

**UnitedHealthcare  
Commercial and Medicare  
Therapy Fee Schedule**  
Effective 11/1/08 for UnitedHealthcare products.

| Description   | Per Visit Fee   |          |
|---|---|----------|
| Physical Therapy, Occupational Therapy, Speech Therapy  | \$77.00   |          |
| <ul style="list-style-type: none"> <li>➤ All professional fees and supplies are included in the per visit reimbursement rate.</li> <li>➤ Certain Orthotics covered under the member's benefit plan may be reimbursed separately from the per visit therapy fee schedule. Reimbursement amounts for common codes are listed below.</li> <li>➤ Please ensure that your office continues to bill for all services provided.</li> </ul> |   |          |
| HCPCS Code  | Description   | Fee      |
| L1800   | KO elastic w/stays prefabricated                            | \$33.95  |
| L1815   | KO condylar pads prefabricated                              | \$49.44  |
| L1825   | KO elastic knee cap prefabricated                           | \$28.06  |
| L1902   | AFO ankle gauntlet custom fabricated                        | \$40.74  |
| L1906   | AFO multi-ligamentus support prefabricated                  | \$61.37  |
| L3700   | EO prefabricated  | \$34.86  |
| L3701   | EO elastic prefabricated                                    | \$9.04   |
| L3807   | WHFO w/o joints prefabricated                               | \$110.95 |
| L3808   | WHFO rigid w/o joints custom fabricated                     | \$125.23 |
| L3908   | WHO ext cock-up prefabricated                               | \$29.92  |
| L3909   | WO elastic prefabricated                                    | \$6.27   |
| L3911   | WHFO elastic prefabricated                                  | \$11.00  |
| L3912   | HFO flexion glove with elastic finger control prefabricated | \$47.36  |
| L3923   | HFO 1 or more non-torsion joints                            | \$17.26  |
| L3925   | FO PIP DIP non-torsion joints spring ext/flex               | \$25.32  |
| L3929   | HFO 1 or more non-torsion joints                            | \$40.09  |
| L3931   | WHFO includes 1 or more non-torsion joints                  | \$93.52  |
| L4386   | Walking boot w or w/o joints, prefabricated                 | \$77.30  |
| <p>Note: This schedule is not intended to be all inclusive or reflect the provider's full scope of practice, but rather represents the most commonly billed codes. This fee schedule is not a guarantee of coverage; final coverage will be determined by each member's benefit contract.</p>   |   |          |