

Detail Reference Guide to  
Determining CMS Medicare + 35%  
for Offices of the Insurance Commissioner (OIC)  
Workers' Compensation Maximum Medical Reimbursement Fee Schedules  
Effective: October 1, 2008  
Subsequent schedules should be updated each July 1 until further notice.

Codes listed with "0", not listed, or are "BR – By Report" are carrier priced.

## **HCPCS Level II**

Calculate the OIC Maximum Medical Reimbursement with the following formula(s):  
(Formula component 1.35 below represents Medicare + 35%), rounded

Medicare *West Virginia Durable Medical Equipment* fee, rounded x 1.35 = OIC  
Maximum Medical Reimbursement, rounded

### IMPORTANT NOTES:

1. The following table is available from Medicare <http://www.cms.hhs.gov/home/medicare.asp>:  
*Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)*
2. Within the Medicare Website go to the link labeled *Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Fee Schedules*. From there go to the link *DMEPOS Fee Schedule*. From there take the link for the July 1 update prior to date of service folder. For date of service between July 1 and June 30, the reimbursement effective on the July 1 immediately prior to date of service would apply. For example, for a January 10, 2009 date of service, the reimbursement effective on July 1, 2008 would apply. Find the Excel table labeled d(year)\_(most recent month of update). For example, the January 2008 file is named d08\_jan.
3. The fee found under West Virginia (WV) column on the *Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)* table, rounded; then multiply by 1.35 to calculate the OIC Maximum allowable fee, rounded.