all of these conditions are met:

- They are dispensed to a patient for home care of a wound, *and*
- They are medically necessary, *and*
- The wound is due to an accepted work related condition.

The cost for surgical dressings applied during a procedure, office visit, or clinic visit is included in the practice expense component of the RVU (overhead) for that provider. Separate payment isn't allowed.

Items such as elastic stockings, support hose, and pressure garments aren't **secondary surgical dressings** and must be billed with the appropriate HCPCS code.

Surgical dressing **supplies** and codes billed without the local modifier **-1S** are considered **Bundled** and won't be paid.

Pneumatic compression devices used during surgery and sent home with the worker are considered surgical supplies. The cost of the device is bundled into the surgical service fee and is not separately payable, even to **DME** suppliers. For details on coverage of pneumatic compression devices, see [Chapter 9: Durable Medical Equipment](#).





## Payment policy: Surgical trays and supplies used in the physician's office

### Payment limits

L&I follows CMS's policy of bundling HCPCS codes for surgical trays and **supplies** used in a physician's office. Surgical trays and **supplies** won't be paid separately.

#### **Special note: Surgical dressings and other items dispensed for home use**

Surgical dressings and other items dispensed for home use are separately payable when billed with local modifier **-1S**.



## Links to related topics

If you're looking for more information about...	Then see...
<b>Administrative rules</b> for topics relevant to this chapter	<a href="#">Washington Administrative Code (WAC) 296-20-1102</a> <a href="#">WAC 296-20-01002</a>
<b>Becoming an L&amp;I provider</b>	<a href="#">Become A Provider on L&amp;I's website</a>
<b>Billing</b> instructions and forms	<a href="#">Chapter 2: Information for All Providers</a>
<b>Fee schedules</b> for all healthcare facility services (including ASCs)	<a href="#">Fee schedules on L&amp;I's website</a>
Payment policies for <b>catheterization to obtain specimens for lab tests</b>	<a href="#">Chapter 23: Pathology and Laboratory Services</a>
Payment policies for <b>durable medical equipment (DME)</b>	<a href="#">Chapter 9: Durable Medical Equipment</a>
Payment policies for <b>hospital acquisition cost policy</b>	<a href="#">Chapter 35: Hospitals</a>

### Need more help?

Call L&I's Provider Hotline at **1-800-848-0811** or email [PHL@lni.wa.gov](mailto:PHL@lni.wa.gov)