

A Message to

Business Office Managers



8000 Midlantic Drive, Suite 333, Mt. Laurel N.J. 08054

MEMORANDUM

TO: All Contracting Durable Medical Equipment Providers

FROM: Kathleen Mariano
Manager, Provider Relations

DATE: January 11, 2002

SUBJECT: E0935 and E0760 Rate Increase

Effective February 9, 2002, the reimbursement rate for the Continuous Passive Motion device (E0935) will increase to \$18.00 per day and the Osteogenesis Stimulator (E0760) will increase to \$2,689.50 for the following plans: AmeriHealth HMO, AmeriHealth 65, AmeriHealth Point of Service and AmeriHealth Personal Choice.

Please share this information with your staff. If you have any questions regarding this Bulletin, please contact Kimberly Lees-Pratt, Ancillary Coordinator, at 856-778-6652.