

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5020 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,453.68 | 4/1/1992 | 0.00 | \$1,453.68 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5050 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,834.75 | 4/1/1992 | 0.00 | \$1,834.75 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5060 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,203.30 | 4/1/1992 | 0.00 | \$2,203.30 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5100 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,041.52 | 4/1/1992 | 0.00 | \$2,041.52 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5105 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,399.36 | 4/1/1992 | 0.00 | \$2,399.36 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5150 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,753.18 | 4/1/1992 | 0.00 | \$2,753.18 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5160 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,864.71 | 4/1/1992 | 0.00 | \$2,864.71 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5200 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,652.11 | 4/1/1992 | 0.00 | \$2,652.11 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5210 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,753.37 | 4/1/1992 | 0.00 | \$1,753.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5220 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,204.80 | 4/1/1992 | 0.00 | \$2,204.80 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5230 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,588.51 | 4/1/1992 | 0.00 | \$2,588.51 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5250 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,804.80 | 4/1/1992 | 0.00 | \$3,804.80 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5270 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,569.42 | 4/1/1992 | 0.00 | \$3,569.42 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5280 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,904.83 | 4/1/1992 | 0.00 | \$3,904.83 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5301 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,487.62 | 7/1/2010 | 0.00 | \$2,487.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5312 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,547.39 | 1/1/2012 | 0.00 | \$2,547.39 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5321 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,470.57 | 7/1/2010 | 0.00 | \$3,470.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5331 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$5,224.82 | 7/1/2010 | 0.00 | \$5,224.82 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5341 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$5,452.42 | 7/1/2010 | 0.00 | \$5,452.42 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5400 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$867.54 | 4/1/1992 | 0.00 | \$867.54 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5410 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$383.92 | 2/1/1993 | 0.00 | \$383.92 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5420 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,182.14 | 4/1/1992 | 0.00 | \$1,182.14 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5430 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$470.73 | 2/1/1993 | 0.00 | \$470.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5450 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$369.17 | 4/1/1992 | 0.00 | \$369.17 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5460 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$484.07 | 2/1/1993 | 0.00 | \$484.07 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5500 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$933.65 | 4/1/1992 | 0.00 | \$933.65 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5505 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,602.55 | 4/1/1992 | 0.00 | \$1,602.55 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5510 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$988.76 | 4/1/1992 | 0.00 | \$988.76 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5520 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,359.06 | 2/1/1993 | 0.00 | \$1,359.06 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5530 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,373.87 | 4/1/1992 | 0.00 | \$1,373.87 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5535 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,365.25 | 4/1/1992 | 0.00 | \$1,365.25 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5540 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,481.57 | 4/1/1992 | 0.00 | \$1,481.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5560 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,824.08 | 2/1/1993 | 0.00 | \$1,824.08 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5570 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,675.91 | 4/1/1992 | 0.00 | \$1,675.91 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5580 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,932.25 | 4/1/1992 | 0.00 | \$1,932.25 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5585 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,861.41 | 4/1/1992 | 0.00 | \$1,861.41 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5590 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,921.37 | 4/1/1992 | 0.00 | \$1,921.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5595 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,614.81 | 2/1/1993 | 0.00 | \$2,614.81 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5600 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,920.67 | 2/1/1993 | 0.00 | \$2,920.67 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5610 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,590.05 | 1/1/2004 | 0.00 | \$1,590.05 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5611 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,037.38 | 4/1/1992 | 0.00 | \$1,037.38 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5613 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,654.72 | 4/1/1992 | 0.00 | \$1,654.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5614 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,539.04 | 7/1/2010 | 0.00 | \$1,539.04 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5616 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,260.48 | 2/1/1993 | 0.00 | \$1,260.48 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5617 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$404.55 | 2/1/1996 | 0.00 | \$404.55 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5618 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$214.55 | 4/1/1992 | 0.00 | \$214.55 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5620 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$256.89 | 2/1/1993 | 0.00 | \$256.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5622 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$336.07 | 2/1/1993 | 0.00 | \$336.07 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5624 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$335.28 | 2/1/1993 | 0.00 | \$335.28 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5626 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$361.14 | 4/1/1992 | 0.00 | \$361.14 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5628 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$409.35 | 4/1/1992 | 0.00 | \$409.35 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5629 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$288.62 | 2/1/1993 | 0.00 | \$288.62 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5630 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$314.35 | 4/1/1992 | 0.00 | \$314.35 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5631 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$401.22 | 2/1/1993 | 0.00 | \$401.22 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5632 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$136.66 | 2/1/1993 | 0.00 | \$136.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5634 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$193.96 | 2/1/1993 | 0.00 | \$193.96 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5636 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$166.63 | 4/1/1992 | 0.00 | \$166.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5637 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$273.73 | 2/1/1993 | 0.00 | \$273.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5638 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$324.82 | 4/1/1992 | 0.00 | \$324.82 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5639 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$780.06 | 2/1/1993 | 0.00 | \$780.06 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5640 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$408.23 | 2/1/1993 | 0.00 | \$408.23 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5642 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$395.66 | 2/1/1993 | 0.00 | \$395.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5643 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,020.37 | 4/1/1992 | 0.00 | \$1,020.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5644 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$557.05 | 4/1/1992 | 0.00 | \$557.05 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5645 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$491.45 | 4/1/1992 | 0.00 | \$491.45 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5646 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$523.55 | 4/1/1992 | 0.00 | \$523.55 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5647 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$497.66 | 2/1/1993 | 0.00 | \$497.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5648 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$592.57 | 4/1/1992 | 0.00 | \$592.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5649 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,631.89 | 4/1/1992 | 0.00 | \$1,631.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5650 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$451.75 | 4/1/1992 | 0.00 | \$451.75 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5651 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$938.37 | 4/1/1992 | 0.00 | \$938.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5652 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$380.62 | 4/1/1992 | 0.00 | \$380.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5653 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$395.63 | 4/1/1992 | 0.00 | \$395.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5654 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$279.67 | 4/1/1992 | 0.00 | \$279.67 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5655 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$245.87 | 2/1/1993 | 0.00 | \$245.87 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5656 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$252.74 | 4/1/1992 | 0.00 | \$252.74 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5658 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$233.37 | 4/1/1992 | 0.00 | \$233.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5661 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$383.31 | 4/1/1992 | 0.00 | \$383.31 | 6 | | | | | | | | | | | | 3/1/2021 | |

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| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5665 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$332.22 | 4/1/1992 | 0.00 | \$332.22 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5666 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$62.90 | 2/1/1993 | 0.00 | \$62.90 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5668 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$90.46 | 2/1/1993 | 0.00 | \$90.46 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5670 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$250.47 | 2/1/1993 | 0.00 | \$250.47 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5671 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$518.60 | 7/1/2010 | 0.00 | \$518.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5672 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$195.10 | 2/1/1993 | 0.00 | \$195.10 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5673 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$587.53 | 7/1/2004 | 0.00 | \$587.53 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5676 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$328.32 | 2/1/1993 | 0.00 | \$328.32 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5677 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$462.39 | 2/1/1993 | 0.00 | \$462.39 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5678 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$35.56 | 2/1/1993 | 0.00 | \$35.56 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5679 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$489.59 | 7/1/2004 | 0.00 | \$489.59 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5680 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$224.64 | 4/1/1992 | 0.00 | \$224.64 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5681 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,066.68 | 7/1/2004 | 0.00 | \$1,066.68 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5682 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$415.03 | 4/1/1992 | 0.00 | \$415.03 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5683 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,066.68 | 7/1/2004 | 0.00 | \$1,066.68 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5684 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$37.99 | 4/1/1992 | 0.00 | \$37.99 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5685 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$77.40 | 1/1/2005 | 0.00 | \$77.40 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5686 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$38.61 | 4/1/1992 | 0.00 | \$38.61 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5688 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$58.12 | 2/1/1993 | 0.00 | \$58.12 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5690 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$77.77 | 4/1/1992 | 0.00 | \$77.77 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5692 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$124.39 | 2/1/1993 | 0.00 | \$124.39 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5694 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$169.28 | 2/1/1993 | 0.00 | \$169.28 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5695 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$151.25 | 2/1/1993 | 0.00 | \$151.25 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5696 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$166.43 | 4/1/1992 | 0.00 | \$166.43 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5697 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$52.36 | 4/1/1992 | 0.00 | \$52.36 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5698 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$85.11 | 4/1/1992 | 0.00 | \$85.11 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5699 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$116.45 | 2/1/1993 | 0.00 | \$116.45 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5700 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,988.95 | 4/1/1994 | 0.00 | \$1,988.95 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5701 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,388.59 | 4/1/1994 | 0.00 | \$2,388.59 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5702 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,021.91 | 4/1/1994 | 0.00 | \$3,021.91 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5703 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,988.95 | 1/1/2006 | 0.00 | \$1,988.95 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5704 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$372.09 | 4/1/1994 | 0.00 | \$372.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5705 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$664.84 | 4/1/1994 | 0.00 | \$664.84 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5706 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$651.74 | 4/1/1994 | 0.00 | \$651.74 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5707 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$859.23 | 4/1/1994 | 0.00 | \$859.23 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5710 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$289.90 | 4/1/1992 | 0.00 | \$289.90 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5711 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$370.82 | 4/1/1992 | 0.00 | \$370.82 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5712 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$376.43 | 4/1/1992 | 0.00 | \$376.43 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5714 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$300.27 | 4/1/1992 | 0.00 | \$300.27 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5716 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$519.58 | 4/1/1992 | 0.00 | \$519.58 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5718 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$613.21 | 4/1/1992 | 0.00 | \$613.21 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5722 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$584.63 | 2/1/1993 | 0.00 | \$584.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5724 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,448.26 | 4/1/1992 | 0.00 | \$1,448.26 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5726 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,656.45 | 4/1/1992 | 0.00 | \$1,656.45 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5728 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,652.69 | 4/1/1992 | 0.00 | \$1,652.69 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5780 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$820.29 | 4/1/1992 | 0.00 | \$820.29 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5785 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$372.37 | 4/1/1992 | 0.00 | \$372.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5790 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$667.39 | 2/1/1993 | 0.00 | \$667.39 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5795 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$946.60 | 2/1/1993 | 0.00 | \$946.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5810 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$359.77 | 4/1/1992 | 0.00 | \$359.77 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5811 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$525.35 | 4/1/1992 | 0.00 | \$525.35 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5812 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$385.99 | 4/1/1992 | 0.00 | \$385.99 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5814 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,387.27 | 7/1/2010 | 0.00 | \$3,387.27 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5816 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$631.91 | 4/1/1992 | 0.00 | \$631.91 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5818 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$641.93 | 4/1/1992 | 0.00 | \$641.93 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5822 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,028.34 | 4/1/1992 | 0.00 | \$1,028.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5824 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,225.63 | 4/1/1992 | 0.00 | \$1,225.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5826 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,848.26 | 7/1/2010 | 0.00 | \$2,848.26 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5828 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,993.68 | 4/1/1992 | 0.00 | \$1,993.68 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5830 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,370.31 | 4/1/1992 | 0.00 | \$1,370.31 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5840 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,750.56 | 3/1/2021 | 0.00 | \$1,750.56 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5845 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,634.75 | 7/1/2010 | 0.00 | \$1,634.75 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5848 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$871.99 | 6/1/2003 | 0.00 | \$871.99 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5850 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$101.67 | 4/1/1992 | 0.00 | \$101.67 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5855 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$238.62 | 4/1/1994 | 0.00 | \$238.62 | 6 | | | | | | | | | | | | 3/1/2021 | |

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TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5856 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$21,894.75 | 7/1/2010 | 0.00 | \$21,894.75 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5857 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7,769.10 | 7/1/2010 | 0.00 | \$7,769.10 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5858 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$9,377.37 | 3/1/2021 | 0.00 | \$9,377.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5859 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$13,782.16 | 10/1/2014 | 0.00 | \$13,782.16 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5910 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$323.90 | 2/1/1993 | 0.00 | \$323.90 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5920 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$472.81 | 2/1/1993 | 0.00 | \$472.81 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5925 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$404.10 | 10/1/2018 | 0.00 | \$404.10 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5930 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,433.73 | 2/1/1996 | 0.00 | \$2,433.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5940 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$420.12 | 4/1/1992 | 0.00 | \$420.12 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5950 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$713.94 | 2/1/1993 | 0.00 | \$713.94 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5960 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$931.97 | 2/1/1993 | 0.00 | \$931.97 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5961 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$4,399.48 | 10/1/2012 | 0.00 | \$4,399.48 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5962 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$572.22 | 10/1/2018 | 0.00 | \$572.22 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5964 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$844.74 | 10/1/2018 | 0.00 | \$844.74 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5966 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$931.97 | 10/1/2018 | 0.00 | \$931.97 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5968 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,755.37 | 3/1/1999 | 0.00 | \$2,755.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5970 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$164.11 | 4/1/1992 | 0.00 | \$164.11 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5971 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$205.31 | 7/1/2010 | 0.00 | \$205.31 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5972 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$386.47 | 7/1/2010 | 0.00 | \$386.47 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5973 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$15,691.70 | 1/1/2010 | 0.00 | \$15,691.70 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5974 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$193.89 | 4/1/1992 | 0.00 | \$193.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5975 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$351.52 | 3/1/1999 | 0.00 | \$351.52 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5976 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$350.00 | 4/1/1990 | 0.00 | \$350.00 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5978 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$252.72 | 4/1/1992 | 0.00 | \$252.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5979 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,584.09 | 4/1/1994 | 0.00 | \$1,584.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5980 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,500.00 | 4/1/1990 | 0.00 | \$2,500.00 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5981 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,500.00 | 10/1/2018 | 0.00 | \$2,500.00 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5982 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$392.46 | 4/1/1992 | 0.00 | \$392.46 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5984 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$428.19 | 4/1/1992 | 0.00 | \$428.19 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5985 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$204.17 | 2/1/1996 | 0.00 | \$204.17 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5986 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$420.19 | 4/1/1992 | 0.00 | \$420.19 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5987 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$5,347.10 | 2/1/1997 | 0.00 | \$5,347.10 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5988 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,514.73 | 3/1/1999 | 0.00 | \$1,514.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5990 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,654.66 | 7/1/2010 | 0.00 | \$1,654.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L5999 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$0.00 | 4/1/1990 | | \$0.00 | 5 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6000 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$972.86 | 4/1/1992 | 0.00 | \$972.86 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6010 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,016.34 | 4/1/1992 | 0.00 | \$1,016.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6020 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$982.86 | 4/1/1992 | 0.00 | \$982.86 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6050 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,560.05 | 4/1/1992 | 0.00 | \$1,560.05 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6055 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,875.19 | 4/1/1992 | 0.00 | \$1,875.19 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6100 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,673.07 | 4/1/1992 | 0.00 | \$1,673.07 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6110 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,706.62 | 4/1/1992 | 0.00 | \$1,706.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6120 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,937.07 | 4/1/1992 | 0.00 | \$1,937.07 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6130 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,749.29 | 4/1/1992 | 0.00 | \$1,749.29 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6200 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,157.71 | 4/1/1992 | 0.00 | \$2,157.71 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6205 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,362.09 | 4/1/1992 | 0.00 | \$2,362.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6250 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,262.60 | 4/1/1992 | 0.00 | \$2,262.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6300 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,607.09 | 4/1/1992 | 0.00 | \$2,607.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6310 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,162.15 | 4/1/1992 | 0.00 | \$2,162.15 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6320 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,357.49 | 4/1/1992 | 0.00 | \$1,357.49 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6350 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,554.34 | 2/1/1993 | 0.00 | \$2,554.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6360 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,275.13 | 4/1/1992 | 0.00 | \$2,275.13 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6370 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,673.51 | 4/1/1992 | 0.00 | \$1,673.51 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6380 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$884.50 | 4/1/1992 | 0.00 | \$884.50 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6382 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,060.87 | 4/1/1992 | 0.00 | \$1,060.87 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6384 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,363.57 | 4/1/1992 | 0.00 | \$1,363.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6386 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$294.89 | 4/1/1992 | 0.00 | \$294.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6388 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$343.73 | 4/1/1992 | 0.00 | \$343.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6400 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,631.25 | 4/1/1992 | 0.00 | \$1,631.25 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6450 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,993.94 | 4/1/1992 | 0.00 | \$1,993.94 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6500 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,053.82 | 4/1/1992 | 0.00 | \$2,053.82 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6550 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,487.09 | 4/1/1992 | 0.00 | \$2,487.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6570 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,802.70 | 4/1/1992 | 0.00 | \$2,802.70 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6580 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,099.39 | 4/1/1992 | 0.00 | \$1,099.39 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6582 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$999.28 | 4/1/1992 | 0.00 | \$999.28 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6584 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,532.85 | 4/1/1992 | 0.00 | \$1,532.85 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6586 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,447.11 | 4/1/1992 | 0.00 | \$1,447.11 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6588 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,076.56 | 4/1/1992 | 0.00 | \$2,076.56 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6590 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,987.15 | 4/1/1992 | 0.00 | \$1,987.15 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6600 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$176.15 | 2/1/1993 | 0.00 | \$176.15 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6605 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$170.62 | 4/1/1992 | 0.00 | \$170.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6610 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$142.80 | 4/1/1992 | 0.00 | \$142.80 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6611 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$375.52 | 7/1/2010 | 0.00 | \$375.52 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6615 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$127.83 | 4/1/1992 | 0.00 | \$127.83 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6616 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$59.41 | 2/1/1993 | 0.00 | \$59.41 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6620 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$212.21 | 4/1/1992 | 0.00 | \$212.21 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6621 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,154.08 | 3/1/2021 | 0.00 | \$1,154.08 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6623 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$474.77 | 4/1/1992 | 0.00 | \$474.77 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6624 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,185.32 | 1/1/2007 | 0.00 | \$3,185.32 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6625 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$468.62 | 2/1/1993 | 0.00 | \$468.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6628 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$366.57 | 4/1/1992 | 0.00 | \$366.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6629 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$108.88 | 4/1/1992 | 0.00 | \$108.88 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6630 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$160.41 | 4/1/1992 | 0.00 | \$160.41 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6632 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$41.63 | 2/1/1993 | 0.00 | \$41.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6635 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$147.94 | 4/1/1992 | 0.00 | \$147.94 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6637 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$296.18 | 4/1/1992 | 0.00 | \$296.18 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6638 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,027.88 | 6/1/2003 | 0.00 | \$2,027.88 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6640 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$257.70 | 2/1/1993 | 0.00 | \$257.70 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6641 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$128.66 | 4/1/1992 | 0.00 | \$128.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6642 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$165.34 | 4/1/1992 | 0.00 | \$165.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6645 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$296.78 | 2/1/1993 | 0.00 | \$296.78 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6646 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,557.62 | 6/1/2003 | 0.00 | \$2,557.62 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6647 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$421.06 | 6/1/2003 | 0.00 | \$421.06 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6648 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,637.84 | 6/1/2003 | 0.00 | \$2,637.84 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6650 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$314.50 | 2/1/1993 | 0.00 | \$314.50 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6655 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$68.90 | 4/1/1992 | 0.00 | \$68.90 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6660 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$70.50 | 4/1/1992 | 0.00 | \$70.50 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6665 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$41.60 | 2/1/1993 | 0.00 | \$41.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6670 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$43.61 | 2/1/1993 | 0.00 | \$43.61 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6672 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$111.91 | 4/1/1992 | 0.00 | \$111.91 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6675 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$88.97 | 4/1/1992 | 0.00 | \$88.97 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6676 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$83.66 | 4/1/1992 | 0.00 | \$83.66 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6677 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$149.69 | 3/1/2021 | 0.00 | \$149.69 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6680 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$214.42 | 2/1/1993 | 0.00 | \$214.42 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6682 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$204.24 | 4/1/1992 | 0.00 | \$204.24 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6684 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$225.51 | 4/1/1992 | 0.00 | \$225.51 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6686 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$388.52 | 4/1/1992 | 0.00 | \$388.52 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6687 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$358.09 | 2/1/1993 | 0.00 | \$358.09 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6688 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$394.75 | 4/1/1992 | 0.00 | \$394.75 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6689 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$473.35 | 4/1/1992 | 0.00 | \$473.35 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6690 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$489.36 | 4/1/1992 | 0.00 | \$489.36 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6691 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$219.63 | 4/1/1992 | 0.00 | \$219.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6692 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$466.60 | 4/1/1992 | 0.00 | \$466.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6693 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,152.63 | 3/1/1999 | 0.00 | \$2,152.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6694 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$660.81 | 7/1/2010 | 0.00 | \$660.81 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6695 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$550.65 | 7/1/2010 | 0.00 | \$550.65 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6696 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,199.72 | 7/1/2010 | 0.00 | \$1,199.72 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6697 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,199.72 | 7/1/2010 | 0.00 | \$1,199.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6698 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$518.60 | 7/1/2010 | 0.00 | \$518.60 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6703 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$276.63 | 1/1/2007 | 0.00 | \$276.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6704 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$648.73 | 1/1/2007 | 0.00 | \$648.73 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6706 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$336.56 | 1/1/2007 | 0.00 | \$336.56 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6707 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,197.57 | 1/1/2007 | 0.00 | \$1,197.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6708 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$804.87 | 1/1/2007 | 0.00 | \$804.87 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6709 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,180.90 | 1/1/2007 | 0.00 | \$1,180.90 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6711 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$583.99 | 1/1/2009 | 0.00 | \$583.99 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6712 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,075.26 | 1/1/2009 | 0.00 | \$1,075.26 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6713 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,357.07 | 1/1/2009 | 0.00 | \$1,357.07 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6714 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,149.43 | 1/1/2009 | 0.00 | \$1,149.43 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6715 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,998.93 | 10/1/2014 | 0.00 | \$2,998.93 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6721 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,042.98 | 1/1/2009 | 0.00 | \$2,042.98 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6722 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,761.19 | 1/1/2009 | 0.00 | \$1,761.19 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6805 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$285.58 | 4/1/1992 | 0.00 | \$285.58 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6810 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$144.51 | 4/1/1992 | 0.00 | \$144.51 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6880 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$0.00 | 1/1/2012 | | \$0.00 | 5 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6881 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,728.72 | 7/1/2010 | 0.00 | \$3,728.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6882 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,828.42 | 7/1/2010 | 0.00 | \$2,828.42 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6883 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,683.10 | 7/1/2010 | 0.00 | \$1,683.10 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6884 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,525.99 | 7/1/2010 | 0.00 | \$2,525.99 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6885 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,873.00 | 7/1/2010 | 0.00 | \$2,873.00 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6890 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$116.22 | 4/1/1992 | 0.00 | \$116.22 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6895 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$348.92 | 4/1/1992 | 0.00 | \$348.92 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6900 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,018.70 | 4/1/1992 | 0.00 | \$1,018.70 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6905 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$935.52 | 2/1/1993 | 0.00 | \$935.52 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6910 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$981.37 | 4/1/1992 | 0.00 | \$981.37 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6915 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$402.34 | 2/1/1993 | 0.00 | \$402.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6920 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$6,609.86 | 7/1/2010 | 0.00 | \$6,609.86 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6925 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$6,979.44 | 7/1/2010 | 0.00 | \$6,979.44 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6930 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7,096.46 | 7/1/2010 | 0.00 | \$7,096.46 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6935 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7,806.03 | 7/1/2010 | 0.00 | \$7,806.03 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6940 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$8,869.04 | 7/1/2010 | 0.00 | \$8,869.04 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6945 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$10,032.95 | 7/1/2010 | 0.00 | \$10,032.95 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6950 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$9,429.49 | 7/1/2010 | 0.00 | \$9,429.49 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6955 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$11,832.69 | 7/1/2010 | 0.00 | \$11,832.69 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6960 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$11,667.63 | 7/1/2010 | 0.00 | \$11,667.63 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6965 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$17,044.73 | 7/1/2010 | 0.00 | \$17,044.73 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6970 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$17,324.81 | 7/1/2010 | 0.00 | \$17,324.81 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L6975 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$17,417.80 | 7/1/2010 | 0.00 | \$17,417.80 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7007 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,837.72 | 1/1/2007 | 0.00 | \$3,837.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7008 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$6,513.41 | 7/1/2010 | 0.00 | \$6,513.41 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7009 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$4,222.48 | 7/1/2010 | 0.00 | \$4,222.48 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7040 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,390.49 | 7/1/2010 | 0.00 | \$3,390.49 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7045 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,943.89 | 7/1/2010 | 0.00 | \$1,943.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7170 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7,051.76 | 7/1/2010 | 0.00 | \$7,051.76 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7180 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$36,843.81 | 7/1/2010 | 0.00 | \$36,843.81 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7181 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$36,544.45 | 7/1/2010 | 0.00 | \$36,544.45 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7185 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7,140.85 | 7/1/2010 | 0.00 | \$7,140.85 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7186 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$10,305.99 | 7/1/2010 | 0.00 | \$10,305.99 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7190 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$9,085.38 | 7/1/2010 | 0.00 | \$9,085.38 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7191 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$10,954.94 | 7/1/2010 | 0.00 | \$10,954.94 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7400 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$279.53 | 7/1/2010 | 0.00 | \$279.53 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7401 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$312.93 | 7/1/2010 | 0.00 | \$312.93 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7402 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$337.94 | 7/1/2010 | 0.00 | \$337.94 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7403 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$335.88 | 7/1/2010 | 0.00 | \$335.88 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7404 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$506.92 | 7/1/2010 | 0.00 | \$506.92 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7405 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$662.98 | 7/1/2010 | 0.00 | \$662.98 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7499 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$0.00 | 4/1/1990 | | \$0.00 | 5 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7510 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$30.45 | 10/1/2016 | 0.00 | \$30.45 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7520 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$27.41 | 10/1/2016 | 0.00 | \$27.41 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7600 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$61.44 | 10/1/2018 | 0.00 | \$61.44 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L7700 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$92.88 | 1/1/2018 | 0.00 | \$92.88 | 6 | | | | | | | | | | | | 9/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8000 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$23.92 | 6/1/2010 | 0.00 | \$23.92 | | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8001 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$114.39 | 7/1/2010 | 0.00 | \$114.39 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8002 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$150.48 | 7/1/2010 | 0.00 | \$150.48 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8010 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$51.22 | 10/1/2018 | 0.00 | \$51.22 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8015 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$45.45 | 6/1/2010 | 0.00 | \$45.45 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8020 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$140.20 | 6/1/2010 | 0.00 | \$140.20 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8030 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$233.93 | 6/1/2010 | 0.00 | \$233.93 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8031 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$307.79 | 10/1/2012 | 0.00 | \$307.79 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8032 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$20.09 | 1/1/2010 | 0.00 | \$20.09 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8033 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$29.65 | 1/1/2020 | 0.00 | \$29.65 | | | | | | | | | | | | | 9/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8035 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$2,777.90 | 6/1/2010 | 0.00 | \$2,777.90 | | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8039 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$0.00 | 6/1/2010 | | \$0.00 | 5 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8040 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,873.58 | 10/1/2016 | 0.00 | \$1,873.58 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8041 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,258.29 | 10/1/2016 | 0.00 | \$2,258.29 | 6 | | | | | | | | | | | | 3/1/2021 | |

TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|----------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8042 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,589.19 | 4/1/2001 | 0.00 | \$2,589.19 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8043 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,899.88 | 4/1/2001 | 0.00 | \$2,899.88 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8044 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$3,210.59 | 4/1/2001 | 0.00 | \$3,210.59 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8045 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,010.46 | 4/1/2001 | 0.00 | \$2,010.46 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8046 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$2,071.34 | 4/1/2001 | 0.00 | \$2,071.34 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8047 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$1,061.57 | 4/1/2001 | 0.00 | \$1,061.57 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8400 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$10.45 | 4/1/1992 | 0.00 | \$10.45 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8410 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$14.86 | 4/1/1992 | 0.00 | \$14.86 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8415 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$15.72 | 4/1/1992 | 0.00 | \$15.72 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8417 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$55.89 | 2/1/1997 | 0.00 | \$55.89 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8420 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$14.48 | 7/1/1997 | 0.00 | \$14.48 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8430 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$16.00 | 7/1/1997 | 0.00 | \$16.00 | 6 | | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8435 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$15.62 | 7/1/1997 | 0.00 | \$15.62 | 6 | | | | | | | | | | | | 3/1/2021 | |

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TEXAS MEDICAID FEE SCHEDULE -
PROSTHETIST

| TOS | TOS Desc | Proc Code | Mod 1 | Mod 2 | Client Age | | | Non-facility | | | | | | | Facility | | | | | | | Last Pricing Review Date | Change Ind | | | |
|-----|---------------------------------|-----------|-------|-------|------------|------|-------|---------------------------|-------------------|--------------|-----------------|----------|------------------------------|------------|----------|--|---------------------------|-------------------|--------------|-----------------|----------|--------------------------|------------|------------------------------|------------|--|
| | | | | | Frm | Thru | Units | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | Adjusted Fee for Report Date | Note Codes | | | Total RVUs/ Base Units | Conversion Factor | Medicaid Fee | Fee Effect Date | Adjust % | | | Adjusted Fee for Report Date | Note Codes | |
| | | | | | | | | | | | | | 1 | 2 | 3 | | | | | | | 1 | 2 | 3 | | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8440 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$30.38 | 4/1/1992 | 0.00 | \$30.38 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8460 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$59.16 | 4/1/1992 | 0.00 | \$59.16 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8465 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$37.20 | 4/1/1992 | 0.00 | \$37.20 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8470 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$4.98 | 7/1/1997 | 0.00 | \$4.98 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8480 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$6.96 | 7/1/1997 | 0.00 | \$6.96 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8485 | | | 0 | 20 | Years | 0.00 | \$0.0000 | \$7.72 | 7/1/1997 | 0.00 | \$7.72 | 6 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8499 | | | 0 | 999 | Years | 0.00 | \$0.0000 | \$0.00 | 1/1/2009 | | \$0.00 | 5 | | | | | | | | | | | 3/1/2021 | |
| 9 | OTHER MEDICAL ITEMS OR SERVICES | L8499 | RB | | 0 | 999 | Years | 0.00 | \$0.0000 | \$0.00 | 1/1/2009 | | \$0.00 | 5 | | | | | | | | | | | 3/1/2021 | |

Note Code(s): 5 - This procedure is manually reviewed to determine pricing.
6 - This procedure is payable only through the CCP program.