

**ND Medicaid  
 DME Rental Fee Schedule  
 as of 1/1/2023**

Inclusion or exclusion of a procedure code, supply, product, or service does not imply Medicaid coverage, reimbursement, or lack thereof.

<b>Code</b>	<b>Medicaid Fee</b>
B9002	\$167.11
B9004	\$284.22
B9006	\$284.22
E0110	\$9.52
E0114	\$6.07
E0116	\$3.23
E0135	\$8.43
E0141	\$9.55
E0143	\$9.36
E0144	\$32.78
E0147	\$52.29
E0148	\$10.97
E0149	\$17.05
E0153	\$8.22
E0154	\$8.88
E0155	\$3.79
E0156	\$2.80
E0160	\$3.99
E0162	\$20.34
E0163	\$11.59
E0165	\$17.07
E0181	\$22.07
E0182	\$27.44
E0184	\$21.08
E0196	\$38.12
E0197	\$26.64
E0198	\$29.47
E0202	\$70.79
E0203	\$27.14

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E0240	\$6.96
E0245	\$5.31
E0250	\$76.49
E0251	\$70.36
E0255	\$85.94
E0256	\$75.12
E0260	\$93.07
E0261	\$92.06
E0265	\$183.94
E0266	\$161.10
E0271	\$26.87
E0277	\$373.28
E0290	\$70.79
E0291	\$53.25
E0292	\$76.64
E0293	\$68.83
E0294	\$90.26
E0295	\$89.31
E0303	\$221.27
E0305	\$13.82
E0310	\$22.87
E0373	\$336.75
E0424	\$78.20
E0431	\$17.94
E0433	\$39.22
E0434	\$39.22
E0435	\$49.77
E0439	\$79.30
E0445	\$85.26
E0457	\$97.77
E0465	\$1,269.40
E0466	\$1,269.40
E0470	\$167.22

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<b>Code</b>	<b>Medicaid Fee</b>
E0471	\$389.39
E0480	\$54.17
E0482	\$514.90
E0483	\$1,413.84
E0550	\$79.64
E0560	\$22.08
E0561	\$14.23
E0562	\$38.19
E0565	\$66.31
E0570	\$10.41
E0600	\$54.82
E0601	\$66.47
E0604	\$110.90
E0615	\$55.43
E0618	\$264.45
E0619	\$264.20
E0621	\$42.16
E0630	\$85.30
E0720	\$45.83
E0730	\$47.77
E0745	\$75.21
E0747	\$517.50
E0760	\$429.96
E0776	\$13.66
E0781	\$293.04
E0784	\$524.23
E0791	\$343.30
E0849	\$47.22
E0850	\$12.39
E0855	\$65.73
E0870	\$10.90
E0880	\$15.17
E0890	\$12.31

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<b>Code</b>	<b>Medicaid Fee</b>
E0910	\$14.69
E0911	\$39.35
E0912	\$104.53
E0920	\$61.38
E0930	\$52.69
E0935	\$30.25
E0940	\$27.62
E0950	\$13.43
E0951	\$2.51
E0952	\$2.43
E0954	\$5.69
E0955	\$26.11
E0956	\$12.73
E0957	\$18.29
E0958	\$53.64
E0961	\$3.82
E0971	\$7.05
E0973	\$13.92
E0978	\$5.42
E0981	\$6.47
E0982	\$6.00
E0983	\$364.35
E0984	\$197.14
E0986	\$502.68
E0990	\$15.13
E0992	\$12.25
E1002	\$531.38
E1020	\$31.47
E1028	\$26.59
E1029	\$47.68
E1060	\$200.73
E1070	\$151.34
E1083	\$117.87

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<b>Code</b>	<b>Medicaid Fee</b>
E1084	\$117.25
E1087	\$164.06
E1092	\$165.65
E1093	\$140.58
E1100	\$139.41
E1110	\$131.61
E1150	\$92.39
E1160	\$74.08
E1161	\$314.65
E1224	\$95.59
E1226	\$59.91
E1232	\$284.41
E1233	\$294.65
E1234	\$256.53
E1235	\$247.03
E1236	\$217.93
E1237	\$46.51
E1238	\$217.93
E1240	\$116.47
E1270	\$113.87
E1280	\$146.01
E1295	\$162.50
E1372	\$19.36
E1390	\$79.30
E1392	\$39.22
E1405	\$102.26
E1406	\$82.21
E1700	\$45.21
E2000	\$62.06
E2201	\$49.09
E2202	\$39.18
E2203	\$58.39
E2208	\$8.02

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<b>Code</b>	<b>Medicaid Fee</b>
E2231	\$19.11
E2310	\$151.20
E2312	\$214.54
E2313	\$36.77
E2321	\$205.31
E2322	\$182.20
E2325	\$93.36
E2327	\$323.47
E2330	\$442.12
E2331	\$19.11
E2342	\$59.36
E2359	\$14.34
E2362	\$12.86
E2365	\$14.24
E2366	\$32.31
E2367	\$55.71
E2373	\$150.34
E2374	\$20.25
E2376	\$160.46
E2377	\$58.15
E2378	\$59.06
E2397	\$48.63
E2398	\$95.40
E2402	\$1,062.65
E2500	\$52.01
E2502	\$159.04
E2506	\$307.58
E2508	\$475.64
E2510	\$900.09
E2601	\$11.47
E2602	\$13.56
E2604	\$21.34
E2607	\$38.18

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<b>Code</b>	<b>Medicaid Fee</b>
E2608	\$39.54
E2620	\$76.12
E2622	\$37.99
E2623	\$47.79
E2624	\$37.81
E2625	\$48.06
E2626	\$43.47
E2627	\$69.39
E2628	\$52.28
E2629	\$66.14
E2630	\$46.25
E2631	\$16.24
E2632	\$10.37
E2633	\$15.66
E8000	\$102.31
E8001	\$170.02
E8002	\$157.30
K0001	\$35.31
K0002	\$58.01
K0003	\$58.26
K0004	\$81.01
K0005	\$241.75
K0006	\$91.53
K0007	\$120.70
K0011	\$634.24
K0012	\$389.07
K0018	\$3.74
K0019	\$2.22
K0020	\$6.57
K0040	\$10.04
K0045	\$6.60
K0053	\$13.43
K0056	\$13.07

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<b>Code</b>	<b>Medicaid Fee</b>
K0069	\$13.68
K0195	\$20.78
K0455	\$317.13
K0606	\$2,977.83
K0730	\$174.27
K0738	\$39.22
K0813	\$229.45
K0814	\$289.91
K0815	\$426.48
K0816	\$388.25
K0820	\$259.37
K0821	\$385.68
K0822	\$438.41
K0823	\$416.46
K0824	\$596.11
K0825	\$408.50
K0826	\$639.19
K0827	\$620.14
K0828	\$705.41
K0829	\$737.96
K0830	\$457.35
K0831	\$457.35
K0835	\$483.71
K0836	\$501.68
K0837	\$604.88
K0838	\$537.85
K0839	\$796.48
K0840	\$863.51
K0841	\$534.20
K0842	\$533.70
K0843	\$636.69
K0848	\$534.85
K0849	\$513.92



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<b>Code</b>	<b>Medicaid Fee</b>
K0850	\$593.47
K0851	\$570.52
K0852	\$720.92
K0853	\$740.43
K0854	\$941.98
K0855	\$881.03
K0856	\$574.78
K0857	\$536.02
K0858	\$715.85
K0859	\$669.95
K0860	\$1,006.15
K0861	\$575.65
K0862	\$715.85
K0863	\$1,006.03
K0864	\$897.64