DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington

To: Resource Based Relative Value Scale (RBRVS) Users:
- Anesthesiologists
- Advanced Registered Nurse Practitioners
- Ophthalmologists
- Psychiatrists
- Emergency Physicians
- Nurse Anesthetists
- Physicians
- Physician Clinics
- Registered Nurse First Assistants
- Family Planning Clinics
- Federally Qualified Health Centers
- Health Departments
- Laboratories
- Managed Care Plans
- Podiatrists
- Radiologists
- Regional Administrators
- CSO Administrators

Memorandum No: 02-32 MAA
Issued: July 17, 2002

For Information Call:
1-800-562-6188

Supersedes: 01-52 MAA
01-77 MAA
02-11 MAA
02-15 MAA

From: Douglas Porter, Assistant Secretary
Medical Assistance Administration (MAA)

Subject: **Update to the RBRVS[1], Anesthesiology RVG[2], and Vendor Rate Increase**

Effective for dates of service on and after July 1, 2002, the Medical Assistance Administration (MAA) will implement:

- The updated Medicare Physician Fee Schedule Data Base (MPFSDB) Year 2002 relative value units (RVUs);
- The updated Year 2002 Relative Value Guide base anesthesia units (BAUs);
- The updated Medicare Clinical Laboratory Fee Schedule (MCLFS);
- The Year 2002 additions of Current Procedural Terminology (CPT™) codes and changes to the Health Care Financing Administration Common Procedure Coding System (HCPCS) Level II codes;
- A legislatively appropriated one and one-half (1.5) percent vendor rate increase;
- Updated Conversion Factors; and
- Technical changes.

[1] RBRVS stands for Resource-Based Relative Value Scale
[2] RVG stands for Relative Value Guide

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Maximum Allowable Fees and Base Anesthesia Units (BAU)

In updating the fee schedule with Year 2002 RVUs, BAUs, and clinical laboratory fees, MAA maintained overall budget neutrality. The 2001-2003 Biennium Appropriations Act authorizes this one and one-half (1.5) percent vendor rate increase for MAA fee-for-service programs. Conversion factors have been adjusted to reflect the changes listed on the preceding page.

Below are the updated conversion factors:

Title	Procedure Codes	July 1, 2002 Conversion Factor
Maternity	58611, 59000, 59025, 59400-59410, 59430, 59510-59525, 59610-59622, and 5930M-5959M	$45.59
Children's Primary Health Care	99201-99215, 99431-99435, 99381-99395 and 0252M	35.62
Adult Primary Health Care	99201-99215	20.44
Anesthesia		15.70
All Other Procedures Codes	Except Clinical Laboratory	22.75
Clinical Lab Multiplication Factor		.719

Technical Changes

Medicare's Correct Coding Initiative

- MAA is currently in the process of evaluating and implementing Medicare's Correct Coding Initiative (CCI) policies and edits. These policies were created by the Centers for Medicare and Medicaid Services (CMS) to promote national correct coding methodologies. CCI will assist MAA in controlling improper coding that may lead to inappropriate payment. For further information on CCI, please refer to replacement page A4.

EPSDT

- **Immunization Modifier Change**

  Effective for dates of service on and after July 1, 2002, **state-unique modifier –1H** (immunization materials received from the Department of Health) **is discontinued**. Providers must bill immunization materials received from the Department of Health **using the new HCPCS modifier –SL** (state supplied vaccine).

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- **Medical Nutrition Therapy**

Last year, MAA assigned flat fees to the medical nutrition therapy procedures, as there were no Medicare-assigned RVUs. However, Medicare has since assigned RVUs to these procedures. Effective for dates of service on and after July 1, 2002, MAA will adopt these RVUs and establish fees using the RBRVS methodology. Due to the change in the fee-setting methodology, MAA will also revise the unit description and unit limitations for group therapy as described below:

CPT Procedure Code	Brief Description	July 1, 2002 Maximum Allowable Fee
97802	Medical nutrition, indiv, initial (1 unit = 15 minutes)	$10.47/per unit Maximum of 2 hours (8 units) per year
97803	Med nutrition, indiv, subseq (1 unit = 15 minutes)	$10.47/per unit Maximum of 1 hour (4 units) per day
97804	Medical nutrition, group (1 unit = 15 minutes)	$4.10/per unit Maximum of 1 hour (4 units) per day

Providers must document beginning and ending times in the client's medical record.

Radiology

- **PET Scans**

Expedited Prior Authorization (EPA) criteria are established for many of the covered PET scan procedures, allowing providers to create their own prior authorization numbers. Therefore, these **covered PET scans will no longer require written/fax prior authorization**. Details on creating EPA numbers for PET scans are included as replacement pages to Section I with this memorandum.

> **Exception:**
>
> PET Scan HCPCS codes G0030-G0047 still require written/fax prior authorization. CPT PET scan code 78810 may be used after written/fax authorization has been obtained and only when there is no other appropriate HCPCS code to describe the procedure being performed.

HCPCS code G0219 (PET imaging whole body; full- and partial-ring PET scanners only, non-covered individual) **is no longer covered**.

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Effective for dates of service on and after July 1, 2002, the following new PET scan codes are added:

HCPCS Procedure Code	Full Description	MAA Maximum Allowable Fee	Limitations
G0252	PET imaging, full and partial-ring PET scanners only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (e.g. initial staging of axillary lymph nodes), not covered by Medicare	Not Covered	Not Covered
G0253	PET imaging for breast cancer, full and partial ring PET scanners only, detection of local regional recurrence or distant metastases, i.e. staging/restaging after or prior to course of treatment	By Report	Requires EPA
G0254	PET imaging for breast cancer, full and partial-ring PET scanners only, evaluation of response to treatment, performed during course of treatment	By Report	Requires EPA

Laboratories

- **STAT Lab Changes**

  ✓ The state-unique procedure code **8949M** for STAT laboratory charges **is discontinued** and replaced with the following HCPCS code:

HCPCS Procedure Code	Description	July 1, 2002 Maximum Allowable Fee
S3600	Stat laboratory request	$3.35

  ✓ CPT code 88400 is removed from the list of codes eligible for a STAT charge.

- **Human Leukocyte Antigens (HLA) Typing**

  CPT codes 86812-86822 are added to those that are limited to 15 tests total per client, per lifetime.

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Family Planning

- **Coding Changes**

  ✓ Lunelle

  Retroactive to dates of service on and after May 1, 2002, MAA discontinued state-unique code 1111J for Lunelle. Providers must **use HCPCS code J1056** to bill for Lunelle.

  ✓ Non-Copper IUD (Progestacert)

  Effective for dates of service on and after July 1, 2002, the state-unique code 9911M for intrauterine device (non-copper) is discontinued. Providers must **use HCPCS code S4989** (contraceptive intrauterine device) to bill for a non-copper IUD (Progestacert). Continue to bill the Paragard IUD and Mirena IUD as listed in the attached fee schedule.

Surgical Policies

- **Use of Operating Microscope**

  CPT code 61548 is removed from those procedures that may be billed in conjunction with the use of an operating microscope (CPT code 69990). MAA no longer reimburses CPT code 61548 when billed in conjunction with CPT code 69990.

- **Salpingostomy**

  CPT code 58673 is payable only for a tubal pregnancy (diagnosis code 633.1).

Physical Therapy

- **Clarification of Documentation Requirements for Timed Visits**

  A program unit is based on the CPT code description. For CPT codes that are timed, each 15 minutes equals one unit. If the description does not include time, the procedure equals one unit regardless of how long the procedure takes.

  If time is included in the CPT code description, the beginning and ending times of each therapy modality must be documented in the client's medical record.

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Supplies

- **Surgical Trays**

  Effective for dates of service on and after July 1, 2002, **HCPCS code A4550** (surgical trays) **is bundled** into the appropriate surgical procedures and the RVUs for these procedures have been adjusted to account for this change. Therefore, A4550 is no longer separately payable.

- **Additional Bundled Supplies**

  HCPCS codes A4263 (permanent lacrimal duct implant), **A4300** (implantable vascular access portal/catheter), **and G0025** (collagen skin test kit) **are bundled**. Therefore, A4263, A4300, and G0025 are no longer separately payable.

Place of Service Coding for Physician Services

- **Evaluation and Management (E&M) Services in Residential Settings**

  MAA considers the following to be residential settings:

  ✓ Adult Family Homes; and
  ✓ Boarding Homes with State contracts (i.e. Assisted Living facility, enhanced adult residential care facility, or adult residential care facility).

  When a physician visits a client living in a residential setting, the physician **must** use CPT codes 99321 – 99333 to bill MAA for these services. The correct place of service (POS) code is 9.

  MAA's policy follows Medicare's policy in the Medicare Carrier's Manual, Section 15510, which states, "CPT codes 99321 through 99333…are used to report evaluation and management services to residents residing in a facility which provides room, board, and other personal assistance services, generally on a long-term basis."

  Physicians **must not** use CPT codes 99341 – 99350 to report E&M services performed in residential settings. CPT codes 99341 – 99350 are used to report only those E&M services furnished to a client who **resides in his or her own private residence** and not any type of facility. The correct POS code is 4.

  CPT codes 99315 and 99316 are used to report only those E&M services furnished to a client who resides in a nursing facility. The correct POS codes are 7 and 8.

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Authorization Fax Number Change:

MAA's fax number for the following has changed:

- ✓ Acute Physical Medicine and Rehabilitation authorization requests and authorization number changes;
- ✓ Written/fax prior authorization requests;
- ✓ Exception to Rule (ETRs); and
- ✓ Limitation Extensions (LEs).

The new fax number is **(360) 586-1471.**

Fee Schedule Changes

- There are several new changes to the format of the fee schedule this year:

  ✓ Maximum allowable fees for all codes, including CPT codes, select HCPCS codes, state-unique codes, and injectable drug codes are now **listed in one fee schedule**, beginning on replacement page J5. This enables providers to use this section as a quick reference for MAA's maximum allowable fees.

  ✓ Beginning on replacement page J5, MAA has identified procedure codes that may require some type of prior authorization. However, this list may not be all-inclusive. Prior authorization, limitations, or requirements detailed in MAA's billing instructions and/or Washington Administrative Codes (WAC) remain applicable.

  ✓ Beginning on replacement page J124, full descriptions and limitations are listed for all state-unique procedure codes. In addition, select HCPCS codes are listed here if they contain special limitations, requirements, or instructions. However, this list may not be all-inclusive. Limitations or requirements detailed in MAA's billing instructions and/or WAC remain applicable.

  ✓ Section L contains rate setting methodology and unit rounding instructions for injection drug codes. However, all of the fees have been moved to the complete schedule of maximum allowable fees in Section J.

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Physician-Related Services Billing Instructions

The attached replacement pages to MAA's Physician-Related Services Billing Instructions, dated November 2001 are listed below:

SECTION	PAGE(S)	NOTES
Table of Contents	i - vi	
Section A	A3/A4	
Section B	B3/B4	
Section C	C1/C2	
	C7 – C16	
Section E	E1 – E24	Entire Section in replaced.
Section F	F1 – F4(d)	The addition of the Smoking Cessation for Pregnant Women section necessitates unusual page numbering.
	F13 – F22	
	F25 – F28	The Major Trauma Services program has been suspended (see # Memo 02-14 MAA).
Section G	G5 – G8	
Section H	H1/H2	
	H5 – H12	
Section I	I1 – I20	Entire section is replaced.
Section J	J1 – J128	Entire section is replaced.
Section K	K1 – K10	Entire section is replaced.
Section L	L1 – L4	Entire section is replaced. (Due to moving of fee schedule, section L is significantly shortened).
Section M	M5 – M8	
Section O	O3/O4	

Updated billing instructions and the entire fee schedule can be viewed online at MAA's website at http://maa.dshs.wa.gov (click on Provider Publications/Fee Schedules link).

Bill MAA your usual and customary charge.

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Important Contacts

A provider may contact MAA's toll-free lines for questions regarding MAA programs. However, MAA's response is based solely on the information provided to the representative at the time of the call or inquiry, and in no way exempts a provider from following the rules and regulations that govern MAA's programs. [WAC 388-502-0020(2)].

Where do I call for information on becoming a DSHS provider, submitting a change of address or ownership, or to ask questions about the status of a provider application?

Call the toll-free line:
(800) 545-0544

Where do I send my claims?

Hard Copy Claims:
Division of Program Support
PO Box 9248
Olympia WA 98507-9248

Magnetic Tapes/Floppy Disks:
Division of Program Support
Claims Control
PO Box 45560
Olympia, WA 98504-5560

How do I obtain copies of billing instructions or numbered memoranda?

Check out our web site at:
http://maa.dshs.wa.gov

Or write/call:
Provider Relations Unit
PO Box 45562
Olympia WA 98504-5562
(800) 562-6188

Where do I call if I have questions regarding…

Policy, payments, denials, or general questions regarding claims processing, Healthy Options?

Provider Relations Unit
(800) 562-6188

Private insurance or third party liability, other than Healthy Options?

Coordination of Benefits Section
(800) 562-6136

Electronic Billing?

Write/call:
Electronic Billing Unit
PO Box 45512
Olympia, WA 98504-5512
(360) 725-1267

Other Important Numbers

Client Assistance/
Brokered Transportation Hotline (Clients Only) 1-800-562-3022

Disability Insurance..... 1-800-562-6074

Durable Medical Equipment (DME)/Prosthetics
Authorization..... 1-800-292-8064

Fraud Hotline..... 1-800-562-6906

Healthy Options Enrollment..... 1-800-562-3022

Acute PM&R Authorization FAX..... 1-800-634-1398

Pharmacy Authorization **(Providers Only)**..... 1-800-848-2842

Provider Inquiry Hotline **(Providers Only)**..... 1-800-562-6188

Provider Enrollment 1-866-545-0544

Telecommunications Device For The Deaf (TDD)..... 1-800-848-5429

Third-Party Resource Hotline 1-800-562-6136

Ambulance Transportation/Hospice Authorization 1-800-624-4793

TAKE CHARGE..... 1-800-770-4334

Provider Field Representatives

(360) 725-1024
(360) 725-1027
(360) 725-1022
(360) 725-1023

MAA does not reimburse for services performed by any of the following practitioners [WAC 388-531-0250(2)]**:**

- Acupuncturists;
- Naturopaths;
- Homeopathists;
- Herbalists;
- Masseurs, masseuses;
- Christian Science practitioners or theological healers;
- Counselors (i.e., M.A. and M.S.N.);
- Sanipractors;
- Those who have a master's degree in social work (M.S.W.) except those employed by an FQHC; or
- Any other licensed or unlicensed practitioners not otherwise specifically provided for in WAC 388-502-0010; or
- Any other licensed practitioners providing services which the practitioner is not:
  (i) Licensed to provide; and
  (ii) Trained to provide.

Clients Enrolled in Managed Health Care

Many MAA clients are enrolled in a managed care program called Healthy Options. These clients have an HMO identifier in the HMO column on their DSHS Medical ID card. They will also receive an ID card from the managed care plan with whom they are enrolled. Clients enrolled in Healthy Options must obtain most of their services from their designated plans.

Note: Client's enrollment can change monthly. Prior to serving a Healthy Options client, make sure you received approval from <u>both</u> the plan and the client's PCP, if necessary.

Send claims to the client's managed care plan for payment. Call the client's HMO to discuss payment prior to providing the service. Providers may bill clients only in very limited situations as described in the <u>General Information Booklet</u> and WAC 388-87-010.

By Report (BR)

MAA may require a special report for certain services provided to MAA clients to determine whether the procedure is indeed necessary. These services are identified by a **BR** (By Report) in the procedure code listings in this manual. This special report must include an adequate definition or description of the nature, extent, and need for the procedure, including the time, effort, and equipment necessary. You may also be required to provide additional information.

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Conversion Factors

These conversion factors multiplied by the Relative Value Units (RVUs) establish the rates in this fee schedule.

	7/1/96	7/1/97	7/1/98	7/1/99	7/1/00	7/1/01	7/1/02
Maternity	$45.07	$43.34	$43.19	$44.20	$45.33	$45.34	$45.59
Anesthesia	$12.63	$12.75	$12.75	$12.96	$15.10	$15.49	$15.70
Children's Primary Health Care	$43.60	$40.77	$39.11	$37.49	$35.89	$36.52	$35.62
Adult Primary Health Care	$27.33	$24.86	$23.67	$22.47	$21.17	$21.27	$20.44
All Other Procedure Codes	$23.04	$22.25	$22.27	$21.93	$22.37	$22.41	$22.75
Clinical Lab Multiplication Factor			.667	.689	.694	.720	.719

Correct Coding Initiative

Beginning in 2002, MAA is evaluating and implementing Medicare's Correct Coding Initiative (CCI) policy. This policy was created by the Centers for Medicare and Medicaid Services (CMS) to promote national correct coding methodologies. CCI will assist MAA in controlling improper coding that may lead to inappropriate payment. MAA will base coding policies on the American Medical Association's Current Procedural Terminology (CPT) manual, national and local policies and edits, coding guidelines developed by national professional societies, the analysis and review of standard medical and surgical practices, and review of current coding practices. These correct coding policies do not necessarily supercede any other specific MAA coding, coverage, or payment policies, unless specifically stated.

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MAA will not reimburse:

- A hospital admission (CPT codes 99221-99223) **and** a planned surgery when billed in combination. The hospital admission is already included in the global fee for surgery.

- For a physician to appropriately report CPT codes 99234 through 99236, the patient must be an inpatient or an observation care patient for a minimum of 8 hours on the same calendar date.

Other Guidelines:

- When the patient is admitted to observation status for less than 8 hours and is discharged on the same date, the physician must use CPT codes 99218 through 99220 and no discharge code must be reported.

- When patients are admitted for observation care and are discharged on a different calendar date, the physician must use CPT codes 99218 through 99220 and CPT observation discharged code 99217.

- When patients qualify as an inpatient hospital admission and are discharged on a different calendar date, the physician must use CPT codes 99221 through 99233 and CPT hospital discharge day management code 99238 or 99239.

- When patients qualify as an inpatient hospital admission and discharge on the same calendar date, CPT codes 99221 through 99223 must be used for the admission service, and the hospital discharge day management service must not be billed.

- The physician must satisfy the documentation requirements for both admission to and discharge from inpatient or observation care to bill CPT codes 99234, 99235, or 99236. The length of time for observation care or treatment status must also be documented.

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Emergency Physician-Related Services **(CPT codes 99281-99285)**

[Refer to WAC 388-531-0500]

- For services performed by the physician assigned to, or on call to, the emergency department, bill MAA using CPT codes 99281 through 99285.

  Note: For multiple emergency room (ER) calls on the same day, with related diagnoses, you **must** indicate the time(s) of the additional call(s) on the claim form.

- MAA does not reimburse emergency room physicians for hospital admission charges (e.g., CPT codes 99221-99223) or additional service charges (e.g., CPT codes 99050, 99052, or 99054).

- Physicians who perform emergency room services must bill MAA for surgical procedures without modifier 54.

- Physicians who provide only the follow-up services for minor procedures performed in emergency departments must bill the appropriate level of office visit code without modifier 55.

End-Stage Renal disease (ESRD)

(CPT codes 90935, 90937, 90945, and 90947)

- Reimbursement is limited to one dialysis procedure code per day.

- Payment for dialysis (CPT codes 90935, 90937, 90945, and 90947) includes reimbursement for the following Evaluation and Management (E&M) services performed on the same day:

  ✓ CPT codes 99231-99233; and
  ✓ CPT codes 99261-99263.

- Separate reimbursement is allowed for the following procedure codes when they are provided on the same date of service as an inpatient dialysis service (CPT codes 90935, 90937, 90945, and 90947):

  ✓ Initial hospital visit (CPT codes 99221-99223);
  ✓ Initial hospital consultation (CPT codes 99251-99255); and
  ✓ Hospital discharge service (CPT code 99238).

- If E&M service is unrelated to dialysis procedure, bill E&M service with the unrelated diagnosis and modifier 25.

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Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

What is the purpose of the EPSDT program?

The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program is a federal preventive health care benefit. The purpose of this program is to screen clients **20 years of age and younger** in order to identify physical and/or mental defects. If a physical or mental defect is identified, the client should be treated or referred to an appropriate provider for treatment. EPSDT is designed to encourage continuing access to health care.

Access to and services for EPSDT are governed by federal rules at 42 CFR, Part 441, Subpart B.

MAA's standard for coverage is that the services, treatment, or other measures must be:

- Medically necessary;
- Safe and effective; and
- Not experimental.

Who can provide EPSDT screenings?

- Physicians;
- Advanced Registered Nurse Practitioners (ARNPs);
- Physician Assistants (PAs);
- Nurses specially trained through the Department of Health; and
- Registered nurses working under the guidance of a physician or ARNP may also do EPSDT screenings. However, only physicians, PAs and ARNPs can diagnose and treat problems found in a screening.

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Who is eligible for EPSDT screenings?

MAA reimburses EPSDT screenings for clients who:

- Are 20 years of age and younger; and
- Present a DSHS Medical ID card with one of the following identifiers:

Medical Program Identifier	Medical Program Name
CNP	Categorically Needy Program
CNP – Children's Health	CNP – Children's Health Program **Note: This program is scheduled to be discontinued with dates of service after 9/30/02.**
CNP – CHIP	CNP – Children's Health Insurance Program
CNP – Emergency Medical Only	CNP – Emergency Medical Only *(Covered only when the service is related to the emergent condition.)*
LCP-MNP	Limited Casualty Program – Medically Needy Program

☞ **Note:** Please refer clients to their local Community Services Office (CSO) if they are 20 years of age and younger and their DSHS Medical ID card does not list one of the above medical program identifiers. The CSO will evaluate these clients for a possible change in their Medical Assistance program that would enable them to receive EPSDT screenings.

Are clients enrolled in a Healthy Options managed care plan eligible for EPSDT?

Yes! EPSDT screenings are included in the scope of service under the Healthy Options managed care program. Clients who are enrolled in one of MAA's Healthy Options managed care plans will have an identifier in the HMO column on their DSHS Medical ID card.

Please refer Healthy Options managed care clients to their respective health care plan for necessary preventive health care services and medical treatments, including EPSDT services. Clients can contact their plan by calling the telephone number indicated on their DSHS Medical ID card.

Do not bill MAA for EPSDT services as they are included in the Healthy Options managed health care plan's reimbursement rate.

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Medical Nutrition Therapy

If an EPSDT screening provider suspects or establishes a medical need for medical nutrition therapy, eligible clients may be referred to a certified dietitian to receive outpatient medical nutrition therapy. Use the usual professional referral procedures (e.g., a prescription or letter) to refer clients for medically necessary medical nutrition therapy.

MAA covers the procedure codes listed below when referred by an EPSDT provider.

☞ **Note:** Medical nutrition therapy is a face-to-face interaction between the certified dietitian and a client and/or caregiver. MAA limits initial assessments to 2 hours (or 8 units) per year and reassessments to no more than 1 hour (or 4 units) per day. MAA limits group therapy to 1 hour (or 4 units) per day. MAA reimburses for medical nutrition therapy only when referred by an EPSDT provider.

Last year, MAA assigned flat fees to the medical nutrition therapy procedures, as there were no Medicare-assigned RVUs. However, Medicare has since assigned RVUs to these procedures. Effective 7/1/02, MAA will adopt these RVUs and establish fees using the RBRVS methodology. Due to the change in the fee-setting methodology, MAA will also revise the unit description and unit limitations for group therapy as described below:

Due to its licensing agreement with the American Medical Association, MAA publishes only the official, brief CPT code descriptions. To view the full descriptions, please refer to your current CPT book.

CPT Procedure Code	Brief Description
97802	Medical nutrition, indiv, initial [1 unit = 15 minutes; maximum of 2 hours (8 units) per year]
97803	Med nutrition, indiv, subseq [1 unit = 15 minutes; maximum of 1 hour (4 units) per day]
97804	Medical nutrition, group [1 unit = 15 minutes; maximum of 1 hour (4 units) per day]

Provider must document beginning and ending times in the client's medical record.

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Fluoride Varnish (Physicians and ARNPs)

(State-unique code 0122D)

In cooperation with the University of Washington's School of Dentistry, the Medical Assistance Administration's (MAA) goal is to improve the oral health of Medicaid-eligible clients, 18 years of age and younger, through the application of fluoride varnish.

In order to achieve this goal effectively, a protocol has been developed for physicians, advanced registered nurse practitioners, and nurses to apply fluoride varnish to the teeth of Medicaid-eligible children.

What is fluoride varnish? How often is it applied?

Fluoride varnish is a type of topical fluoride that acts to retard, arrest and reverse the caries process. It is applied up to three times per year to all surfaces of the teeth. The teeth then absorb the fluoride varnish, strengthening the enamel and helping prevent cavities.

These fluoride varnish applications are viewed as preventive in nature and are not intended to replace routine dental care by a dentist.

Who must order the fluoride varnish?

- Dentists;
- Physicians; or
- Advanced Registered Nurse Practitioners (ARNP).

Who is eligible?

All Medicaid-eligible clients, 18 years of age and younger, may receive fluoride varnish applications. DDD clients age 19 and older are also eligible.

Are managed care clients eligible?

Clients whose DSHS Medical ID cards have an identifier in the HMO column are enrolled in a Healthy Options managed health care plan. These clients **are eligible for fluoride varnish applications** through fee-for-service. Fluoride varnish applications must be billed directly to MAA for reimbursement.

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Immunizations – Children

(This applies to clients 20 years of age and younger. For clients 21 years of age and older, refer to the Immunizations-Adults on page C12.

The following procedure codes must be used to bill for the administration of immunizations:

Procedure Code	Brief Description	7/1/02 Maximum Allowable Fee Non-Facility Setting	Facility Setting
90471	Immunization admin	$5.00	$5.00
90472	Immunization admin, each add	$3.00	$3.00

Immunizations for EPSDT are usually given in conjunction with a screening or interperiodic screening. Do not bill an Evaluation and Management (E&M) code unless there is a separate, identifiable diagnosis that is different from the immunization.

- MAA will reimburse an administration fee (up to $5.00) for vaccines available through the state's Universal Vaccine Distribution program and the Federal Vaccines for Children program for children 18 years of age and under. When immunization materials are received from the Department of Health, you must bill the appropriate procedure code with **modifier –SL** (e.g., 90700-SL). **In the following list, the procedure codes that are shaded identify these vaccines. Do not bill CPT codes 90471 and 90472.**

- Do not bill with modifier -SL for any of the procedure codes listed on the following page if the client is 19 through 20 years of age, or if the procedure code is NOT shaded.

- Bill 90471 and 90472 with the vaccine or toxoid procedure code.

- Do not bill administration codes 90471 and 90472:

  - ✓ As multiple units; or
  - ✓ More than once per client, per day.

- Bill only CPT code 90471 when administering one vaccine. Bill both CPT codes 90471 and 90472 with one unit per code when administering more than one vaccine. MAA will reimburse a maximum of $8.00 when:

  - ✓ More than one vaccine is administered; and,
  - ✓ Both CPT codes 90471 and 90472 are billed; and,
  - ✓ Those vaccines are not available through the state's Universal Vaccine Distribution program or Federal Vaccines for Children program.

- When an immunization is the only service performed, an interperiodic screen (0252M) may be billed.

- Reimbursement rates for immunization materials include federal excise tax.

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- For all providers **except Health Departments**, MAA adopts CPT guidelines regarding billing E&M procedures with immunizations. The only time that an E&M procedure can be billed with an immunization is if there is a separate, identifiable diagnosis. If a Health Department gives the immunization and it is the only service performed, continue to bill E&M CPT code 99211.

See immunization list on following page.

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Due to its licensing agreement with the American Medical Association, MAA publishes only the official, brief CPT code descriptions. To view the full descriptions, please refer to your current CPT book.

CPT	Immunization
90585	Bcg vaccine, percut
90586	Bcg vaccine, intravescial
90632	Hep a vaccine, adult im
90633	Hep a vacc, ped/adol, 2 dose
90645	Hib vaccine, hboc, im
90646	Hib vaccine, prp-d, im
90647	Hib vaccine, prp-omp, im
90648	Hib vaccine, prp-t, im
90657	Flu vaccine, 6-35 mo, im
90658	Flu vaccine, 3 yrs, im
90659	Flu vaccine, whole, im
90665	Lyme disease vaccine, im
90669	Pneumococcal vacc, ped<5
90675	Rabies vaccine, im
90676	Rabies vaccine, id
90690	Typhoid vaccine, oral
90691	Typhoid vaccine, im
90692	Typhoid vaccine, h-p, sc/id
90700	Dtap vaccine, im
90701	Dtp vaccine, im
90702	Dt vaccine <7, im
90703	Tetanus vaccine, im
90704	Mumps vaccine, sc
90705	Measles vaccine, sc
90706	Rubella vaccine, sc
90707	Mmr vaccine, sc
90708	Measles-rubella vaccine, sc
90709	Rubella & mumpsvaccine, sc
90712	Oral poliovirus vaccine
90713	Poliovirus, ipv, sc
90716	Chicken pox vaccine, sc
90717	Yellow fever vaccine, sc
90718	Td vaccine >7, im
90720	Dtp/hib vaccine, im
90725	Cholera vaccine, injectable
90732	Pneumococcal vacc, adult/ill
90733	Meningococcal vaccine, sc
90735	Encephalitis, vaccine, sc
90740	Hepb vacc, ill pat 3 dose im
90743	Hep b vacc, adol, 2 dose, im
90744	Hepb vacc ped/adol 3 dose, im
90746	Hep b vaccine, adult, im
90747	Hepb vacc, ill pat 4 dose, im
90748	Hep b/hib vaccine, im
90749	Vaccine toxoid

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Immunizations-Adults

(This section applies to clients 21 years of age and older. For clients 20 years of age and younger, refer to the Immunizations-Children Section, page C9.

Immunization materials are reimbursed at MAA's established Maximum Allowable Fee (MAF). Bill administration CPT codes 90471 and 90472 in addition to the immunization materials.

Do not bill an E&M procedure with an administration unless there is a separate identifiable diagnosis from the administration.

- Do not bill administration codes 90471 and 90472:
  - ✓ As multiple units; or
  - ✓ More than once per client, per day.

- Bill only CPT code 90471 when administering one vaccine. Bill both CPT codes 90471 and 90472 with one unit per code when administering more than one vaccine. MAA will reimburse a maximum of $8.00 when:
  - ✓ More than one vaccine is administered; and,
  - ✓ Both CPT codes 90471 and 90472 are billed.

- Reimbursement rates for immunization materials include federal excise tax.

CPT	Immunization	CPT	Immunization
90585	Bcg vaccine, percut	90705	Measles, vaccine, sc
90586	Bcg vaccine, intravesical	90706	Rubella vaccine, sc
90632	Hep a vaccine, adult im	90707	Mmr vaccine, sc
90636	Hep a/hep b vacc, adult im	90708	Measles-rubella vaccine, sc
90645	Hib vaccine, hboc, im	90709	Rubella & mumps vaccine, sc
90646	Hib vaccine, prp-d, im	90712	Oral poliovirus vaccine
90647	Hib vaccine, prp-omp, im	90713	Poliovirus, ipv, sc
90648	Hib vaccine, prp-t, im	90716	Chicken pox vaccine, sc
90658	Flu vaccine, 3 yrs, im	90717	Yellow fever vaccine, sc
90659	Flu vaccine, whole, im	90718	Td vaccine >7, im
90665	Lyme disease vaccine, im	90720	Dtp/hib vaccine, im
90675	Rabies vaccine, im	90725	Cholera vaccine, injectable
90676	Rabies vaccine, id	90732	Pneumococcal vacc, adult/ill
90690	Typhoid vaccine, oral	90733	Meningococcal vaccine, sc
90691	Typhoid vaccine, im	90735	Encephalitis vaccine, sc
90692	Typhoid vaccine, h-p, sc/id	90740	Hepb vacc, ill pat 3 dose, im
90700	Dtap vaccines, im	90746	Hep b vaccine, adult, im
90701	Dtp vaccine, im	90747	Hepb vacc, ill pat 4 dose, im
90703	Teanus vaccine, im	90748	Hep b/hib vaccine, im
90704	Mumps vaccine, sc	90749	Vaccine toxoid

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Immune Globulins

- **RespiGam** – Bill HCPCS code J1565 for Respigam only.

- **Synagis (CPT code 90378)** – MAA covers this immune globulin only after prior authorization has been obtained. The following payment levels have been established for Synagis:

Number of Units	Description	Maximum Allowable Fee
1	Synagis, 50 mg	$598.00
2	Synagis, 100 mg	$1,128.00
3	Synagis, 150 mg	$1,726.00
4	Synagis, 200 mg	$2,256.00

✓ Bill one unit for each 50 mg of Synagis used.
✓ MAA reimburses for Synagis at the lesser of billed charges or MAA's maximum allowable fee regardless of place of service.

Requests for authorization must be submitted in writing to:

MAA-Division of Medical Management
Attn: Synagis Program
PO Box 45506
Olympia, WA 98504-5506
FAX: (360) 586-1471

- **Hepatitis B** (CPT code 90371) – Reimbursement is based on the number of 1 ml syringes used. Bill each 1 ml syringe used as 1 unit.

- **Immune Globulins** - CPT codes 90287, 90288, 90296 and 90393 are not covered if the provider obtained the immune globulins at no cost from either the Center for Disease Control or California Department of Health. MAA reimburses the provider for the administration of the immune globulin using CPT codes 90782-90784.

  For CPT code 90396 (varicella-zoster immune globulin), each one unit billed equals one 125-unit vial, with a maximum reimbursement of five vials per session.

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CPT codes 90281, 90283, 90291, 90379, 90384, 90385, 90386, and 90389 are not covered. Use the appropriate J codes listed in the following table:

Non-Covered CPT Code	Covered HCPCS Code
90281	J1460-J1560
90283	J1561, J1563
90291	J0850
90379	J1565
90384	J2790
90385	J2790
90386	J2792
90389	J1670

- **Rabies Immune Globulin (RIG) (CPT codes 90375-90376)**

✓ RIG is reimbursed at acquisition cost.

✓ RIG is given based on .06 ml per pound of body weight. The dose is rounded to the nearest tenth of a milliliter (ml). Below are the recommended dosages up to 300 pounds of body weight:

Pounds	Dose
0-17	1 ml
18-34	2 ml
35-50	3 ml
51-67	4 ml
68-84	5 ml
85-100	6 ml
101-117	7 ml
118-134	8 ml
135-150	9 ml

Pounds	Dose
151-167	10 ml
168-184	11 ml
185-200	12 ml
201-217	13 ml
218-234	14 ml
235-250	15 ml
251-267	16 ml
268-284	17 ml
285-300	18 ml

✓ RIG is sold in either 2 ml or 10 ml vials.
✓ One dose is allowed per episode.
✓ Bill one unit for each 2 ml vial used per episode.

For example:
➢ If a patient weighs 83 pounds, three 2 ml vials would be used. The number of units billed would be three; or
➢ If a patient weighs 240 pounds, both one 10 ml vial and three 2 ml vials or eight 2 ml vials could be used. The number of units billed would be eight.

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Therapeutic or Diagnostic Injections
(CPT codes 90782-90784, 90788, 90799)

[Refer to WAC 388-531-0950]

- MAA reimburses physicians for injection procedures and/or injectable drug products provided to a client only when the injectable drug used is from office stock purchased by the physician from a pharmacist or drug manufacturer.

- If no other service is performed on the same day, a subcutaneous or intra-muscular injection (CPT code 90782) or an intra-muscular antibiotic injection (CPT code 90788) can be billed in addition to an injectable drug code.

- When a subcutaneous or intra-muscular injection (CPT code 90782) or an intra-muscular antibiotic injection (CPT code 90788) is provided on the same day as and Evaluation & Management (E&M) service, the injections are bundled into the E&M service and are not reimbursed separately.

- Intra-arterial injections (CPT code 90783) and intravenous therapeutic or diagnostic injections (CPT code 90784) are reimbursed separately even when provided on the same day as an E&M service. Separate payment for the drug is allowed. Use the appropriate HCPCS injection drug code. These injections are not reimbursed separately if provided in conjunction with IV infusion therapy services (CPT codes 90780 and 90781).

> ☞ **Note:** Drugs must be billed using the HCPCS drug codes and are reimbursed at MAA's established maximum allowable fees. Name, strength, and dosage of the drug must be documented and retained in the client's file for review. For billing and reimbursement of chemotherapy services, see page F7.

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Hyalgan/Synvisc

- Only orthopedic surgeons and rheumatologists are reimbursed for Hyalgan or Synvisc.
- MAA allows a maximum of 5 Hyalgan or 3 Synvisc intra-articular injections **per knee** for the treatment of pain in osteoarthritis of the knee. Identify left knee or right knee by adding the appropriate "LT" or "RT" modifier to your claim.
- MAA changed the pricing of Hyalgan (HCPCS code J7316) and Synvisc (HCPCS code J7320) to match the dosage within the description of the code.

HCPCS Code	Description	Restrictions
J7316	Sodium hyaluronate, 5 mg, for intra-articular injection (Hyalgan) [1 unit = 5 mg]	Maximum of 5 injections Maximum of 20 units (4 units = 1 injection)
J7320	Hylan G-F 20, 16 mg, for intra-articular injection (Synvisc) [1 unit = 16 mg]	Maximum of 3 injections Maximum of 3 units (1 unit = 1 injection)

- Hyalgan and Synvisc injections are covered for treatment of osteoarthritis of the knee only with the following diagnoses:

Diagnosis Code	Description
715.16	Osteoarthritis, localized, primary lower leg.
715.18	Osteoarthritis, localized, primary, other specified sites.
715.26	Osteoarthritis, localized, secondary, lower leg.
715.28	Osteoarthritis, localized, secondary, other specified sites
715.36	Osteoarthritis, localized, not specified whether primary or secondary, lower leg.
715.38	Osteoarthritis, localized, not specified whether primary or secondary, other specified sites.
715.96	Osteoarthritis, unspecified whether generalized or localized, lower leg.
715.98	Osteoarthritis, unspecified whether generalized or localized, other specified sites.

- The series of injections must be billed after all injections are completed. It is billed as five (5) units for Hyalgan and three (3) units for Synvisc (per knee).
- Bill CPT injection code 20610 each time an injection is given, up to a maximum of 5 injections for Hyalgan and 3 injections for Synvisc.
- **You must bill both the injection CPT code and HCPCS drug codes on the same claim form.**

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Allergen Immunotherapy

[Refer to WAC 388-531-0950(10)]

Reimbursement for antigen/antigen preparation (CPT codes 95145-95149, 95165 and 95170) are **per dose**.

Service Provided	What should I bill?
Injection and antigen/antigen preparation for allergen immunotherapy	✓ **One injection** (CPT code 95115 or 95117); **and** ✓ **One antigen/antigen preparation** (CPT codes 95145, 95146, 95147, 95148, 95149, 95165 or 95170).
Antigen/antigen preparation for stinging/biting insects	✓ CPT codes 95145-95149 and 95170
All other antigen/antigen preparation services (e.g., dust, pollens)	✓ CPT code 95144 for single dose vials; or ✓ CPT code 95165 for multiple dose vials.
Allergist prepared the extract to be injected by another physician	✓ CPT code 95144
Allergists who billed the complete service procedures (CPT codes 95120-95134) and use treatment boards	✓ One antigen/antigen preparation (CPT 95145-95149, 95165, and 95170); **and** ✓ One injection (CPT code 95115 or 95117).
Physician injects one dose of a multiple dose vial	✓ Bill for the total number of doses in the vial and an injection code
Physician or another physician injects the remaining doses at subsequent times	✓ Bill only the injection service

- Reimbursement for an allergist billing both an injection and either CPT code 95144 or 95165 will be the injection plus the fee of CPT code 95165, regardless of whether CPT code 95144 or 95165 is billed. The allergist may bill an Evaluation and Management (E&M) for conditions not related to allergen immunotherapy.

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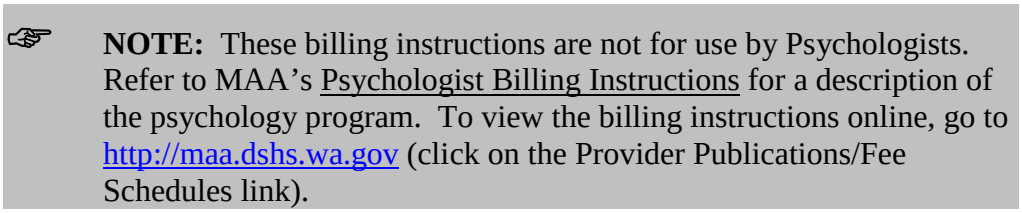
Psychiatric Services

[Refer to WAC 388-531-1400]



NOTE: These billing instructions are not for use by Psychologists. Refer to MAA's Psychologist Billing Instructions for a description of the psychology program. To view the billing instructions online, go to http://maa.dshs.wa.gov (click on the Provider Publications/Fee Schedules link).

General Guidelines

- MAA reimburses a maximum of one psychiatric service procedure code per client, per day.

- Psychiatrists must bill using one procedure code for the total time spent on direct client care during each visit. Making inpatient rounds is considered direct client care and includes any one of the following:

  ✓ Brief (up to one hour) individual psychotherapy;
  ✓ Family psychotherapy (CPT code 90847);
  ✓ Group psychotherapy (CPT codes 90853 and 90857);
  ✓ Electroconvulsive therapy (CPT codes 90870-90871); or
  ✓ Pharmacological management (CPT code 90862).

- When performing both psychotherapy services and an E&M service on the same visit, use the appropriate psychiatric procedure code that includes the E&M services (e.g., CPT code 90805 – outpatient psychotherapy with E&M or CPT code 90817 – inpatient psychotherapy with E&M).

- A psychiatrist may bill for a medical physical examination in the hospital (CPT codes 99221-99233) in addition to a psychiatric diagnostic or evaluation interview examination (CPT code 90801 for adults or 90802 for children).

- Physicians (who may or may not be psychiatrists) may bill state-unique code 9089M. This service is described as "certification activities related to an elective admission of clients younger than 21 years of age for inpatient psychiatric care."

- Psychiatric sleep therapy is not covered.

- All E&M codes are subject to MAA's current policies and limitations.

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- MAA reimburses psychiatrists for the CPT codes listed in the following tables only when billed in combination with the diagnoses listed in the table. **The diagnosis on the detail line must indicate the specific reason for the visit on the date of service being billed.**

Inpatient Hospital

Inpatient CPT Codes	Must be billed in combination with:
Psychiatric Services	
90816-90819, 90823-90827*, 90845, 90847, 90853-90871, 90899	Any MAA covered diagnosis code in the following range: **290-319.99**
Inpatient	
99217-99239	**Any MAA covered diagnosis codes**
Inpatient Consultation	
99251-99278	**Any MAA covered diagnosis codes**
Case Management	
99371-99373	**All MAA covered diagnosis codes**
***Limited to clients 20 years of age and under. **All inpatient psychiatric services should be coordinated by either the local RSN or the client's managed care plan.**	

Outpatient Hospital

Outpatient Procedure Codes	Must be billed in combination with:
Psychiatric Services	
90804-90807, 90810-90813*, 90845, 90847, 90853-90871, 90899 The above procedure codes (except 90862) are subject to a limit of 12 hours, per client, per calendar year.	Any MAA covered diagnosis code in the following range: **290-319.99**
Outpatient	
99201-99215	**Any MAA covered diagnosis codes** except 290-319.99
Outpatient Consultation	
99241-99245	**Any MAA covered diagnosis codes** except 290-319.99
Emergency Room Consultation	
99281-99288	**All MAA covered diagnosis codes** except 290-319.99
Nursing Facility Services	
99301-99316	**All MAA covered diagnosis codes** except 290-319.99
Domicillary/Rest Home Services	
99321-99333	**All MAA covered diagnosis codes** except 290-319.99
Standby Services	
99360	**All MAA covered diagnosis codes** except 290-319.99
Case Management Services	
99371-99373	**All MAA covered diagnosis codes**
***Limited to clients 20 years of age and under. **Any other outpatient psychiatric services should be coordinated by either the local RSN or the client's managed care plan.**	

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Limitations for Inpatient and Outpatient Psychiatric Services:

- MAA does not reimburse for psychiatric procedure codes and E&M procedure codes on the same date of service unless there are two separate visits **and** the diagnoses are completely unrelated.

- MAA limits outpatient psychotherapy and electroconvulsive therapy in any combination to one hour per day, per client, up to a total of 12 hours per calendar year. This includes family or group psychotherapy.

- Family therapy is covered only when the client is present.

- Psychiatric diagnostic interview examinations (CPT codes 90801 and 90802) are limited to one in a calendar year unless a new mental health diagnosis occurs.

- The only psychiatric service MAA reimburses psychiatric ARNPs for is a medication adjustment (CPT code 90862).

- MAA reimburses psychiatrists and psychiatric ARNPs only for procedure codes and diagnosis codes that are within their scope of practice.

- Outpatient psychiatric services are not allowed for clients on the General Assistance (GAU) program, except for medication adjustment (CPT code 90862).

- Individual psychotherapy, interactive services (CPT codes 90810-90813, 90823-90824, 90826-90827) may be billed only for clients age 20 and younger.

Involuntary Treatment Act (ITA)

Physicians may provide psychiatric services under the Involuntary Treatment Act according to the following guidelines:

- Each involuntarily committed person must be examined and evaluated by a licensed physician or psychiatrist within 24 hours of admission or payment will be denied. This evaluation may be used for both treatment purposes and court testimony. Bill admissions through the emergency room using state-unique code 9084M.

- Physicians and psychiatrists may bill for a physical examination (state-unique code 9083M) in addition to CPT code 90801 (for adults) or 90802 (for children).

- A day's rounds along with any one of the following constitutes direct client care: narcosynthesis, brief (half-hour or one hour) individual psychotherapy, multiple/family group therapy, group therapy, chemotherapy, or electroconvulsive therapy.

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- Payment will be made if the date of service is within 30 days from the date of detention. An extension form is required after 20 days of care. Extension approvals can be from the Regional Support Network (RSN), as well as the state hospital.

- A court may request another physician or psychiatrist evaluation.

- The ITA form needs to include identification of the county of commitment, as well as some identification (signature or initials) of the County Designee completing the form. The physician or psychiatrist needs to complete Section I of the ITA Patient Claim Information form (DSHS 13-628x). If you need copies of this referral form, mail or fax a written request on letterhead to **DSHS Warehouse**, PO Box 45816, Olympia, WA 98504-5816, or FAX (360) 664-0597.

- MAA reimburses for physician and psychiatrist evaluations and consultations to the court regarding the need for continued involuntary psychiatric hospitalization of a client. Documentation of the time required for actual testimony must be maintained in the client's medical record. Only one court testimony will be paid per hearing. Use the ITA court testimony state-unique codes 9085M through 9087M to bill for time spent doing court testimony.

- Additional costs for court testimony are to be reimbursed from county ITA administrative funds.

- Out-of-state providers or border-area providers are not covered.

Podiatric Services

[Refer to WAC 388-531-1300]

- MAA reimburses podiatrists for procedure codes within their scope of care.

- Routine foot care is paid when a medical condition affecting the legs or feet (such as diabetes or arteriosclerosis obliterans) requires that such care be performed by a M.D., D.O., or podiatrist.

Examples of medical necessity include, but are not limited to:

✓ Limitation of ambulation due to mycosis.

✓ Likelihood that absence of treatment will result in significant medical complications.

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- MAA reimburses podiatrists for only the orthotics listed below:

State-Unique Code	Modifier	Description/Limits
1600L	**RT** or **LT**	**Single fabricated orthotic**; MAA allows 2 units per client, per calendar year. Limited to 1 unit per date of service. Do not bill in combination with **1601L**.
1601L	No Modifier	**Pair fabricated orthotic**; Must include fabrication for both right and left. Limited to 1 unit per calendar year. Do not bill in combination with **1600L**.
1602L	**RT** or **LT**	**Impression casting, each foot**; MAA allows 2 units per client, per calendar year. Limited to 1 unit per date of service. Do not bill in combination with **1604L**.
1603L	**RT** or **LT**	**Prefabricated orthotic (attach invoice if over $50.00)**; 2 units per client, per calendar year. Do not bill in combination with **1600L or 1601L**.
1604L	No Modifier	**Impression casting, custom shoes, pair;** Must include impression for both feet. Limited to 1 unit per calendar year. Do not bill in combination with **1602L**.

☞**NOTE:** If the description of the orthotic code indicates the code is for a single orthotic or impression casting of one foot, either modifier RT or LT **must** be included on the claim. Providers **must** use an appropriate procedure code with the word "pair" in the description when billing for fabrications, casting, or impressions of both feet.

- Evaluation and Management (E&M) codes can be billed in addition to orthotics if the E&M services performed are justified and documented in the client's medical records.

- Medicare does not reimburse for orthotics and casting. You may bill MAA directly for those services without submitting a Medicare denial, unless the client's Medical ID card indicates *QMB – Medicare only*, in which case the orthotics and casting would not be covered by MAA.

- Biomechanical evaluation (the evaluation of the foot that includes various measures and manipulations necessary for the fitting of an orthotic) is included in the orthotic fee.

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MAA does <u>not cover</u> the following services:

- ✓ Treatment of flat feet; and
- ✓ Treatment of fungal (mycotic) disease is considered routine foot care and is not covered unless medical necessity is documented in the client's chart.

- Local nerve blocks for subregional anatomic areas (such as the ankle and foot) are included in the reimbursement for the surgical procedure and are not reimbursed separately.
- Reimbursement for debridement of nails is limited to a maximum of one treatment in a 60-day period unless documented in the client's chart as medically necessary.
- MAA will reimburse podiatrists for covered, diagnostic, radiologic services of the ankle and foot if the client is examined before the x-ray is ordered. X-rays must be of sufficient quality to ensure ease of diagnosis, must be designated left and/or right, and dated and marked with the client's name for ready identification.
- MAA will not reimburse for the following radiology services:
  - ✓ X-rays for soft tissue diagnosis;
  - ✓ Bilateral x-rays for unilateral condition;
  - ✓ X-rays in excess of two views;
  - ✓ X-rays that are ordered before the client is examined; or
  - ✓ X-rays for any part of the body other than the foot or ankle.

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Registered Nurse First Assistants (RNFA)

Registered Nurse First Assistants (RNFAs) are allowed to assist at surgeries within their scope of practice. Use modifier 80 to bill MAA for these services. Current RNFA providers who want to assist at surgeries need to submit their Certification as a Certified Nurse Operating Room (CNOR) from the Certification Board Perioperative Nursing to:

Provider Enrollment
PO Box 45562
Olympia, Washington 98504-5562

New RNFA providers must meet the following criteria:

- Licensed in Washington State as a Registered Nurse in good standing;
- Work under the direct supervision of the performing surgeon; and
- Submit the following documentation to MAA along with the Core Provider Agreement:

  - Certification as a Certified Nurse Operating Room (CNOR) from the Certification Board Perioperative Nursing;
  - Proof of Allied Health Personnel privileges in the hospital where the surgeries are performed; and
  - Certification as a RNFA from the Certification Board of Perioperative Nursing.

RNFAs who are current providers or who wish to bill only for cesarean sections (CPT codes 59514 and 59620) **do not need** to submit the Certification as a RNFA from the Certification Board Perioperative Nursing.

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Radiology Services

[Refer to WAC 388-531-1450]

General Limitations on Radiology Services

The following services are not usually considered medically necessary and may be subject to post-pay review:

- X-rays for soft tissue diagnosis;
- Bilateral x-rays for a unilateral condition; and
- X-rays in excess of two views.

Contrast Material

Separate payment will not be made for contrast material (A4647) except in the case of low-osmolar contrast media (LOCM) used in intrathecal, intravenous, and intra-arterial injections for clients with one or more of the following conditions:

- A history of previous adverse reaction to contrast material, with the exception of a sensation of heat, flushing, or a single episode of nausea or vomiting.
- A history of asthma or allergy.
- Significant cardiac dysfunction including recent or imminent cardiac decompensation, severe arrhythmia, unstable angina pectoris, recent myocardial infarction, and pulmonary hypertension.
- Generalized severe debilitation.
- Sickle cell disease.

To bill for LOCM, use the appropriate HCPCS procedure code A4644, A4645 or A4646. The brand name of the LOCM and the dosage must be documented in the client's record.

Radiopharmaceutical Diagnostic Imaging Agents

When performing nuclear medicine procedures, separate payment is allowed for radiopharmaceutical diagnostic imaging agents. See procedure codes listed in Section K.

Outpatient MRIs

You must bill using MAA's Expedited Prior Authorization (EPA) process for all outpatient MRIs. See Section I.

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Outpatient PET Scans

Effective for dates of service on and after July 1, 2002, Expedited Prior Authorization (EPA) criteria are established for many Positron Emission Tomography (PET) scan codes, allowing providers to create their own prior authorization numbers. Therefore, these covered PET scans no longer require written/fax prior authorization. For details on creating EPA numbers for PET scans, refer to Section I.

> **Exception:** PET scan HCPCS codes G0030-G0047 still require written/fax prior authorization.

MAA no longer accepts the CPT codes for PET scans (codes 78608-78609, 78459, and 78491-78492). Providers **must** use one of the HCPCS codes from the range G0030-G0047, G0125, G0210-G0218, G0220-G0234, and G0253-G0254 when billing for PET scans.

> **Exception:** PET scan CPT code 78810 may be used after written/fax prior authorization has been obtained and **only** when there is no other appropriate HCPCS code to describe the procedure being performed.

HCPCS code G0219 (PET imaging whole body, full- and partial-ring PET scanners only, non-covered individual) **is no longer covered**.

Effective for dates of service on and after July 1, 2002, the following PET scan HCPCS codes are added:

HCPCS Procedure Code	Full Description	MAA Maximum Allowable Fee	Limitations
G0252	PET imaging, full and partial-ring PET scanners only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (e.g. initial staging of axillary lymph nodes), not covered by Medicare	Not Covered	Not Covered
G0253	PET imaging for breast cancer, full and partial ring PET scanners only, detection of local regional recurrence or distant metastases, i.e. staging/restaging after or prior to course of treatment	By Report	Requires EPA
G0254	PET imaging for breast cancer, full and partial-ring PET scanners only, evaluation of response to treatment, performed during course of treatment	By Report	Requires EPA

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Mammograms

MAA has adopted the National Cancer Institute (NCI) recommendations regarding screening mammograms, CPT code 76092. For clients age 40 and over, one annual screening mammogram is allowed. Other screening mammograms may be allowed if determined medically necessary and documented in the client's record.

Radiology Modifiers for Bilateral Procedures

- Bill the procedure on two separate lines using modifier 50 on one line only.
- Bill **modifier LT or RT** on separate lines when a radiological procedure is performed on the right and/or left side or extremity.
- Do not use modifier 50, LT, or RT, if the procedure is defined as bilateral.

Anesthesia for Radiological Procedures **[Refer to WAC 388-531-0300 (2) and (7)]**

General anesthesia will be allowed for radiological procedures for children and/or non-cooperative clients when the medically necessary procedure cannot be performed unless the client is anesthetized.

Providers **must** use the anesthesia CPT code 01922 when providing general anesthesia for non-invasive imaging or radiation therapy. **Do not** bill the radiological procedure code with an anesthesia modifier to bill for the anesthesia procedure.

When using CPT code 01922 for non-invasive imaging or radiation therapy:

- ✓ The client must be 17 years of age or younger; **or**
- ✓ A statement of the client-specific reasons why the procedure cannot be performed without anesthesia services must be kept in the client's medical record and made available to MAA on request.

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Nuclear Medicine

When billing MAA for nuclear medicine, the multiple surgery rules will be applied when:

- The coding combinations listed below are billed:

  ✓ For the same client, on the same day, by the same physician or by more than one physician of the same specialty in the same group practice; or
  ✓ With other codes that are subject to the multiple surgery rules, not just when billed in the combinations specified below.

    - CPT code 78306 (bone imaging; whole body) and 78320 (bone imaging; SPECT);
    - CPT code 78802 (radionuclide localization of tumor; whole body) and 78803 (tumor localization; SPECT); and
    - CPT code 78806 (radionuclide localization of abscess; whole body) and 78807 (radionuclide localization of abscess; SPECT).

Consultation on X-Ray Examination

- When billing a consultation, the consulting physician must bill the specific radiological x-ray code with modifier 1R (professional component).

  For example: The primary physician would bill with the global chest x-ray (CPT code 71020) or the professional component (CPT codes 71020-26), but the consulting physician would bill only for the chest x-ray consultations (e.g., 71020-1R).

Portable X-Rays

- Portable x-ray services furnished in clients' homes or nursing facilities are limited to the following tests:

  ✓ Skeletal films involving extremities, pelvis, vertebral column, or skull;
  ✓ Chest or abdominal films that do not involve the use of contrast media; or
  ✓ Diagnostic mammograms.

- To bill for transportation of equipment, bill either HCPCS code R0070 (one patient, one unit) or HCPCS code R0075 (multiple patients, multiple units).

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Pathology and Laboratory

[Refer to WAC 388-531-0800 and WAC 388-531-0850]

Certification

Independent laboratories must be certified according to Title XVII of the Social Security Act (Medicare) to receive payment from Medicaid.

MAA reimburses laboratories only for MAA-certified tests.

CLIA Certification

All facilities performing laboratory testing must have a Clinical Laboratory Improvement Amendment (CLIA) certificate and identification number in order to receive reimbursement from MAA. Your claim for laboratory services cannot be paid unless your active CLIA identification number is on file with MAA.

To obtain CLIA certificate and number, or to resolve questions concerning your CLIA certification, call (206) 361-2802 or write to:

Department of Health
Office of Laboratory Quality Assurance
1610 NE 150th Street
Seattle, Washington 98155-9701
(206) 361-2802 or (206) 361-2813 FAX

Referenced Laboratory

If a laboratory sends a specimen to a referenced lab, you may bill for the referenced lab. However, the referenced lab provider number must be entered in the performing provider's number field. The referenced lab must be CLIA certified and have an active CLIA identification number on file with MAA. Use modifier 90.

NOTE: Providers, please remember that laboratory claims must include an appropriate diagnosis code. The ordering provider must give the diagnosis code to the performing laboratory at the time the tests are ordered. MAA will not reimburse a laboratory for procedures without an appropriate diagnosis code.

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Cancer Screens (HCPCS codes G0101-G0107 and G0120-G0122)

HCPCS Code	Coverage Restrictions	Allowed Only With Diagnosis Code(s)
G0101	Females only	V76.2
G0102	Bundled	
G0103	Males age 50 and older Once every 12 months	Any valid ICD-9 code other than high risk
G0104	Clients age 50 and older Allowed once every 48 months	Any valid ICD-9 code Other than high risk
G0105	Clients at high risk for colorectal cancer One every 24 months	High risk* 555.1, 555.0, 555.2, 555.9, 556.0-556.6, 556.8, 556.9, 558.2, 558.9 V10.05, V10.06, V12.72, V16.0
G0106	Clients age 50 and older and not a high risk Once every 48 months	Any valid ICD-9 code Other than high risk
G0107	Clients age 50 and older Once every 12 months (1-3 simultaneous determinations)	Any valid ICD-9 code Other than high risk
G0120	Clients age 50 and older who are at high risk for colorectal cancer Once every 24 months	High risk* 555.1, 555.0, 555.2, 555.9, 556.0-556.6, 556.8, 556.9, 558.2, 558.9 V10.05, V10.06, V12.72, V16.0
G0121	Once every 48 months	Any valid ICD-9 code Other than high risk
G0122	None	Any valid ICD-9 code Other than high risk

MAA does **not cover** diagnosis codes V16 and V28.9.

* Allowable diagnoses have changed in accordance with Medicare's guidelines.

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Coding and Payment Policies

Pathology and laboratory services must be provided either by a pathologist or by technologists who are under the supervision of a physician.

- Physicians must bill using their provider number for laboratory services provided by their technicians under their supervision.
- An independent laboratory and/or hospital laboratory must bill using its provider number for any services performed in its facility.
- MAA will reimburse for one blood draw fee (CPT code 36415 or 36540) per day.
- MAA will reimburse for one catheterization for collection of a urine specimen (HCPCS code P9612) per day.
- CPT codes 85007, 85009, 85014, 85018, 85021, 85027, 85041, and 85048 are included in the complete blood count procedure.
- CPT codes 81001, 81002, 81003 and 81015 are not allowed in combination with urinalysis procedure 81000.
- CPT codes 86812-86822 are limited to a maximum of 15 tests total for human leukocyte antigens (HLA) typing per client, per lifetime.
- Do not bill with modifier 26 if the description in CPT indicates professional services only.
- Reimbursement for lab tests includes handling, packaging and mailing fee. Separate reimbursement is not allowed.
- For **modifier 91**, see page E20.

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Drug Screens

- MAA will reimburse for drug screens only when medically necessary and when ordered by a physician as part of a medical evaluation or when required drug and alcohol screens to assess suitability for medical tests or treatment.

- MAA will not reimburse for screens to monitor any of the following:

  ✓ Program compliance in either a residential or outpatient drug or alcohol treatment program;
  ✓ Drug or alcohol abuse by a client when performed by a provider in a private practice; or
  ✓ To monitor suspected drug use by clients in a residential setting such as a group home.

- For clients in the DASA contracted methadone treatment programs, drug screens are reimbursed through a contract issued by DASA, not through MAA.

Laboratory Services Referred by Community Mental Health Center (CMHC) Providers or Alcohol & Substance Abuse Providers

When CMHC or Alcohol & Substance Abuse providers refer Healthy Options clients for laboratory services, the laboratory must bill MAA directly, and the following conditions apply:

- The laboratory service is medically necessary;
- The laboratory service is directly related to the client's mental health or alcohol and substance abuse needs
- The laboratory service is referred by a CMH provider who has a core provider agreement with MAA; and
- The laboratory must bill with a mental health, substance abuse, or alcohol abuse diagnosis.

To bill for laboratory services, laboratories **must** put the seven-digit CMHC or Division of Alcohol and Substance Abuse (DASA) referring provider identification number assigned by MAA in **field 17a** on the HCFA-1500 claim form.

Direct entry and electronic billers must use the appropriate field.

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Automated Multi-Channel Tests

MAA will reimburse for:

- CPT lab panel codes 80048, 80050, 80051, 80053, 80061, 80069, 80072, and 80076. The 22 individual automated multi-channel tests are:

Procedure Code	Description
82040	Albumin; serum
82247	Bilirubin; total
82248	Bilirubin; direct
82310	Calcium; total
82374	Carbon dioxide (bicarbonate)
82435	Chloride; blood
82465	Cholesterol, serum, total
82550	Creatine kinase (CK)
82565	Creatine; blood
82947	Glucose; quantitative
82977	Glutamyltransferase, gamma (GGT)
83615	Lactate dehydrogenase (LD),(LDH)
84075	Phosphatase, alkaline
84100	Phosphorous inorganic (phosphate)
84132	Potassium; serum
84155	Protein; total, except refractometry
84295	Sodium; serum
84450	Transferase; apartate amino (AST)(SGOT)
84460	Transferase; alanine amino (AST)(SGPT)
84478	Tryglycerides
84520	Urea nitrogen; quantitative
84550	Uric acid; blood

- You may bill a combination of panels and individual tests. <u>However, do not bill separately for any individual tests that are included in the panel.</u> Duplicate tests will be denied. Panel codes must be billed if all individual tests in the panel are performed.

- Each test and/or panel must be billed on a separate line.

- All automated/non-automated tests must be billed on the same claim form when performed for a client by the same provider on the same day. For laboratory services that exceed the lines allowed per claim, see the next page:

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Billing for laboratory services that exceed the lines allowed

- Providers who bill on hardcopy HCFA-1500 claim forms are allowed up to 6 lines per claim. Direct entry, magnetic tape, and electronic submitters are allowed 21 lines per claim. **Use additional claim forms, if the services exceed the lines allowed.** Note the statement "additional services" in field 19 on the HCFA-1500 claim form or in the *Remarks/Comments* area, when billing electronically. MAA will review the claims for correct payment. *Total* each claim separately.

- If MAA pays a claim with one or more automated/non-automated lab test, bill any additional automated/non-automated lab tests for the same date of service on a blue Adjustment Request form (DSHS 525-109). Make sure you adjust the claim with the paid automated/non-automated lab tests, using the comment "additional services."

If all services for **automated/non-automated lab tests** for the same date are denied, then follow the instructions in the first bullet on this page. If multiple claims are necessary and you are submitting on the HCFA-1500 paper claims, add the statement **additional services in box 19.**

For individual automated multi-channel tests (see previous page for list), providers will be paid on the basis of the total number of individual automated multi-channel tests performed for the same patient, on the same day, by the same laboratory. Each test must be billed as a separate line item on the claim form if:

1. Not all the procedures in a panel are performed;
2. There are additional automated multi-channel tests not included in a panel; or
3. There are other individual tests.

Reimbursement is based on the total number of tests.

For example:

- If five individual automated tests are billed, the reimbursement will be equal to the updated internal codes maximum allowable fee.

- If five individual automated tests and a panel that contains automated tests are billed, reimbursement will be the maximum allowable for the panel. Reimbursement for the individual tests, less any duplicates, will be equal to the internal codes maximum allowable fee.

If one automated multi-channel test is billed, reimbursement will be at the individual procedure code or internal codes maximum allowable fee, whichever is lower. The same will apply if the same automated multi-channel test is performed with modifier 91. (See page E20 for information on modifier 91.)

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Non-automated Multi-Channel

Organ and Disease Panels, CPT codes 80055, 80074, and 80090 do not include automated multi-channel tests. If all individual tests in the panel are not performed reimbursement will be at the individual procedure code maximum allowable fee or billed charge, whichever is lower.

The 19 non-automated multi-channel tests are:

CPT Code	Description
83718	Assay of lipoprotein
84443	Assay thyroid stim hormone
85022	Automated hemogram
85025	Automated hemogram
85651	Rbc sed rate, nonautomated
86255	Fluorescent antibody, screen
86430	Rheumatoid factor test
86592	Blood serology, qualitative
86644	CMV antibody
86694	Herpes simplex test
86705	Hep b core antibody, test
86709	Hep a antibody, igm
86762	Rubella antibody
86777	Toxoplasma antibody
86803	Hep c ab test, confirm
86850	RBC antibody screen
86900	Blood typing, ABO
86901	Blood typing, Rh(D)
87340	Hepatitis b surface ag, eia

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Laboratory Modifiers

Modifier QP

Modifier QP indicates documentation is on file showing that the lab test(s) was ordered individually or ordered as a CPT recognized panel other than automated profile codes. This modifier is used ***for information only.*** **This modifier is <u>not</u> appropriate to use for billing repeat tests or to indicate not done as a panel.**

Modifier 90

- **<u>Reference (Outside) Laboratory</u>**: when a lab other than the referring lab performs laboratory procedures, the procedure must be identified by adding modifier 90 to the procedure code. *The referenced lab provider number must be entered in the performing number field on the HCFA-1500 claim form or electronic claim record. The referral lab must be CLIA certified.*

Modifier 91

- **Modifier 91 does affect payments**.

- Use this modifier:

  ✓ Only for clinical laboratory tests; and
  ✓ When repeat tests are performed on the same day, by the same provider, to obtain reportable test values with separate specimens taken at different times when it is necessary to obtain multiple results in the course of treatment. **Use modifier 91 with the appropriate procedure code for repeat tests.**

DO NOT USE THIS MODIFIER when tests are rerun:

- To confirm initial results;
- Due to testing problems with specimens or equipment;
- For any reason when a normal, one-time, reportable result is all that is required; **or**
- There are standard HCPCS codes available that describe the series of results (e.g., glucose tolerance test, evocative/suppression testing, etc.).

Justification to bill modifier 91 must be maintained in the client's medical record.

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Clinical Laboratory Codes

Nineteen clinical laboratory codes have both a professional component and a technical component. If performing only the technical portion, do not bill with a modifier. (The former TC is the global code in your fee schedule with no modifier.) The professional component for physician interpretation must be billed using modifier 26. Laboratories performing both the professional and the technical components must bill the code without a modifier for the technical and with modifier 26 for the professional. These services may be billed either on separate lines or on separate claim forms. Listed below are the 19 laboratory codes.

Code	Brief Description
83020	Hemoglobin electrophoresis
83912	Genetic examination
84165	Assay of serum proteins
84181	Western blot test
84182	Protein, western blot test
85390	Fibrinolysins screen
85576	Blood platelet aggregation
86255	Fluorescent antibody; screen
86256	Fluorescent antibody; titer
86320	Serum immunoelectrophoresis
86325	Other immunoelectrophoresis
86327	Immunoelectrophoresis assay
86334	Immunofixation procedure
87164	Dark field examination
87207	Smear, special stain
88371	Protein, western blot tissue
88372	Protein analysis w/probe
89060	Exam, synovial fluid crystals
P3001	Screening pap smear, cervical or vaginal, up to 3 smears, requiring interpretation by physician

STAT lab Charges

NOTE: The state-unique procedure code **8949M** for STAT laboratory charges **is discontinued** and **replaced** with **HCPCS code S3600**.

Laboratory services are covered under the RBRVS fee schedule. When laboratory tests are appropriately performed on a STAT basis, the provider may bill **HCPCS code S3600** (Stat laboratory request). Reimbursement will be limited to one STAT charge per episode (not once per test). Tests must be ordered STAT and limited to only those that are needed to manage the patient in a true emergency. The laboratory report must contain the name of the provider who requested the STAT. The medical record must reflect the medical necessity and urgency of the service.

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"STAT" Charges

Note: "STAT" must be clearly indicated by the physician and be documented on patient orders or records. Tests generated from the emergency room do not automatically justify a STAT order. Use **HCPCS code S3600** with the following procedure codes.

The STAT charge will be paid only with the tests listed below. Please refer to a CPT book for complete descriptions:

80048	Basic metabolic panel
80051	Electrolyte panel
80069	Renal function panel
80076	Hepatic function panel
80100	Drug screen, qualitate/multi
80101	Drug screen, single
80156	Assay, carbamazepine, total
80162	Assay of digoxin
80164	Assay, dipropylacetic acid
80170	Assay of gentamicin
80178	Assay of lithium
80184	Assay of phenobarbital
80185	Assay of phenytoin, total
80188	Assay primidone
80192	Assay of procainamide
80194	Assay of procainamide
80196	Assay of salicylate
80197	Assay of tacrolimus
80198	Assay of theophylline
81000	Urinalysis, nonauto w/scope
81001	Urinalysis, auto w/scope
81002	Urinalysis, nonauto w/o scope
81003	Urinalysis, auto, w/o scope
81005	Urnalysis
82003	Assay of acetaminophen
82009	Test for acetone/ketones
82040	Assay of serum albumin
82055	Assay of ethanol
82150	Assay of amylase
82247	Bilirubin; total
82248	Bilirubin; direct
82310	Assay of calcium
82330	Assay of calcium
82374	Assay, blood carbon dioxide
82435	Assay of blood chloride
82550	Assay of ck (cpk)
82565	Assay of creatinine
82803	Blood gases: pH, pO2 & pCO2
82945	Glucose other fluid
82947	Assay, glucose, blood quant
83615	Lactate (LD) (LDH) enzyme
83663	Test urine for lactose
83664	Lamellar bdy, fetal lung
83735	Assay of magnesium
83874	Assay of myoglobin
84100	Assay of phosphorus
84132	Assay of serum potassium
84155	Assay of protein
84295	Assay of serum sodium
84450	Transferase (AST)(SGOT)
84484	Assay of troponin, quant
84512	Troponin qualitative
84520	Assay of urea nitrogen
84550	Assay of blood/uric acid
84702	Chorionic gonadotropin test
85007	Differential WBC count
85021	Automated hemogram
85022	Automated hemogram
85023	Automated hemogram
85024	Automated hemogram
85025	Automated hemogram
85027	Automated hemogram
85046	Automated hemogram
85378	Fibrin degradation
85384	Fibrinogen
85595	Platelet count, automated
85610	Prothrombin time
85730	Thromboplastin time, partial
86308	Heterophile antibodies
86403	Particle agglutination test
86880	Coombs test
86900	Blood typing, ABO
86901	Blood typing, Rh (D)
86920	Compatibility test
86921	Compatibility test
86922	Compatibility test
86971	RBC pretreatment
87205	Smear gram stain
87210	Smear, wet mount, saline/ink
87281	Pneumocystis carinii, ag, if
87327	Cryptococcus neoform ag, eia
87400	Influenza a/b, ag, eia
89051	Body fluid cell count

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Pap Smears

- Use CPT codes 88147-88154 and 88164-88167 for conventional Pap Smears.

- MAA reimburses for thin layer preparation CPT codes 88142-88145. HCPCS codes G0123-G0124, and G0141-G0148 remain non-covered. MAA reimburses for thin layer paps at Medicare's payment levels. Thin layer preparation and conventional preparation CPT codes cannot be billed in combination.

- Use CPT codes 88141 and 88155 in conjunction with codes 88142-88154 and 88164-88167.

HIV Testing

- The state-unique code for HIV virtual phenotype, **8999M** has been deleted and replaced with the following HCPCS code, and will be paid By Report:

HCPCS Code	Brief Description
0023T	Phenotype drug test, HIV 1

- The CPT codes for HIV testing 87534, 87535, 87536, 87537, 87538, and 87539 are restricted to ICD-9 diagnoses 042 or V08.

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Maternity Care and Delivery

- A prenatal assessment (state-unique code 5930M) can be billed in addition to antepartum care. Only one prenatal assessment will be reimbursed per billing provider, per client, per pregnancy. MAA recommends that the Washington State Physicians Insurance Association (WSPIA) assessment form be used as a guide for your assessment.

- **Total obstetrical care (CPT code 59400) includes:**

  ✓ Routine antepartum care in any trimester;
  ✓ Delivery; and
  ✓ Postpartum care.

- Bill a global obstetric procedure code after you have performed **all** of the services.

- Providers may also bill these routine antepartum services separately using the following state-unique codes and the appropriate CPT delivery only or delivery/postpartum only code:

State-Unique Code	Description	Limitations
5951M	Routine antepartum care, first and second trimester, per month	Limited to once per calendar month, per client, per pregnancy; limited to a maximum of six (6) total.
5952M	Routine antepartum care, third trimester, per month	Limited to once per calendar month, per client, per pregnancy; limited to a maximum of three (3) total.

  ✓ Routine antepartum care must be billed in sequential months.
  ✓ Use a separate line for each calendar month, indicating the date of service.
  ✓ Three separate months of antepartum care equal one full trimester of care.

- If you provide all or part of an MAA's client's antepartum and/or postpartum care, but do not perform the delivery, you must bill using the appropriate trimester or postpartum procedure codes. Bill **only** for the actual care you provided to a client.

- If you provide part of an MAA client's antepartum and postpartum care, and perform the delivery, you must bill only for the actual care you provided.

- **Antepartum care includes** prenatal services (initial and subsequent history, physical examination, recording of weight, blood pressure, fetal heart tones, routine chemical urinalysis, maternity counseling).

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- Necessary prenatal lab tests can be billed in addition to maternity services, **except urine dipstick tests (CPT codes 81000, 81001, 81002, 81003, and 81007).**

- Routine antepartum care procedure codes are not allowed in combination with any vaginal deliver or cesarean section procedure code that includes antepartum care.

- If a high-risk condition exists, bill the appropriate prenatal high-risk management code(s) in addition to routine antepartum care. When billing high-risk pregnancy codes, use an ICD-9-CM diagnosis code that reflects high-risk.

  A high-risk condition exists when a pregnant client:

  ✓ Has a high-risk medical condition; and/or
  ✓ Has a diagnosis of multiple births.

  The diagnosis on the detail line of the claim form must be the diagnosis that qualifies the pregnancy as high-risk.

- The following state-unique codes for the monthly high-risk add-on fees must be used according to the trimester of care:

State-Unique Code	Description	Limitations
5953M	High-risk management, first trimester, add-on, per month	Limited to once per calendar month, per client, per pregnancy; limited to a maximum of three (3) total.
5954M	High-risk management, second trimester, add-on per month	Limited to once per calendar month, per client, per pregnancy; limited to a maximum of three (3) total.
5955M	High-risk management, third trimester, add-on, per month	Limited to once per calendar month, per client, per pregnancy; limited to a maximum of three (3) total.

  ✓ High-risk management must be billed in sequential months.
  ✓ Use a separate line for each calendar month, indicating the date of service.
  ✓ Three separate months of high-risk management equal one full trimester of care.

  ☞**NOTE:** Additional services for antepartum care or high-risk management may be allowed in certain circumstances, such as when the client moves, transfers care to a new provider, etc. In order for MAA to consider payment, providers must indicate the reason for additional services in field 19 of the HCFA-1500 claim form or in the *Comments* field when billing electronically.

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- Medical problems during prenatal/trimester or postpartum care may require additional services. Bill for treatment of these problems using the Evaluation and Management (E&M) Services codes. MAA will reimburse for the medical services in addition to obstetrical care. Bill using the appropriate medical diagnosis.

- Bill MAA for consultations using consultation CPT codes 99241-99255. If a follow-up consultation is necessary, bill using CPT codes 99261-99263.

☞**Note:** Maternity Case Management services are available through certain providers to help pregnant women gain access to medical, social, educational and other services. The Maternity Support Services program also supports these women. This program provides preventive health services in the home or clinic for women throughout pregnancy and up to 60 days after delivery.

For information on maternity case management services and maternity support services, call **MAA's Family Services Section at (360) 725-1655.**

- When a high-risk delivery condition exists, the procedure code for high-risk vaginal delivery add-on (state-unique code 5941M) can be billed in addition to routine vaginal delivery. You must also use an appropriate corresponding ICD-9-CM diagnosis code.

- Bill labor management (state-unique code 5935M) for care provided by the physician who has managed prenatal care but does not perform the delivery due to unanticipated medical complications. The client must be in active labor and must be admitted to a hospital or certified birthing facility when the referral to the delivering physician is made.

- Do not bill CPT code 59430 (postpartum care only) in addition to procedure codes that include postpartum care.

- MAA reimburses a multiple vaginal delivery (for twins, triplets, etc.) at 100% for the first baby. When billing for 2nd or 3rd baby, use delivery only codes. Delivery only codes are paid at 50% of that procedure code's maximum allowance. Bill each baby's delivery on a separate line. Identify on the claim form, "twins" or "triplets."

- OB/GYN consultants may bill external cephalic version (CPT code 59412) and a consultation when performed on the same date of service.

- To bill for anesthesia during delivery, see the Anesthesia Section.

- For deliveries in a Birthing Center, refer to MAA's Births in Birthing Centers Billing Instructions. For deliveries in a home birth setting, refer to MAA's Planned Home Births Billing Instructions.

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Cesarean Delivery

- MAA reimburses for multiple births at cesarean delivery at 100% for the first baby. No additional reimbursement will be made for additional babies.

- Bill labor management (state-unique code 5935M) for care provided by the physician who has managed prenatal care but does not perform the cesarean section. The client must be in active labor and admitted to a hospital or licensed birthing center when the referral to the delivering physician is made.

- You may bill state-unique code 5959M for high-risk cesarean delivery add-on in addition to a cesarean delivery when a high-risk delivery condition exists and the appropriate ICD-9-CM diagnosis is used. A physician who provides stand-by attendance for high-risk delivery can bill CPT code 99360 and resuscitation CPT code 99440, when appropriate.

- If you have performed the antepartum and postpartum care and assisted at cesarean delivery, use state-unique code 5947M. Do not use modifier 80.

- Do not bill postpartum care only (CPT code 59430), in addition to procedure codes that include postpartum care.

- To bill for anesthesia during delivery, see the Anesthesia Section.

- Physician assistants must bill for an assist for a C Section delivery on the same claim form as the physician using modifiers 80, 81 or 82.

- RNFAs bill for cesarean sections using modifier 80.

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Smoking Cessation For Pregnant Women

MAA reimburses providers for smoking cessation counseling as part of an antepartum care visit or a post-pregnancy office visit for tobacco dependent eligible pregnant women.

Who is eligible for smoking cessation counseling?

Fee-for-service: Tobacco dependent, pregnant women covered under fee-for-service are eligible for smoking cessation counseling.

Managed Care: Tobacco dependent, pregnant women who are enrolled in a managed care plan must have services arranged and referred by their primary care provider (PCP). Clients covered under a managed care plan will have a plan indicator in the HMO column on their Medical Identification card. Do not bill MAA for Smoking Cessation Counseling as it is included in the managed care plans' reimbursement rates.

Who is eligible to be reimbursed for smoking cessation counseling?

MAA will reimburse only the following providers for smoking cessation counseling as part of an antepartum care visit or a post-pregnancy office visit (which must take place within two months following live birth, miscarriage, fetal death, or pregnancy termination):

- Physicians;
- Physician Assistants (PA) working under the guidance and billing under the provider number of a physician;
- Advanced Registered Nurse Practitioners (ARNP); and
- Licensed Midwives (LM), including certified nurse midwives (CNM).

What is Smoking Cessation Counseling?

Smoking cessation counseling consists of provider information and assistance to help the client stop smoking. Smoking cessation counseling includes the following steps:

- Step 1: Asking the client about her smoking status;
- Step 2: Advising the client to stop smoking;
- Step 3: Assessing the client's willingness to set a quit date;
- Step 4: Assisting the client to stop smoking, which includes a written quit plan. If the provider considers it appropriate for the client, the "assisting" step may also include prescribing smoking cessation pharmacotherapy, as needed (see next page); and
- Step 5: Arranging to track the progress of the client's attempt to stop smoking.

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What is covered?

- MAA will allow one smoking cessation counseling session per client, per day, up to 10 sessions per client, per pregnancy. The provider must keep written documentation in the client's file for each session. The documentation must reflect the information listed on the following page.

- MAA covers two levels of counseling. Counseling levels are:

  - ✓ Basic counseling (approximately 15 minutes) which includes Steps 1-3 on previous page; and
  - ✓ Intensive counseling (approximately 30 minutes) which includes Steps 1-5 on previous page.

- Use the most appropriate procedure code from the following chart when billing for smoking cessation:

CPT Procedure Code	Brief Description	Restricted to Diagnoses:
99401	Preventive counseling, indiv [approximately 15 minutes]	648.43 (antepartum) 648.44 (postpartum)
99402	Preventive counseling, indiv [approximately 30 minutes]	648.43 (antepartum) 648.44 (postpartum)

- A provider may prescribe pharmacotherapy for smoking cessation for a client when the provider considers the treatment is appropriate for the client. MAA covers certain pharmacotherapy for smoking cessation as follows:

  - ✓ MAA covers Zyban® only;
  - ✓ The product must be prescribed by a physician, ARNP, or physician assistant;
  - ✓ The client for whom the product is prescribed must be 18 years of age or older;
  - ✓ The pharmacy provider must obtain prior authorization from MAA when filling the prescription for pharmacotherapy; and
  - ✓ The provider must include both of the following on the client's prescription:

    - ➢ The client's estimated or actual delivery date; and
    - ➢ Notation that the client is participating in smoking cessation counseling.

To obtain prior authorization for Zyban®, pharmacy providers must call:

Drug Utilization and Review
1-800-848-2842

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ATTACHMENT I
From American College of Obstetrics and Gynecologists (ACOG) Educational Bulletin No. 260

Smoking Cessation Intervention for Pregnant Clients

Step 1: ASK–1 minute

- Ask the client to choose the statement that best describes her smoking status:

  A. I have NEVER smoked or have smoked LESS THAN 100 cigarettes in my lifetime. ☐

  B. I stopped smoking BEFORE I found out I was pregnant, and I am not smoking now. ☐

  C. I stopped smoking AFTER I found out I was pregnant, and I am not smoking now. ☐

  D. I smoke some now, but I have cut down on the number of cigarettes I smoke SINCE I found out I was pregnant. ☐

  E. I smoke regularly now, about the same as BEFORE I found out I was pregnant. ☐

If the client stopped smoking before or after she found out she was pregnant (B or C), reinforce her decision to quit, congratulate her on success in quitting, and encourage her to stay smoke free throughout pregnancy and postpartum.

If client is still smoking (D or E), document smoking status in her medical record, and proceed to Advise, Assess, Assist, and Arrange.

Step 2: ADVISE–1 minute

- Provide clear, strong advice to quit with personalized messages about the benefits of quitting and the impact of smoking and quitting on the woman and fetus. ☐

Step 3: ASSESS-1 minute

- Assess the willingness of the client to attempt to quit within 30 days. ☐

If the client is ready to quit, proceed to Assist.
If the client is not ready, provide information to motivate the client to quit and proceed to Arrange.

Step 4: ASSIST-3 minutes +

- Suggest and encourage the use of problem-solving methods and skills for smoking cessation (eg, identify "trigger" solutions). ☐
- Provide social support as part of the treatment (e.g., "we can help you quit"). ☐
- Arrange social support in the smoker's environment (e.g., identify "quit buddy" and smoke-free space). ☐
- Provide pregnancy-specific, self-help smoking cessation materials. ☐

Step 5: ARRANGE-1 minute +

- Assess smoking status at subsequent prenatal visits and, if client continues to smoke, encourage cessation. ☐

Data from Melvin C. Dolan Mullen P, Windsor RA, Whiteside HP, Goldenberg RL. Recommended cessation counseling for pregnant women who smoke: a review of the evidence. Tobacco Control 2000; 9:1-5.

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Multiple Surgery

When multiple surgeries are performed on the same client, at the same operative session, total payment equals the sum of 100% of the global fee for the highest value procedure. Reimbursement for the second through the fifth surgical procedure s is 50% of the global fee.

To expedite payment of your claims, bill all the surgeries for the same operative session on the same claim.

When multiple dermatological procedures are performed, the first procedure is paid at 100%, and at 50% for each additional procedure.

If a partial payment is made on a claim with multiple surgeries, you must rebill MAA using a blue Adjustment Request form (DSHS 525-109).

Endoscopy Procedures

Endoscopy procedures are paid as follows:

- When multiple endoscopies from the same group are performed on the same day, the procedure with the highest maximum allowable fee is paid the full amount. The second, third, etc., are paid at the maximum allowable amount minus the base endoscopy procedure's allowed amount.

- When multiple endoscopies from different endoscopy groups are billed, the multiple surgery rules apply.

- When surgical procedure s are performed in the same operative session, the multiple surgery rules apply.

- When payment for other codes within an endoscopy group is less than the endoscopy base code, no payment is made.

- MAA does not reimburse for an E&M visit on the same day as the diagnostic or surgical endoscopic procedure unless a documented, separately identifiable service is provided and modifier 25 is used (reason for the E&M service must be unrelated to the procedure).

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Other Surgical Policies

- Use modifiers 80, 81 and/or 82 to indicate surgery assist procedures. An assist at major surgery by a physician is paid at 20% of the listed value for the surgical procedure. The multiple surgery rules apply for surgery assists.

- **All claims for sterilization and hysterectomy procedures must be accompanied by a completed consent form (see Section H).**

- MAA will reimburse for the use of an operating microscope, CPT code 69990, only when billed with one of the following CPT codes: 61304-61546, 61550-61711, 62010-62100, 63081-63308, 63704-63710, or 64831-64907.

- The following surgeries are allowed only with diagnoses V10.3, 140.0-239.9, 757.6, 759.4, 906.5-906.9, or 940.0-949.5.

CPT Code(s)	Description
11960	Insertion of tissue expander(s)
11970	Replace tissue expander
11971	Remove tissue expander(s)
19160	Removal of breast tissue
19162	Remove breast tissue, nodes
19180	Removal of breast
19182	Removal of breast
19316	Suspension of breast
19340	Immediate breast prosthesis
19342	Delayed breast prosthesis
19350	Breast reconstruction
19357	Breast reconstruction
19361	Breast reconstruction
19364	Breast reconstruction
19366	Breast reconstruction
19367	Breast reconstruction
19368	Breast reconstruction
19369	Breast reconstruction
19370	Surgery of breast capsule
19371	Removal of breast capsule
19380	Revise breast reconstruction

- Salpingostomy, CPT codes 58770 and 58673, are payable only for a tubal pregnancy (diagnosis code 633.1).

- Modifier 53 must be used when billing incomplete colonoscopies (CPT code 45378). Do not bill incomplete colonoscopies as sigmoidoscopies. Modifier 53 indicates that the physician elected to terminate a surgical procedure. Use of modifier 53 is allowed for all surgical procedures. Modifier 53 is a payment modifier when used with CPT code 45378 only. It is “information only” for all other surgical procedures.

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Epiphyseal

Surgical procedures for epiphyseal (CPT codes 25450, 25455, 27185, 27475, 27477-27485, 27742, and 27730-27740) are allowed only for clients age 17 and younger.

Closure of Enterostomy

Mobilization of splenic flexure (CPT code 44139) is not reimbursed when billed with enterostomy codes (CPT codes 44625 and 44626). CPT code 44139 must be used only in conjunction with partial colectomy (CPT codes 44140 through 44147).

Angioscopy

MAA reimburses for one unit of angioscopy (CPT code 35400), per session.

Apheresis (CPT code 36520)

Therapeutic apheresis (CPT code 36520) includes payment for all medical management services provided to the patient on the date of service. MAA reimburses for only one unit of CPT code 36520 for the same physician on the same date for the same patient.

Separate payment is not allowed on the same date that therapeutic apheresis services are provided, unless they are billed with a modifier 25 (reason for the E&M service must be unrelated to the procedure) for the following:

- Established patient office and other outpatient visits (CPT codes 99211-99215);
- Subsequent hospital care (CPT codes 99231-99233); and
- Follow-up inpatient consultations (CPT codes 99261-99263).

Do not bill apheresis management when billing for critical care (99291 and 99292) time.

Urology

Circumcisions (other than newborn) (CPT code 54161) Circumcisions for clients other than newborns are only allowed for one of the following diagnoses: 605-Phimosis; 607.1 – Balanoposthitis; or 607.81 – Balanitis Xerotica.

Urological procedures with sterilizations in the procedure code description – These procedures may stop in MAA's payment system as a result of MAA's effort to remain in compliance with federal sterilization consent form requirements. If the surgery is not being done for the purpose of sterilization or the sterilizing portion of the procedure is not being performed, a sterilization consent form is not required.

Continued on next page…..

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However, you **must** note one of the following in the *Comments* section of your claim:

- ✓ No sterilization done;
- ✓ No vasectomy or tubal done;
- ✓ Not sterilized; or
- ✓ Not done primarily for the purpose of sterilization.

Bilateral Procedures

- If a procedure **is not** identified by its terminology as a bilateral procedure (or unilateral or bilateral), report the procedure with modifier 50. Bill as a single line item.
- If a procedure **is** identified by the terminology as bilateral (or unilateral or bilateral), as in CPT codes 27395 and 52290, do not report the procedure with modifier 50.
- Use Modifiers LT and RT to indicate left and right for unilateral procedures.

Pre-/Intra-/Postoperative Payment Splits

Pre-, intra-, and postoperative payment splits are made when modifiers 54, 55, and 56 are used.

MAA has adopted Medicare's payment splits where appropriate, as listed below. If Medicare has not assigned a payment split to a procedure, MAA uses a payment split of 10% 80% 10%.

Code Range	Operative System	Pre-	Intra-	Postoperative
10000 – 19499	Integumentary	10%	71%	19%
20000 – 29909	Musculoskeletal	10%	69%	21%
30000 – 32999	Respiratory	10%	76%	14%
33010 – 37788	Cardiovascular	09%	84%	07%
37790 – 37799	Cardiovascular	08%	83%	09%
38100 – 38115	Hemic/Lymphatic	11%	73%	16%
38120 – 38300	Hemic/Lymphatic	09%	84%	07%
38305 - 38999	Hemic/Lymphatic	11%	73%	16%
39000 – 39599	Mediastinum/Diaphragm	09%	84%	07%
40490 – 43641	Digestive	09%	81%	10%
43651 - 43652	Digestive	11%	76%	13%
43653 – 49999	Digestive	09%	81%	10%
50010 – 53899	Urinary	08%	83%	09%
54000 – 55980	Male Genital	10%	80%	10%
56300 – 56399	Laparoscopy/Hysteroscopy	09%	81%	10%
56405 – 58999	Female Genital	12%	74%	14%
59000 – 59899	Maternity	17%	60%	23%
60000 – 60605	Endocrine	09%	82%	09%
60650 – 60699	Endocrine	09%	84%	07%
61000 – 64999	Nervous System	11%	76%	13%
65091 – 68899	Eye/Occular	10%	70%	20%
69000 – 69979	Auditory	07%	79%	14%

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Anesthesia [Refer to WAC 388-531-0300]

Coding and payment policies

General Anesthesia

- MAA requires providers to used Anesthesia CPT codes 00100 through 01999 to bill for anesthesia services paid with base and time units. Providers **must not** use the surgical procedure code with an anesthesia modifier to bill for the anesthesia procedure.

- When using CPT code 01922 for non-invasive imaging or radiation therapy:

  ✓ The client must be 17 years of age or younger; **or**
  ✓ A statement of the client-specific reasons why the procedure cannot be performed without anesthesia services must be kept in the client's medical record.

- MAA reimburses providers for covered anesthesia service performed by one of the following:

  ✓ Anesthesiologist;
  ✓ Certified registered nurse anesthetist (CRNA); or
  ✓ Other providers who have a special agreement with MAA to provide anesthesia services.

- For each client, the anesthesia provider must:

  ✓ Perform a pre-anesthetic examination and evaluation;
  ✓ Prescribe the anesthesia plan;
  ✓ Personally participate in the most demanding aspects of the anesthesia plan, including, if applicable, induction and emergence;
  ✓ Ensure that any procedures in the anesthesia plan that he or she does not perform, are performed by a qualified individual as defined in program operating instructions;
  ✓ Monitor the course of anesthesia administration at frequent intervals;
  ✓ Remain physically present and available for immediate diagnosis and treatment of emergencies; and
  ✓ Provide indicated post anesthesia care.

- In addition, the anesthesiologist may direct no more than four anesthesia services concurrently. The physician may not perform any other services while directing the single or concurrent services, other than attending to medical emergencies and other limited services as allowed by Medicare instructions.

- The anesthesia provider must document in the client's medical record that the medical direction requirements were met. Providers do not need to submit documentation with each claim to substantiate these requirements.

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- Anesthesia time begins when the anesthesiologist or CRNA starts to physically prepare the patient for the induction of anesthesia in the operating room area or its equivalent. When there is a break in continuous anesthesia care, blocks of time may be summed as long as there is continuous monitoring of the patient within the blocks of time. Examples of this include, but are not limited to, time a patient spends in an anesthesia induction room; or under the care of an operating room nurse during a surgical procedure. Anesthesia time ends when the anesthesiologist, surgeon or CRNA is no longer in constant attendance (i.e., when the patient can be safely placed under postoperative supervision).

- Do not bill CPT codes 01953 or 01996 with an anesthesia modifier. MAA has assigned flat fees for these codes. Do not bill time in the units field for CPT codes 01953 or 01996.

- In addition to the anesthesia CPT codes, MAA accepts two anesthesia codes published in the American Society of Anesthesiology (ASA) Relative Value Guide (RVG). Effective for dates of service on and after January 1, 2002, the ASA RVG 2001 codes 01961 and 01962 for nerve block injections have been deleted and replaced with the ASA RVG 2002 codes in the following table:

ASA Code	Description
02100	Anesthesia for diagnostic or therapeutic nerve blocks and injections (when block or injection is performed by a different provider)
02101	Anesthesia for diagnostic or therapeutic nerve blocks and injections—patient in the prone position (when block or injection is performed by a different provider)

- Use these ASA codes only when a provider, other than the one performing the block or the injection, administers anesthesia. MAA does not adopt any other ASA RVG codes that are not included in the CPT book. Bill all other anesthesia codes according to the descriptions published in the CPT book. When there are differences in code descriptions between the CPT book and the ASA RVG, MAA follows CPT code descriptions. MAA does not reimburse for anesthesia services when billed with the CPT surgery, radiology and medicine codes. **Continue to use the appropriate anesthesia modifier with Anesthesia CPT and ASA codes.**

  Exception: Continue to bill CPT Pain Management/Other Services codes that are not paid with base and time units. These services are reimbursed as a procedure using RBRVS methodology. Do not bill time in the unit field or use anesthesia modifiers.

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- Effective with dates of service on and after January 1, 2002, state-unique anesthesia codes 5911M – 5915M are discontinued and replaced with the following CPT codes:

Discontinued State-Unique Code	Procedure	Replacement CPT Procedure Code	Anesthesia CPT codes must be used when these CPT surgical procedure codes are billed:
5911M	Vasectomies	00869	55250 and 55450
5912M	Tubals	00851	58600, 58605, 58611, 58615, 58670 and 58671
5913M	Hysterectomies	01962, 01963, 00846, or 00944	51925, 58150, 58152, 58180, 58260, 58262, 58263, 58267, 58270, 58275, 58280, 58550 and 59135
5914M	Hysterectomies	01962, 01963, 00846, or 00944	58200, 58210, 58240, 58285 and 59525
5915M	Abortions	01964	59812, 59820, 59821, 59830, 59840, 59841, 59850, 59851, 59852, 59855, 59856 and 59857

- When billing anesthesia CPT code 01964 indicate in field 19 of the HCFA-1500 claim form or in the *Comments* field for direct entry, magnetic tape or EMC "voluntary or induced abortion."

- Do not bill CPT codes 00800-00884, 00920-00955 for abortions, hysterectomies, or sterilization procedures. Use the appropriate code from the table above.

- When multiple surgical procedures are performed during the same period of anesthesia, the surgical procedure with the greatest base value should be billed, along with the total time in whole minutes.

- If anesthesia time exceeds 999 minutes, leave the unit field blank. Enter the time in the *Remarks* field or enter beginning and ending time or total minutes on the HCFA-1500 claim form.

- When more than one anesthesia provider is present, MAA pays the supervisory anesthesiologist and the certified registered nurse (CRNA) each 50% of the allowed amount. MAA limits reimbursement in this circumstance to 100% of the total allowed reimbursement for the service.

- The anesthesia payment system is based on a per minute reporting assumption. Anesthesia time begins when the anesthesiologist or CRNA starts to physically prepare the patient for the induction of anesthesia in the operating room area (or its equivalent) and ends when the anesthesiologist or CRNA is no longer in constant attendance (i.e., when the patient can be safely placed under post-operative supervision).

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- Providers must report the number of actual anesthesia minutes (calculates to the next whole minute) in field 24G of the HCFA-1500 claim form. MAA calculates the base units.

Regional Anesthesia

- Bill MAA the appropriate CPT code (e.g., epidural-CPT code 62319) with no time units and no anesthesia modifier. MAA determines payment by using only RBRVS, not anesthesia base and time units.

- Local nerve block CPT code 64450 (other than digital and metacarpal) for subregional anatomic areas (such as the hand, wrist, ankle, foot and vagina) is included in the package for the surgical procedure and is not reimbursed separately.

Other

- Patient acuity does not affect payment levels. Qualifying circumstances (CPT codes 99100, 99116, 99135, and 99140) are considered bundled and are not paid separately.

- MAA follows the Centers for Medicare and Medicaid Services' (CMS's) policy to not reimburse surgeons for anesthesia services. Claims for anesthesia services with modifier 47 will be denied. Under Medicare's payment policy, **separate reimbursement** for local, regional, or digital block or general anesthesia administered by the surgeon **is not allowed.** These services are considered included in the RBRVS payments for the procedure.

- When billing for anesthesia services using CPT anesthesia code 01999, submit documentation (operative report) indicating what surgical procedure was performed that require the anesthesia. A MAA Medical Consultant will review documentation for determination of payment.

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Anesthesia for Maternity [Refer to WAC 388-531-0300(9)]

- MAA reimburses a maximum of 6 hours (360 minutes) of anesthesia for labor and delivery time (CPT codes 01960, 01961, 01967 and 01968) per delivery, including multiple births and/or Cesarean section delivery.

- When billing more than one time-limited anesthesia code, the total time may not exceed 6 hours (360 minutes).

- In order to be reimbursed, bill the applicable CPT anesthesia code with modifier and time. To determine time for obstetric epidural anesthesia during normal labor and delivery and C-sections, time begins with insertion and ends with removal for a maximum of 6 hours per delivery.

- CPT codes 01968 and 01969 are anesthesia add-on codes to be used for cesarean delivery and cesarean hysterectomy following anesthesia given for a planned vaginal delivery. An additional base of 3 is allowed for 01968 and an additional base of 5 is allowed for 01969 in conjunction with the base of 6 for 01967. The time involved with each portion of the procedure should be reported with the appropriate CPT code. For example, if an epidural anesthetic is given to a client in labor for three hours while a vaginal delivery is still planned, the provider will report 01967 with a total time of 180 minutes. If the provider decides a cesarean section is then necessary, and the cesarean portion of the procedure takes an additional 30 minutes, the provider will report CPT code 01968 with a total time of 30 minutes on another line of the claim form. The provider will be reimbursed for a grand total of 9 base units and 210 minutes.

- The following obstetrical anesthesia codes are not subject to the 6-hour (360 minute) limitation: CPT codes 01962, 01963, 01964 and 01969.

- Anesthesia time for sterilization is added to the time for the delivery when the two procedures are performed during one operative session. If the sterilization and delivery are performed in different operative sessions, the time is calculated separately.

Anesthesia Payment Calculation for Services Paid with Base and Time Units

- The conversion factor is $15.70.

- Anesthesia time is paid using **one minute per unit.**

- The total anesthesia reimbursement rate is calculated by adding the base value for anesthesia listed in this fee schedule with the actual time. Bill time in **total minutes** to the next whole minute, not hours and minutes or multiple-minute units. Do not bill base. The formula for calculating anesthesia payment using total minutes is described later in this section.

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The following table illustrates how to calculate the anesthesia payment:

Payment Calculation	
A.	Multiply base units by **15.**
B.	Add total minutes to value from step A.
C.	Divide anesthesia conversion factor by 15, to obtain the rate per minute.
D.	Multiply total from Step B by the rate per minute in Step C.

Anesthesia conversion factor is based on 15-minute time units.

Anesthesia for Dental

General anesthesia is allowed when provided by an anesthesiologist for a Certified Registered Nurse Anesthetist (CRNA) for dental admissions. Providers must use CPT anesthesia code 00170 with the appropriate anesthesia modifier to bill for dental anesthesia.

Note: Bill MAA directly for dental anesthesia for all clients, including those enrolled in managed care.

Pain Management Services

- Pain Management services and selected surgical services that are commonly performed by anesthesiologists and CRNAs are *not* paid with anesthesia base and time units. **Do not use anesthesia modifiers when billing for services payable only under RBRVS.** If an anesthesia modifier is used with a code that is payable only under RBRVS, MAA will deny the service.

- Two postoperative procedures are allowed for pain management. Only one (1) unit may be billed per procedure. Do NOT bill time.

See next page for Pain Management Procedure Codes

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Major Trauma Services

Payment enhancements apply to nongovernmental Trauma Services. Physicians and clinical providers on the Trauma teams of governmental hospitals receive enhancements on a per-patient basis. See page F27 for a list of the Designated Trauma Services. Page F28 lists DOH's categories of Physician and Clinical Providers for the Trauma Response Teams.

This program has been suspended.
See Memo 02-14 MAA

Payment Limitations for Major Trauma

To receive enhanced payment, the Department of Health (DOH) must identify the facility as a Designated Trauma Services. The facility's staff must maintain a quality improvement program and submit trauma registry data as prescribed by DOH. Verification of trauma service designation and patients' Injury Severity Score (ISS) will be done by DOH.

Enhanced payments are limited to services provided by a member of a Designated Trauma Services Trauma Response Team for Medical Assistance clients who require major trauma services. (See the Physician/Clinical Provider List, page F28.) Enhanced payments are limited to services performed in the Hospital.

These enhancements are for fee-for-service MAA clients only. MAA clients covered by managed care plans have trauma payments included in their managed care rates. Providers have contracts with these managed care plans that may or may not include additional payments for various services such as major trauma.

Nondesignated Centers and Providers

Physicians and clinical providers <u>not</u> identified by DOH as Designated Trauma Services will continue to be reimbursed at the standard rates for Medical Assistance clients. A nondesignated clinic that becomes designated during the course of the year must notify the Provider Enrollment Unit, PO Box 45562, Olympia, WA 98504-5562 of the change of status.

Billing

Physicians/Clinics and Other Professionals: Under certain circumstances, two or more modifiers may be necessary to completely describe a service. When that occurs, add modifier 99 to the detail line along with all other applicable modifiers, including 9T. Billing all modifiers with modifier 99 ensures appropriate payment. Claims billed inappropriately must be rebilled on MAA's blue Adjustment Request Form (DSHS 525-109).

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In addition to the procedure code, enter the appropriate condition code or modifier as follows:

Type of Claim	Claim Form	Code/Modifier	Where on claim?
Physicians/ Clinical Providers	HCFA-1500	Modifier **9T** *Enter this for each detail line that applies.*	Field 24d

Additional funds <u>are</u> available for treatment related to major trauma at Designated Trauma Services; however, modifier 9T must be entered on the claim form to receive the enhanced payment.

Note: The current Injury Severity Score (ISS) is 9. Enhanced payment is available for ALL cases with an ISS of 9 or above.

This program has been suspended.
See Memo 02-14 MAA

For Additional Information

For information on **initial service designation, trauma registry and/or injury severity scores (ISS)**, contact:

Chris Williams
Department of Health
Office of Emergency Medical & Trauma Prevention
(360) 705-6735 or 1-800-725-1834.

For information on **reimbursement**, contact:

Tom Johnson
MAA Reimbursement Section
(360) 725-1834

For information on a specific **Medicaid trauma claim**, contact:

MAA's Provider Relations Unit
1-800-562-6188.

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DESIGNATED TRAUMA SERVICES

This program has been suspended. See Memo 02-14 MAA

Nongovernmental Facilities:
Auburn Regional (Auburn)
Cascade Medical (Leavenworth)
Central Washington (Wenatchee)
Darrington (Darrington)
Deaconess (Spokane)
Deer Park (Deer Park)
Emanual (Portland)
Good Samaritan (Puyallup)
Grays Harbor Community (Aberdeen)
Gritman Memorial (Moscow, Idaho)
Harrison Memorial (Bremerton)
Highline Community (Burien)
Holy Family (Spokane)
Inter-Island (Friday Harbor)
Kadlec (Richland)
Mary Bridge's (Tacoma)
Mt. Carmel (Colville)
Northwest (Seattle)
Our Lady of Lourdes (Pasco)
Overlake (Bellevue)
Providence (Centralia)
Providence (Everett – Colby)
Providence (Toppenish)
Sacred Heart (Spokane)
St. Francis (Federal Way)
St. Johns (Longivew)
St. Joseph (Bellingham)
St. Joseph (Chewelah)
St. Joseph (Lewiston)
St. Mary Med. (Walla Walla)
St. Peter's (Olympia)
Southwest Wash. (Vancouver)
Sunnyside Community (Sunnyside)
Tri-State Memorial (Clarkston)
Valley (Spokane)
Walla Walla General (Walla Walla)
Yakima Valley/Prov Yak Med (Yakima)

Governmental Facilities and their Trauma Service Level:

Level 1:
Harborview (Seattle)
Oregon Health Sciences (Portland)
* **Designated by Oregon only**

Level 2:
None

Level 3:
Island (Anacortes)
Kennewick General (Kennewick)
Skagit Valley (Mt. Vernon)
Valley Med. Ctr. (Renton)
Whidbey General (Coupeville)

Level 4:
Cascade Valley (Arlington)
Evergreen Hospital (Kirkland)
Forks Community (Forks)
Jefferson General (Pt. Townsend)
Kittitas Valley (Cle Elum)
Klickitat Valley (Goldendale
Lake Chelan Community (Chelan)
Lewis Co. Hosp. Dist. #1 (Morton)
Lincoln (Davenport)
Mason General (Shelton)
Mid Valley (Omak)
Newport Comm. Hospital (Newport)
North Valley (Tonasket)
Ocean Beach (Ilwaco)
Okanogan-Douglas (Brewster)
Olympic Mem. Hospital (Pt. Angeles)
Othello Community (Othello)
Prosser Memorial (Prosser)
Pullman Memorial (Pullman)
Samaritan (Moses Lake)
Skyline (White Salmon)
Stevens Memorial (Edmonds)
Valley General (Monroe)
Willapa Harbor Hosp. (South Bend)

Level 5:
Columbia Basin (Ephrata)
Coulee Community (Grand Coulee)
Dayton General (Dayton)
East Adams Rural (Ritzville)
Ferry Co. Memorial (Republic)
Garfield County (Pomeroy)
Kittitas Hosp. Dist. #2 (Cle Elum)
Mark Reed (McCleary)
Odessa Memorial (Odessa)
Quincy Valley (Quincy)
Whitman County (Colfax)

CPT codes and descriptions are copyright 2001 American Medical Association

PHYSICIAN/CLINICAL PROVIDER LIST

Advanced Registered Nurse Practitioner
Anesthesiologist
Certified Registered Nurse Anesthetist
Cardiologist
Critical Care Physician
Emergency Physician
Family/General Practice Physician with Trauma Training
Gastroenterologist
General Surgeon
Gynecologist
Hand Surgeon
Hematologist
Infectious Disease Specialist
Internal Medicine
Nephrologist
Neurologist
Neurosurgeon
Obstetrician
Ophthalmologist
Oral/Maxillofacial Surgeon
Orthopedic Surgeon
Pathologist
Pediatric Surgeon
Pediatrician
Physiatrist
Physician Assistant
Plastic Surgeon
Pulmonologist
Urologist
Thoracic Surgeon
Urologist
Vascular Surgeon

This program has been suspended. See Memo 02-14 MAA

Note: Laboratory procedures are not included in major trauma services enhanced payment.

CPT codes and descriptions are copyright 2001 American Medical Association

Physical Therapy Program Limitations

Duplicate services for Occupational, Physical, and Speech therapy are not allowed for the same client when both providers are performing the same or similar procedure(s).
[WAC 338-545-500 (11)]

> ☞ **NOTE:** A program unit is based on the CPT code description. For CPT codes that are timed, each 15 minutes equals one unit. If the description does not include time, the procedure equals one unit regardless of how long the procedure takes.
>
> **If time is included in the CPT description, the beginning and ending times of each therapy modality must be documented in the client's medical record.**

The following are considered part of the physical therapy program 48-unit limitation:

- Application of a modality to one or more areas not requiring direct patient contact (CPT codes 97010-97028);
- Application of a modality to one or more areas requiring direct patient contact (CPT codes 97032-97039);
- Therapeutic exercises (CPT codes 97110-97139);
- Manual therapy (CPT code 97140);
- Therapeutic procedures (CPT code 97150);
- Prosthetic training (CPT code 97520);
- Therapeutic activities (CPT code 97530);
- Self care/home management training (CPT code 97535);
- Community/work reintegration training (CPT code 97537); and
- Physical performance test or measurement (CPT code 97750). Do not use to bill for an evaluation (CPT code 97001) or re-evaluation (CPT code 97002).

The following are not included in the physical therapy program 48-unit limitation:

- Orthotics fitting and training upper and/or lower extremities (CPT code 97504). Two units are allowed per day. This procedure can be billed alone or with other physical therapy CPT codes.

- Checkout for orthotic/prosethetic use (CPT code 97703). Two units are allowed per day. This procedure can be billed alone or with other physical therapy CPT codes.

- Muscle testing (CPT codes 95831-95852). One muscle testing procedure is allowed per day. Muscle testing procedure s cannot be billed in combination with each other. These procedures can be billed alone or with other physical therapy CPT codes.

- Evaluation of physical therapy (CPT code 97001). CPT code 97001 is for reporting the initial evaluation before the plan of care is established by the physical therapist or the physician. This evaluation is for evaluating the patient's condition and establishing the plan of care.

- Re-evaluation of physical therapy (CPT code 97002). Allowed once per calendar year, per client. CPT code 97002 is for reporting the re-evaluation of a patient who has been under a plan of care established by a physician or physical therapist. This evaluation is for re-evaluating the patient's condition and revising the plan of care under which the patient is being treated.

- Wheelchair needs assessments (CPT code 97703). One allowed per calendar year. Four physical therapy program units are allowed per assessment. Indicate on claim that this is a wheelchair needs assessment.

- DME needs assessments (CPT code 97703). Two allowed per calendar year. Two physical therapy program units are allowed per assessment. Indicate on claim the type of assessment.

- MAA reimburses Physical Therapists for active wound care management involving selective and non-selective debridement techniques to promote healing using CPT codes 97601 and 97602. The following conditions apply:

  - ✓ MAA allows one unit of CPT code 97601 <u>or</u> 97602 per client, per day. Providers may not bill CPT codes 97601 and 97602 in conjunction with each other.

  - ✓ Providers must not bill CPT codes 97601 and 97602 in addition to CPT codes 11040-11044.

- Custom splints (cockup and/or dynamic) (State-unique procedure code 0002M).

How do I request approval to exceed the limits?

For clients 21 years of age and older who need physical therapy in addition to that which is allowed by diagnosis, the provider must request MAA approval to exceed the limits.
See Section I – Authorization.

Are school medical services covered?

MAA covers physical therapy services provided in a school setting for school-contracted services that are noted in the client's Individual Education Program (IEP) or Individualized Family Service Plan (IFSP). Refer to MAA's School Medical Services Billing Instructions. (See Important Contacts.)

What is not covered? [WAC 388-545-500(12)]

- MAA does not reimburse separately for physical therapy services that are included as part of the reimbursement for other treatment programs. This includes, but is not limited to, hospital inpatient and nursing facility services.

Supplies

Office Supplies

- See Section K for supplies that can be billed individually.
- Procedure codes for supplies under $50.00 that do not have a fee listed will be reimbursed at acquisition cost; an invoice must be retained in the provider's file. An invoice must be submitted with the claim for supplies costing $50.00 or more.
- Effective with dates of service on and after July 1, 2002, HCPCS code A4550 (surgical tray) is bundled into the appropriate surgical procedures and the RVUs for these procedures have been adjusted accordingly. MAA will no longer reimburse providers separately for surgical trays.

Casting Materials

- Use state-unique codes 2978M through 2987M for fiberglass and plaster casting materials (see page K2). **Do not bill for the use of a cast room.** Use of a cast room is considered part of a provider's practice expense.

Catheter Supplies

- Separate payment is allowed for a temporary, indwelling catheter when it is used to treat a temporary obstruction and is performed in a physician's office. Use HCPCS procedure code G0002 to bill for this supply.
- MAA does not cover this procedure when it is performed on the same day as, or during the postoperative period of, a major surgical procedure.

Sterilizations

What is sterilization? [Refer to WAC 388-531-1550(1)]

Sterilization is any medical procedure, treatment, or operation for the purpose of rendering a client permanently incapable of reproducing (this includes vasectomies).

> **Note:** MAA does not reimburse for hysterectomies performed solely for the purpose of sterilization. Refer to page H15, Hysterectomies.

When does MAA reimburse for sterilization?

[Refer to WAC 388-531-1550(2)]

MAA covers sterilization when all of the following apply:

- The client is at least 18 years of age at the time consent is signed;
- The client is a mentally competent individual;
- The client has **voluntarily** given informed consent (see page 1, Definitions) in accordance with all of the requirements defined under this Sterilizations section;
- At least 30 days, but not more than 180 days, have passed between the date the client gave informed consent and the date of the sterilization.

> **Note: MAA reimburses providers for sterilizations for managed care clients 18 through 20 years of age under the fee-for-service system.**

Why do I need a DSHS-approved consent form?

Federal regulations prohibit payment for sterilization procedures until a properly completed consent form is received. To comply with this requirement, surgeons, anesthesiologists and assistant surgeons must obtain a copy of a completed consent form to attach to their claim. **No other form will be accepted.** The consent form may be obtained from the physician who performs the sterilization. MAA will deny a claim for a sterilization procedure received without a consent form. MAA will either return or deny a claim with an incomplete or improperly completed consent form.

The claim and completed consent form are to be submitted to the:

DIVISION OF PROGRAM SUPPORT
PO BOX 9248
OLYMPIA WA 98507-9248

Consent Form Requirements:

✓ The signatures and other information on the consent form must be legible.
✓ All blanks on the consent form must be completed except race, ethnicity, and interpreter's statement blanks.
✓ For sterilization of a client between 18 and 20 years of age, use the DSHS 13-364(x) Consent form.

Cross out age 21 in the following three places on the form and write in **18.**

- *Consent to Sterilization* section, **"I am at least 21…"**
- *Statement of Person Obtaining Consent* section, **"To the best of my knowledge….is at least 21…"**
- *Physician's Statement* section, **"To the best of my knowledge…is at least 21…"**

What if the physician who signs the consent form is not the physician who performs the sterilization?

The physician identified in the "Consent to Sterilization" section of DSHS 13-364x must be the same physician who completes the "Physician's Statement" section and performs the sterilization procedure. If the physician who signed the above referenced sections of the DSHS 13-364x Consent Form is not the physician performing the sterilization procedure, the client must sign and date a new Consent Form indicating the name of the physician performing the operation under the "Consent for Sterilization" section, at the time of the procedure. This amended consent must be attached to the initial DSHS 13-364(x) Consent Form before billing MAA. **Note: Both consent forms must be attached to each billing. The original consent must meet all of the consent requirements.**

Sample Completed Consent Forms:

See page H5 for a **REGULAR** consent form, page H8/H9 for examples of when an **AMENDED** consent form is necessary, and page H11 for a **BLANK** consent form. The blank consent form may be photocopied for your use.

To obtain a Consent Form (DSHS 13-364(x)), write or fax your request to:

DSHS Warehouse
PO box 45816
Olympia, WA 98504-5816
FAX (360) 664-0597

When does MAA waive the 30-day waiting period?

[WAC 388-531-1550(3)(4)]

MAA **does not require** the 30-day waiting period, **but does require** at least a 72-hour waiting period for sterilization in the following circumstances:

- At the time of premature delivery, the client gave consent at least 30 days before the expected date of delivery. The expected date of delivery must be documented on the consent form.

- For emergency abdominal surgery, the nature of the emergency must be described on the consent form.

MAA waives the 30-day consent waiting period for sterilization when the client requests that sterilization be performed at the time of delivery, **and** completes a sterilization consent form when one of the following circumstances applies:

- The client became eligible for Medical Assistance during the last month of pregnancy *("NOT ELIGIBLE 30 DAYS BEFORE DELIVERY");*

- The client did not obtain medical care until the last month of pregnancy *("NO MEDICAL CARE 30 DAYS BEFORE DELIVERY")*; or

- The client was a substance abuser during pregnancy, but is not using alcohol or illegal drugs at the time of delivery *("NO SUBSTANCE ABUSE AT THE TIME OF DELIVERY").*

The provider must note on the HCFA-1500 claim form in field 19 or on the backup documentation, which of the above waiver conditions has been met. Required language is shown in parentheses. Electronic bills must indicate this information in the *Comments* field.

When does MAA not accept informed consent?

[Refer to WAC 388-531-1550(5)(6)]

MAA does not accept informed consent obtained when the client is in any of the following conditions:

- In labor or childbirth;
- Seeking to obtain or obtaining an abortion; or
- Under the influence of alcohol or other substances that affect the client's state of awareness.

Additional Requirements for Sterilization of Mentally Incompetent or Institutionalized Clients

MAA has certain additional consent requirements that the provider must meet before MAA reimburses sterilization of a mentally incompetent or institutionalized client. MAA requires both of the following:

- A court order; and
- A sterilization consent form signed by the legal guardian, sent to MAA.

Reimbursement for Sterilization

MAA reimburses all attending providers for the sterilization procedure only when the provider submits an appropriate, completed DSHS-approved consent form with the claim for reimbursement. MAA reimburses after the procedure is completed.

MAA reimburses epidural anesthesia in excess of the six-hour limit for deliveries if sterilization procedures are performed in conjunction with or immediately following a delivery. MAA determines total billable units by:

- Adding the time for the sterilization procedure to the time for the delivery; and
- Determining the total billable units by adding together the delivery BAUs, the delivery time, and the sterilization time.
- The provider cannot bill separately for the BAUs for the sterilization procedure.

How to Complete the Sterilization Consent Form

The following numbers correlate to those listed on the following sample of the Sterilization Consent Form.

Consent to Sterlization

1	Doctor or Clinic – May be different than performing doctor if another physician takes over.
2	Procedure – Type of sterilization or vasectomy
3	Birthday of Client (Month, Day, Year)
4	Client's Name
5	Doctor – Physician that performed surgery, has to be the same name as the physician who signs on bottom right (see #16 below).
6	Procedure – Type of sterilization or vasectomy
7	Signature – Client's signature and dated 30 days prior to surgery date.

Statement of Person Obtaining Consent

8	Name of Individual – Patient name
9	Procedure – Type of sterilization or vasectomy
10	Signature of person obtaining consent and dated
11	Facility – Clinic or office name
12	Address – Physical address of clinic or office, city, state and zip code

Physician's Statement

13	Name: Individual to be sterilized – Client's name
14	Date: Sterilization Operation – Date of Service of sterilization
15	Specify type of operation – Name of procedure
16	Physician – Signature of doctor who performed the surgery and dated after, or not more than one week before, the surgery is performed and must be the same physician as #5 above. If not, the amended consent form (see page H9) must be attached to original consent containing the client signature, date and name of doctor who performed the sterilization.

Note: #13 through #16 may be left blank on the ORIGINAL consent form if you are attaching an AMENDED consent form (see instructions on page H7).

SAMPLE: Regular

CONSENT FORM

NOTE: Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving Federal funds.

• CONSENT TO STERILIZATION •

I have asked for and received information about sterilization from (1) Dr. Tim Lu (DOCTOR OR CLINIC).

When I first asked for the information, I was told that the decision to be sterilized is completely up to me. I was told that I could decide not to be sterilized. If I decide not to be sterilized, my decision will not affect my right to future care or treatment. I will not lose any help or benefits from programs receiving Federal funds, such as Aid to Families with Dependent Children (AFDC) or Medicaid that I am now getting or for which I may become eligible.

I understand that the sterilization must be considered permanent and not reversible. I have decided that I do not want to become pregnant, bear children, or father children.

I was told about those temporary methods of birth control that are available and could be provided to me which will allow me to bear or father a child in the future. I have rejected these alternatives and chosen to be sterilized.

I understand that I will be sterilized by an operation known as a (2) tubal ligation. The discomforts, risks, and benefits associated with the operation have been explained to me. All my questions have been answered to my satisfaction.

I understand that the operation will not be done until at least thirty days after I sign this form. I understand that I can change my mind at any time and that my decision at any time not to be sterilized will not result in the withholding of any benefits or medical services provided by Federally funded programs.

I am at least 21 years of age and was born on (3) 8/1/71 (MONTH DAY YEAR).

I, (4) Jane Doe, hereby consent of my own free will to be sterilized by (5) Dr. Tim Lu (DOCTOR) by a method called (6) tubal ligation. My consent expires 180 days from the date of my signature below.

I also consent to the release of this form and other medical records about the operation to:

- Representatives of the Department of Health and Human Services; or
- Employees of programs or projects funding by that department but only for determining if Federal laws were observed.

I have received a copy of this form.

(7) Jane Doe (SIGNATURE) Date: 8/20/01 (MONTH DAY YEAR)

You are requested to supply the following information, but it is not required. **RACE AND ETHNICITY DESIGNATION (PLEASE CHECK):**

- ☐ American Indian or Alaska Native
- ☐ Asian or Pacific Islander
- ☐ Black (not of Hispanic origin)
- ☐ Hispanic
- ☐ White (not of Hispanic origin)

• INTERPRETER'S STATEMENT •

If an interpreter is provided to assist the individual to be sterilized: I have translated the information and advice presented orally to the individual to be sterilized by the person obtaining this consent. I have also read him/her the consent form in _____ language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

_____ (INTERPRETER) _____ (DATE)

• STATEMENT OF PERSON OBTAINING CONSENT •

Before (8) Jane Doe (NAME OF INDIVIDUAL) signed the consent form, I explained to him/her the nature of the sterilization operation

STATEMENT OF PERSON OBTAINING CONSENT (CONTINUED):

(9) tubal ligation, the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or any benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appears to understand the nature and consequences of the procedure.

(10) Dr. Tim Lu (SIGNATURE OF PERSON OBTAINING CONSENT) Date: 8/20/01

(11) US Clinic (FACILITY)

(12) PO Box 123, Anywhere WA 98000 (ADDRESS)

• PHYSICIAN'S STATEMENT •

Shortly before I performed a sterilization operation upon (13) Jane Doe (NAME: INDIVIDUAL TO BE STERILIZED) on (14) 10/01/01 (DATE: STERILIZATION OPERATION), I explained to him/her the nature of the sterilization operation (15) tubal ligation (SPECIFY TYPE OF OPERATION), the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appeared to understand the nature and consequences of the procedure.

(INSTRUCTIONS FOR USE OF ALTERNATIVE FINAL PARAGRAPHS: Use the first paragraph below except in the case of premature delivery or emergency abdominal surgery where the sterilization is performed less than 30 days after the date of the individual's signature on the consent form. In those cases, the second paragraph below must be used. Cross out the paragraph which is not used.)

1. At least thirty (30) days have passed between the date of the individual's signature on this consent form and the date the sterilization was performed.

2. This sterilization was performed less than thirty (30) days but more than 72 hours after the date of the individual's signature on this consent form because of the following circumstances (check applicable box and fill in information requested):

- ☐ Premature delivery
  Individual's expected date of delivery: _____
- ☐ Emergency abdominal surgery (describe circumstances):

Dr. Tim Lu MD (16) (PHYSICIAN) 10/01/01 (DATE)

How to Complete the Amended Consent Form

(see Sample B)

The following numbers correlate to those listed on the sample Amended Consent Form.

Consent to Sterilization

4	Client's name
5	Doctor or physician that performed surgery (same name as in 16).
6	Signature – Client's signature and current date.

Physician's Statement

13	Name: Individual to be sterilized – Client's name
14	Date: Sterilization Operation – Date of Service of sterilization
15	Specify type of operation – Name of procedure
16	Physician – Signature of doctor who performed the surgery and dated after, or not more than one week before, the surgery is performed.

Page H8 and H9 are samples for:

Instances when the physician who performs the surgery is different from the physician who signed the original consent form.

Original and amended consent forms
must be stapled together and submitted with each claim.

Washington State DEPARTMENT OF SOCIAL & HEALTH SERVICES

CONSENT FORM **SAMPLE A: Original**

NOTE: Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving Federal funds.

• CONSENT TO STERILIZATION •

I have asked for and received information about sterilization from (1) Dr. Tim Lu (DOCTOR OR CLINIC).

When I first asked for the information, I was told that the decision to be sterilized is completely up to me. I was told that I could decide not to be sterilized. If I decide not to be sterilized, my decision will not affect my right to future care or treatment. I will not lose any help or benefits from programs receiving Federal funds, such as Aid to Families with Dependent Children (AFDC) or Medicaid that I am now getting or for which I may become eligible.

I understand that the sterilization must be considered permanent and not reversible. I have decided that I do not want to become pregnant, bear children, or father children.

I was told about those temporary methods of birth control that are available and could be provided to me which will allow me to bear or father a child in the future. I have rejected these alternatives and chosen to be sterilized.

I understand that I will be sterilized by an operation known as a (2) tubal ligation. The discomforts, risks, and benefits associated with the operation have been explained to me. All my questions have been answered to my satisfaction.

I understand that the operation will not be done until at least thirty days after I sign this form. I understand that I can change my mind at any time and that my decision at any time not to be sterilized will not result in the withholding of any benefits or medical services provided by Federally funded programs.

I am at least 21 years of age and was born on (3) 8/1/71 (MONTH DAY YEAR).

I, (4) Jane Doe, hereby consent of my own free will to be sterilized by (5) Dr. Tim Lu (DOCTOR) by a method called (6) tubal ligation. My consent expires 180 days from the date of my signature below.

I also consent to the release of this form and other medical records about the operation to:

- Representatives of the Department of Health and Human Services; or
- Employees of programs or projects funding by that department but only for determining if Federal laws were observed.

I have received a copy of this form.

(7) Jane Doe (SIGNATURE) Date: 8/20/01 (MONTH DAY YEAR)

You are requested to supply the following information, but it is not required. **RACE AND ETHNICITY DESIGNATION (PLEASE CHECK):**

- ☐ American Indian or Alaska Native
- ☐ Asian or Pacific Islander
- ☐ Black (not of Hispanic origin)
- ☐ Hispanic
- ☐ White (not of Hispanic origin)

• INTERPRETER'S STATEMENT •

If an interpreter is provided to assist the individual to be sterilized: I have translated the information and advice presented orally to the individual to be sterilized by the person obtaining this consent. I have also read him/her the consent form in _____ language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

_____ (INTERPRETER) _____ (DATE)

• STATEMENT OF PERSON OBTAINING CONSENT •

Before (8) Jane Doe (NAME OF INDIVIDUAL) signed the consent form, I explained to him/her the nature of the sterilization operation

STATEMENT OF PERSON OBTAINING CONSENT (CONTINUED):

(9) tubal ligation, the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or any benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appears to understand the nature and consequences of the procedure.

(10) Dr. Tim Lu (SIGNATURE OF PERSON OBTAINING CONSENT) Date: 8/20/01

(11) US Clinic (FACILITY)

(12) PO Box 123, Anywhere WA 98000 (ADDRESS)

• PHYSICIAN'S STATEMENT •

Shortly before I performed a sterilization operation upon (13) _____ (NAME: INDIVIDUAL TO BE STERILIZED) on (14) _____ (DATE: STERILIZATION OPERATION), I explained to him/her the nature of the sterilization operation (15) _____ (SPECIFY TYPE OF OPERATION), the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appeared to understand the nature and consequences of the procedure.

(INSTRUCTIONS FOR USE OF ALTERNATIVE FINAL PARAGRAPHS: Use the first paragraph below except in the case of premature delivery or emergency abdominal surgery where the sterilization is performed less than 30 days after the date of the individual's signature on the consent form. In those cases, the second paragraph below must be used. Cross out the paragraph which is not used.)

1. At least thirty (30) days have passed between the date of the individual's signature on this consent form and the date the sterilization was performed.

2. This sterilization was performed less than thirty (30) days but more than 72 hours after the date of the individual's signature on this consent form because of the following circumstances (check applicable box and fill in information requested):

- ☐ Premature delivery
  Individual's expected date of delivery: _____
- ☐ Emergency abdominal surgery (describe circumstances):

(16) _____ (PHYSICIAN) _____ (DATE)

DSHS 13-364 (X) (REV. 06/1997)

SAMPLE B: Amended

Washington State DEPARTMENT OF SOCIAL AND HEALTH SERVICES

CONSENT FORM

NOTE: Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving Federal funds.

• CONSENT TO STERILIZATION •

I have asked for and received information about sterilization from _____.
DOCTOR OR CLINIC

When I first asked for the information, I was told that the decision to be sterilized is completely up to me. I was told that I could decide not to be sterilized. If I decide not to be sterilized, my decision will not affect my right to future care or treatment. I will not lose any help or benefits from programs receiving Federal funds, such as Aid to Families with Dependent Children (AFDC) or Medicaid that I am now getting or for which I may become eligible.

I understand that the sterilization must be considered permanent and not reversible. I have decided that I do not want to become pregnant, bear children, or father children.

I was told about those temporary methods of birth control that are available and could be provided to me which will allow me to bear or father a child in the future. I have rejected these alternatives and chosen to be sterilized.

I understand that I will be sterilized by an operation known as a _____. The discomforts, risks, and benefits associated with the operation have been explained to me. All my questions have been answered to my satisfaction.

I understand that the operation will not be done until at least thirty days after I sign this form. I understand that I can change my mind at any time and that my decision at any time not to be sterilized will not result in the withholding of any benefits or medical services provided by Federally funded programs.

I am at least 21 years of age and was born on _____.
MONTH DAY YEAR

I, (4) Jane Doe, hereby consent of my own free will to be sterilized by (5) Dr. Mary Williams
DOCTOR

by a method called _____. My consent expires 180 days from the date of my signature below.

I also consent to the release of this form and other medical records about the operation to:

- Representatives of the Department of Health and Human Services; or
- Employees of programs or projects funding by that department but only for determining if Federal laws were observed.

I have received a copy of this form.

(7) Jane Doe _____ Date: 10/01/01
SIGNATURE MONTH DAY YEAR

You are requested to supply the following information, but it is not required. **RACE AND ETHNICITY DESIGNATION (PLEASE CHECK):**

- ☐ American Indian or Alaska Native
- ☐ Asian or Pacific Islander
- ☐ Black (not of Hispanic origin)
- ☐ Hispanic
- ☐ White (not of Hispanic origin)

• INTERPRETER'S STATEMENT •

If an interpreter is provided to assist the individual to be sterilized: I have translated the information and advice presented orally to the individual to be sterilized by the person obtaining this consent. I have also read him/her the consent form in _____ language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

_____ _____
INTERPRETER DATE

• STATEMENT OF PERSON OBTAINING CONSENT •

Before _____ signed the consent
NAME OF INDIVIDUAL

form, I explained to him/her the nature of the sterilization operation

STATEMENT OF PERSON OBTAINING CONSENT (CONTINUED):

_____, the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or any benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appears to understand the nature and consequences of the procedure.

_____ Date: _____
SIGNATURE OF PERSON OBTAINING CONSENT

_____
FACILITY

_____
ADDRESS

• PHYSICIAN'S STATEMENT •

Shortly before I performed a sterilization operation upon (13) Jane Doe on
NAME: INDIVIDUAL TO BE STERILIZED

(14) 10/01/01, I explained to him/her the nature of
DATE: STERILIZATION OPERATION

the sterilization operation (15) tubal ligation, the fact that
SPECIFY TYPE OF OPERATION

it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appeared to understand the nature and consequences of the procedure.

(INSTRUCTIONS FOR USE OF ALTERNATIVE FINAL PARAGRAPHS: Use the first paragraph below except in the case of premature delivery or emergency abdominal surgery where the sterilization is performed less than 30 days after the date of the individual's signature on the consent form. In those cases, the second paragraph below must be used. Cross out the paragraph which is not used.)

1. At least thirty (30) days have passed between the date of the individual's signature on this consent form and the date the sterilization was performed.

2. This sterilization was performed less than thirty (30) days but more than 72 hours after the date of the individual's signature on this consent form because of the following circumstances (check applicable box and fill in information requested):

- ☐ Premature delivery
  Individual's expected date of delivery: _____
- ☐ Emergency abdominal surgery (describe circumstances):

(16) Mary Williams MD _____ . 10/01/01
PHYSICIAN DATE

DSHS 13-364 (X) (REV. 06/1997)

NOTICE: ALL BLANKS MUST BE COMPLETED EXCEPT AS INDICATED BELOW

Instructions to the Patient for Completing Consent to Sterilization

1. In the first blank space, write the name of the doctor or clinic giving you the information.
2. In the second blank space, write the name of the operation.
3. In the next blank space, you must write the month, day, and year you were born.
4. Fill in the last five blanks as indicated. Be sure the doctor's name is the name of the physician who will actually perform the operation.
5. You are not required to fill out the "Race and Ethnicity" portion. It is optional.

Interpreter's Statement

This section of the form should be completed ONLY if interpretation into another language is required.

Statement of Person Obtaining Consent

1. Complete the first two blanks with the patient's name and the name of the procedure to be performed.
2. Fill in the last four blanks with your signature, date, name, and address of the facility.

Physician's Statement

1. Complete the first three blanks with the name of the individual to be sterilized, the date of the sterilization operation, and the specific type of operation.
2. Cross out the "alternative final paragraph" if inappropriate.
3. The performing surgeon must sign. The date given below the signature must either be the date of the sterilization or a date which follows the sterilization.
4. The performing surgeon's name must appear in the ***sterilized by*** blank in the CONSENT TO STERILIZATION section.

CONSENT FORM

NOTE: Your decision at any time not to be sterilized will not result in the withdrawal or withholding of any benefits provided by programs or projects receiving Federal funds.

• CONSENT TO STERILIZATION •

I have asked for and received information about sterilization from _____.
DOCTOR OR CLINIC

When I first asked for the information, I was told that the decision to be sterilized is completely up to me. I was told that I could decide not to be sterilized. If I decide not to be sterilized, my decision will not affect my right to future care or treatment. I will not lose any help or benefits from programs receiving Federal funds, such as Aid to Families with Dependent Children (AFDC) or Medicaid that I am now getting or for which I may become eligible.

I understand that the sterilization must be considered permanent and not reversible. I have decided that I do not want to become pregnant, bear children, or father children.

I was told about those temporary methods of birth control that are available and could be provided to me which will allow me to bear or father a child in the future. I have rejected these alternatives and chosen to be sterilized.

I understand that I will be sterilized by an operation known as a _____. The discomforts, risks, and benefits associated with the operation have been explained to me. All my questions have been answered to my satisfaction.

I understand that the operation will not be done until at least thirty days after I sign this form. I understand that I can change my mind at any time and that my decision at any time not to be sterilized will not result in the withholding of any benefits or medical services provided by Federally funded programs.

I am at least 21 years of age and was born on _____.
MONTH DAY YEAR

I, _____, hereby consent of my own free will to be sterilized by _____
DOCTOR

by a method called _____. My consent expires 180 days from the date of my signature below.

I also consent to the release of this form and other medical records about the operation to:

- Representatives of the Department of Health and Human Services; or
- Employees of programs or projects funding by that department but only for determining if Federal laws were observed.

I have received a copy of this form.

_____ Date: _____
SIGNATURE MONTH DAY YEAR

You are requested to supply the following information, but it is not required. **RACE AND ETHNICITY DESIGNATION (PLEASE CHECK):**

- ☐ American Indian or Alaska Native
- ☐ Asian or Pacific Islander
- ☐ Black (not of Hispanic origin)
- ☐ Hispanic
- ☐ White (not of Hispanic origin)

• INTERPRETER'S STATEMENT •

If an interpreter is provided to assist the individual to be sterilized: I have translated the information and advice presented orally to the individual to be sterilized by the person obtaining this consent. I have also read him/her the consent form in _____ language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

_____ _____
INTERPRETER DATE

• STATEMENT OF PERSON OBTAINING CONSENT •

Before _____ signed the consent form, I explained to him/her the nature of the sterilization operation
NAME OF INDIVIDUAL

STATEMENT OF PERSON OBTAINING CONSENT (CONTINUED):

_____, the fact that it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or any benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appears to understand the nature and consequences of the procedure.

_____ Date: _____
SIGNATURE OF PERSON OBTAINING CONSENT

_____
FACILITY

_____
ADDRESS

• PHYSICIAN'S STATEMENT •

Shortly before I performed a sterilization operation upon _____ on
NAME: INDIVIDUAL TO BE STERILIZED

_____, I explained to him/her the nature of
DATE: STERILIZATION OPERATION

the sterilization operation _____, the fact that
SPECIFY TYPE OF OPERATION

it is intended to be a final and irreversible procedure and the discomforts, risks, and benefits associated with it.

I counseled the individual to be sterilized that alternative methods of birth control are available which are temporary. I explained that sterilization is different because it is permanent.

I informed the individual to be sterilized that his/her consent can be withdrawn at any time and that he/she will not lose any health services or benefits provided by Federal funds.

To the best of my knowledge and belief the individual to be sterilized is at least 21 years old and appears mentally competent. He/She knowingly and voluntarily requested to be sterilized and appeared to understand the nature and consequences of the procedure.

(INSTRUCTIONS FOR USE OF ALTERNATIVE FINAL PARAGRAPHS: Use the first paragraph below except in the case of premature delivery or emergency abdominal surgery where the sterilization is performed less than 30 days after the date of the individual's signature on the consent form. In those cases, the second paragraph below must be used. Cross out the paragraph which is not used.)

1. At least thirty (30) days have passed between the date of the individual's signature on this consent form and the date the sterilization was performed.

2. This sterilization was performed less than thirty (30) days but more than 72 hours after the date of the individual's signature on this consent form because of the following circumstances (check applicable box and fill in information requested):

☐ Premature delivery
Individual's expected date of delivery: _____

☐ Emergency abdominal surgery (describe circumstances):

_____ _____
PHYSICIAN DATE

NOTICE: ALL BLANKS MUST BE COMPLETED EXCEPT AS INDICATED BELOW

Instructions to the Patient for Completing Consent to Sterilization

1. In the first blank space, write the name of the doctor or clinic giving you the information.
2. In the second blank space, write the name of the operation.
3. In the next blank space, you must write the month, day, and year you were born.
4. Fill in the last five blanks as indicated. Be sure the doctor's name is the name of the physician who will actually perform the operation.
5. You are not required to fill out the "Race and Ethnicity" portion. It is optional.

Interpreter's Statement

This section of the form should be completed ONLY if interpretation into another language is required.

Statement of Person Obtaining Consent

1. Complete the first two blanks with the patient's name and the name of the procedure to be performed.
2. Fill in the last four blanks with your signature, date, name, and address of the facility.

Physician's Statement

1. Complete the first three blanks with the name of the individual to be sterilized, the date of the sterilization operation, and the specific type of operation.
2. Cross out the "alternative final paragraph" if inappropriate.
3. The performing surgeon must sign. The date given below the signature must either be the date of the sterilization or a date which follows the sterilization.
4. The performing surgeon's name must appear in the ***sterilized by*** blank in the CONSENT TO STERILIZATION section.

Authorization

[Refer to WAC 388-531-0200]

Limitation Extensions and Expedited Prior Authorization numbers do not override the client's eligibility or program limitations. Not all categories of eligibility receive all services. For Example: Therapies are not covered under the Medically Indigent Program (MIP).

MAA's authorization requirements can be met by using the following authorization processes:

1. Written or fax authorization; and
2. Expedited prior authorization (EPA).

These authorization procedures do not apply to out-of-state care. Out-of-state care is not covered (see page A2). Out of state hospital admissions are not covered unless they are emergency admissions.

Limitation Extensions (LE)

What is a Limitation Extension?

Limitation extension (LE) is authorization for cases when a provider can verify that it is medically necessary to provide more units of service than allowed in MAA's billing instructions and Washington Administrative Code (WAC).

How do I get LE authorization?

Some LE authorizations may be obtained by using the Expedited Prior Authorization process. Refer to the EPA section (page I7) for criteria. If the EPA process is not applicable, limitation extensions may be obtained using the written/fax authorization process (see below).

Written/Fax Authorization

What is written/fax authorization?

Written or fax authorization is a paper authorization process available to providers when expedited prior authorization has not been established or the expedited prior authorization criteria is not applicable.

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Which services require written/fax authorization?

All services noted in WAC and billing instructions as needing prior authorization require written or fax authorization.

EXAMPLES of services that require written/fax authorizations are:

Code	Procedure
0009T-0013T	New technology CPT Category III codes
54416-54417	Repair of Penile Implant
61885, 61886, 64573 and 64585	Vagus Nerve Stimulator Insertion, Removal, or Revision
66930 & A9900	Cochlear Implantation and External Replacement Parts
67909	Reduction of Overcorrection of Ptosis
55873	Cryosurgical Ablation of the Prostate
69714-69718	Osseointegrated Implants
78810	Tumor imaging (PET)
88380	Microdissection
95965-95967	Magnetoencephalography (MEG)
G0030-G0047	Myocardial perfusion imaging (PET)
J2020	Linezolid injection
J2940	Somatrem injection
J2941	Somatropin injection
J7340	Metobolic active D/E tissue
S0093	Morphine 500 mg
99221-99223	Inpatient Acute PM&R
	Services that have published EPA criteria ✓ Only when the client's situation does not meet MAA's published EPA criteria, the service is medically necessary/medically appropriate in accordance with established criteria and there is no option to create an EPA number that indicates that the medical appropriateness is documented in the medical record.

How do I obtain written/fax authorization?

Send or fax your request to:

MAA – Division of Medical Management
Attn: Medical Request Coordinator
PO Box 45506
Olympia, WA 98504-5506
FAX: (360) 586-1471

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Fax\Written Request Basic Information

Provider Information

Name _____ Provider #: _____

Phone _____ Fax: _____

Client Information

Name _____ PIC# ____-____-____

ie (AB-122300-SMITH-A)

Service Request Information

Description of service being requested: _____

_____

Procedure Code _____ Number units requested _____ number units used this year _____

Medical Information

Dates of injury or illness _____

Diagnosis code _____ Diagnosis name _____

Place of service _____

How will approving this request change the course of treatment?

_____

_____

Goal of treatment? _____

_____

_____

What is the clinical justification for this request (if not addressed above?)

_____

_____

_____

Please send in any necessary additional documentation with your request to:

Fax: **360-586-1471** or mail to: Medical Request Coordinator
MAA\DMM (previously DHSQS)
PO Box 45506
Olympia, WA 98504-5506

Expedited Prior Authorization (EPA)

Expedited prior authorization does not apply to out-of-state care. Out-of-state care is not covered (see page A2). Out-of-state hospital admissions are not covered unless they are emergency admissions.

What is the EPA process?

MAA's EPA process is designed to eliminate the need for written authorization. The intent is to establish authorization criteria and identify these criteria with specific codes, enabling provider to create an "EPA" number when appropriate.

How is an EPA number created?

The first six digits of the EPA number must be **870000**. The last 3 digits must be the code number of the diagnostic condition, procedure, or service that meets the EPA criteria. Enter the EPA number on the billing form in the authorization number field, or in the *Authorization* or *Comments* field when billing electronically.

Example: The 9-digit authorization number for a brain MRI in a client with suspected brain tumor and new onset of unexplained seizures would be **870000303** (**870000** = first six digits of all expedited prior authorization numbers, **303** = last three digits of an EPA number, and they indicate both the diagnostic condition, procedure, or service and indicate which criteria the case meets).

Note: When the client's situation does not meet published criteria and there is no option to create an EPA number that indicates the medical necessity is documented in the client's medical record, prior authorization is necessary.

If there is an option to create an EPA number based on the medical necessity being documented in the medical record, and medical necessity can not be documented, the service is not covered.

Expedited Prior Authorization Guidelines

A. Diagnoses

Only diagnostic information obtained from the hospital or outpatient chart may be used to meet conditions for EPA. Claims submitted without the appropriate diagnosis, procedure code or service as indicated by the last three digits of the EPA number will be denied.

B. Documentation

The billing provider must have documentation of how expedited criteria was met, and have this information in the client's file available to MAA on request. When care is received in the hospital, the documentation of how the expedited prior authorization criteria were met must also be in the hospital record.

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Which services require EPA?

EPA is required for services noted in MAA's billing instructions and WAC as needing expedited prior authorization.

Examples of services requiring EPA:

- **Hysterectomies** (CPT: 51925, 58550, 58551, 58150-58285, 59525)
  Note: CPT codes 58152 and 58267 must meet guidelines for both hysterectomies and bladder repair.

  Exceptions: MAA does not require EPA for clients 46 years of age and older; **and/or** clients that have been diagnosed with cancer(s) of the female reproductive organs (ICD-9-CM: 179-184.9, 198.6, 198.82, 233.1-233.3, 236.0-236.3, 239.5).

- **Bladder Repairs** (CPT: 51840-51845, 57288-57289, 58152, and 58267)
  Note: Bladder repairs are only allowed for client's with a diagnosis of stress urinary incontinence (ICD-9-CM: 625.6, 788.30-788.39)

- **Reduction Mammoplasties** (CPT: 19318)
  Note: Reduction Mammoplasties are only allowed with ICD-9-CM diagnosis codes 611.1 and 611.9.

- **Mastectomies for Gynecomastia** (CPT: 19140)
  Note: Mastectomies for Gynecomastia are only allowed with ICD-9-CM diagnosis codes 611.1 and 611.9.

- **Visual Exams, Dispensing and Fitting Fees, Frames, Glasses, and Lenses**
  When in excess of MAA establish limitations.

- **Blepharoplasties** (CPT 67901-67908) **and Strabismus Surgery** (CPT 67311-67340)
  Clients 18 years of age and older.

- **Physical and Occupational Therapy**
  When in excess of MAA establish limitations.

- **Outpatient PET Scans** (HCPCS G0125, G0210-G0218, G0220-G0234, G0253-G0254)
  Exception: G0030-G0047 still require written/fax prior authorization.

See next page for more…

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- **Outpatient MRIs and MRAs**

- **Inpatient Medical Admits** (CPT: 99221-99223)
  Note: MAA requires EPA when the diagnosis is in the following chart and the client is seven years of age and older:

Description	ICD-9-CM Diagnosis Code(s)
Abdominal Pain	789-789.09
Back Pain	724-724.6, 724.8-724.9, 846-847.9
Cellulitis	681-681.9, 682, 682.2-682.9
Chronic pancreatitis	577-577.1
Constipation	560.3, 560.39, 564-564.9
Dehydration; Disorders of Electrolyte Imbalance	276-276.6, 276.8-276.9
Headache	784.0
Gastritis/Gastroenteritis	535-535.6, 558-558.9
Migraine Headache	346-346.9
Nausea/vomiting	536.2; 787-787.03
Malaise & Fatigue	780.7-780.79
Painful Respiration	786.52
Related general symptoms	780, 780.4, & 780.9
Respiratory abnormality	786.09

Short stay admissions (less than 24 hours) do not require authorization – use CPT codes 99218-99220 for admits, and 99217 for discharge.

Clients six years of age and younger do not require prior authorization for inpatient medical admits. However, these admits must be medically appropriate in accordance with MAA's established criteria.

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Washington State
Expedited Prior Authorization Criteria Coding List

Code	Criteria
Abdominal Hysterectomy	
CPT: 58150, 58180, 58200, 58210	
101	Diagnosis of **abnormal uterine bleeding** in a client 30 years of age or older with two or more of the following conditions: 1) Profuse uterine bleeding requiring extra protection more than eight days a month for more than 3 months. 2) Documented hct of <30 or hgb <10 3) Documented failure of conservative care i.e.: d&c, laparoscopy, or hormone therapy for at least three months.
102	Diagnosis of **fibroids** for any one of the following indications in a client 30 years of age or older: 1) Myomata associated with uterus greater than 12 weeks or 10cm in size 2) Symptomatic uterine leiomyoma regardless of size with profuse bleeding more than eight days a month for three months requiring extra protection or documented hct <30 or hgb <10 3) Documented rapid growth in size of uterus/myomata by consecutive ultrasounds or exams.
103	Diagnosis of **symptomatic endometriosis** in a client 30 years of age or older with the following: 1) Significant findings per laproscope and 2) Unresponsiveness to 3 months of hormone therapy or cauterization.
104	Diagnosis of **chronic advanced pelvic inflammatory disease** in a client 30 years of age or older with infection refractory to multiple trials of antibiotics

Code	Criteria
Vaginal Hysterectomy	
CPT: 58270-58285, 58550-58551, 58260-58263	
111	Diagnosis of **abnormal uterine bleeding** in a client 30 years of age or older with two or more of the following conditions: 1) Profuse uterine bleeding requiring extra protection more than eight days a month for more than 3 months. 2) Documented hct of less than 30 or hgb less than 10. 3) Documentation of failure of conservative care, i.e.: d&c, laparoscopy, or hormone therapy for at least three months.
112	Diagnosis of **fibroids** for any one of the following indications in a client 30 years of age or older: 1) Myomata associated with uterus greater than 12 weeks or 10cm in size 2) Symptomatic uterine leiomyoma regardless of size with profuse bleeding more than eight days a month for three months requiring extra protection or documented hct less than 30 or hgb less than 10 3) Documented rapid growth in size of uterus/myomata by consecutive ultrasounds or exams.
113	Diagnosis of **symptomatic endometriosis** in a client 30 years of age or older with the following: 1) Significant findings per laproscope; and 2) Unresponsiveness to 3 months of hormone therapy or cauterization.
114	Diagnosis of **chronic advanced pelvic inflammatory disease** in a client 30 years of age or older with infection refractory to multiple trials of antibiotics.

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Code	Criteria

115 Diagnosis of **symptomatic pelvic relaxation** (in a client 30 years of age or older) with a 3rd degree or greater uterine prolapse (at or to vaginal introitus).

Bladder Neck Suspension

CPT: 51840-51845, 57288-57289

201 Diagnosis of **stress urinary incontinence** with all of the following:

1) Documented urinary leakage severe enough to cause the client to be pad dependent; and
2) Surgically sterile or past child bearing years; and
3) Failed conservative treatment with one of the following: bladder training or pharmacologic therapy; and
4) Urodynamics showing loss of ureterovescical angle or physical exam showing weak bladder neck and
5) Recent gynecological exam for coexistent gynecological problems correctable at time of bladder neck surgery.

Hysterectomy With Colopourethrocystopexy

CPT: 51925, 58152, and 58267

221 Diagnosis of **Abnormal uterine bleeding and Stress Urinary Incontinence**-meeting criteria 101 or 111 and 201.

222 Diagnosis of **Fibroids and Stress Urinary Incontinence**-meeting criteria 102 or 112 and 201.

223 Diagnosis of **Symptomatic Endometriosis and Stress Urinary Incontinence**-meeting criteria 103 or 113 and 201.

224 Diagnosis of **Chronic Pelvic Inflammatory Disease and Stress Urinary Incontinence** - meeting criteria 104 and 114.

225 Diagnosis of **Symptomatic Pelvic Relaxation and Stress Urinary Incontinence** - meeting criteria 115 and 201.

226 **Hysterectomy not requiring authorization** and **Stress Urinary Incontinence** meeting criteria 201.

Other Hysterectomies and/or Bladder Repairs With Diagnosis Of 625.6 Or 788.30-788.39

CPT: 58150, 58180, 58200, 58210, 58240, 51840-51845, 57288-57289, 51925, 58152, 58550, 58260-58263, 58267, 58270, 58276, 58280, 58285, and 59525

230 Hysterectomies and/or bladder repairs not meeting expedited criteria, but medically necessary/medically appropriate in accordance with established criteria. Evidence of medical appropriateness must be clearly evidenced by the information in the client's medical record.

Reduction Mammoplasties/ Mastectomy For Gynecomastia

CPT: 19318, 19140

241 Diagnosis for **hypertrophy of the breast** with:

1) Photographs in client's chart, and
2) Documented medical necessity including:
   a) Back, neck, and/or shoulder pain for a minimum of one year, directly attributable to macromastia, and
   b) Conservative treatment not effective; and
3) Abnormally large breasts in relation to body size with shoulder grooves, and
4) Within 20% of ideal body weight, and
5) Verification of minimum removal of 500 grams of tissue from each breast.

242 Diagnosis for **gynecomastia**:

1) Pictures in clients' chart, and
2) Persistent tenderness and pain, and
3) If history of drug or alcohol abuse, must have abstained from drug or alcohol use for no less than one year.

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Code	Criteria

Other Reduction Mammoplasties/ Mastectomy For Gynecomastia With Diagnosis Of 611.1 Or 611.9

250 Reduction mammoplasty or mastectomy, not meeting expedited criteria, but medically necessary/medically appropriate in accordance with established criteria. Evidence of medical appropriateness must be clearly evidenced by the information in the client's medical record.

Brain Magnetic Resonance Imaging (MRI)
CPT: 70544-70546, 70551-70553

301 Suspected diagnosis of **acoustic neuroma** if one of the following:

1) Unilateral sensorineural hearing loss per audiogram, or
2) Decreased discrimination score that is out of proportion to amount of hearing loss per ENT evaluation, or
3) Positive or inconclusive computed tomography with a need for clearer definition, and one of the above.

302 Suspected diagnosis of **pituitary tumor** with any two of the following:

1) Galactorhea
2) Pre menopausal amenorrhea
3) Elevated prolactin level **(females must have negative pregnancy test)**
4) Positive or inconclusive computed tomography and one of the above with a need for clearer definition

303 Suspected diagnosis of **brain tumor** with any one of the following:

1) Unexplained new onset seizure
2) Objective evidence of increased intracranial pressure
3) Positive or inconclusive computed tomography with a need for clearer definition, and one of the above.

304 **Follow up** of **brain tumor** if done at:

1) Three months from the date of last MRI and in the first two years of diagnosis in any of the following cases:

   a) Tumor is currently being treated
   b) Post treatment
   c) With documented changes in tumor size or

2) Six months from the date of last MRI and in the second to fifth years of diagnosis or
3) One year from the date of last MRI in the sixth to tenth year of diagnosis or
4) Symptoms of recurrence in a client that would be treated aggressively

305 Suspected diagnosis of **multiple sclerosis** with three or more of the following objective findings:

1) Progressive weakness or decreased sensation in extremities
2) Difficulty word finding
3) Diplopia
4) Vertigo or vertigo nystagmus
5) Optic neuritis
6) Facial weakness
7) Positive Lhermitte's sign

Note to 305: Only for initial diagnosis, not as a follow-up.

306 Suspected diagnosis of **toxoplasmosis versus lymphoma versus progressive multifocal leukoencephalopathy** in an HIV positive client with:

1) Central nervous system changes **in a client that would be aggressively treated**.
2) Positive or inconclusive computed tomography with a need for clearer definition **in a client that would be aggressively treated**

307 Diagnosis of **breast cancer** for staging as part of PSCT or BMT protocol.

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Code	Criteria
308	Suspected diagnosis of **seizure disorder** with unexplained onset of seizures.
309	Diagnostic evidence of **refractory seizures**, as part of preoperative work up.

Lumbar MRI
CPT: 72148, 72149, 72158

Code	Criteria
311	Suspected diagnosis of **Herniated Nucleus Pulposus or Tumor** in a surgical candidate with two or more of the following objective findings: 1) New onset of bowel or bladder incontinence not related to known diagnosis; 2) Asymetric or bilaterally absent tendon reflexes in the lower extremity (patella/achilles); 3) Visible atrophy of key muscle groups of lower extremities; 4) Decrease sensation in a dermatomal pattern not previously attributed to another diagnosis; 5) Significant weakness of key muscle groups of either or both lower extremity; or 6) Positive study indicating definitive nerve root compression.
312	Suspected diagnosis of **tumor or abscess** with a bone scan or x-ray suspicious for same.

Cervical MRI
CPT: 72141, 72142, 72156

Code	Criteria
321	Suspected **herniated nucleus pulposa or tumor** with two or more of the following objective findings: 1) Decreased tricep, bicep, or brachial radialis reflex; 2) Decrease sensation in upper extremities in a dermatomal distribution; 3) Decreased muscle strength of upper extremities and limitation of movement; 4) Upper extremity muscle atrophy; 5) Hyperreflexia; 6) Positive babinski in non-infant; or 7) Studies showing definitive nerve root compression, and ruling out carpal tunnel syndrome.

Note to 321: Carpal tunnel syndrome must be ruled out prior to cervical MRI when symptoms indicate possible carpal tunnel syndrome.

Code	Criteria
322	Suspected diagnosis of **tumor or abscess** with a bone scan or xray suspicious for same.

Thoracic MRI
CPT: 72146, 72147, 72157

Code	Criteria
331	Suspected diagnosis of **tumor or abscess**: 1) With a bone scan or x-ray suspicious for same, or 2) Evidence of myelopathy, such as hyperreflexia, positive babinski in a non-infant, ataxia, etc.

Pelvic MRI
CPT: 72195-72197

Code	Criteria
341	Suspected diagnosis of **avascular necrosis** with: 1) Pain in the hip radiating to the knee and 2) A history of one of the following: a) Previous trauma b) Intracapsular fractures c) Alcoholism d) High dose steroid use e) Air embolism from diving, or f) Hemoglobinopathies
342	Suspected diagnosis of **tumor or abscess** with a bone scan or x-ray suspicious for same.

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Code	Criteria	Code	Criteria

Knee MRI
CPT: 73721

351 Suspected **anterior cruciate ligament tear** when xray is negative for bony abnormalities, and the intent is to treat aggressively with at least three of the following:

1) History of hyperextension injury with immediate swelling, and complaints of giving way or buckling, or
2) Four or more weeks of conservative care, or
3) Current exam with the following findings: hemarthrosis and\or positive Lockman's and\or positive pivot shift, or
4) MRI is necessary to choose treatment option(s).

352 Suspected **posterior cruciate ligament tear** when xray is negative for bony abnormalities, and the intent is to treat aggressively with at least two of the following:

1) History of direct blow to anterior tibia or forced hyperflexion, or
2) Four or more weeks of conservative care, or
3) Current clinical with one or more positive findings: positive drawers, test positive tibial sag.

353 Suspected **meniscal tear** when xray is negative for bony abnormalities, and the intent is to treat aggressively with at least two of the following:

1) History of twisting injury with subsequent catching, locking, and swelling, or
2) Four or more weeks of conservative care, or
3) One or more of the following exam findings: joint line tenderness, positive McMurrays.

Upper Extremity MRI
CPT: 73218-73223

361 Suspected diagnosis of **tumor or abscess** with a bone scan or x-ray suspicious for same.

Lower Extremity MRI
CPT: 73718-73723

371 Suspected diagnosis of **tumor or abscess** with a bone scan or x-ray suspicious for same.

Abdominal MRI
CPT: 74181-74183

381 Suspected diagnosis of **tumor or abscess** with both of the following:

1) Ultrasound positive for mass on the kidney, pancreas, or liver, and
2) Objective evidence of poor renal function.

Other MRI/MRA
All other covered MRI/MRA

390 MRIs/MRAs not meeting expedited criteria, but medically necessary/medically appropriate in accordance with established criteria. Evidence of medical appropriateness must be clearly evidenced by the information in the client's medical record.

Note: If billing for more than one MRI/MRA for the same reason, use criteria code 390.

Note: If billing for more than one MRI/MRA for different reasons, build two separate expedited prior authorization numbers.

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Code	Criteria	Code	Criteria

PET Scan
HCPCS code: G0125
DX: 235.7, 793.1

382 PET imaging regional or whole body when the client has a pulmonary nodule.

PET Scans
HCPCS codes: G0210, G0213, G0216, G0220

383 PET Imaging whole body to diagnose; lung cancer (non small cell), colorectal cancer, melanoma, or lymphoma **when at least one of the following is true:**

1) The PET results may assist in avoiding an invasive diagnostic procedure; or
2) The PET results may assist in determining the optimal anatomical location to perform an invasive diagnostic procedure.

PET Scans
HCPCS codes: G0211, G0214, G0217, G0221
DX: 162.0-162.9, 153.0-154.8, 172.0-172.9, 190.9, 200.00-202.28

384 PET Imaging whole body for initial staging of; lung cancer (non-small cell), colorectal cancer, melanoma, or lymphoma **when one of the following is true:**

1) The stage of the cancer is unclear after completion of a standard diagnostic work-up that includes conventional imaging (CT, MRI, or ultrasound); or
2) The use of the PET could potentially replace one or more conventional imaging study when it is expected that conventional study information is insufficient for the clinical management of the patient; and
3) The clinical management of the client would differ depending on the stage of the cancer identified.

PET Scans
HCPCS codes: G0212, G0215, G0218, G0222
DX: 162.0-162.9, 153.0-154.8, 172.0-172.9, 190.9, 200.00-202.28

385 PET Imaging whole body for re-staging of; lung cancer (non-small cell), colorectal cancer, melanoma, or lymphoma after completion of treatment for **one of the following reasons:**

1) To detect residual disease; or
2) To detect suspected recurrence; or
3) To determine the extent of known recurrence.

PET Scans
HCPCS codes: G0223, G0226

386 PET Imaging whole body or regional to diagnose; head and neck cancer (excluding thyroid and CNS cancers), or esophageal cancer when **at least one of the following is true:**

1) The PET results may assist in avoiding an invasive diagnostic procedure; or
2) The PET results may assist in determining the optimal anatomical location to perform an invasive diagnostic procedure.

PET Scans
HCPCS codes: G0224, G0227
DX: 160-161.9, 170, 170.1, 171.0

387 PET Imaging whole body or regional for initial staging of; head and neck cancer (excluding thyroid and CNS cancers), or esophageal cancer when **at least one of the following is true:**

1) The stage of the cancer is unclear after completion of a standard diagnostic work-up that includes conventional imaging (CT, MRI, or ultrasound); or
2) The use of the PET could potentially replace one or more conventional imaging study when it is expected that conventional study information is insufficient for the clinical management of the patient and
3) The clinical management of the client would differ depending on the stage of the cancer identified

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Code	Criteria	Code	Criteria

PET Scans
HCPCS codes: G0225, G0228
DX: 160-161.9, 170, 170.1, 171.0

388 PET Imaging whole body or regional for re-staging of; head and neck cancer (excluding thyroid and CNS cancers), or esophageal cancer after the completion of treatment for **one of the following**:

1) To detect residual disease;
2) To detect suspected recurrence; or
3) To determine the extent of known recurrence.

PET Scans
HCPCS codes: G0229
DX: 345.11, 345.41, 345.54

389 PET Imaging; metabolic brain imaging for pre-surgical evaluation of refractory seizures.

PET Scans
HCPCS codes: G0230
DX: 410.00-414.9

391 PET Imaging; metabolic assessment for myocardial viability when a SPECT study is inconclusive.

PET Scans
HCPCS codes: G0231, G0232, G0233
DX: 153.0-154.8, 200.00-202.28, 202.80-202.88, 172.0-172.9

392 PET WhBD, gamma cameras only, for one of the following reasons:

1) Recurrence of colorectal or colorectal metastatic cancer;
2) Recurrence of melanoma or metastatic melanoma; or
3) Staging and characterization of lymphoma.

PET Scans
HCPCS codes: G0234
DX: 162.0-162.9

393 PET regional or whole body, gamma camera only, when the study is for **one of the following:**

1) A solitary pulmonary nodule following CT; or
2) Initial staging of pathologically diagnosed non-small cell lung cancer.

PET Scans
HCPCS codes: G0253, G0254
DX: 174.0, 175.9

394 PET imaging, for breast cancer, full and partial ring, when the study is for <u>one</u> of the following:

1) Staging/restaging of local regional recurrence or distant metastases, i.e., staging/restaging after, or prior to, course of treatment; or
2) Evaluation of response to treatment, performed during course of treatment.

Medical Admits
CPT: 99221-99223

401 Diagnosis of **<u>Cellulitis</u>** (681-681.9, 682, 682.2-682.9) in a client that received greater than 30 hours of IV antibiotics during the hospitalization and any <u>one</u> of the following:

1) Incision & drainage during admit, <u>or</u>
2) White Count greater than10 on admit, <u>or</u>
3) Persistence or progression of fever, lymphodenopathy, edema, or erythema after a minimum of 24 hours of outpatient antibiotic treatment.

402 Diagnosis of **<u>Abdominal Pain</u>** (789-789.09) in a client with a nasogastric tube and Intravenous fluid administration, during the hospital stay, for greater than 30 hours.

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Code	Criteria
403	Diagnosis of **Dehydration or Electrolyte Imbalances** (276-276.6, 276.8-276.9) in a client with abnormal lab values requiring intravenous electrolyte supplementation, during the hospital stay, for greater than 30 hours.
404	Diagnosis of **Nausea/Vomiting** (536.2; 787-787.03) in a client: 1) With a nasogastric tube and Intravenous fluid administration, during the hospital stay, for greater than 30 hours, or 2) That is unable to tolerate PO and is treated with Intravenous medications, during the hospital stay, for greater than 30 hours
405	Diagnosis of **Gastritis** (535-535.6, 558-558.9) in a client: 1) With a Nasogastric tube and Intravenous fluid administration, during the hospital stay, for greater than 30 hours, or 2) That is unable to tolerate PO and is treated with Intravenous medications, during the hospital stay, for greater than 30 hours.
406	Diagnosis of **headaches** (784.0**,** 346-346.9) in a client receiving Intravenous DHE, during the hospital stay, for greater than 30 hours.
407	Diagnosis of **chronic pancreatitis** (577, 577.1) in a client: 1) With a nasogastric tube and intravenous fluid administration, during the hospital stay, for greater than 30 hours; or 2) That is unable to tolerate PO and is treated with intravenous medications, during the hospital stay, for greater than 30 hours.
408	Diagnosis of **back pain** (724-724.5, 724.8-724.9, 846-847.9) in a client: 1) Failed outpatient treatment; and 2) Continued use of IV pain medication, during the hospital stay, greater than 30 hours; or 3) Continued inability to ambulate after physical therapy intervention greater than 30 hours.
409	Diagnosis of **constipation** (560.3, 560.39, 564-564.9) in a client: 1) Failed outpatient treatment; or 2) Recent abdominal surgery; and 3) Extensive inpatient treatment, during the hospital stay, greater than 30 hours.

Other Inpatient Medical Admits

420	Inpatient medical admits requiring expedited prior authorization and not meeting expedited criteria, but medically necessary/medically appropriate in accordance with established criteria, for continued stay over 24 hours. Medical appropriateness must be clearly evident by the documentation in the client's medical record.

Visual Exams

CPT: 92014-92015

610	**Eye Exam** within two (2) years of last exam when no medical indication exists and **both** of the following are documented in the client's record: 1) Glasses or contacts are broken or lost; **and** 2) Last exam was 18 months ago or longer.

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Code	Criteria	Code	Criteria

Dispensing/Fitting Fees For Glasses
CPT: 92340-92342

615 **Glasses (both frames and lenses)** within two (2) years of last dispense may be replaced when glasses are broken or lost and **all** of the following are documented in the client's record:

1) Copy of current prescription (must not be older than 17 months); **and**
2) Date of last dispense; **and**
3) Both frames and lenses are broken or lost.

Dispensing/Fitting Fees For Frames Only
CPT: 92340

618 **Frames Only** within two (2) years of last dispense may be replaced when frames only are broken, and all of the following are documented in the client's record:

1) No longer covered under the manufacturer's one (1) year warranty; **and**
2) Copy of current prescription demonstrating the need for prescription eye wear; **and**
3) Documentation of frame damage.

619 **Durable Frames (American Athletic or Invincible)** when **one** of the following is documented in the client's record:

1) Client has a seizure disorder that results in frequent falls; **or**
2) Client has a history of two or more incidences of broken frames in the past 12 months as a result of a medical condition.

620 **Flexible Frame (Daryl or Scott)** when **one** of the following is documented in the client's record:

1) Client has a seizure disorder that results in frequent falls; **or**
2) Client has a history of two or more incidences of broken frames in the past 12 months as a result of a medical condition.

Dispensing/Fitting Fees For Lenses Only
CPT: 92341, 94342

623 **Lenses Only** within two (2) years of last dispense when the lenses only are lost or broken and **all** of the following are documented in the client's record:

1) Copy of current prescription (prescription must not be older than 17 months); **and**
2) Date of last dispense; **and**
3) Documentation of lens damage or loss.

624 **Lenses Only** within two (2) years of last dispense, for refractive changes (provider error is the responsibility of the provider to warranty their work and replace the lenses at no charge) when **all** of the following are documented in the client's record:

1) Copy of current prescription (prescription must not be older than 17 months); **and**
2) Date of last dispense; **and**
3) The current exam shows a refractive change of .75 diopters or more; **and**
4) The client has headaches, blurred vision, difficulty with school or work and it has been diagnosed by a physician as caused from the inability to see adequately; **and**
5) The client does not have a medical condition that is known to cause temporary visual acuity changes (e.g. diabetes, pregnancy).

Note: In conditions other than pregnancy, if vision has been stable for 3 months and medical condition is stable, lenses are allowed when (1)-(4) previously listed are true.

625 **High Index Lenses** when **one** of the following is documented in the client's record:

1) Spherical correction is greater than, or equal to, +\- 8 diopters; **or**
2) Cylinder correction is greater than, or equal, to +\- 3 diopters.

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Code	Criteria	Code	Criteria

626 **Executive bifocals and trifocals** for clients 11 years of age and older, with a diagnosis of accommodative esotropia or strabismus documented in the client's record.

Dispensing|Fitting Fees For Contacts

STATE-UNIQUE CODES: 9275M, 9276M, or 9277M

627 **Contacts (client must meet criteria found in MAA's Vision Care Billing Instructions for contacts)** within one (1) year of last dispense may be replaced when contacts are broken or lost and **both** of the following are documented in the client's record:

1) Copy of current prescription (must not be older than 17 months) **and**
2) Date of last dispense documented.

Blepharoplasties

CPT: 67901-67908

630 Blepharoplasty for noncosmetic reasons when both of the following are true:

1) The excess upper eyelid skin impairs the vision by blocking the superior visual field; and
2) On a central visual field test, the vision is blocked to within 10 degrees of central fixation.

Strabismus Surgery

CPT: 67311-67340

631 Strabismus surgery for clients 18 years of age and older when both of the following are true:

1) The client has double vision; and
2) It is not done for cosmetic reasons.

Physical Therapy

CPT: 97010-97150, 97520-97537,97750

640 **An additional 48 Physical Therapy program units** when the client has already used the allowed program units for the current year and has **one** of the following surgeries or injuries:

1) Lower Extremity Joint Surgery;
2) CVA not requiring acute inpatient rehabilitation; or
3) Spine surgery.

641 **An additional 96 Physical Therapy program units** when the client has already used the allowed program units for the current year and has recently completed an acute inpatient rehabilitation stay.

Occupational Therapy

CPT: 97110, 97112, 97520, 97530, 97532, 97533, 97535, 97537

644 **An additional 12 Occupational Therapy** visits when the client has used the allowed visits for the current year and has **one** of the following:

1) Hand\Upper Extremity Joint Surgery; or
2) CVA not requiring acute inpatient rehabilitation.

645 **An additional 24 Occupational Therapy** visits when the client has already used the allowed visits for the current year and has recently completed an acute inpatient rehabilitation stay.

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MAA-Approved Centers of Excellence (COE)

[Refer to WAC 388-531-0650 and WAC 388-531-0700]

The following services must be performed in an MAA-approved Center of Excellence (COE) and **do not require authorizations**. See next page for a list of COEs.

- ✓ Organ/bone marrow/peripheral stem cell transplants;
- ✓ Inpatient Chronic Pain Management (0088M-0099M);
- ✓ Sleep studies (CPT codes 95805, 95807-95811) only allowed for ICD-9 Diagnosis 780.51, 780.53, 780.57, or 347;
- ✓ Weight Loss Program.

Note: When billing hard copy, note the COE in Box 32 on the HCFA-1500 claim form or in the *Comments* field when billing electronically.

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MAA-Approved Organ Transplant Centers of Excellence (COE)

APPROVED TRANSPLANT HOSPITALS	ORGAN(S)	CPT CODE
Children's Hospital & Medical Center/Seattle	• Bone Marrow (BMT) (autologous & allogenic) • Peripheral Stem Cell Transplant (PSC-T) • Heart • Liver • Kidney	• 38230, 38240-38241 • 38231, 38240-38241 • 33945 • 47135-47136 • 50360, 50365, 50380
Dorenbacher Children's Hospital/Portland NW Marrow Transplant Program (PSC-T only)	• BMT • PSC-T	• 38230, 38240-38241 • 38231, 38240-38241
Fred Hutchinson Cancer Research Center/Seattle	• BMT • PSC-T	• 38230, 38240-38241 • 38231, 38240-38241
Good Samaritan Hospital Medical/Puyallup	• PSC-T	• 38231, 38240-38241
Inland NW Blood Center	• PSC-T	• 38231, 38240-38241
Legacy Good Samaritan Hospital/Portland (Northwest Marrow Transplant Program)	• BMT • PSC-T	• 38230, 38240-38241 • 38231, 38240-38241
Mary Bridge Children's Hospital/Seattle	• PSC-T (autologous only)	• 38231, 38241
Oregon Health Sciences University (OHSU)/Portland	• Heart • Liver • Kidney • Pancreas	• 33945 • 47135-47136 • 50360, 50365, 50380 • 48160, 48554
Providence St. Peter Hospital/Olympia	• PSC-T	• 38231, 38240-38241
Sacred Heart Medical Center/Spokane	• Kidney • Heart • Heart/Lung(s) • Lung	• 50360, 50365, 50380 • 33945 • 33935 • 32851-32854
Seattle Cancer Care Alliance/Seattle	• BMT • PSC-T	• 38230, 38240-38241 • 38231, 38240-38241
St. Joseph's Hospital/Tacoma	• BMT (autologous only) • PSC-T	• 38230, 38241 • 38231, 38240-38241

[*Refer to WAC 388-531-1750 and WAC 388-550-2000]

MAA-Approved Organ Transplant Centers of Excellence (COE) (Cont.)

APPROVED TRANSPLANT HOSPITALS	ORGAN(S)	CPT CODE
Swedish Medical Center/Seattle	• Kidney • PSC-T	• 50360, 50365, 50380 • 38231, 38240-38241
University of Washington Medical Center/Seattle	• BMT • PSC-T • Heart • Heart/Lung(s) • Lung • Kidney • Liver • Pancreas	• 38230, 38240-38241 • 38231, 38240-38241 • 33945 • 33935 • 32851-32854 • 50360, 50365, 50380 • 47135-47136 • 48160, 48554
Virginia Mason Hospital/Seattle	• Kidney • Pancreas • BMT • PSC-T	• 50360, 50365, 50380 • 48160, 48554 • 38230, 38240-38241 • 38231, 38240-38241

[*Refer to WAC 388-531-1750 and WAC 388-550-2000]

MAA-Approved Sleep Centers

MAA Approved Sleep Centers	Location
ARMC Sleep Apnea Laboratory	Auburn Regional Medical Center: Auburn, WA
Columbia Sleep Laboratory	Richland, WA
Diagnostic Sleep Disorder Program Center	Children's Hospital and Medical: Seattle, WA
Good Samaritan Hospital ***(Effective for dates of service on and after 10/1/02 - no longer an MAA-Approved Sleep Center.)***	Puyallup, WA
Highline Sleep Disorders Center	Highline Community Hospital: Seatttle, WA
Kathryn Severyns Dement Sleep Disorders Center	St. Mary's Medical Center: Walla Walla, WA
Multi Care Sleep Disorders Center	Tacoma General Hospital/Mary Bridge Children's Hospital: Tacoma, WA
Providence Everett Medical Center Sleep Disorder Center	Providence General Medical Center: Everett, WA
Richland Sleep Lab ***(Effective for dates of service on and after 10/1/02 - no longer an MAA-Approved Sleep Center.)***	Richland, WA
Sleep Center at Valley	Valley Medical Center: Renton, WA
Sleep Center for Southwest Washington	Providence St. Peter: Olympia, WA
Sleep Disorder Center of Central Washington	Providence Medical Center: Yakima, WA
Sleep Disorder Center Virginia Mason Hospital	Virginia Mason Hospital: Seattle, WA
Sleep Disorders Center Legacy Good Samaritan Hospital and Medical Center	Legacy Good Samaritan Hospital and Medical Center: Portland, OR
Sleep Related Breathing Disorders Laboratory St Clare Hospital	St. Clare Hospital: Tacoma, WA
Sleep Studies Laboratory Mid Columbia Medical Center	Mid Columbia Medical Center: Dalles, OR
St. Joseph Regional Medical Center Sleep Lab	St. Joseph Regional Medical Center: Lewiston, ID
Swedish Sleep Medicine Institute	Providence Swedish **or** Swedish First Hill: Seattle, WA
The Sleep Institute of Spokane	Sacred Heart Medical Center **or** 104 W. 5th Suite 400 W: Spokane, WA
University of Washington Sleep Disorders Center\Harborview Medical Center	Harborview Medical Center: Seattle, WA

[Refer to WAC 388-531-1500]

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Physicians must:

- Use CPT procedure codes 95805, 95807-95811 for sleep study services.
- Enter the location of the approved sleep center where the sleep study/ polysomnogram or multiple sleep latency testing was performed. (Refer to previous page for appropriate location of MAA-approved sleep center.)
- When billing electronically, enter the information into the *Comments* field. If you are billing hard copy, enter the information in field 32 on the HCFA-1500 claim form.
- All sleep studies are limited to Obstructive Sleep Apnea, ICD-9-CM diagnosis codes **780.51, 780.53, 780.57**; or Narcolepsy **347**.

MAA-Approved Inpatient Pain Clinics

MAA-Approved Inpatient Pain Clinic
St. Joseph Hospital & Health Care Center, Tacoma

MAA-Approved Weight Loss Program

MAA-Approved Weight Loss Program
MAA encourages any providers who have structured weight loss programs and would like to be included as an MAA approved facility [refer to WAC 388-531-1600] to send their program criteria and credentials to: MAA ATTN: Dr. Joan Baumgartner PO Box 45500 Olympia, WA 98504-5500

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Site of Service (SOS) Payment Differential

How are fees established for the professional services performed in the facility and non-facility settings?

Based on the RBRVS methodology, MAA's fee schedule amounts are established using three relative value unit (RVU) components (work, practice expense and malpractice expense). MAA uses the two levels of practice expense to determine the fee schedule amounts for reimbursing professional services. This may result in two RBRVS maximum allowable fees for a procedure code. These are:

- **Facility setting maximum allowable fees (FS MAF) -** Paid when the provider performs the services in a facility setting and the cost of the resources are the responsibility of the facility; or

- **Non-facility setting maximum allowable fees (NFS MAF) -** Paid for services when the provider performing the service typically bears the cost of resources, such as labor, medical supplies, and medical equipment associated with the service performed.

Some services, by nature of their description, are performed only in certain settings and have only one maximum allowable fee per code. Examples of these services include many:

- Evaluation and management codes, which specify the site of service within the description of the procedure codes; and
- Major surgical procedures that are generally only performed in hospital settings.

How will the site of service payment policy affect provider reimbursements?

Providers billing professional services will be reimbursed at one of two maximum allowable fees, depending on where the service is performed.

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Does MAA reimburse providers differently for services performed in facility and non-facility settings?

When a provider performs a professional service in a facility setting, MAA makes two payments, one to the performing provider and another to the facility. The reimbursement to the facility includes the payment for resources. The NFS MAF includes the allowance for resources.

The professional FS MAF excludes the allowance for resources that are included in the payment to the facility. Reimbursing the lower FS MAF to performing providers when the facility is also reimbursed eliminates duplicate payment for resources.

When are professional services reimbursed at the Facility Setting Maximum Allowable Fee?

Providers are reimbursed at the FS MAF when MAA also makes a payment to a facility. MAA will follow CMS's determination for using the FS MAF, except when this is not possible due to system limitations.

Professional services billed with the following place of service codes will be reimbursed at the FS MAF:

MAA Place of Service Code	CMS Place of Service Description
1	Inpatient Hospital
1	Inpatient Psychiatric Facility
1	Comprehensive Inpatient Rehabilitation Facility
2	Outpatient Hospital
2	Hospice
2	Psychiatric Facility Partial Hospitalization
2	Comprehensive Outpatient Rehabilitation Facility
2	End-Stage Renal Disease Treatment Facility
5	Emergency Room- Hospital
6	Ambulatory Surgery Center
7	Intermediate Care Facility/Mentally Retarded
8	Skilled Nursing Facility
8	Nursing Facility

Due to Medicare consolidated billing requirements, MAA does not make a separate payment to providers who perform certain services in hospitals and skilled nursing facilities. The facilities will be reimbursed at the NFS MAF. Some therapies, such as physical therapy services (Current Procedural Terminology (CPT) 97001-97799), will always be paid at the NFS MAF.

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When are professional services reimbursed at the Non-Facility Setting Maximum Allowable Fee?

The NFS MAF is paid when MAA does not make a separate payment to a facility. Services performed in a provider's office, client's home, facility or institution (listed in the following table) will be reimbursed at the NFS MAF. MAA will follow CMS's determination for using the NFS MAF, except when this is not possible due to system limitations.

Professional services billed with the following place of service codes will be reimbursed at the NFS MAF:

MAA Place of Service Code	CMS Place of Service Description
3	Office *
3	Federally Qualified Health Center
3	Community Mental Health Center
3	State or Local Public Health Clinic
3	Rural Health Clinic
3	Independent Laboratory
4	Client's Private Residence
9	Birthing Center
9	Military Treatment Facility
9	Custodial Care Facility
9	Adult Family Homes
9	Boarding Homes (e.g., Assisted Living facility, Enhanced Adult residential care facility, adult residential care facility)
9	Residential Substance Abuse Treatment Facility
9	Psychiatric Residential Treatment Center
9	Other Unlisted Facility

*Includes Neurodevelomental Centers

What professional services have an SOS payment differential?

Most of the services with an SOS payment differential are from the surgery, medicine and evaluation and management ranges of CPT. However, some HCPCS, CPT radiology, pathology and laboratory codes also have an SOS payment differential.

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Fee Schedule Changes

- There are several new changes to the format of the fee schedule this year:

  ✓ Maximum allowable fees for all codes, including CPT codes, select HCPCS codes, state-unique codes, and injectable drug codes are now **listed in one fee schedule**, beginning on page J5. This enables providers to use this section as a quick reference for MAA's maximum allowable fees.

  ✓ Beginning on page J5, MAA has identified procedure codes that may require some type of prior authorization. However, this list may not be all-inclusive. Prior authorization, limitations, or requirements detailed in MAA's billing instructions, Washington Administrative Codes (WAC) remain applicable.

  ✓ Beginning on page J124, full descriptions and limitations are listed for all state-unique procedure codes. In addition, select HCPCS codes are listed here if they contain special limitations, requirements, or instructions. However, this list may not be all-inclusive. Limitations or requirements detailed in MAA's billing instructions or WAC remain applicable.

  ✓ Section L contains rate setting methodology and unit rounding instructions for injection drug codes. However, all of the fees have been moved to the complete schedule of maximum allowable fees in Section J.

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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
00100		5 Base	5 Base		000	N
00102		6 Base	6 Base		000	N
00103		5 Base	5 Base		000	N
00104		4 Base	4 Base		000	N
00120		5 Base	5 Base		000	N
00124		4 Base	4 Base		000	N
00126		4 Base	4 Base		000	N
00140		5 Base	5 Base		000	N
00142		4 Base	4 Base		000	N
00144		6 Base	6 Base		000	N
00145		6 Base	6 Base		000	N
00147		4 Base	4 Base		000	N
00148		4 Base	4 Base		000	N
00160		5 Base	5 Base		000	N
00162		7 Base	7 Base		000	N
00164		4 Base	4 Base		000	N
00170		5 Base	5 Base		000	N
00172		6 Base	6 Base		000	N
00174		6 Base	6 Base		000	N
00176		7 Base	7 Base		000	N
00190		5 Base	5 Base		000	N
00192		7 Base	7 Base		000	N
00210		11 Base	11 Base		000	N
00212		5 Base	5 Base		000	N
00214		9 Base	9 Base		000	N
00215		9 Base	9 Base		000	N
00216		15 Base	15 Base		000	N
00218		13 Base	13 Base		000	N
00220		10 Base	10 Base		000	N
00222		6 Base	6 Base		000	N
00300		5 Base	5 Base		000	N
00320		6 Base	6 Base		000	N
00322		3 Base	3 Base		000	N
00350		10 Base	10 Base		000	N
00352		5 Base	5 Base		000	N
00400		3 Base	3 Base		000	N
00402		5 Base	5 Base		000	N
00404		5 Base	5 Base		000	N
00406		13 Base	13 Base		000	N
00410		4 Base	4 Base		000	N
00450		5 Base	5 Base		000	N
00452		6 Base	6 Base		000	N
00454		3 Base	3 Base		000	N
00470		6 Base	6 Base		000	N
00472		10 Base	10 Base		000	N
00474		13 Base	13 Base		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
00500		15 Base	15 Base		000	N
00520		6 Base	6 Base		000	N
00522		4 Base	4 Base		000	N
00524		4 Base	4 Base		000	N
00528		8 Base	8 Base		000	N
00530		4 Base	4 Base		000	N
00532		4 Base	4 Base		000	N
00534		7 Base	7 Base		000	N
00537		10 Base	10 Base		000	N
00540		13 Base	13 Base		000	N
00542		15 Base	15 Base		000	N
00544		15 Base	15 Base		000	N
00546		15 Base	15 Base		000	N
00548		17 Base	17 Base		000	N
00550		10 Base	10 Base		000	N
00560		15 Base	15 Base		000	N
00562		20 Base	20 Base		000	N
00563		25 Base	25 Base		000	N
00566		25 Base	25 Base		000	N
00580		20 Base	20 Base		000	N
00600		10 Base	10 Base		000	N
00604		13 Base	13 Base		000	N
00620		10 Base	10 Base		000	N
00622		13 Base	13 Base		000	N
00630		8 Base	8 Base		000	N
00632		7 Base	7 Base		000	N
00634		10 Base	10 Base		000	N
00635		4 Base	4 Base		000	N
00670		13 Base	13 Base		000	N
00700		4 Base	4 Base		000	N
00702		4 Base	4 Base		000	N
00730		5 Base	5 Base		000	N
00740		5 Base	5 Base		000	N
00750		4 Base	4 Base		000	N
00752		6 Base	6 Base		000	N
00754		7 Base	7 Base		000	N
00756		7 Base	7 Base		000	N
00770		15 Base	15 Base		000	N
00790		7 Base	7 Base		000	N
00792		13 Base	13 Base		000	N
00794		8 Base	8 Base		000	N
00796		30 Base	30 Base		000	N
00797		9 Base	9 Base		000	N
00800		4 Base	4 Base		000	N
00802		5 Base	5 Base		000	N
00810		5 Base	5 Base		000	N

- Not Covered
A.C. – Acquisition Cost
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* - PA may be required

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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
00820		5 Base	5 Base		000	N
00830		4 Base	4 Base		000	N
00832		6 Base	6 Base		000	N
00840		6 Base	6 Base		000	N
00842		4 Base	4 Base		000	N
00844		7 Base	7 Base		000	N
00846		8 Base	8 Base		000	N
00848		8 Base	8 Base		000	N
00851		6 Base	6 Base		000	N
00860		6 Base	6 Base		000	N
00862		7 Base	7 Base		000	N
00864		8 Base	8 Base		000	N
00865		7 Base	7 Base		000	N
00866		10 Base	10 Base		000	N
00868		10 Base	10 Base		000	N
00869		3 Base	3 Base		000	N
00870		5 Base	5 Base		000	N
00872		7 Base	7 Base		000	N
00873		5 Base	5 Base		000	N
00880		15 Base	15 Base		000	N
00882		10 Base	10 Base		000	N
00902		5 Base	5 Base		000	N
00904		7 Base	7 Base		000	N
00906		4 Base	4 Base		000	N
00908		6 Base	6 Base		000	N
00910		3 Base	3 Base		000	N
00912		5 Base	5 Base		000	N
00914		5 Base	5 Base		000	N
00916		5 Base	5 Base		000	N
00918		5 Base	5 Base		000	N
00920		3 Base	3 Base		000	N
00922		6 Base	6 Base		000	N
00924		4 Base	4 Base		000	N
00926		4 Base	4 Base		000	N
00928		6 Base	6 Base		000	N
00930		4 Base	4 Base		000	N
00932		4 Base	4 Base		000	N
00934		6 Base	6 Base		000	N
00936		8 Base	8 Base		000	N
00938		4 Base	4 Base		000	N
00940		3 Base	3 Base		000	N
00942		4 Base	4 Base		000	N
00944		6 Base	6 Base		000	N
00948		4 Base	4 Base		000	N
00950		5 Base	5 Base		000	N
00952		4 Base	4 Base		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
01112		5 Base	5 Base		000	N
01120		6 Base	6 Base		000	N
01130		3 Base	3 Base		000	N
01140		15 Base	15 Base		000	N
01150		10 Base	10 Base		000	N
01160		4 Base	4 Base		000	N
01170		8 Base	8 Base		000	N
01180		3 Base	3 Base		000	N
01190		4 Base	4 Base		000	N
01200		4 Base	4 Base		000	N
01202		4 Base	4 Base		000	N
01210		6 Base	6 Base		000	N
01212		10 Base	10 Base		000	N
01214		8 Base	8 Base		000	N
01215		10 Base	10 Base		000	N
01220		4 Base	4 Base		000	N
01230		6 Base	6 Base		000	N
01232		5 Base	5 Base		000	N
01234		8 Base	8 Base		000	N
01250		4 Base	4 Base		000	N
01260		3 Base	3 Base		000	N
01270		8 Base	8 Base		000	N
01272		4 Base	4 Base		000	N
01274		6 Base	6 Base		000	N
01320		4 Base	4 Base		000	N
01340		4 Base	4 Base		000	N
01360		5 Base	5 Base		000	N
01380		3 Base	3 Base		000	N
01382		3 Base	3 Base		000	N
01390		3 Base	3 Base		000	N
01392		4 Base	4 Base		000	N
01400		4 Base	4 Base		000	N
01402		7 Base	7 Base		000	N
01404		5 Base	5 Base		000	N
01420		3 Base	3 Base		000	N
01430		3 Base	3 Base		000	N
01432		6 Base	6 Base		000	N
01440		8 Base	8 Base		000	N
01442		8 Base	8 Base		000	N
01444		8 Base	8 Base		000	N
01462		3 Base	3 Base		000	N
01464		4 Base	4 Base		000	N
01470		5 Base	5 Base		000	N
01472		5 Base	5 Base		000	N
01474		5 Base	5 Base		000	N
01480		3 Base	3 Base		000	N

- Not Covered
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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
01482		4 Base	4 Base		000	N
01484		4 Base	4 Base		000	N
01486		7 Base	7 Base		000	N
01490		3 Base	3 Base		000	N
01500		8 Base	8 Base		000	N
01502		6 Base	6 Base		000	N
01520		3 Base	3 Base		000	N
01522		5 Base	5 Base		000	N
01610		5 Base	5 Base		000	N
01620		4 Base	4 Base		000	N
01622		4 Base	4 Base		000	N
01630		5 Base	5 Base		000	N
01632		6 Base	6 Base		000	N
01634		9 Base	9 Base		000	N
01636		15 Base	15 Base		000	N
01638		10 Base	10 Base		000	N
01650		6 Base	6 Base		000	N
01652		10 Base	10 Base		000	N
01654		8 Base	8 Base		000	N
01656		10 Base	10 Base		000	N
01670		4 Base	4 Base		000	N
01680		3 Base	3 Base		000	N
01682		4 Base	4 Base		000	N
01710		3 Base	3 Base		000	N
01712		5 Base	5 Base		000	N
01714		5 Base	5 Base		000	N
01716		5 Base	5 Base		000	N
01730		3 Base	3 Base		000	N
01732		3 Base	3 Base		000	N
01740		4 Base	4 Base		000	N
01742		5 Base	5 Base		000	N
01744		5 Base	5 Base		000	N
01756		6 Base	6 Base		000	N
01758		5 Base	5 Base		000	N
01760		7 Base	7 Base		000	N
01770		6 Base	6 Base		000	N
01772		6 Base	6 Base		000	N
01780		3 Base	3 Base		000	N
01782		4 Base	4 Base		000	N
01810		3 Base	3 Base		000	N
01820		3 Base	3 Base		000	N
01830		3 Base	3 Base		000	N
01832		6 Base	6 Base		000	N
01840		6 Base	6 Base		000	N
01842		6 Base	6 Base		000	N
01844		6 Base	6 Base		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
01850		3 Base	3 Base		000	N
01852		4 Base	4 Base		000	N
01860		3 Base	3 Base		000	N
01905		5 Base	5 Base		000	N
01916		6 Base	6 Base		000	N
01920		7 Base	7 Base		000	N
01922		7 Base	7 Base		000	N
01924		6 Base	6 Base		000	N
01925		8 Base	8 Base		000	N
01926		10 Base	10 Base		000	N
01930		5 Base	5 Base		000	N
01931		7 Base	7 Base		000	N
01932		7 Base	7 Base		000	N
01933		8 Base	8 Base		000	N
01951		3 Base	3 Base		000	N
01952		5 Base	5 Base		000	N
01960		5 Base	5 Base		000	N
01961		9 Base	9 Base		000	N
01962		8 Base	8 Base		000	N
01963		10 Base	10 Base		000	N
01964		4 Base	4 Base		000	N
01967		6 Base	6 Base		000	N
01968		3 Base	3 Base		000	N
01969		5 Base	5 Base		000	N
01990		7 Base	7 Base		000	N
01995		5 Base	5 Base		000	N
01999		B.R.	B.R.		000	N
02100		3 Base	3 Base		000	N
02101		5 Base	5 Base		000	N
01953		15.70	15.70		000	N
01996		20.25	20.25		000	N
10021		53.92	53.92		000	N
10022		55.51	55.51		000	N
10040		50.51	39.81		010	N
10060		62.56	43.91		010	N
10061		100.33	91.00		010	N
10080		78.03	45.27		010	N
10081		128.08	95.55		010	N
10120		64.16	37.54		010	N
10121		133.77	107.15		010	N
10140		72.57	57.79		010	N
10160		45.95	38.90		010	N
10180		89.86	85.77		010	N
11000		29.57	20.02		000	N
11001		15.70	9.55		000	N
11010		160.84	150.83		010	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
11011		210.66	182.68		000	N
11012		297.80	270.73		000	N
11040		24.80	17.29		000	N
11041		35.72	27.75		000	N
11042		51.19	37.99		000	N
11043		120.35	90.55		010	N
11044		150.83	117.62		010	N
11055		22.07	14.33		000	N
11056		27.75	20.25		000	N
11057		33.67	26.39		000	N
11100		53.23	27.75		000	N
11101		25.93	14.11		000	N
11200		45.73	25.48		010	N
11201		19.11	9.55		000	N
11300		36.17	17.06		000	N
11301		45.50	28.89		000	N
11302		52.32	35.72		000	N
11303		60.29	41.63		000	N
11305		33.44	22.52		000	N
11306		46.64	33.21		000	N
11307		53.01	38.22		000	N
11308		62.56	47.32		000	N
11310		43.68	25.03		000	N
11311		53.01	36.17		000	N
11312		58.47	41.41		000	N
11313		75.53	55.06		000	N
11400		60.29	29.80		010	N
11401		73.48	43.45		010	N
11402		98.51	60.97		010	N
11403		111.48	71.89		010	N
11404		122.17	80.08		010	N
11406		143.10	98.96		010	N
11420		60.29	35.49		010	N
11421		78.72	51.19		010	N
11422		101.92	66.89		010	N
11423		121.26	80.76		010	N
11424		136.27	95.55		010	N
11426		178.82	134.68		010	N
11440		79.40	39.59		010	N
11441		95.32	55.28		010	N
11442		111.48	74.39		010	N
11443		137.64	96.91		010	N
11444		171.54	129.22		010	N
11446		207.03	165.85		010	N
11450		162.66	89.86		090	N
11451		216.13	126.49		090	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
11462		159.93	83.04		090	N
11463		226.36	134.45		090	N
11470		192.92	107.38		090	N
11471		233.87	146.51		090	N
11600		90.32	58.24		010	N
11601		103.51	76.89		010	N
11602		110.57	81.45		010	N
11603		123.08	90.09		010	N
11604		136.50	97.14		010	N
11606		171.54	124.67		010	N
11620		88.50	56.88		010	N
11621		105.33	78.94		010	N
11622		121.26	92.14		010	N
11623		145.37	112.39		010	N
11624		167.21	129.45		010	N
11626		206.12	162.21		010	N
11640		93.96	65.97		010	N
11641		125.13	98.51		010	N
11642		146.74	115.80		010	N
11643		171.08	136.50		010	N
11644		218.85	176.09		010	N
11646		272.77	228.87		010	N
11719		9.78	5.69		000	N
11720		15.47	10.47		000	N
11721		22.98	17.97		000	N
11730		46.18	37.54		000	N
11732		20.70	19.34		000	N
11740		27.53	12.06		000	N
11750		84.86	62.56		010	N
11752		116.48	106.70		010	N
11755		55.74	44.36		000	N
11760		80.08	68.02		010	N
11762		123.30	115.57		010	N
11765		42.54	28.21		010	N
11770		134.45	91.91		010	N
11771		272.55	231.37		090	N
11772		329.19	271.41		090	N
11900		29.80	17.29		000	N
11901		38.90	27.30		000	N
11920		#	#		000	N
11921		#	#		000	N
11922		#	#		000	N
11950		#	#		000	N
11951		#	#		000	N
11952		#	#		000	N
11954		#	#		000	N

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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
11960		485.49	485.49		090	N
11970		291.20	291.20		090	N
11971		192.01	145.37		090	N
11975		93.67	93.67		000	N
11976		119.95	119.95		000	N
11977		213.62	213.62		000	N
11980		#	#		000	N
11981		72.12	49.37		000	N
11982		82.13	59.38		000	N
11983		132.86	110.11		000	N
12001		89.64	50.73		010	N
12002		95.32	66.43		010	N
12004		110.34	78.03		010	N
12005		138.32	97.14		010	N
12006		170.63	124.67		010	N
12007		197.24	141.96		010	N
12011		95.09	52.55		010	N
12013		103.97	70.53		010	N
12014		121.03	84.17		010	N
12015		153.79	106.24		010	N
12016		183.59	130.59		010	N
12017		157.43	157.43		010	N
12018		182.91	182.91		010	Y
12020		121.03	96.46		010	N
12021		82.81	68.25		010	N
12031		101.92	69.61		010	N
12032		123.53	89.64		010	N
12034		141.28	104.20		010	N
12035		156.07	122.40		010	N
12036		221.13	156.07		010	N
12037		242.06	179.72		010	N
12041		111.70	76.44		010	N
12042		134.45	98.96		010	N
12044		149.01	113.30		010	N
12045		169.49	132.41		010	N
12046		246.38	163.12		010	N
12047		277.78	177.68		010	Y
12051		129.90	92.82		010	N
12052		134.45	99.19		010	N
12053		147.42	111.25		010	N
12054		163.35	121.94		010	N
12055		209.30	158.11		010	N
12056		293.70	200.66		010	N
12057		288.24	227.27		010	Y
13100		151.97	118.30		010	N
13101		174.72	147.19		010	N
13102		46.87	43.45		000	N
13120		158.34	123.30		010	N
13121		190.19	159.93		010	N
13122		55.06	50.05		000	N
13131		176.09	142.64		010	N
13132		244.79	217.26		010	N
13133		80.53	77.12		000	N
13150		210.21	154.25		010	N
13151		221.81	178.59		010	N
13152		282.10	244.56		010	N
13153		88.50	84.40		000	N
13160		405.86	405.86		090	N
14000		315.09	251.84		090	N
14001		402.68	344.44		090	N
14020		342.39	285.06		090	N
14021		452.50	408.36		090	N
14040		374.92	330.78		090	N
14041		498.45	458.64		090	N
14060		400.63	365.82		090	N
14061		539.63	498.91		090	N
14300		513.01	480.03		090	N
14350		384.70	384.70		090	N
15000		154.47	140.60		000	N
15001		39.13	34.35		000	Y
15050		219.54	199.74		090	N
15100		364.68	364.45		090	N
15101		74.16	59.38		000	N
15120		434.98	396.99		090	N
15121		106.93	93.27		000	N
15200		421.56	323.51		090	N
15201		55.28	47.77		000	N
15220		404.95	338.07		090	N
15221		50.05	42.77		000	N
15240		424.51	384.47		090	N
15241		78.72	66.66		000	N
15260		444.76	415.64		090	N
15261		89.86	79.85		000	N
15342		74.16	48.00		010	N
15343		15.70	8.19		000	N
15350		276.41	194.74		090	N
15351		44.13	34.13		000	N
15400		209.53	209.53		090	N
15401		60.97	35.26		000	N
15570		403.81	371.05		090	N
15572		411.09	371.05		090	N
15574		436.80	402.90		090	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
15576		412.91	359.00		090	N
15600		199.52	104.20		090	N
15610		194.74	120.35		090	N
15620		233.19	152.65		090	N
15630		218.63	166.76		090	N
15650		226.59	187.46		090	N
15732		695.69	695.69		090	Y
15734		698.88	698.88		090	Y
15736		654.29	654.29		090	N
15738		702.06	702.06		090	Y
15740		442.72	407.45		090	N
15750		471.15	471.15		090	Y
15756		1,365.91	1,365.91		090	Y
15757		1,371.60	1,371.60		090	Y
15758		1,376.15	1,376.15		090	Y
15760		422.69	369.01		090	N
15770		324.42	324.42		090	Y
15775		#	#		000	N
15776		#	#		000	N
15780		318.73	312.36		090	N
15781		232.96	225.00		090	N
15782		201.57	194.97		090	N
15783		216.58	182.00		090	N
15786		87.36	77.35		010	N
15787		16.84	11.83		000	N
15788		121.49	73.71		090	N
15789		245.47	192.01		090	N
15792		109.66	81.22		090	N
15793		174.72	174.72		090	N
15810		207.03	207.03		090	N
15811		265.04	247.07		090	N
15819		#	#		090	N
15820		#	#		090	N
15821		#	#		090	N
15822		#	#		090	N
15823		#	#		090	N
15824		#	#		000	N
15825		#	#		000	N
15826		#	#		000	N
15828		#	#		000	N
15829		#	#		000	N
15831		#	#		090	Y
15832		#	#		090	Y
15833		#	#		090	N
15834		#	#		090	N
15835		#	#		090	N
15836		#	#		090	N
15837		#	#		090	N
15838		#	#		090	N
15839		#	#		090	N
15840		551.23	551.23		090	N
15841		908.41	908.41		090	Y
15842		1,450.31	1,450.31		090	Y
15845		499.82	499.82		090	Y
15850		Bundled	Bundled		000	N
15851		58.01	28.21		000	N
15852		65.06	28.89		000	N
15860		77.35	65.52		000	N
15876		#	#		000	N
15877		#	#		000	N
15878		#	#		000	N
15879		#	#		000	N
15920		329.42	329.42		090	N
15922		420.65	420.65		090	Y
15931		360.36	360.36		090	N
15933		455.91	455.91		090	N
15934		504.82	504.82		090	N
15935		588.54	588.54		090	Y
15936		504.82	504.82		090	N
15937		594.00	594.00		090	Y
15940		369.69	369.69		090	N
15941		519.38	519.38		090	N
15944		481.16	481.16		090	N
15945		533.94	533.94		090	N
15946		863.82	863.82		090	Y
15950		308.94	308.94		090	N
15951		447.26	447.26		090	N
15952		458.41	458.41		090	Y
15953		521.43	521.43		090	N
15956		624.94	624.94		090	N
15958		635.63	635.63		090	Y
15999		B.R.	B.R.		090	N
16000		46.18	27.30		000	N
16010		48.69	29.35		000	N
16015		103.06	80.53		000	N
16020		46.64	25.25		000	N
16025		89.18	60.29		000	N
16030		127.40	72.34		000	N
16035		126.72	126.72		090	N
16036		50.05	50.05		000	N
17000		39.36	20.48		010	N
17003		9.10	5.23		000	N

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17004		123.76	94.87		010	N
17106		220.45	174.49		090	N
17107		374.69	336.93		090	N
17108		516.88	480.03		090	N
17110		40.95	21.38		010	N
17111		47.32	30.94		010	N
17250		29.35	16.84		000	N
17260		52.78	30.26		010	N
17261		61.20	40.04		010	N
17262		75.76	54.37		010	N
17263		83.04	60.74		010	N
17264		88.04	65.06		010	N
17266		102.38	78.72		010	N
17270		66.89	44.59		010	N
17271		72.57	51.19		010	N
17272		82.36	60.97		010	N
17273		92.14	70.07		010	N
17274		111.02	87.81		010	N
17276		132.63	116.93		010	N
17280		59.61	39.59		010	N
17281		80.76	59.15		010	N
17282		91.91	70.30		010	N
17283		112.61	89.86		010	N
17284		132.63	109.43		010	N
17286		178.13	161.75		010	N
17304		355.13	262.53		000	N
17305		149.01	98.51		000	N
17306		149.92	98.73		000	N
17307		149.47	99.19		000	N
17310		57.79	33.21		000	N
17340		26.84	24.12		010	N
17360		66.89	50.05		010	N
17380		15.28	15.28		000	N
17999		B.R.	B.R.		000	N
19000		49.37	27.07		000	N
19001		29.80	13.42		000	N
19020		250.48	167.44		090	N
19030		120.80	48.00		000	N
19100		64.84	40.72		000	N
19101		196.33	120.35		010	N
19102		165.39	63.70		000	N
19103		379.01	116.25		000	N
19110		329.88	209.53		090	N
19112		340.34	162.66		090	N
19120		254.35	208.85		090	N
19125		270.50	224.54		090	N
19126		95.78	95.78		000	N
19140		361.04	212.03	EX	090	N
19160		252.07	252.07		090	N
19162		514.83	514.83		090	Y
19180		353.53	353.53		090	Y
19182		304.40	304.40		090	Y
19200		590.13	590.13		090	Y
19220		600.60	600.60		090	Y
19240		594.69	594.69		090	Y
19260		586.50	586.50		090	Y
19271		721.86	721.86		090	Y
19272		814.68	814.68		090	Y
19290		97.60	40.04		000	N
19291		54.83	19.79		000	N
19295		65.29	65.29		000	N
19316		445.22	445.22		090	Y
19318		626.53	626.53	EX	090	Y
19324		#	#		090	N
19325		#	#		090	N
19328		247.52	247.52		090	N
19330		309.63	309.63		090	N
19340		230.46	230.46		000	N
19342		461.14	461.14		090	N
19350		552.37	380.83		090	N
19355		470.24	321.00		090	N
19357		774.87	774.87		090	Y
19361		756.89	756.89		090	Y
19364		1,577.94	1,577.94		090	Y
19366		796.02	796.02		090	Y
19367		991.44	991.44		090	Y
19368		1,230.32	1,230.32		090	Y
19369		1,149.79	1,149.79		090	Y
19370		343.52	343.52		090	N
19371		400.17	400.17		090	N
19380		392.21	392.21		090	N
19396		215.90	73.03		000	N
19499		B.R.	B.R.		090	N
20000		102.15	78.26		010	N
20005		153.56	134.00		010	N
20100		393.80	339.20		010	Y
20101		146.51	114.43		010	N
20102		173.81	137.41		010	Y
20103		230.91	198.61		010	N
20150		548.73	548.73		090	Y
20200		75.53	50.05		000	N
20205		149.92	79.63		000	N

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20206		98.51	31.62		000	N
20220		143.78	98.28		000	N
20225		146.97	114.43		000	N
20240		174.04	174.04		010	N
20245		341.93	341.93		010	N
20250		222.72	222.72		010	N
20251		250.93	250.93		010	Y
20500		152.20	119.44		010	N
20501		93.96	23.89		000	N
20520		174.04	127.86		010	N
20525		252.98	187.23		010	N
20526		38.45	29.35		000	N
20550		40.04	26.84		000	N
20551		38.45	29.35		000	N
20552		38.45	29.35		000	N
20553		38.45	29.35		000	N
20600		31.39	24.34		000	N
20605		34.35	25.03		000	N
20610		41.18	29.35		000	N
20615		167.21	112.61		010	N
20650		171.54	128.54		010	N
20660		99.42	99.42		000	N
20661		281.65	281.65		090	N
20662		268.91	268.91		090	N
20663		249.57	249.57		090	N
20664		404.72	404.72		090	N
20665		86.22	61.20		010	N
20670		175.18	121.94		010	N
20680		199.52	199.52		090	N
20690		131.50	131.50		090	N
20692		237.06	237.06		090	Y
20693		445.67	445.67		090	N
20694		309.85	248.66		090	N
20802		1,695.79	1,695.79		090	Y
20805		2,086.40	2,086.40		090	Y
20808		2,800.98	2,800.98		090	Y
20816		1,888.70	1,888.70		090	Y
20822		1,688.05	1,688.05		090	Y
20824		1,887.80	1,887.80		090	Y
20827		1,701.70	1,701.70		090	Y
20838		1,630.49	1,630.49		090	Y
20900		276.64	276.64		090	Y
20902		393.80	393.80		090	Y
20910		338.29	288.70		090	N
20912		329.42	329.42		090	N
20920		254.35	254.35		090	N
20922		359.91	308.94		090	Y
20924		322.14	322.14		090	Y
20926		288.01	288.01		090	N
20930		Bundled	Bundled		000	N
20931		69.39	69.39		000	N
20936		Bundled	Bundled		000	N
20937		106.02	106.02		000	Y
20938		114.89	114.89		000	Y
20950		80.76	80.76		000	N
20955		1,662.12	1,662.12		090	Y
20956		1,635.04	1,635.04		090	Y
20957		1,516.74	1,516.74		090	Y
20962		1,633.00	1,633.00		090	Y
20969		1,832.06	1,832.06		090	Y
20970		1,743.79	1,743.79		090	Y
20972		1,495.36	1,495.36		090	Y
20973		1,815.00	1,815.00		090	Y
20974		26.39	23.43		000	N
20975		98.73	98.73		000	Y
20979		#	#		000	N
20999		B.R.	B.R.		090	N
21010		404.27	404.27		090	N
21015		298.02	298.02		090	N
21025		410.64	401.54		090	N
21026		236.60	234.10		090	N
21029		351.94	341.48		090	N
21030		281.87	269.82		090	N
21031		155.84	128.31		090	N
21032		155.38	134.45		090	N
21034		632.00	632.00		090	Y
21040		120.58	92.59		090	N
21041		291.66	263.67		090	N
21044		474.11	474.11		090	Y
21045		629.72	629.72		090	Y
21050		531.67	531.67		090	N
21060		494.58	494.58		090	Y
21070		342.84	342.84		090	N
21076		553.28	496.86		010	N
21077		1,391.85	1,249.66		090	N
21079		934.80	827.87		090	N
21080		1,064.02	943.67		090	N
21081		961.64	852.22		090	N
21082		848.80	760.99		090	N
21083		818.09	725.50		090	N
21084		941.17	833.33		090	N
21085		366.50	328.51		010	N

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21086		1,044.45	925.01		090	N
21087		1,022.16	917.05		090	N
21088		B.R.	B.R.		090	N
21089		B.R.	B.R.		090	N
21100		228.41	183.37		090	N
21110		242.97	225.22		090	N
21116		200.43	25.93		000	N
21120		299.16	230.69		090	N
21121		358.54	334.88		090	Y
21122		385.16	385.16		090	Y
21123		448.63	448.63		090	Y
21125		471.83	432.25		090	Y
21127		508.92	432.48		090	Y
21137		419.06	419.06		090	Y
21138		503.46	503.46		090	Y
21139		536.22	536.22		090	Y
21141		682.27	682.27		090	Y
21142		761.44	761.44		090	Y
21143		714.58	714.58		090	Y
21145		755.07	755.07		090	Y
21146		771.23	771.23		090	Y
21147		794.66	794.66		090	Y
21150		983.03	983.03		090	Y
21151		1,163.21	1,163.21		090	Y
21154		1,257.62	1,257.62		090	Y
21155		1,406.86	1,406.86		090	Y
21159		1,573.85	1,573.85		090	Y
21160		1,822.50	1,822.50		090	Y
21172		1,036.72	1,036.72		090	Y
21175		1,294.02	1,294.02		090	Y
21179		980.75	980.75		090	Y
21180		1,026.93	1,026.93		090	Y
21181		434.75	434.75		090	N
21182		1,274.91	1,274.91		090	Y
21183		1,371.14	1,371.14		090	Y
21184		1,383.66	1,383.66		090	Y
21188		903.40	903.40		090	Y
21193		661.12	661.12		090	Y
21194		757.35	757.35		090	Y
21195		693.65	693.65		090	Y
21196		749.61	749.61		090	Y
21198		620.39	620.39		090	Y
21199		632.22	632.22		090	Y
21206		551.23	551.23		090	Y
21208		452.50	444.99		090	N
21209		347.17	312.36		090	Y

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
21210		448.86	436.34		090	N
21215		466.83	432.93		090	N
21230		509.14	509.14		090	N
21235		434.30	352.85		090	N
21240		607.88	607.88		090	Y
21242		566.02	566.02		090	Y
21243		822.19	822.19		090	Y
21244		503.69	503.69		090	Y
21245		854.26	518.47		090	Y
21246		536.90	536.90		090	Y
21247		1,012.60	1,012.60		090	Y
21248		481.39	457.28		090	N
21249		682.27	657.25		090	N
21255		699.11	699.11		090	Y
21256		701.84	701.84		090	Y
21260		705.48	705.48		090	Y
21261		1,208.93	1,208.93		090	Y
21263		1,025.34	1,025.34		090	Y
21267		788.74	788.74		090	Y
21268		913.41	913.41		090	Y
21270		482.30	472.97		090	Y
21275		524.84	524.84		090	Y
21280		284.83	284.83		090	N
21282		206.12	206.12		090	N
21295		136.50	136.50		090	N
21296		194.97	194.97		090	N
21299		B.R.	B.R.		090	N
21300		81.45	24.80		000	N
21310		75.98	17.29		000	N
21315		116.48	65.29		010	N
21320		158.34	92.59		010	N
21325		176.09	176.09		090	N
21330		260.03	260.03		090	N
21335		374.01	374.01		090	N
21336		268.68	268.68		090	N
21337		185.19	143.32		090	N
21338		287.10	287.10		090	N
21339		356.04	356.04		090	Y
21340		459.55	459.55		090	N
21343		528.48	528.48		090	Y
21344		792.38	792.38		090	Y
21345		432.70	376.28		090	N
21346		486.62	486.62		090	N
21347		528.71	528.71		090	Y
21348		668.62	668.62		090	Y
21355		179.50	148.33		010	N

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21356		175.86	175.86		010	N
21360		286.65	286.65		090	Y
21365		629.26	629.26		090	Y
21366		753.48	753.48		090	Y
21385		402.45	402.45		090	Y
21386		413.59	413.59		090	Y
21387		428.84	428.84		090	Y
21390		441.35	441.35		090	Y
21395		517.33	517.33		090	Y
21400		109.43	57.79		090	N
21401		179.27	163.35		090	Y
21406		333.97	333.97		090	Y
21407		389.48	389.48		090	Y
21408		537.36	537.36		090	Y
21421		289.38	280.51		090	N
21422		381.97	381.97		090	Y
21423		449.54	449.54		090	Y
21431		363.09	363.09		090	Y
21432		389.03	389.03		090	Y
21433		1,012.15	1,012.15		090	Y
21435		716.17	716.17		090	Y
21436		1,041.04	1,041.04		090	Y
21440		189.73	150.38		090	N
21445		295.07	246.84		090	Y
21450		219.31	137.64		090	N
21451		265.04	257.07		090	N
21452		356.26	147.19		090	N
21453		301.89	287.33		090	N
21454		286.88	286.88		090	N
21461		388.34	385.16		090	Y
21462		465.92	422.69		090	Y
21465		476.61	476.61		090	Y
21470		606.74	606.74		090	Y
21480		51.87	18.65		000	N
21485		183.14	172.22		090	N
21490		467.28	467.28		090	Y
21493		115.11	115.11		090	N
21494		245.93	245.93		090	Y
21495		256.85	256.85		090	Y
21497		199.97	179.95		090	N
21499		B.R.	B.R.		090	N
21501		195.65	175.86		090	N
21502		336.47	336.47		090	Y
21510		313.04	313.04		090	N
21550		102.15	77.35		010	N
21555		202.93	161.07		090	N
21556		210.21	210.21		090	N
21557		396.08	396.08		090	Y
21600		348.99	348.99		090	Y
21610		620.85	620.85		090	Y
21615		425.20	425.20		090	Y
21616		500.05	500.05		090	Y
21620		353.53	353.53		090	Y
21627		447.72	447.72		090	Y
21630		748.70	748.70		090	Y
21632		730.96	730.96		090	Y
21700		343.30	310.31		090	Y
21705		413.59	413.59		090	Y
21720		342.39	278.46		090	Y
21725		340.80	340.80		090	Y
21740		703.20	703.20		090	Y
21750		482.98	482.98		090	Y
21800		76.44	48.69		090	N
21805		160.84	160.84		090	N
21810		337.38	337.38		090	Y
21820		95.78	67.80		090	N
21825		409.50	409.50		090	Y
21899		B.R.	B.R.		090	N
21920		103.74	66.20		010	N
21925		343.30	219.08		090	N
21930		225.91	182.45		090	N
21935		748.70	748.70		090	N
22100		439.07	439.07		090	Y
22101		455.68	455.68		090	Y
22102		457.96	457.96		090	Y
22103		88.50	88.50		000	Y
22110		580.58	580.58		090	Y
22112		575.12	575.12		090	Y
22114		570.12	570.12		090	Y
22116		88.27	88.27		000	Y
22210		1,012.38	1,012.38		090	Y
22212		822.64	822.64		090	Y
22214		839.93	839.93		090	Y
22216		229.55	229.55		000	Y
22220		905.22	905.22		090	Y
22222		886.34	886.34		090	Y
22224		902.72	902.72		090	Y
22226		227.95	227.95		000	Y
22305		126.04	97.60		090	N
22310		175.18	146.74		090	N
22315		437.71	437.71		090	N
22318		905.68	905.68		090	Y

- Not Covered
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22319		1,026.03	1,026.03		090	Y
22325		802.16	802.16		090	Y
22326		864.73	864.73		090	Y
22327		836.29	836.29		090	Y
22328		171.54	171.54		000	Y
22505		152.20	120.58		010	N
22520		#	#		010	N
22521		#	#		010	N
22522		#	#		000	N
22548		1,086.09	1,086.09		090	Y
22554		802.39	802.39		090	Y
22556		982.12	982.12		090	Y
22558		909.54	909.54		090	Y
22585		209.53	209.53		000	Y
22590		887.71	887.71		090	Y
22595		836.52	836.52		090	Y
22600		706.16	706.16		090	Y
22610		706.62	706.62		090	Y
22612		893.62	893.62		090	Y
22614		245.02	245.02		000	Y
22630		905.00	905.00		090	Y
22632		197.02	197.02		000	Y
22800		788.06	788.06		090	Y
22802		1,277.18	1,277.18		090	Y
22804		1,472.83	1,472.83		090	Y
22808		1,089.50	1,089.50		090	Y
22810		1,213.03	1,213.03		090	Y
22812		1,322.91	1,322.91		090	Y
22818		1,304.94	1,304.94		090	Y
22819		1,423.47	1,423.47		090	Y
22830		506.19	506.19		090	Y
22840		475.93	475.93		000	Y
22841		Bundled	Bundled		000	N
22842		476.61	476.61		000	Y
22843		510.51	510.51		000	Y
22844		626.31	626.31		000	Y
22845		455.68	455.68		000	Y
22846		474.11	474.11		000	Y
22847		515.74	515.74		000	Y
22848		228.41	228.41		000	Y
22849		794.88	794.88		090	Y
22850		445.67	445.67		090	Y
22851		252.30	252.30		000	Y
22852		425.65	425.65		090	Y
22855		657.93	657.93		090	Y
22899		B.R.	B.R.		090	Y
22900		242.52	242.52		090	Y
22999		B.R.	B.R.		090	N
23000		315.09	267.31		090	Y
23020		465.24	465.24		090	Y
23030		231.82	186.78		010	N
23031		200.88	163.35		010	N
23035		586.04	586.04		090	Y
23040		499.36	499.36		090	Y
23044		424.29	424.29		090	N
23065		113.52	84.40		010	N
23066		294.38	244.34		090	N
23075		182.45	131.27		010	N
23076		379.47	379.47		090	N
23077		725.95	725.95		090	Y
23100		351.03	351.03		090	Y
23101		337.84	337.84		090	N
23105		439.53	439.53		090	Y
23106		361.95	361.95		090	N
23107		454.77	454.77		090	Y
23120		397.44	397.44		090	Y
23125		482.07	482.07		090	Y
23130		414.73	414.73		090	N
23140		360.82	360.82		090	N
23145		476.84	476.84		090	Y
23146		442.26	442.26		090	N
23150		444.53	444.53		090	Y
23155		538.04	538.04		090	Y
23156		456.82	456.82		090	Y
23170		429.97	429.97		090	N
23172		392.89	392.89		090	Y
23174		507.32	507.32		090	Y
23180		584.67	584.67		090	N
23182		574.89	574.89		090	Y
23184		611.06	611.06		090	Y
23190		381.29	381.29		090	Y
23195		476.16	476.16		090	Y
23200		629.26	629.26		090	Y
23210		630.86	630.86		090	Y
23220		722.08	722.08		090	Y
23221		833.56	833.56		090	Y
23222		1,073.80	1,073.80		090	Y
23330		186.32	125.13		010	N
23331		407.45	407.45		090	N
23332		569.21	569.21		090	Y
23350		189.51	31.39		000	N
23395		744.15	744.15		090	Y

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23397		721.86	721.86		090	Y
23400		672.94	672.94		090	Y
23405		430.66	430.66		090	Y
23406		534.85	534.85		090	Y
23410		599.69	599.69		090	Y
23412		632.90	632.90		090	Y
23415		484.35	484.35		090	N
23420		653.15	653.15		090	Y
23430		506.19	506.19		090	Y
23440		527.57	527.57		090	Y
23450		634.27	634.27		090	Y
23455		672.72	672.72		090	Y
23460		711.62	711.62		090	Y
23462		697.51	697.51		090	Y
23465		718.22	718.22		090	Y
23466		669.31	669.31		090	Y
23470		777.60	777.60		090	Y
23472		917.51	917.51		090	Y
23480		554.19	554.19		090	N
23485		636.54	636.54		090	Y
23490		602.88	602.88		090	Y
23491		667.03	667.03		090	Y
23500		140.37	111.25		090	N
23505		229.55	184.50		090	N
23515		374.69	374.69		090	Y
23520		143.10	114.66		090	N
23525		253.66	182.68		090	N
23530		362.41	362.41		090	Y
23532		399.94	399.94		090	Y
23540		159.25	114.89		090	N
23545		194.97	164.03		090	N
23550		370.37	370.37		090	Y
23552		414.05	414.05		090	Y
23570		143.78	117.39		090	N
23575		243.88	197.02		090	N
23585		438.17	438.17		090	Y
23600		202.93	158.34		090	N
23605		313.04	272.32		090	N
23615		468.19	468.19		090	Y
23616		905.90	905.90		090	Y
23620		182.68	138.55		090	N
23625		267.08	226.13		090	N
23630		372.42	372.42		090	Y
23650		210.21	166.30		090	N
23655		213.17	213.17		090	N
23660		376.74	376.74		090	Y

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
23665		288.01	245.02		090	N
23670		398.13	398.13		090	Y
23675		340.11	305.31		090	N
23680		478.66	478.66		090	Y
23700		143.10	143.10		010	N
23800		682.27	682.27		090	Y
23802		779.64	779.64		090	Y
23900		864.04	864.04		090	Y
23920		678.18	678.18		090	Y
23921		290.97	290.97		090	N
23929		B.R.	B.R.		090	Y
23930		212.26	164.03		010	N
23931		176.54	130.13		010	N
23935		448.86	448.86		090	N
24000		284.15	284.15		090	N
24006		430.89	430.89		090	Y
24065		175.86	123.99		010	N
24066		323.28	275.27		090	N
24075		275.27	231.82		090	N
24076		324.19	324.19		090	N
24077		615.62	615.62		090	Y
24100		256.17	256.17		090	Y
24101		309.85	309.85		090	Y
24102		379.93	379.93		090	Y
24105		210.89	210.89		090	N
24110		408.36	408.36		090	N
24115		485.71	485.71		090	Y
24116		576.03	576.03		090	Y
24120		325.32	325.32		090	N
24125		346.71	346.71		090	Y
24126		382.20	382.20		090	Y
24130		315.09	315.09		090	N
24134		621.99	621.99		090	Y
24136		358.08	358.08		090	N
24138		386.52	386.52		090	Y
24140		611.98	611.98		090	Y
24145		451.59	451.59		090	N
24147		450.45	450.45		090	N
24149		613.11	613.11		090	Y
24150		674.08	674.08		090	Y
24151		772.59	772.59		090	Y
24152		476.84	476.84		090	Y
24153		444.76	444.76		090	N
24155		511.65	511.65		090	Y
24160		374.01	374.01		090	N
24164		314.63	314.63		090	N

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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
24200		175.63	116.93		010	N
24201		306.22	273.00		090	N
24220		287.33	41.63		000	N
24300		219.31	219.31		090	N
24301		462.28	462.28		090	Y
24305		362.18	362.18		090	N
24310		341.70	341.70		090	N
24320		515.29	515.29		090	Y
24330		439.76	439.76		090	Y
24331		477.75	477.75		090	Y
24332		301.67	301.67		090	N
24340		374.92	374.92		090	Y
24341		377.65	377.65		090	Y
24342		480.94	480.94		090	Y
24343		398.35	398.35		090	Y
24344		599.92	599.92		090	Y
24345		398.35	398.35		090	Y
24346		599.92	599.92		090	Y
24350		274.82	274.82		090	N
24351		302.35	302.35		090	N
24352		322.14	322.14		090	Y
24354		319.18	319.18		090	N
24356		332.38	332.38		090	N
24360		543.95	543.95		090	Y
24361		611.75	611.75		090	Y
24362		631.54	631.54		090	Y
24363		778.51	778.51		090	Y
24365		391.76	391.76		090	Y
24366		423.38	423.38		090	Y
24400		563.29	563.29		090	Y
24410		683.64	683.64		090	Y
24420		704.79	704.79		090	Y
24430		616.75	616.75		090	Y
24435		650.88	650.88		090	Y
24470		370.37	370.37		090	Y
24495		436.80	436.80		090	N
24498		581.26	581.26		090	Y
24500		196.56	157.20		090	N
24505		333.51	285.97		090	N
24515		553.51	553.51		090	Y
24516		563.97	563.97		090	Y
24530		229.55	199.06		090	N
24535		374.47	326.24		090	N
24538		478.66	478.66		090	N
24545		495.95	495.95		090	Y
24546		707.07	707.07		090	Y

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
24560		181.32	143.55		090	N
24565		324.42	272.32		090	N
24566		424.06	424.06		090	N
24575		460.92	460.92		090	Y
24576		177.45	146.06		090	N
24577		333.97	285.74		090	N
24579		550.32	550.32		090	Y
24582		454.55	454.55		090	N
24586		638.59	638.59		090	Y
24587		635.41	635.41		090	Y
24600		260.72	221.81		090	N
24605		250.25	250.25		090	N
24615		418.14	418.14		090	Y
24620		325.78	325.78		090	N
24635		710.48	710.48		090	Y
24640		106.02	72.12		010	N
24650		158.34	120.80		090	N
24655		278.01	229.55		090	N
24665		419.51	419.51		090	Y
24666		471.38	471.38		090	Y
24670		166.30	134.45		090	N
24675		291.43	244.11		090	N
24685		445.22	445.22		090	Y
24800		505.05	505.05		090	Y
24802		606.51	606.51		090	Y
24900		498.68	498.68		090	Y
24920		557.60	557.60		090	Y
24925		397.90	397.90		090	Y
24930		502.55	502.55		090	Y
24931		581.72	581.72		090	Y
24935		682.50	682.50		090	N
24940		389.36	389.36		090	Y
24999		B.R.	B.R.		090	N
25000		256.39	256.39		090	N
25001		182.91	182.91		090	N
25020		410.86	410.86		090	N
25023		720.95	720.95		090	N
25024		423.15	423.15		090	N
25025		683.64	683.64		090	N
25028		363.77	363.77		090	N
25031		337.61	337.61		090	N
25035		555.33	555.33		090	N
25040		394.94	394.94		090	N
25065		105.11	105.11		010	N
25066		294.84	294.84		090	N
25075		255.26	255.26		090	N

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25076		412.91	412.91		090	N
25077		599.46	599.46		090	N
25085		396.08	396.08		090	Y
25100		280.51	280.51		090	N
25101		294.61	294.61		090	N
25105		403.58	403.58		090	N
25107		421.78	421.78		090	Y
25110		302.35	302.35		090	N
25111		237.97	237.97		090	N
25112		282.56	282.56		090	N
25115		613.79	613.79		090	N
25116		548.73	548.73		090	N
25118		290.52	290.52		090	N
25119		413.59	413.59		090	Y
25120		493.68	493.68		090	N
25125		557.15	557.15		090	N
25126		550.32	550.32		090	Y
25130		321.69	321.69		090	N
25135		377.88	377.88		090	Y
25136		357.63	357.63		090	Y
25145		513.01	513.01		090	Y
25150		452.72	452.72		090	N
25151		556.01	556.01		090	Y
25170		680.68	680.68		090	Y
25210		347.39	347.39		090	N
25215		477.98	477.98		090	Y
25230		318.73	318.73		090	N
25240		376.74	376.74		090	N
25246		268.45	45.73		000	N
25248		370.60	370.60		090	N
25250		368.55	368.55		090	Y
25251		523.93	523.93		090	Y
25259		216.81	216.81		090	N
25260		586.50	586.50		090	N
25263		552.83	552.83		090	Y
25265		637.23	637.23		090	Y
25270		517.56	517.56		090	N
25272		553.96	553.96		090	N
25274		616.07	616.07		090	N
25275		384.25	384.25		090	N
25280		542.13	542.13		090	N
25290		548.73	548.73		090	N
25295		511.19	511.19		090	N
25300		447.72	447.72		090	Y
25301		441.81	441.81		090	Y
25310		580.13	580.13		090	Y
25312		633.81	633.81		090	Y
25315		679.77	679.77		090	Y
25316		731.87	731.87		090	Y
25320		531.21	531.21		090	Y
25332		556.47	556.47		090	Y
25335		632.45	632.45		090	Y
25337		569.66	569.66		090	N
25350		602.19	602.19		090	Y
25355		649.51	649.51		090	Y
25360		598.33	598.33		090	Y
25365		740.06	740.06		090	Y
25370		744.61	744.61		090	Y
25375		704.57	704.57		090	Y
25390		658.38	658.38		090	Y
25391		775.32	775.32		090	Y
25392		703.43	703.43		090	Y
25393		890.21	890.21		090	Y
25394		448.40	448.40		090	Y
25400		686.14	686.14		090	Y
25405		827.19	827.19		090	Y
25415		774.18	774.18		090	Y
25420		906.36	906.36		090	Y
25425		895.44	895.44		090	Y
25426		813.31	813.31		090	Y
25430		398.13	398.13		090	N
25431		392.67	392.67		090	Y
25440		514.38	514.38		090	Y
25441		604.47	604.47		090	Y
25442		529.85	529.85		090	Y
25443		562.83	562.83		090	Y
25444		605.15	605.15		090	Y
25445		551.01	551.01		090	N
25446		744.15	744.15		090	Y
25447		516.65	516.65		090	Y
25449		730.27	730.27		090	Y
25450		512.78	512.78		090	N
25455		582.86	582.86		090	N
25490		620.17	620.17		090	Y
25491		639.96	639.96		090	Y
25492		676.58	676.58		090	Y
25500		158.34	127.86		090	N
25505		310.54	259.58		090	N
25515		458.41	458.41		090	Y
25520		340.11	300.53		090	N
25525		573.53	573.53		090	Y
25526		669.53	669.53		090	Y

- Not Covered
A.C. – Acquisition Cost
B.R. – By Report
* - PA may be required

Effective 7/01/02
PA – Written/Fax Authorization
EX – Expedited Prior Authorization
LE – Limitation Extension

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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
25530		148.79	117.85		090	N
25535		305.76	259.35		090	N
25545		449.54	449.54		090	Y
25560		158.11	127.17		090	N
25565		324.87	276.87		090	N
25574		375.60	375.60		090	Y
25575		508.24	508.24		090	Y
25600		169.49	136.50		090	N
25605		333.29	285.74		090	N
25611		425.20	425.20		090	N
25620		435.66	435.66		090	Y
25622		167.67	136.05		090	N
25624		283.01	235.69		090	N
25628		432.70	432.70		090	Y
25630		178.59	145.15		090	N
25635		277.09	223.41		090	N
25645		399.72	399.72		090	Y
25650		184.50	149.69		090	N
25651		234.55	234.55		090	N
25652		347.17	347.17		090	N
25660		242.97	242.97		090	N
25670		416.78	416.78		090	Y
25671		286.88	286.88		090	N
25675		289.38	239.33		090	N
25676		419.51	419.51		090	Y
25680		294.16	294.16		090	N
25685		477.07	477.07		090	Y
25690		298.71	298.71		090	N
25695		429.52	429.52		090	Y
25800		492.99	492.99		090	Y
25805		547.82	547.82		090	Y
25810		523.02	523.02		090	Y
25820		404.27	404.27		090	Y
25825		471.83	471.83		090	Y
25830		639.96	639.96		090	Y
25900		568.07	568.07		090	N
25905		551.92	551.92		090	Y
25907		544.63	544.63		090	Y
25909		554.42	554.42		090	Y
25915		775.09	775.09		090	Y
25920		447.04	447.04		090	N
25922		357.86	357.86		090	Y
25924		443.85	443.85		090	Y
25927		540.77	540.77		090	N
25929		357.40	357.40		090	Y
25931		554.64	554.64		090	N
25999		B.R.	B.R.		090	N
26010		157.66	127.86		010	N
26011		225.91	203.16		010	N
26020		417.01	417.01		090	N
26025		424.29	424.29		090	N
26030		468.88	468.88		090	N
26034		495.72	495.72		090	N
26035		582.86	582.86		090	N
26037		470.24	470.24		090	N
26040		379.01	379.01		090	N
26045		464.33	464.33		090	N
26055		253.66	243.88		090	N
26060		243.65	243.65		090	N
26070		358.08	358.08		090	N
26075		379.24	379.24		090	N
26080		405.86	405.86		090	N
26100		284.60	284.60		090	N
26105		389.48	389.48		090	N
26110		373.78	373.78		090	N
26115		271.63	271.63		090	N
26116		456.82	456.82		090	N
26117		564.88	564.88		090	N
26121		549.87	549.87		090	N
26123		614.71	614.71		090	N
26125		173.81	173.81		000	N
26130		492.76	492.76		090	N
26135		564.20	564.20		090	N
26140		528.03	528.03		090	N
26145		543.73	543.73		090	N
26160		260.26	259.12		090	N
26170		314.18	314.18		090	N
26180		339.43	339.43		090	N
26185		331.69	331.69		090	Y
26200		457.96	457.96		090	N
26205		543.27	543.27		090	N
26210		456.82	456.82		090	N
26215		515.97	515.97		090	N
26230		453.41	453.41		090	N
26235		442.03	442.03		090	N
26236		421.78	421.78		090	N
26250		584.90	584.90		090	N
26255		729.59	729.59		090	Y
26260		550.10	550.10		090	Y
26261		589.91	589.91		090	Y
26262		480.71	480.71		090	Y
26320		399.26	399.26		090	N

- Not Covered
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Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
26340		166.07	166.07		090	N
26350		613.34	613.34		090	N
26352		643.60	643.60		090	Y
26356		695.01	695.01		090	N
26357		701.15	701.15		090	Y
26358		740.74	740.74		090	Y
26370		650.19	650.19		090	N
26372		686.60	686.60		090	Y
26373		721.17	721.17		090	Y
26390		615.62	615.62		090	Y
26392		783.51	783.51		090	Y
26410		488.44	488.44		090	N
26412		543.50	543.50		090	N
26415		618.57	618.57		090	N
26416		668.17	668.17		090	N
26418		480.48	480.48		090	N
26420		579.44	579.44		090	Y
26426		544.41	544.41		090	N
26428		546.46	546.46		090	N
26432		409.27	409.27		090	N
26433		444.31	444.31		090	N
26434		502.55	502.55		090	Y
26437		469.79	469.79		090	N
26440		549.19	549.19		090	N
26442		646.56	646.56		090	N
26445		526.89	526.89		090	N
26449		636.32	636.32		090	N
26450		291.20	291.20		090	N
26455		283.01	283.01		090	N
26460		271.18	271.18		090	N
26471		462.51	462.51		090	N
26474		437.94	437.94		090	Y
26476		420.19	420.19		090	N
26477		442.49	442.49		090	N
26478		482.98	482.98		090	N
26479		458.19	458.19		090	Y
26480		616.98	616.98		090	N
26483		660.21	660.21		090	Y
26485		652.01	652.01		090	Y
26489		631.31	631.31		090	N
26490		550.10	550.10		090	N
26492		602.19	602.19		090	Y
26494		521.88	521.88		090	Y
26496		594.00	594.00		090	N
26497		614.02	614.02		090	Y
26498		764.63	764.63		090	Y
26499		554.87	554.87		090	Y
26500		494.58	494.58		090	N
26502		524.39	524.39		090	Y
26504		512.33	512.33		090	Y
26508		473.43	473.43		090	N
26510		461.14	461.14		090	N
26516		523.48	523.48		090	N
26517		581.26	581.26		090	Y
26518		589.23	589.23		090	Y
26520		558.51	558.51		090	N
26525		561.24	561.24		090	N
26530		611.06	611.06		090	Y
26531		642.46	642.46		090	Y
26535		384.93	384.93		090	N
26536		571.02	571.02		090	N
26540		493.68	493.68		090	N
26541		590.36	590.36		090	Y
26542		501.86	501.86		090	N
26545		541.45	541.45		090	N
26546		588.09	588.09		090	Y
26548		569.21	569.21		090	N
26550		1,208.48	1,208.48		090	Y
26551		1,840.93	1,840.93		090	Y
26553		1,749.02	1,749.02		090	Y
26554		2,127.35	2,127.35		090	Y
26555		964.37	964.37		090	Y
26556		1,864.14	1,864.14		090	Y
26560		420.42	420.42		090	Y
26561		686.14	686.14		090	Y
26562		664.30	664.30		090	Y
26565		506.42	506.42		090	Y
26567		515.74	515.74		090	N
26568		672.03	672.03		090	Y
26580		831.28	831.28		090	Y
26587		442.94	442.94		090	Y
26590		763.94	763.94		090	Y
26591		406.77	406.77		090	N
26593		437.48	437.48		090	N
26596		452.95	452.95		090	Y
26600		144.01	113.75		090	N
26605		209.98	169.72		090	N
26607		324.64	324.64		090	N
26608		337.16	337.16		090	N
26615		326.46	326.46		090	N
26641		247.52	210.89		090	N
26645		277.55	230.91		090	N

- Not Covered
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Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
26650		349.90	349.90		090	N
26665		400.86	400.86		090	N
26670		237.97	202.93		090	N
26675		271.41	222.72		090	N
26676		353.08	353.08		090	N
26685		378.33	378.33		090	N
26686		423.83	423.83		090	Y
26700		204.52	158.80		090	N
26705		247.29	202.93		090	N
26706		261.63	261.63		090	N
26715		340.80	340.80		090	N
26720		111.25	80.53		090	N
26725		203.84	157.66		090	N
26727		334.20	334.20		090	N
26735		355.13	355.13		090	N
26740		136.73	109.43		090	N
26742		261.17	213.40		090	N
26746		349.44	349.44		090	N
26750		125.81	98.51		090	N
26755		193.15	151.52		090	N
26756		309.85	309.85		090	N
26765		287.33	287.33		090	N
26770		184.73	137.18		090	N
26775		230.69	185.19		090	N
26776		317.36	317.36		090	N
26785		287.33	287.33		090	N
26820		569.21	569.21		090	Y
26841		531.44	531.44		090	N
26842		561.47	561.47		090	Y
26843		508.92	508.92		090	Y
26844		576.03	576.03		090	Y
26850		509.37	509.37		090	N
26852		558.51	558.51		090	Y
26860		425.65	425.65		090	N
26861		65.97	65.97		000	N
26862		531.44	531.44		090	Y
26863		148.56	148.56		000	Y
26910		508.69	508.69		090	N
26951		413.59	413.59		090	N
26952		487.99	487.99		090	N
26989		B.R.	B.R.		090	N
26990		551.01	551.01		090	N
26991		425.88	381.52		090	N
26992		783.28	783.28		090	N
27000		312.13	312.13		090	N
27001		366.73	366.73		090	Y
27003		389.03	389.03		090	Y
27005		483.21	483.21		090	Y
27006		485.26	485.26		090	Y
27025		518.02	518.02		090	N
27030		611.52	611.52		090	Y
27033		625.17	625.17		090	Y
27035		858.36	858.36		090	Y
27036		644.74	644.74		090	Y
27040		211.58	160.39		010	N
27041		438.39	438.39		090	N
27047		394.71	343.52		090	N
27048		336.25	336.25		090	Y
27049		652.70	652.70		090	Y
27050		280.51	280.51		090	N
27052		344.89	344.89		090	Y
27054		458.64	458.64		090	Y
27060		298.71	298.71		090	N
27062		302.35	302.35		090	N
27065		345.34	345.34		090	Y
27066		546.00	546.00		090	Y
27067		680.45	680.45		090	Y
27070		672.94	672.94		090	Y
27071		714.35	714.35		090	Y
27075		1,419.60	1,419.60		090	Y
27076		1,010.78	1,010.78		090	Y
27077		1,659.61	1,659.61		090	Y
27078		707.30	707.30		090	Y
27079		651.56	651.56		090	Y
27080		333.74	333.74		090	Y
27086		179.72	130.13		010	N
27087		419.51	419.51		090	Y
27090		540.08	540.08		090	Y
27091		902.04	902.04		090	Y
27093		343.52	43.00		000	N
27095		288.47	49.37		000	N
27096		236.83	40.95		000	N
27097		406.77	406.77		090	Y
27098		432.02	432.02		090	Y
27100		577.17	577.17		090	Y
27105		573.76	573.76		090	Y
27110		621.76	621.76		090	Y
27111		570.57	570.57		090	Y
27120		777.60	777.60		090	Y
27122		707.30	707.30		090	Y
27125		689.78	689.78		090	Y
27130		898.40	898.40		090	Y

- Not Covered
A.C. – Acquisition Cost
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Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
27132		1,019.66	1,019.66		090	Y
27134		1,214.62	1,214.62		090	Y
27137		932.98	932.98		090	Y
27138		967.10	967.10		090	Y
27140		580.81	580.81		090	Y
27146		797.84	797.84		090	Y
27147		920.92	920.92		090	Y
27151		998.73	998.73		090	Y
27156		1,072.89	1,072.89		090	Y
27158		849.03	849.03		090	Y
27161		750.29	750.29		090	Y
27165		791.02	791.02		090	Y
27170		726.63	726.63		090	Y
27175		378.56	378.56		090	N
27176		536.44	536.44		090	Y
27177		658.16	658.16		090	Y
27178		532.81	532.81		090	Y
27179		575.80	575.80		090	Y
27181		635.63	635.63		090	Y
27185		460.69	460.69		090	N
27187		649.74	649.74		090	Y
27193		303.03	262.08		090	N
27194		452.50	417.69		090	N
27200		117.39	87.59		090	N
27202		667.94	667.94		090	Y
27215		494.58	494.58		090	Y
27216		737.10	737.10		090	Y
27217		647.47	647.47		090	Y
27218		888.16	888.16		090	Y
27220		326.24	285.74		090	N
27222		556.01	556.01		090	N
27226		610.84	610.84		090	Y
27227		981.66	981.66		090	Y
27228		1,131.13	1,131.13		090	Y
27230		312.13	281.65		090	N
27232		480.48	480.48		090	N
27235		562.83	562.83		090	N
27236		688.87	688.87		090	Y
27238		284.15	284.15		090	N
27240		550.32	550.32		090	N
27244		703.43	703.43		090	Y
27245		867.00	867.00		090	Y
27246		285.97	254.12		090	N
27248		495.72	495.72		090	Y
27250		319.18	319.18		090	N
27252		449.54	449.54		090	N
27253		578.53	578.53		090	Y
27254		784.65	784.65		090	Y
27256		200.66	200.66		010	N
27257		232.96	232.96		010	N
27258		704.57	704.57		090	Y
27259		953.00	953.00		090	Y
27265		265.26	265.26		090	N
27266		359.68	359.68		090	N
27275		139.91	139.91		010	N
27280		657.70	657.70		090	Y
27282		559.19	559.19		090	Y
27284		1,003.73	1,003.73		090	Y
27286		1,010.10	1,010.10		090	Y
27290		975.98	975.98		090	Y
27295		798.75	798.75		090	Y
27299		B.R.	B.R.		090	Y
27301		512.33	483.21		090	N
27303		543.27	543.27		090	Y
27305		351.26	351.26		090	Y
27306		288.47	288.47		090	Y
27307		331.92	331.92		090	N
27310		465.01	465.01		090	Y
27315		263.90	263.90		090	Y
27320		272.32	272.32		090	Y
27323		182.45	134.68		010	N
27324		277.09	277.09		090	N
27327		304.40	255.48		090	N
27328		302.57	302.57		090	N
27329		693.65	693.65		090	Y
27330		271.41	271.41		090	N
27331		320.77	320.77		090	Y
27332		409.95	409.95		090	Y
27333		377.88	377.88		090	Y
27334		442.94	442.94		090	Y
27335		493.68	493.68		090	Y
27340		243.20	243.20		090	N
27345		320.09	320.09		090	Y
27347		204.30	204.30		090	Y
27350		410.18	410.18		090	Y
27355		429.52	429.52		090	Y
27356		496.86	496.86		090	Y
27357		533.72	533.72		090	Y
27358		180.64	180.64		000	Y
27360		685.69	685.69		090	Y
27365		744.38	744.38		090	Y
27370		278.01	30.71		000	N

- Not Covered
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27372		324.42	269.59		090	N
27380		376.06	376.06		090	Y
27381		496.18	496.18		090	Y
27385		399.49	399.49		090	Y
27386		520.06	520.06		090	Y
27390		321.46	321.46		090	Y
27391		388.57	388.57		090	N
27392		485.49	485.49		090	Y
27393		354.22	354.22		090	Y
27394		453.86	453.86		090	Y
27395		596.51	596.51		090	Y
27396		418.60	418.60		090	Y
27397		551.46	551.46		090	Y
27400		469.56	469.56		090	Y
27403		412.46	412.46		090	Y
27405		442.03	442.03		090	Y
27407		501.41	501.41		090	Y
27409		600.14	600.14		090	Y
27418		523.93	523.93		090	Y
27420		472.97	472.97		090	Y
27422		470.70	470.70		090	Y
27424		469.79	469.79		090	Y
27425		298.25	298.25		090	N
27427		453.86	453.86		090	Y
27428		645.42	645.42		090	Y
27429		703.20	703.20		090	Y
27430		469.56	469.56		090	Y
27435		460.01	460.01		090	Y
27437		442.94	442.94		090	N
27438		541.45	541.45		090	Y
27440		511.19	511.19		090	Y
27441		528.71	528.71		090	Y
27442		568.29	568.29		090	Y
27443		538.95	538.95		090	Y
27445		786.92	786.92		090	Y
27446		724.13	724.13		090	Y
27447		936.16	936.16		090	Y
27448		551.46	551.46		090	Y
27450		667.71	667.71		090	Y
27454		803.30	803.30		090	Y
27455		609.47	609.47		090	Y
27457		606.06	606.06		090	Y
27465		669.53	669.53		090	Y
27466		774.18	774.18		090	Y
27468		809.90	809.90		090	Y
27470		771.45	771.45		090	Y
27472		833.79	833.79		090	Y
27475		433.39	433.39		090	N
27477		477.52	477.52		090	N
27479		598.55	598.55		090	Y
27485		437.26	437.26		090	N
27486		852.90	852.90		090	Y
27487		1,074.94	1,074.94		090	Y
27488		720.49	720.49		090	Y
27495		751.89	751.89		090	Y
27496		334.43	334.43		090	N
27497		364.00	364.00		090	N
27498		389.71	389.71		090	Y
27499		440.21	440.21		090	Y
27500		373.78	321.69		090	N
27501		399.26	346.26		090	N
27502		523.93	523.93		090	N
27503		523.71	523.71		090	N
27506		769.40	769.40		090	Y
27507		639.05	639.05		090	Y
27508		310.54	270.50		090	N
27509		409.95	409.95		090	N
27510		397.44	397.44		090	N
27511		648.83	648.83		090	Y
27513		811.49	811.49		090	Y
27514		767.13	767.13		090	Y
27516		317.59	268.68		090	N
27517		447.95	401.08		090	N
27519		677.04	677.04		090	Y
27520		197.24	159.02		090	N
27524		456.59	456.59		090	Y
27530		232.28	193.83		090	N
27532		358.54	316.91		090	N
27535		567.16	567.16		090	Y
27536		671.13	671.13		090	Y
27538		297.34	250.48		090	N
27540		574.21	574.21		090	Y
27550		316.68	275.05		090	N
27552		382.43	382.43		090	N
27556		692.51	692.51		090	Y
27557		782.83	782.83		090	Y
27558		809.67	809.67		090	Y
27560		228.64	186.10		090	N
27562		273.00	273.00		090	N
27566		538.26	538.26		090	Y
27570		118.07	118.07		010	N
27580		866.77	866.77		090	Y

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27590		586.27	586.27		090	Y	27681		374.24	374.24		090	N
27591		636.77	636.77		090	Y	27685		401.08	356.95		090	Y
27592		535.08	535.08		090	Y	27686		538.49	414.05		090	N
27594		378.56	378.56		090	N	27687		356.26	356.26		090	Y
27596		551.46	551.46		090	N	27690		438.85	438.85		090	Y
27598		528.03	528.03		090	Y	27691		504.59	504.59		090	Y
27599		B.R.	B.R.		090	Y	27692		69.61	69.61		000	Y
27600		315.77	315.77		090	N	27695		374.24	374.24		090	N
27601		316.00	316.00		090	N	27696		426.33	426.33		090	N
27602		366.50	366.50		090	Y	27698		457.73	457.73		090	Y
27603		489.81	363.55		090	N	27700		414.05	414.05		090	Y
27604		363.55	305.08		090	N	27702		641.55	641.55		090	Y
27605		297.12	155.84		010	N	27703		703.43	703.43		090	Y
27606		406.77	220.22		010	N	27704		398.58	398.58		090	N
27607		492.54	492.54		090	N	27705		525.07	525.07		090	Y
27610		448.18	448.18		090	N	27707		304.17	304.17		090	N
27612		374.47	374.47		090	Y	27709		512.78	512.78		090	Y
27613		175.40	119.66		010	N	27712		676.58	676.58		090	Y
27614		388.80	303.49		090	N	27715		709.80	709.80		090	Y
27615		700.02	700.02		090	N	27720		609.47	609.47		090	Y
27618		393.80	278.69		090	N	27722		605.15	605.15		090	Y
27619		497.54	426.79		090	N	27724		844.48	844.48		090	Y
27620		338.07	338.07		090	Y	27725		749.38	749.38		090	Y
27625		427.70	427.70		090	Y	27727		680.00	680.00		090	Y
27626		461.60	461.60		090	Y	27730		675.67	415.19		090	N
27630		364.91	276.87		090	N	27732		463.42	297.12		090	N
27635		450.00	450.00		090	N	27734		455.45	455.45		090	N
27637		530.76	530.76		090	Y	27740		601.74	456.36		090	Y
27638		552.83	552.83		090	Y	27742		637.68	472.75		090	Y
27640		707.98	707.98		090	N	27745		518.02	518.02		090	Y
27641		609.70	609.70		090	N	27750		209.53	171.54		090	N
27645		786.24	786.24		090	Y	27752		334.65	288.01		090	N
27646		738.24	738.24		090	Y	27756		418.83	418.83		090	Y
27647		564.88	564.88		090	Y	27758		570.80	570.80		090	Y
27648		240.69	30.71		000	N	27759		653.83	653.83		090	Y
27650		462.96	462.96		090	Y	27760		199.29	163.80		090	N
27652		486.17	486.17		090	N	27762		304.85	262.99		090	N
27654		488.44	488.44		090	Y	27766		399.03	399.03		090	N
27656		373.10	273.91		090	Y	27780		189.05	150.38		090	N
27658		368.78	334.43		090	Y	27781		255.94	215.44		090	N
27659		464.10	399.72		090	Y	27784		376.06	376.06		090	N
27664		525.07	325.55		090	N	27786		194.28	157.43		090	N
27665		340.80	340.80		090	Y	27788		263.90	217.26		090	N
27675		374.69	374.69		090	Y	27792		379.70	379.70		090	N
27676		433.61	433.61		090	Y	27808		218.63	174.04		090	N
27680		333.74	333.74		090	N	27810		306.90	259.58		090	N

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27814		518.47	518.47		090	Y
27816		209.07	176.31		090	N
27818		318.50	272.32		090	N
27822		573.76	573.76		090	Y
27823		653.15	653.15		090	Y
27824		219.99	175.63		090	N
27825		345.34	299.84		090	N
27826		486.62	486.62		090	Y
27827		696.38	696.38		090	Y
27828		751.66	751.66		090	Y
27829		336.70	336.70		090	Y
27830		227.05	193.38		090	N
27831		227.05	227.05		090	N
27832		347.62	347.62		090	Y
27840		254.35	254.35		090	N
27842		274.14	274.14		090	N
27846		485.26	485.26		090	Y
27848		548.96	548.96		090	Y
27860		145.15	145.15		010	N
27870		664.30	664.30		090	Y
27871		483.21	483.21		090	Y
27880		566.25	566.25		090	Y
27881		615.39	615.39		090	Y
27882		521.66	521.66		090	N
27884		449.77	449.77		090	N
27886		488.90	488.90		090	N
27888		495.72	495.72		090	Y
27889		486.17	486.17		090	N
27892		375.15	375.15		090	N
27893		378.79	378.79		090	N
27894		490.49	490.49		090	Y
27899		B.R.	B.R.		090	N
28001		196.33	138.09		010	N
28002		270.04	211.12		010	N
28003		469.79	452.27		090	N
28005		451.82	451.82		090	N
28008		298.02	256.85		090	N
28010		246.61	194.51		090	N
28011		318.73	259.81		090	N
28020		310.99	280.74		090	N
28022		297.80	260.26		090	N
28024		304.17	260.26		090	N
28030		234.10	234.10		090	N
28035		329.65	250.25		090	N
28043		259.58	201.79		090	N
28045		305.53	250.93		090	N
28046		561.70	510.97		090	N
28050		324.42	245.93		090	N
28052		282.10	230.23		090	N
28054		262.76	212.26		090	N
28060		330.56	279.82		090	N
28062		375.15	319.87		090	N
28070		310.54	267.77		090	N
28072		317.82	268.00		090	N
28080		269.36	216.35		090	N
28086		392.44	283.01		090	Y
28088		325.55	248.43		090	N
28090		296.20	239.10		090	N
28092		278.01	230.00		090	N
28100		441.58	318.05		090	Y
28102		398.35	398.35		090	Y
28103		363.77	321.69		090	Y
28104		322.82	283.01		090	Y
28106		339.43	339.43		090	Y
28107		367.41	302.35		090	Y
28108		275.27	226.13		090	N
28110		303.03	258.67		090	N
28111		333.06	300.98		090	N
28112		316.23	283.69		090	N
28113		324.19	283.01		090	N
28114		528.94	494.13		090	Y
28116		406.09	339.66		090	N
28118		363.77	314.86		090	Y
28119		331.92	275.96		090	N
28120		393.35	359.91		090	N
28122		432.93	399.72		090	Y
28124		340.80	294.84		090	N
28126		280.51	243.42		090	N
28130		404.04	404.04		090	Y
28140		409.73	352.63		090	N
28150		302.57	263.90		090	N
28153		284.15	234.10		090	N
28160		289.83	259.35		090	N
28171		426.56	426.56		090	Y
28173		465.69	420.88		090	N
28175		369.01	310.31		090	Y
28190		197.47	128.08		010	N
28192		302.35	238.88		090	N
28193		345.80	293.70		090	N
28200		308.94	259.35		090	N
28202		459.78	326.46		090	Y
28208		296.89	247.52		090	N

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28210		382.88	303.49		090	Y
28220		300.07	260.72		090	N
28222		333.51	295.98		090	N
28225		269.82	219.54		090	N
28226		303.94	266.18		090	N
28230		295.98	262.99		090	N
28232		271.63	235.01		090	N
28234		267.54	224.54		090	N
28238		417.92	368.09		090	Y
28240		296.89	256.17		090	N
28250		355.81	311.45		090	Y
28260		452.27	384.25		090	Y
28261		550.32	515.51		090	N
28262		756.21	743.01		090	Y
28264		511.65	511.65		090	Y
28270		320.32	290.06		090	N
28272		271.86	221.36		090	N
28280		322.59	285.28		090	N
28285		316.91	270.27		090	N
28286		316.00	269.36		090	N
28288		325.32	302.80		090	N
28289		417.92	399.94		090	Y
28290		361.27	344.21		090	N
28292		401.76	352.85		090	Y
28293		474.34	413.37		090	Y
28294		455.45	404.27		090	Y
28296		478.89	428.38		090	Y
28297		524.39	465.69		090	Y
28298		431.11	393.80		090	Y
28299		525.98	472.06		090	Y
28300		563.52	455.00		090	Y
28302		455.23	447.49		090	Y
28304		443.17	405.18		090	Y
28305		580.13	477.75		090	Y
28306		349.67	296.20		090	Y
28307		470.24	333.06		090	N
28308		315.54	261.17		090	Y
28309		571.71	571.71		090	N
28310		342.84	295.30		090	N
28312		312.58	294.61		090	N
28313		333.29	333.29		090	N
28315		303.94	255.03		090	N
28320		436.80	436.80		090	Y
28322		477.98	401.31		090	Y
28340		380.61	318.95		090	N
28341		429.97	368.55		090	N
28344		276.41	218.40		090	N
28345		366.28	322.59		090	N
28360		614.93	614.93		090	Y
28400		186.32	162.89		090	N
28405		267.31	249.11		090	N
28406		357.40	357.40		090	N
28415		760.99	760.99		090	Y
28420		782.37	782.37		090	Y
28430		172.67	149.92		090	N
28435		209.30	189.96		090	N
28436		298.48	298.48		090	N
28445		695.24	695.24		090	Y
28450		168.58	140.82		090	N
28455		204.07	190.87		090	N
28456		210.89	210.89		090	N
28465		363.09	363.09		090	N
28470		153.34	127.86		090	N
28475		193.38	174.95		090	N
28476		238.65	238.65		090	N
28485		330.56	330.56		090	N
28490		90.32	77.58		090	N
28495		103.74	92.14		090	N
28496		313.50	163.57		090	N
28505		358.31	249.80		090	N
28510		84.63	78.03		090	N
28515		101.01	88.72		090	N
28525		331.47	224.32		090	N
28530		93.05	93.05		090	N
28531		332.83	167.67		090	N
28540		136.50	136.50		090	N
28545		170.63	170.63		090	N
28546		369.01	225.45		090	N
28555		467.74	349.90		090	Y
28570		125.81	125.81		090	N
28575		202.02	202.02		090	N
28576		381.29	261.40		090	N
28585		401.31	391.30		090	Y
28600		146.28	136.27		090	N
28605		168.35	168.35		090	N
28606		493.68	285.51		090	N
28615		411.78	411.78		090	Y
28630		95.32	95.32		010	N
28635		104.65	104.65		010	N
28636		179.95	143.32		010	N
28645		259.12	205.20		090	N
28660		101.24	89.41		010	N

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28665		104.42	104.42		010	N
28666		372.64	135.59		010	N
28675		291.20	185.64		090	N
28705		821.50	821.50		090	Y
28715		616.75	616.75		090	Y
28725		554.42	554.42		090	Y
28730		516.65	516.65		090	Y
28735		511.65	511.65		090	Y
28737		449.31	449.31		090	Y
28740		500.50	406.32		090	Y
28750		469.79	392.67		090	N
28755		314.41	266.18		090	N
28760		432.48	373.33		090	Y
28800		407.00	407.00		090	Y
28805		413.14	413.14		090	N
28810		335.56	335.56		090	N
28820		336.25	273.00		090	N
28825		321.23	248.43		090	N
28899		B.R.	B.R.		090	N
29000		118.30	94.41		000	N
29010		119.66	90.77		000	N
29015		130.81	102.38		000	N
29020		126.95	84.17		000	N
29025		134.91	101.47		000	N
29035		114.20	80.08		000	N
29040		114.66	90.55		000	N
29044		126.49	94.64		000	N
29046		136.50	107.15		000	N
29049		46.87	35.26		000	N
29055		99.64	77.12		000	N
29058		62.56	48.69		000	N
29065		47.09	37.54		000	N
29075		43.45	33.90		000	N
29085		46.87	35.72		000	N
29086		33.90	26.62		000	N
29105		45.73	33.44		000	N
29125		34.58	23.89		000	N
29126		46.18	29.12		000	N
29130		22.29	16.38		000	N
29131		29.35	18.20		000	N
29200		34.81	23.89		000	N
29220		37.77	25.03		000	N
29240		37.99	25.93		000	N
29260		32.53	21.16		000	N
29280		33.21	21.16		000	N
29305		113.98	87.59		000	N
29325		127.86	98.96		000	N
29345		69.61	58.47		000	N
29355		71.89	63.47		000	N
29358		75.08	60.29		000	N
29365		61.43	50.28		000	N
29405		45.27	36.63		000	N
29425		49.37	40.95		000	N
29435		60.74	49.82		000	N
29440		28.21	20.02		000	N
29445		80.76	66.43		000	N
29450		81.22	74.62		000	N
29505		41.86	27.53		000	N
29515		35.72	28.66		000	N
29520		33.90	22.52		000	N
29530		32.53	21.84		000	N
29540		21.38	19.57		000	N
29550		20.70	18.20		000	N
29580		27.75	22.07		000	N
29590		29.57	25.03		000	N
29700		32.76	20.48		000	N
29705		35.72	27.75		000	N
29710		67.80	48.46		000	N
29715		45.05	29.35		000	N
29720		38.90	25.48		000	N
29730		35.04	26.84		000	N
29740		51.41	38.45		000	N
29750		57.10	45.50		000	N
29799		B.R.	B.R.		000	N
29800		370.14	370.14		090	N
29804		395.85	395.85		090	Y
29805		221.59	221.59		090	N
29806		619.94	619.94		090	N
29807		603.10	603.10		090	N
29819		416.55	416.55		090	N
29820		396.53	396.53		090	Y
29821		419.28	419.28		090	Y
29822		410.18	410.18		090	Y
29823		437.71	437.71		090	Y
29824		378.56	378.56		090	Y
29825		415.87	415.87		090	Y
29826		469.79	469.79		090	Y
29830		285.06	285.06		090	N
29834		316.23	316.23		090	Y
29835		321.46	321.46		090	Y
29836		364.23	364.23		090	Y
29837		339.66	339.66		090	Y

- Not Covered
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B.R. – By Report
* - PA may be required

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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
29838		370.37	370.37		090	N
29840		329.65	329.65		090	N
29843		350.12	350.12		090	Y
29844		364.91	364.91		090	Y
29845		404.04	404.04		090	Y
29846		436.34	436.34		090	N
29847		448.18	448.18		090	Y
29848		329.88	329.88		090	N
29850		369.92	369.92		090	N
29851		603.10	603.10		090	Y
29855		508.46	508.46		090	Y
29856		641.32	641.32		090	Y
29860		386.75	386.75		090	Y
29861		429.29	429.29		090	Y
29862		471.83	471.83		090	Y
29863		485.03	485.03		090	Y
29870		270.27	270.27		090	N
29871		355.81	355.81		090	N
29874		361.73	361.73		090	N
29875		334.65	334.65		090	N
29876		409.50	409.50		090	N
29877		374.47	374.47		090	Y
29879		400.86	400.86		090	N
29880		418.37	418.37		090	N
29881		390.39	390.39		090	Y
29882		421.33	421.33		090	N
29883		511.88	511.88		090	N
29884		387.43	387.43		090	Y
29885		453.86	453.86		090	Y
29886		395.39	395.39		090	N
29887		452.27	452.27		090	Y
29888		635.18	635.18		090	Y
29889		713.21	713.21		090	Y
29891		415.19	415.19		090	Y
29892		432.93	432.93		090	Y
29893		258.67	258.67		090	Y
29894		365.36	365.36		090	Y
29895		359.00	359.00		090	Y
29897		380.38	380.38		090	Y
29898		409.73	409.73		090	Y
29900		269.59	269.59		090	N
29901		296.89	296.89		090	N
29902		318.50	318.50		090	N
29999		B.R.	B.R.		090	N
30000		92.14	68.70		010	N
30020		94.41	69.61		010	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
30100		53.01	34.35		000	N
30110		103.29	59.15		010	N
30115		207.94	207.94		090	N
30117		188.83	148.56		090	N
30118		426.56	426.56		090	Y
30120		257.30	257.30		090	N
30124		149.47	149.47		090	N
30125		322.82	322.82		090	Y
30130		171.76	171.76		090	N
30140		187.46	187.46		090	N
30150		422.47	422.47		090	N
30160		431.80	431.80		090	Y
30200		46.87	29.12		000	N
30210		75.08	39.81		010	N
30220		94.64	55.96		010	N
30300		84.86	33.21		010	N
30310		90.77	90.77		010	N
30320		229.09	229.09		090	N
30400		#	#		090	N
30410		#	#		090	Y
30420		#	#		090	N
30430		#	#		090	Y
30435		#	#		090	Y
30450		#	#		090	Y
30460		450.00	450.00		090	Y
30462		803.53	803.53		090	Y
30465		499.59	499.59		090	N
30520		272.09	272.09		090	N
30540		338.29	338.29		090	Y
30545		481.84	481.84		090	Y
30560		84.40	64.84		010	N
30580		274.59	274.59		090	N
30600		260.72	260.72		090	N
30620		296.20	296.20		090	N
30630		335.56	335.56		090	N
30801		85.09	79.17		010	N
30802		120.58	114.43		010	N
30901		61.65	36.63		000	N
30903		110.34	48.91		000	N
30905		135.59	65.52		000	N
30906		156.29	87.36		000	N
30915		334.88	334.88		090	N
30920		432.25	432.25		090	N
30930		79.85	79.85		010	N
30999		B.R.	B.R.		090	N
31000		83.27	42.54		010	N

- Not Covered
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31002		93.05	93.05		010	N
31020		166.30	154.47		090	N
31030		252.30	248.43		090	N
31032		298.02	298.02		090	N
31040		393.57	393.57		090	N
31050		243.65	243.65		090	N
31051		323.05	323.05		090	N
31070		217.49	217.49		090	N
31075		410.41	410.41		090	Y
31080		480.94	480.94		090	Y
31081		549.19	549.19		090	Y
31084		568.75	568.75		090	Y
31085		596.51	596.51		090	Y
31086		546.91	546.91		090	Y
31087		552.83	552.83		090	Y
31090		434.30	434.30		090	N
31200		251.16	251.16		090	N
31201		380.61	380.61		090	N
31205		439.99	439.99		090	Y
31225		812.18	812.18		090	Y
31230		917.74	917.74		090	Y
31231		72.34	40.27		000	N
31233		113.07	80.53		000	N
31235		130.13	96.91		000	N
31237		144.92	108.97		000	N
31238		163.80	121.03		000	N
31239		358.54	358.54		010	N
31240		99.19	99.19		000	N
31254		174.49	174.49		000	N
31255		260.72	260.72		000	N
31256		124.44	124.44		000	N
31267		204.98	204.98		000	N
31276		330.78	330.78		000	N
31287		147.65	147.65		000	N
31288		171.99	171.99		000	N
31290		682.27	682.27		010	N
31291		722.77	722.77		010	N
31292		588.09	588.09		010	N
31293		638.82	638.82		010	N
31294		734.14	734.14		010	N
31299		B.R.	B.R.		090	N
31300		740.74	740.74		090	Y
31320		414.05	414.05		090	N
31360		848.35	848.35		090	Y
31365		1,107.93	1,107.93		090	Y
31367		1,070.16	1,070.16		090	Y
31368		1,302.21	1,302.21		090	Y
31370		1,047.64	1,047.64		090	Y
31375		967.10	967.10		090	Y
31380		972.34	972.34		090	Y
31382		1,017.84	1,017.84		090	Y
31390		1,319.04	1,319.04		090	Y
31395		1,545.64	1,545.64		090	Y
31400		607.20	607.20		090	Y
31420		601.51	601.51		090	Y
31500		70.98	70.98		000	N
31502		60.74	21.61		000	N
31505		57.10	22.52		000	N
31510		111.70	69.84		000	N
31511		123.99	68.70		000	N
31512		118.53	74.85		000	N
31513		80.31	80.31		000	N
31515		95.55	63.24		000	N
31520		93.05	93.05		000	N
31525		130.13	97.60		000	N
31526		97.60	97.60		000	N
31527		118.07	118.07		000	N
31528		84.63	84.63		000	N
31529		100.78	100.78		000	N
31530		123.99	123.99		000	N
31531		135.36	135.36		000	N
31535		118.30	118.30		000	N
31536		134.22	134.22		000	N
31540		155.16	155.16		000	N
31541		170.17	170.17		000	N
31560		201.11	201.11		000	N
31561		210.66	210.66		000	N
31570		182.68	144.46		000	N
31571		158.11	158.11		000	N
31575		73.94	39.81		000	N
31576		98.73	71.44		000	N
31577		125.35	88.72		000	N
31578		139.46	104.65		000	N
31579		121.94	83.04		000	N
31580		681.59	681.59		090	Y
31582		1,021.02	1,021.02		090	N
31584		905.45	905.45		090	Y
31585		314.86	314.86		090	N
31586		482.98	482.98		090	N
31587		625.17	625.17		090	Y
31588		707.30	707.30		090	Y
31590		456.36	456.36		090	Y

- Not Covered
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31595		472.52	472.52		090	Y
31599		B.R.	B.R.		090	N
31600		240.01	240.01		000	N
31601		157.66	157.66		000	Y
31603		142.87	142.87		000	N
31605		114.89	114.89		000	N
31610		462.05	462.05		090	N
31611		370.60	370.60		090	Y
31612		56.65	32.53		000	N
31613		315.54	315.54		090	N
31614		456.14	456.14		090	N
31615		136.05	77.12		000	N
31622		149.92	92.59		000	N
31623		135.59	94.18		000	N
31624		130.36	93.96		000	N
31625		146.74	109.43		000	N
31628		166.07	121.49		000	N
31629		108.52	108.52		000	N
31630		137.18	137.18		000	N
31631		150.83	150.83		000	N
31635		125.58	125.58		000	N
31640		171.99	171.99		000	N
31641		169.26	169.26		000	N
31643		108.29	108.29		000	N
31645		102.60	102.60		000	N
31646		89.18	89.18		000	N
31656		74.85	74.85		000	N
31700		110.57	47.09		000	N
31708		47.55	47.55		000	N
31710		47.55	47.55		000	N
31715		42.77	42.77		000	N
31717		123.99	69.84		000	N
31720		68.70	32.99		000	N
31725		59.83	59.83		000	N
31730		125.13	92.82		000	N
31750		684.32	684.32		090	Y
31755		822.19	822.19		090	Y
31760		823.55	823.55		090	Y
31766		1,087.00	1,087.00		090	Y
31770		907.50	907.50		090	Y
31775		930.02	930.02		090	Y
31780		724.81	724.81		090	Y
31781		922.28	922.28		090	Y
31785		712.30	712.30		090	Y
31786		910.46	910.46		090	Y
31800		335.79	335.79		090	N
31805		568.07	568.07		090	Y
31820		296.89	293.02		090	N
31825		412.00	412.00		090	N
31830		287.56	287.56		090	N
31899		B.R.	B.R.		090	N
32000		107.15	47.55		000	N
32002		71.21	71.21		000	N
32005		72.57	72.57		000	N
32020		130.13	130.13		000	N
32035		393.35	393.35		090	Y
32036		432.25	432.25		090	Y
32095		391.07	391.07		090	Y
32100		605.83	605.83		090	Y
32110		839.25	839.25		090	Y
32120		499.82	499.82		090	Y
32124		532.35	532.35		090	Y
32140		568.75	568.75		090	Y
32141		575.35	575.35		090	Y
32150		570.12	570.12		090	Y
32151		581.03	581.03		090	Y
32160		373.10	373.10		090	Y
32200		601.97	601.97		090	Y
32201		223.63	223.63		000	Y
32215		489.58	489.58		090	Y
32220		894.76	894.76		090	Y
32225		573.53	573.53		090	Y
32310		558.74	558.74		090	Y
32320		888.62	888.62		090	Y
32400		84.40	54.37		000	N
32402		364.91	364.91		090	Y
32405		98.73	60.52		000	N
32420		71.21	71.21		000	N
32440		920.47	920.47		090	Y
32442		976.43	976.43		090	Y
32445		938.44	938.44		090	Y
32480		868.37	868.37		090	Y
32482		912.50	912.50		090	Y
32484		786.47	786.47		090	Y
32486		898.40	898.40		090	Y
32488		955.04	955.04		090	Y
32491		817.18	817.18		090	Y
32500		818.77	818.77		090	Y
32501		152.20	152.20		000	Y
32520		825.37	825.37		090	Y
32522		908.86	908.86		090	Y
32525		981.66	981.66		090	Y

- Not Covered
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32540		592.18	592.18		090	Y
32601		217.03	217.03		000	N
32602		232.28	232.28		000	N
32603		288.93	288.93		000	N
32604		325.10	325.10		000	N
32605		267.77	267.77		000	N
32606		311.45	311.45		000	N
32650		459.09	459.09		090	Y
32651		520.75	520.75		090	Y
32652		717.76	717.76		090	Y
32653		527.80	527.80		090	Y
32654		480.25	480.25		090	Y
32655		525.98	525.98		090	Y
32656		538.49	538.49		090	Y
32657		551.92	551.92		090	Y
32658		496.18	496.18		090	Y
32659		495.04	495.04		090	Y
32660		671.81	671.81		090	Y
32661		538.26	538.26		090	Y
32662		649.51	649.51		090	Y
32663		714.58	714.58		090	Y
32664		566.93	566.93		090	Y
32665		592.87	592.87		090	Y
32800		566.25	566.25		090	Y
32810		552.60	552.60		090	Y
32815		878.15	878.15		090	Y
32820		846.53	846.53		090	Y
32850		B.R.	B.R.		000	N
32851		1,415.73	1,415.73		090	Y
32852		1,525.39	1,525.39		090	Y
32853		1,725.82	1,725.82		090	Y
32854		1,822.05	1,822.05		090	Y
32900		781.69	781.69		090	Y
32905		806.03	806.03		090	Y
32906		986.21	986.21		090	Y
32940		756.44	756.44		090	Y
32960		93.27	59.61		000	N
32997		190.87	190.87		000	N
32999		B.R.	B.R.		090	Y
33010		75.98	75.98		000	N
33011		76.89	76.89		000	N
33015		265.95	265.95		090	N
33020		492.54	492.54		090	Y
33025		477.52	477.52		090	Y
33030		742.79	742.79		090	Y
33031		843.80	843.80		090	Y
33050		589.68	589.68		090	Y
33120		968.01	968.01		090	Y
33130		811.49	811.49		090	Y
33140		#	#		090	Y
33141		#	#		000	Y
33200		522.34	522.34		090	N
33201		466.60	466.60		090	N
33206		282.10	282.10		090	N
33207		329.19	329.19		090	N
33208		333.74	333.74		090	N
33210		108.06	108.06		000	N
33211		111.93	111.93		000	N
33212		234.10	234.10		090	N
33213		263.22	263.22		090	N
33214		320.55	320.55		090	N
33216		241.60	241.60		090	N
33217		256.85	256.85		090	N
33218		233.19	233.19		090	N
33220		233.64	233.64		090	N
33222		209.07	209.07		090	N
33223		269.59	269.59		090	N
33233		165.39	165.39		090	N
33234		301.67	301.67		090	N
33235		367.64	367.64		090	N
33236		525.30	525.30		090	N
33237		555.33	555.33		090	N
33238		582.86	582.86		090	N
33240		306.67	306.67		090	N
33241		154.70	154.70		090	N
33243		804.90	804.90		090	Y
33244		517.56	517.56		090	N
33245		592.87	592.87		090	Y
33246		831.51	831.51		090	Y
33249		541.00	541.00		090	N
33250		823.78	823.78		090	Y
33251		926.38	926.38		090	Y
33253		1,146.15	1,146.15		090	Y
33261		943.22	943.22		090	Y
33282		202.47	202.47		090	N
33284		151.06	151.06		090	N
33300		703.43	703.43		090	Y
33305		834.93	834.93		090	Y
33310		729.59	729.59		090	Y
33315		864.27	864.27		090	Y
33320		662.02	662.02		090	Y
33321		805.35	805.35		090	Y

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33322		808.31	808.31		090	Y
33330		810.81	810.81		090	Y
33332		880.65	880.65		090	Y
33335		1,114.52	1,114.52		090	Y
33400		1,088.59	1,088.59		090	Y
33401		928.20	928.20		090	Y
33403		972.34	972.34		090	Y
33404		1,097.46	1,097.46		090	Y
33405		1,263.54	1,263.54		090	Y
33406		1,342.93	1,342.93		090	Y
33410		1,193.46	1,193.46		090	Y
33411		1,305.85	1,305.85		090	Y
33412		1,532.21	1,532.21		090	Y
33413		1,585.22	1,585.22		090	Y
33414		1,157.29	1,157.29		090	Y
33415		1,049.23	1,049.23		090	Y
33416		1,121.35	1,121.35		090	Y
33417		1,099.28	1,099.28		090	Y
33420		808.08	808.08		090	N
33422		981.89	981.89		090	Y
33425		1,005.78	1,005.78		090	Y
33426		1,206.21	1,206.21		090	Y
33427		1,423.69	1,423.69		090	Y
33430		1,221.45	1,221.45		090	Y
33460		903.18	903.18		090	Y
33463		969.15	969.15		090	Y
33464		1,027.16	1,027.16		090	Y
33465		1,072.89	1,072.89		090	Y
33468		1,187.78	1,187.78		090	Y
33470		845.16	845.16		090	Y
33471		856.31	856.31		090	Y
33472		854.94	854.94		090	Y
33474		878.60	878.60		090	Y
33475		1,210.30	1,210.30		090	Y
33476		950.04	950.04		090	Y
33478		997.36	997.36		090	Y
33496		1,062.20	1,062.20		090	Y
33500		946.85	946.85		090	Y
33501		672.26	672.26		090	Y
33502		901.13	901.13		090	Y
33503		835.15	835.15		090	N
33504		990.08	990.08		090	Y
33505		1,048.78	1,048.78		090	Y
33506		1,299.25	1,299.25		090	Y
33510		1,065.84	1,065.84		090	Y
33511		1,104.06	1,104.06		090	Y
33512		1,164.80	1,164.80		090	Y
33513		1,177.31	1,177.31		090	Y
33514		1,206.21	1,206.21		090	Y
33516		1,278.32	1,278.32		090	Y
33517		83.27	83.27		000	Y
33518		157.43	157.43		000	Y
33519		230.91	230.91		000	Y
33521		305.08	305.08		000	Y
33522		379.01	379.01		000	Y
33523		452.27	452.27		000	Y
33530		189.96	189.96		000	Y
33533		1,129.54	1,129.54		090	Y
33534		1,190.96	1,190.96		090	Y
33535		1,256.03	1,256.03		090	Y
33536		1,345.89	1,345.89		090	Y
33542		1,105.88	1,105.88		090	Y
33545		1,361.59	1,361.59		090	Y
33572		144.01	144.01		000	Y
33600		1,114.29	1,114.29		090	Y
33602		1,076.99	1,076.99		090	Y
33606		1,159.11	1,159.11		090	Y
33608		1,150.92	1,150.92		090	Y
33610		1,195.29	1,195.29		090	Y
33611		1,262.63	1,262.63		090	Y
33612		1,331.10	1,331.10		090	Y
33615		1,266.04	1,266.04		090	Y
33617		1,394.58	1,394.58		090	Y
33619		1,706.25	1,706.25		090	Y
33641		801.03	801.03		090	Y
33645		937.30	937.30		090	Y
33647		1,099.74	1,099.74		090	Y
33660		1,118.62	1,118.62		090	Y
33665		1,099.74	1,099.74		090	Y
33670		1,210.30	1,210.30		090	Y
33681		1,162.07	1,162.07		090	Y
33684		1,144.55	1,144.55		090	Y
33688		1,142.73	1,142.73		090	Y
33690		797.39	797.39		090	Y
33692		1,162.53	1,162.53		090	Y
33694		1,251.48	1,251.48		090	Y
33697		1,319.73	1,319.73		090	Y
33702		1,039.22	1,039.22		090	Y
33710		1,124.31	1,124.31		090	Y
33720		1,034.90	1,034.90		090	Y
33722		1,099.51	1,099.51		090	Y
33730		1,243.74	1,243.74		090	Y

- Not Covered
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33732		1,096.32	1,096.32		090	Y
33735		800.35	800.35		090	Y
33736		900.90	900.90		090	Y
33737		892.26	892.26		090	Y
33750		808.08	808.08		090	Y
33755		840.38	840.38		090	Y
33762		825.14	825.14		090	Y
33764		851.99	851.99		090	Y
33766		915.23	915.23		090	Y
33767		950.72	950.72		090	Y
33770		1,350.21	1,350.21		090	Y
33771		1,279.23	1,279.23		090	Y
33774		1,154.11	1,154.11		090	Y
33775		1,195.51	1,195.51		090	Y
33776		1,258.08	1,258.08		090	Y
33777		1,238.51	1,238.51		090	Y
33778		1,451.45	1,451.45		090	Y
33779		1,270.13	1,270.13		090	Y
33780		1,515.38	1,515.38		090	Y
33781		1,340.43	1,340.43		090	Y
33786		1,417.10	1,417.10		090	Y
33788		1,000.55	1,000.55		090	Y
33800		687.05	687.05		090	Y
33802		706.39	706.39		090	Y
33803		799.44	799.44		090	Y
33813		839.25	839.25		090	Y
33814		983.94	983.94		090	Y
33820		656.11	656.11		090	Y
33822		688.19	688.19		090	Y
33824		761.22	761.22		090	Y
33840		831.06	831.06		090	Y
33845		891.35	891.35		090	Y
33851		828.33	828.33		090	Y
33852		915.91	915.91		090	Y
33853		1,209.39	1,209.39		090	Y
33860		1,363.18	1,363.18		090	Y
33861		1,484.44	1,484.44		090	Y
33863		1,580.21	1,580.21		090	Y
33870		1,557.01	1,557.01		090	Y
33875		1,208.25	1,208.25		090	Y
33877		1,508.55	1,508.55		090	Y
33910		933.89	933.89		090	Y
33915		777.60	777.60		090	Y
33916		991.90	991.90		090	Y
33917		961.41	961.41		090	Y
33918		996.90	996.90		090	Y
33919		1,445.76	1,445.76		090	Y
33920		1,180.95	1,180.95		090	Y
33922		887.71	887.71		090	Y
33924		184.28	184.28		000	Y
33930		B.R.	B.R.		000	N
33935		2,160.11	2,160.11		090	Y
33940		B.R.	B.R.		000	N
33945		1,542.90	1,542.90		090	Y
33960		613.34	613.34		000	Y
33961		359.45	359.45		000	Y
33967		160.16	159.02		000	N
33968		21.16	21.16		000	N
33970		218.85	218.85		000	Y
33971		415.19	415.19		090	N
33973		316.91	316.91		000	Y
33974		596.73	596.73		090	N
33975		665.21	665.21		000	Y
33976		746.88	746.88		000	Y
33977		718.44	718.44		090	Y
33978		795.79	795.79		090	Y
33979		B.R.	B.R.		000	Y
33980		B.R.	B.R.		090	Y
33999		B.R.	B.R.		090	Y
34001		453.86	453.86		090	Y
34051		538.95	538.95		090	Y
34101		356.26	356.26		090	Y
34111		352.40	352.40		090	Y
34151		837.88	837.88		090	Y
34201		361.73	361.73		090	Y
34203		571.71	571.71		090	Y
34401		824.91	824.91		090	Y
34421		425.20	425.20		090	Y
34451		890.89	890.89		090	Y
34471		364.23	364.23		090	N
34490		379.01	379.01		090	N
34501		591.04	591.04		090	Y
34502		920.69	920.69		090	Y
34510		690.24	690.24		090	Y
34520		649.74	649.74		090	Y
34530		606.29	606.29		090	Y
34800		718.67	718.67		090	Y
34802		792.84	792.84		090	Y
34804		792.84	792.84		090	Y
34808		136.05	136.05		000	Y
34812		222.49	222.49		000	Y
34813		158.34	158.34		000	Y

- Not Covered
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34820		321.46	321.46		000	Y
34825		430.20	430.20		090	Y
34826		136.05	136.05		000	Y
34830		1,117.71	1,117.71		090	N
34831		1,208.25	1,208.25		090	N
34832		1,208.25	1,208.25		090	N
35001		679.09	679.09		090	Y
35002		714.81	714.81		090	Y
35005		616.75	616.75		090	Y
35011		602.88	602.88		090	Y
35013		735.74	735.74		090	Y
35021		675.45	675.45		090	Y
35022		777.37	777.37		090	Y
35045		601.51	601.51		090	Y
35081		956.41	956.41		090	Y
35082		1,286.06	1,286.06		090	Y
35091		1,196.88	1,196.88		090	Y
35092		1,488.76	1,488.76		090	Y
35102		1,045.14	1,045.14		090	Y
35103		1,342.71	1,342.71		090	Y
35111		834.93	834.93		090	Y
35112		987.35	987.35		090	Y
35121		1,012.60	1,012.60		090	Y
35122		1,166.85	1,166.85		090	Y
35131		844.94	844.94		090	Y
35132		998.73	998.73		090	Y
35141		678.86	678.86		090	Y
35142		780.10	780.10		090	Y
35151		767.59	767.59		090	Y
35152		852.44	852.44		090	Y
35161		667.71	667.71		090	Y
35162		692.74	692.74		090	Y
35180		481.62	481.62		090	Y
35182		993.72	993.72		090	Y
35184		611.29	611.29		090	Y
35188		502.78	502.78		090	Y
35189		937.30	937.30		090	Y
35190		449.31	449.31		090	Y
35201		549.19	549.19		090	Y
35206		491.63	491.63		090	Y
35207		476.84	476.84		090	N
35211		860.18	860.18		090	Y
35216		732.78	732.78		090	Y
35221		818.09	818.09		090	Y
35226		537.81	537.81		090	Y
35231		690.92	690.92		090	Y
35236		612.66	612.66		090	Y
35241		896.35	896.35		090	Y
35246		964.37	964.37		090	Y
35251		998.04	998.04		090	Y
35256		658.16	658.16		090	Y
35261		598.33	598.33		090	Y
35266		543.04	543.04		090	Y
35271		856.31	856.31		090	Y
35276		899.99	899.99		090	Y
35281		930.70	930.70		090	Y
35286		592.18	592.18		090	Y
35301		653.61	653.61		090	Y
35311		912.05	912.05		090	Y
35321		542.36	542.36		090	Y
35331		893.62	893.62		090	Y
35341		862.45	862.45		090	Y
35351		784.88	784.88		090	Y
35355		640.19	640.19		090	Y
35361		948.90	948.90		090	Y
35363		1,017.61	1,017.61		090	Y
35371		510.06	510.06		090	Y
35372		614.25	614.25		090	Y
35381		557.15	557.15		090	Y
35390		104.20	104.20		000	Y
35400		97.83	97.83		000	N
35450		338.75	338.75		000	Y
35452		240.69	240.69		000	Y
35454		212.94	212.94		000	Y
35456		255.26	255.26		000	Y
35458		325.78	325.78		000	Y
35459		296.20	296.20		000	Y
35460		209.76	209.76		000	N
35470		294.61	294.61		000	N
35471		342.84	342.84		000	N
35472		238.88	238.88		000	N
35473		211.12	211.12		000	N
35474		253.66	253.66		000	N
35475		319.18	319.18		000	N
35476		208.39	208.39		000	N
35480		374.92	374.92		000	Y
35481		267.77	267.77		000	Y
35482		235.69	235.69		000	Y
35483		277.78	277.78		000	Y
35484		351.94	351.94		000	Y
35485		325.78	325.78		000	Y
35490		370.14	370.14		000	Y

- Not Covered
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35491		262.53	262.53		000	Y
35492		231.37	231.37		000	Y
35493		280.28	280.28		000	N
35494		348.53	348.53		000	N
35495		326.69	326.69		000	N
35500		208.16	208.16		000	Y
35501		660.66	660.66		090	Y
35506		675.67	675.67		090	Y
35507		673.86	673.86		090	Y
35508		643.60	643.60		090	Y
35509		621.76	621.76		090	Y
35511		710.48	710.48		090	Y
35515		639.50	639.50		090	Y
35516		514.61	514.61		090	Y
35518		711.39	711.39		090	Y
35521		751.21	751.21		090	Y
35526		993.26	993.26		090	Y
35531		1,200.75	1,200.75		090	Y
35533		942.08	942.08		090	Y
35536		1,055.83	1,055.83		090	Y
35541		882.25	882.25		090	Y
35546		872.92	872.92		090	Y
35548		746.65	746.65		090	Y
35549		802.16	802.16		090	Y
35551		914.78	914.78		090	Y
35556		751.43	751.43		090	Y
35558		714.81	714.81		090	Y
35560		1,070.62	1,070.62		090	Y
35563		814.22	814.22		090	Y
35565		782.37	782.37		090	Y
35566		930.48	930.48		090	Y
35571		858.81	858.81		090	Y
35582		927.29	927.29		090	Y
35583		792.84	792.84		090	Y
35585		1,030.58	1,030.58		090	Y
35587		889.98	889.98		090	Y
35600		167.67	167.67		000	Y
35601		603.33	603.33		090	Y
35606		642.23	642.23		090	Y
35612		539.63	539.63		090	Y
35616		548.27	548.27		090	Y
35621		682.27	682.27		090	Y
35623		809.22	809.22		090	Y
35626		930.93	930.93		090	Y
35631		1,131.81	1,131.81		090	Y
35636		988.26	988.26		090	Y
35641		844.25	844.25		090	Y
35642		619.71	619.71		090	Y
35645		619.48	619.48		090	Y
35646		1,055.83	1,055.83		090	Y
35647		958.69	958.69		090	Y
35650		639.27	639.27		090	Y
35651		854.94	854.94		090	Y
35654		844.02	844.02		090	Y
35656		673.17	673.17		090	Y
35661		644.28	644.28		090	Y
35663		744.84	744.84		090	Y
35665		715.26	715.26		090	Y
35666		812.86	812.86		090	Y
35671		707.30	707.30		090	Y
35681		52.10	52.10		000	Y
35682		234.55	234.55		000	N
35683		277.55	277.55		000	N
35685		133.09	133.09		000	Y
35686		109.88	109.88		000	Y
35691		619.03	619.03		090	Y
35693		530.99	530.99		090	Y
35694		653.83	653.83		090	Y
35695		652.47	652.47		090	Y
35700		100.33	100.33		000	Y
35701		310.76	310.76		090	Y
35721		289.38	289.38		090	Y
35741		316.45	316.45		090	Y
35761		234.33	234.33		090	Y
35800		262.99	262.99		090	Y
35820		417.92	417.92		090	Y
35840		358.77	358.77		090	Y
35860		219.54	219.54		090	Y
35870		777.82	777.82		090	Y
35875		397.90	397.90		090	N
35876		626.99	626.99		090	Y
35879		562.83	562.83		090	Y
35881		629.72	629.72		090	Y
35901		334.88	334.88		090	Y
35903		418.37	418.37		090	Y
35905		1,095.64	1,095.64		090	Y
35907		1,170.71	1,170.71		090	Y
36000		19.11	5.46		000	N
36002		113.30	69.16		000	N
36005		189.73	29.80		000	N
36010		76.89	76.89		000	N
36011		98.96	98.96		000	N

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36012		110.57	110.57		000	N
36013		73.71	73.71		000	N
36014		94.87	94.87		000	N
36015		110.57	110.57		000	N
36100		97.83	97.83		000	N
36120		63.02	63.02		000	N
36140		63.24	63.24		000	N
36145		63.02	63.02		000	N
36160		80.99	80.99		000	N
36200		95.78	95.78		000	N
36215		147.88	147.88		000	N
36216		166.53	166.53		000	N
36217		200.20	200.20		000	N
36218		32.08	32.08		000	N
36245		150.38	150.38		000	N
36246		167.44	167.44		000	N
36247		199.29	199.29		000	N
36248		32.31	32.31		000	N
36260		365.82	365.82		090	N
36261		211.35	211.35		090	Y
36262		157.66	157.66		090	N
36299		B.R.	B.R.		000	N
36400		25.25	10.92		000	N
36405		20.48	9.33		000	N
36406		25.93	5.69		000	N
36410		15.70	5.46		000	N
36415		2.45	2.45		000	N
36420		31.85	31.85		000	N
36425		97.14	21.84		000	N
36430		22.75	22.75		000	N
36440		31.85	31.85		000	N
36450		69.39	69.39		000	N
36455		78.72	78.72		000	N
36460		217.03	217.03		000	Y
36468		B.R.	B.R.		000	N
36469		B.R.	B.R.		000	N
36470		86.22	35.49		010	N
36471		98.96	51.41		010	N
36481		230.23	230.23		000	N
36488		49.37	49.37		000	N
36489		165.85	82.58		000	N
36490		60.52	60.52		000	N
36491		51.64	51.64		000	N
36493		48.46	48.46		000	N
36500		111.93	111.93		000	N
36510		42.32	42.32		000	N
36520		64.84	64.84		000	N
36521		64.84	64.84		000	N
36522		177.45	65.52		000	N
36530		245.47	245.47		010	N
36531		193.83	193.83		010	N
36532		116.48	116.48		010	N
36533		481.39	209.07		010	N
36534		102.15	102.15		010	N
36535		122.62	98.28		010	N
36540		2.45	2.45		000	N
36550		14.33	14.33		000	N
36600		17.52	9.55		000	N
36620		32.76	32.76		000	N
36625		64.38	64.38		000	N
36640		67.80	67.80		000	N
36660		41.63	41.63		000	N
36680		43.68	43.68		000	N
36800		94.18	94.18		000	N
36810		147.65	147.65		000	N
36815		93.05	93.05		000	N
36819		493.22	493.22		090	Y
36820		493.22	493.22		090	Y
36821		333.97	333.97		090	Y
36822		289.83	289.83		090	N
36823		755.98	755.98		090	N
36825		369.23	369.23		090	Y
36830		434.98	434.98		090	Y
36831		285.97	285.97		090	Y
36832		385.16	385.16		090	Y
36833		432.48	432.48		090	Y
36834		332.83	332.83		090	Y
36835		278.69	278.69		090	N
36860		104.88	77.58		000	N
36861		93.73	93.73		000	N
36870		1,077.67	176.54		090	N
37140		795.57	795.57		090	N
37145		896.58	896.58		090	Y
37160		741.65	741.65		090	Y
37180		846.07	846.07		090	Y
37181		901.58	901.58		090	Y
37195		182.68	182.68		000	N
37200		142.87	142.87		000	N
37201		176.31	176.31		000	N
37202		211.12	211.12		000	N
37203		177.45	177.45		000	N
37204		569.66	569.66		000	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
37205		283.69	283.69		000	N
37206		132.18	132.18		000	N
37207		285.28	285.28		000	Y
37208		134.22	134.22		000	Y
37209		71.44	71.44		000	N
37250		68.48	68.48		000	N
37251		51.87	51.87		000	N
37565		375.60	375.60		090	N
37600		409.95	409.95		090	Y
37605		461.37	461.37		090	Y
37606		244.11	244.11		090	Y
37607		235.92	235.92		090	N
37609		237.97	130.59		010	N
37615		222.27	222.27		090	Y
37616		648.15	648.15		090	Y
37617		752.34	752.34		090	Y
37618		200.43	200.43		090	Y
37620		378.33	378.33		090	N
37650		292.34	292.34		090	N
37660		710.48	710.48		090	Y
37700		164.71	164.71		090	N
37720		223.86	223.86		090	N
37730		284.38	284.38		090	N
37735		394.49	394.49		090	Y
37760		388.34	388.34		090	Y
37780		160.16	160.16		090	N
37785		258.90	160.61		090	N
37788		843.34	843.34		090	Y
37790		354.90	354.90		090	N
37799		B.R.	B.R.		090	N
38100		504.37	504.37		090	Y
38101		536.44	536.44		090	Y
38102		156.52	156.52		000	Y
38115		547.37	547.37		090	Y
38120		587.86	587.86		090	Y
38129		B.R.	B.R.		090	Y
38200		83.04	83.04		000	N
38220		131.50	35.04		000	N
38221		140.60	44.36		000	N
38230		162.89	162.89		010	N
38231		48.69	48.69		000	N
38240		72.12	72.12		000	N
38241		71.66	71.66		000	N
38300		159.70	108.52		010	N
38305		325.32	288.93		090	N
38308		278.46	278.46		090	Y
38380		355.13	355.13		090	Y
38381		541.68	541.68		090	Y
38382		448.86	448.86		090	Y
38500		161.75	149.92		010	N
38505		101.01	53.23		000	N
38510		279.14	279.14		010	N
38520		289.83	289.83		090	N
38525		248.88	248.88		090	N
38530		323.73	323.73		090	Y
38542		282.10	282.10		090	Y
38550		283.24	283.24		090	N
38555		562.15	562.15		090	Y
38562		409.50	409.50		090	Y
38564		413.14	413.14		090	Y
38570		330.56	330.56		010	Y
38571		494.13	494.13		010	Y
38572		574.21	574.21		010	Y
38589		B.R.	B.R.		090	Y
38700		509.14	509.14		090	Y
38720		698.42	698.42		090	Y
38724		733.69	733.69		090	Y
38740		373.56	373.56		090	Y
38745		505.73	505.73		090	Y
38746		157.89	157.89		000	Y
38747		159.25	159.25		000	Y
38760		476.39	476.39		090	Y
38765		742.56	742.56		090	Y
38770		479.57	479.57		090	Y
38780		624.26	624.26		090	Y
38790		370.37	41.18		000	N
38792		16.84	16.84		000	N
38794		139.23	139.23		090	N
38999		B.R.	B.R.		090	Y
39000		320.77	320.77		090	Y
39010		505.51	505.51		090	Y
39200		568.29	568.29		090	Y
39220		689.33	689.33		090	Y
39400		299.84	299.84		010	N
39499		B.R.	B.R.		090	Y
39501		501.41	501.41		090	Y
39502		591.04	591.04		090	Y
39503		3,057.15	3,057.15		090	Y
39520		615.62	615.62		090	Y
39530		576.26	576.26		090	Y
39531		596.51	596.51		090	Y
39540		503.69	503.69		090	Y

- Not Covered
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39541		534.85	534.85		090	Y
39545		543.04	543.04		090	Y
39560		469.56	469.56		090	Y
39561		655.43	655.43		090	Y
39599		B.R.	B.R.		090	Y
40490		65.97	43.00		000	N
40500		233.41	233.41		090	N
40510		267.77	262.53		090	N
40520		295.98	277.09		090	N
40525		385.39	385.39		090	N
40527		440.89	440.89		090	N
40530		298.94	280.74		090	N
40650		220.45	206.57		090	N
40652		265.72	264.81		090	N
40654		310.99	310.99		090	N
40700		554.64	554.64		090	N
40701		718.22	718.22		090	Y
40702		518.25	518.25		090	Y
40720		624.94	624.94		090	N
40761		649.97	649.97		090	N
40799		B.R.	B.R.		090	Y
40800		74.16	38.90		010	N
40801		118.07	105.79		010	N
40804		89.18	76.21		010	N
40805		138.78	129.22		010	N
40806		27.75	27.75		000	N
40808		71.44	71.44		010	N
40810		93.27	87.81		010	N
40812		122.85	122.40		010	N
40814		175.40	175.40		090	N
40816		186.78	186.78		090	N
40818		149.92	149.92		090	N
40819		141.73	137.41		090	N
40820		85.09	83.04		010	N
40830		99.19	99.19		010	N
40831		121.71	121.71		010	N
40840		346.94	346.94		090	Y
40842		343.75	343.75		090	N
40843		456.36	456.36		090	Y
40844		596.73	596.73		090	Y
40845		726.18	726.18		090	N
40899		B.R.	B.R.		010	N
41000		85.99	66.43		010	N
41005		83.49	67.11		010	N
41006		159.70	152.88		090	N
41007		160.61	150.38		090	N
41008		164.94	154.25		090	N
41009		169.26	164.03		090	N
41010		106.93	106.93		010	N
41015		187.46	172.22		090	N
41016		195.65	179.72		090	N
41017		195.19	177.00		090	N
41018		222.04	209.98		090	N
41100		100.33	99.64		010	N
41105		89.41	89.41		010	N
41108		79.85	79.85		010	N
41110		109.43	96.46		010	N
41112		146.97	146.97		090	N
41113		156.29	156.29		090	N
41114		353.53	353.53		090	N
41115		103.29	99.64		010	N
41116		135.36	135.36		090	N
41120		442.03	442.03		090	Y
41130		489.81	489.81		090	Y
41135		931.84	931.84		090	Y
41140		1,006.92	1,006.92		090	Y
41145		1,205.52	1,205.52		090	Y
41150		954.13	954.13		090	Y
41153		980.30	980.30		090	Y
41155		1,129.99	1,129.99		090	Y
41250		114.20	86.45		010	N
41251		126.04	97.60		010	N
41252		145.15	124.44		010	N
41500		189.96	189.96		090	N
41510		205.20	205.20		090	N
41520		135.14	135.14		090	N
41599		B.R.	B.R.		090	N
41800		73.03	60.74		010	N
41805		77.35	77.35		010	N
41806		122.85	122.85		010	N
41820		B.R.	B.R.		000	N
41821		B.R.	B.R.		000	N
41822		121.03	78.72		010	N
41823		160.84	153.79		090	N
41825		87.13	86.68		010	N
41826		116.25	116.25		010	N
41827		164.94	164.94		090	N
41828		144.01	130.36		010	N
41830		157.43	148.10		010	N
41850		B.R.	B.R.		000	N
41870		B.R.	B.R.		000	N
41872		128.99	128.99		090	N

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41874		139.46	129.90		090	N
41899		B.R.	B.R.		090	N
42000		87.36	64.16		010	N
42100		88.04	88.04		010	N
42104		98.28	98.28		010	N
42106		111.25	111.25		010	N
42107		203.61	203.61		090	N
42120		289.15	289.15		090	Y
42140		128.54	115.80		090	N
42145		365.82	365.82		090	N
42160		117.62	105.33		010	N
42180		135.36	111.48		010	N
42182		162.21	162.21		010	N
42200		512.33	512.33		090	Y
42205		538.26	538.26		090	Y
42210		612.20	612.20		090	Y
42215		439.30	439.30		090	Y
42220		322.82	322.82		090	Y
42225		438.85	438.85		090	Y
42226		467.28	467.28		090	Y
42227		435.89	435.89		090	Y
42235		322.14	322.14		090	Y
42260		383.57	383.57		090	Y
42280		69.84	50.51		010	N
42281		82.13	67.11		010	N
42299		B.R.	B.R.		090	Y
42300		107.15	91.68		010	N
42305		268.45	268.45		090	N
42310		90.55	78.94		010	N
42320		120.12	105.33		010	N
42325		153.56	93.96		090	Y
42326		167.67	125.81		090	Y
42330		117.16	80.08		010	N
42335		164.03	164.03		090	N
42340		226.13	226.13		090	N
42400		76.67	27.75		000	N
42405		157.43	157.43		010	N
42408		216.58	216.58		090	N
42409		143.55	143.55		090	Y
42410		412.46	412.46		090	Y
42415		697.51	697.51		090	Y
42420		799.44	799.44		090	Y
42425		556.69	556.69		090	Y
42426		861.54	861.54		090	Y
42440		306.90	306.90		090	Y
42450		210.89	210.89		090	N
42500		220.45	219.54		090	N
42505		285.28	285.28		090	N
42507		274.37	274.37		090	Y
42508		409.50	409.50		090	Y
42509		494.58	494.58		090	N
42510		360.82	360.82		090	Y
42550		315.54	39.36		000	N
42600		295.98	243.65		090	N
42650		44.36	27.75		000	N
42660		53.23	53.23		000	N
42665		129.68	129.68		090	N
42699		B.R.	B.R.		090	Y
42700		114.43	83.04		010	N
42720		238.65	238.65		010	N
42725		455.68	455.68		090	Y
42800		104.20	93.50		010	N
42802		111.25	99.19		010	N
42804		99.42	88.50		010	N
42806		118.98	101.24		010	N
42808		169.72	127.63		010	N
42809		123.08	83.72		010	N
42810		207.71	183.59		090	Y
42815		321.91	321.91		090	Y
42820		185.41	185.41		090	N
42821		200.88	200.88		090	N
42825		167.21	167.21		090	N
42826		167.90	167.90		090	N
42830		118.76	118.76		090	N
42831		123.99	123.99		090	N
42835		128.31	128.31		090	N
42836		160.39	160.39		090	N
42842		391.07	391.07		090	N
42844		606.74	606.74		090	Y
42845		992.13	992.13		090	Y
42860		123.76	123.76		090	N
42870		270.50	270.50		090	N
42890		561.24	561.24		090	Y
42892		668.17	668.17		090	Y
42894		943.90	943.90		090	Y
42900		215.44	215.44		010	N
42950		367.41	367.41		090	Y
42953		424.97	424.97		090	Y
42955		328.28	328.28		090	Y
42960		104.42	104.42		010	N
42961		254.80	254.80		090	Y
42962		315.77	315.77		090	Y

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42970		220.67	220.67		090	N
42971		285.51	285.51		090	Y
42972		303.49	303.49		090	Y
42999		B.R.	B.R.		090	N
43020		350.35	350.35		090	Y
43030		344.89	344.89		090	Y
43045		747.56	747.56		090	Y
43100		395.17	395.17		090	Y
43101		601.06	601.06		090	Y
43107		1,384.34	1,384.34		090	Y
43108		1,213.94	1,213.94		090	Y
43112		1,505.82	1,505.82		090	Y
43113		1,247.84	1,247.84		090	Y
43116		1,174.58	1,174.58		090	Y
43117		1,388.66	1,388.66		090	Y
43118		1,173.22	1,173.22		090	Y
43121		1,065.38	1,065.38		090	Y
43122		1,373.87	1,373.87		090	Y
43123		1,176.40	1,176.40		090	Y
43124		1,016.01	1,016.01		090	Y
43130		491.63	491.63		090	Y
43135		627.44	627.44		090	Y
43200		219.99	65.75		000	N
43202		193.15	71.21		000	N
43204		127.40	127.40		000	N
43205		127.63	127.63		000	N
43215		90.55	90.55		000	N
43216		84.17	84.17		000	N
43217		99.42	99.42		000	N
43219		98.73	98.73		000	N
43220		75.53	75.53		000	N
43226		82.58	82.58		000	N
43227		121.94	121.94		000	N
43228		129.90	129.90		000	N
43231		112.16	112.16		000	N
43232		154.93	154.93		000	N
43234		152.88	71.89		000	N
43235		202.93	84.40		000	N
43239		223.18	96.23		000	N
43240		229.09	229.09		000	N
43241		90.09	90.09		000	N
43242		230.46	230.46		000	N
43243		152.65	152.65		000	N
43244		167.44	167.44		000	N
43245		115.11	115.11		000	N
43246		144.01	144.01		000	N
43247		115.11	115.11		000	N
43248		107.84	107.84		000	N
43249		99.87	99.87		000	N
43250		109.20	109.20		000	N
43251		125.13	125.13		000	N
43255		157.43	157.43		000	N
43256		145.83	145.83		000	N
43258		152.20	152.20		000	N
43259		164.94	164.94		000	N
43260		196.33	196.33		000	N
43261		206.57	206.57		000	N
43262		242.06	242.06		000	N
43263		237.97	237.97		000	N
43264		289.83	289.83		000	N
43265		324.64	324.64		000	N
43267		242.29	242.29		000	N
43268		242.06	242.06		000	N
43269		266.40	266.40		000	N
43271		241.83	241.83		000	N
43272		242.29	242.29		000	N
43280		613.57	613.57		090	Y
43289		B.R.	B.R.		090	Y
43300		389.03	389.03		090	Y
43305		710.94	710.94		090	Y
43310		962.10	962.10		090	Y
43312		1,101.33	1,101.33		090	Y
43313		1,622.30	1,622.30		090	Y
43314		1,783.83	1,783.83		090	Y
43320		722.31	722.31		090	Y
43324		718.90	718.90		090	Y
43325		712.76	712.76		090	Y
43326		714.81	714.81		090	Y
43330		697.06	697.06		090	Y
43331		749.84	749.84		090	Y
43340		705.71	705.71		090	Y
43341		764.40	764.40		090	Y
43350		617.21	617.21		090	Y
43351		690.92	690.92		090	Y
43352		586.95	586.95		090	Y
43360		1,257.85	1,257.85		090	Y
43361		1,386.84	1,386.84		090	Y
43400		735.28	735.28		090	Y
43401		765.76	765.76		090	Y
43405		696.83	696.83		090	Y
43410		538.72	538.72		090	Y
43415		884.52	884.52		090	Y

- Not Covered
A.C. – Acquisition Cost
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
43420		548.73	548.73		090	N
43425		762.58	762.58		090	Y
43450		66.20	46.87		000	N
43453		50.96	50.96		000	N
43456		84.86	84.86		000	N
43458		100.78	100.78		000	N
43460		124.67	124.67		000	N
43496		B.R.	B.R.		090	Y
43499		B.R.	B.R.		090	Y
43500		384.02	384.02		090	Y
43501		682.50	682.50		090	Y
43502		786.92	786.92		090	Y
43510		482.98	482.98		090	Y
43520		371.74	371.74		090	Y
43600		69.16	69.16		000	N
43605		413.82	413.82		090	Y
43610		506.42	506.42		090	Y
43611		612.88	612.88		090	Y
43620		1,013.51	1,013.51		090	Y
43621		1,037.63	1,037.63		090	Y
43622		1,093.59	1,093.59		090	Y
43631		767.59	767.59		090	Y
43632		767.81	767.81		090	Y
43633		783.51	783.51		090	Y
43634		853.58	853.58		090	Y
43635		67.11	67.11		000	Y
43638		971.65	971.65		090	Y
43639		991.44	991.44		090	Y
43640		587.63	587.63		090	Y
43641		595.82	595.82		090	Y
43651		355.13	355.13		090	Y
43652		422.92	422.92		090	Y
43653		288.47	288.47		090	Y
43659		B.R.	B.R.		090	Y
43750		169.49	169.49		010	N
43752		Bundled	Bundled		000	N
43760		59.83	36.63		000	N
43761		66.20	66.20		000	N
43800		479.11	479.11		090	Y
43810		508.92	508.92		090	Y
43820		531.44	531.44		090	Y
43825		656.11	656.11		090	Y
43830		343.07	343.07		090	Y
43831		298.25	298.25		090	Y
43832		547.37	547.37		090	Y
43840		537.36	537.36		090	Y
43842		#	#		090	Y
43843		#	#		090	Y
43846		#	#		090	Y
43847		#	#		090	Y
43848		#	#		090	Y
43850		831.28	831.28		090	Y
43855		880.43	880.43		090	Y
43860		842.21	842.21		090	Y
43865		893.16	893.16		090	Y
43870		350.81	350.81		090	Y
43880		839.48	839.48		090	Y
43999		B.R.	B.R.		090	N
44005		560.33	560.33		090	Y
44010		449.54	449.54		090	Y
44015		84.86	84.86		000	Y
44020		487.08	487.08		090	Y
44021		499.36	499.36		090	Y
44025		495.95	495.95		090	Y
44050		487.99	487.99		090	Y
44055		737.33	737.33		090	Y
44100		72.34	72.34		000	N
44110		417.92	417.92		090	Y
44111		506.64	506.64		090	Y
44120		585.13	585.13		090	Y
44121		144.92	144.92		000	Y
44125		602.19	602.19		090	Y
44126		1,219.86	1,219.86		090	Y
44127		1,402.76	1,402.76		090	Y
44128		149.24	149.24		000	Y
44130		503.91	503.91		090	Y
44132		#	#		000	N
44133		#	#		000	N
44135		#	#		000	N
44136		#	#		000	N
44139		72.34	72.34		000	Y
44140		724.59	724.59		090	Y
44141		748.25	748.25		090	Y
44143		855.63	855.63		090	Y
44144		788.51	788.51		090	Y
44145		907.95	907.95		090	Y
44146		1,013.51	1,013.51		090	Y
44147		730.50	730.50		090	Y
44150		899.53	899.53		090	Y
44151		1,002.14	1,002.14		090	Y
44152		1,059.69	1,059.69		090	Y
44153		1,112.70	1,112.70		090	Y

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44155		1,018.75	1,018.75		090	Y
44156		1,142.73	1,142.73		090	Y
44160		645.64	645.64		090	Y
44200		507.32	507.32		090	Y
44201		356.04	356.04		090	Y
44202		760.53	760.53		090	Y
44203		144.92	144.92		000	Y
44204		837.65	837.65		090	Y
44205		742.10	742.10		090	Y
44209		B.R.	B.R.		090	Y
44300		444.31	444.31		090	Y
44310		620.62	620.62		090	Y
44312		310.99	310.99		090	N
44314		594.91	594.91		090	Y
44316		816.50	816.50		090	Y
44320		698.88	698.88		090	Y
44322		530.08	530.08		090	Y
44340		295.52	295.52		090	N
44345		558.97	558.97		090	Y
44346		608.79	608.79		090	Y
44360		92.82	92.82		000	N
44361		101.69	101.69		000	N
44363		121.49	121.49		000	N
44364		129.22	129.22		000	N
44365		116.25	116.25		000	N
44366		150.38	150.38		000	N
44369		152.88	152.88		000	N
44370		151.74	151.74		000	N
44372		151.06	151.06		000	N
44373		123.53	123.53		000	N
44376		177.91	177.91		000	N
44377		186.32	186.32		000	N
44378		237.51	237.51		000	N
44379		236.37	236.37		000	N
44380		43.23	43.23		000	N
44382		50.96	50.96		000	N
44383		102.38	102.38		000	N
44385		164.03	64.84		000	N
44386		210.89	75.53		000	N
44388		225.68	99.42		000	N
44389		248.88	109.20		000	N
44390		243.65	131.50		000	N
44391		240.24	142.19		000	N
44392		278.92	131.27		000	N
44393		308.03	164.03		000	N
44394		281.65	151.29		000	N
44397		159.25	159.25		000	N
44500		19.79	19.79		000	N
44602		548.73	548.73		090	Y
44603		634.50	634.50		090	Y
44604		555.10	555.10		090	Y
44605		672.72	672.72		090	Y
44615		551.69	551.69		090	Y
44620		427.02	427.02		090	Y
44625		519.61	519.61		090	Y
44626		853.58	853.58		090	Y
44640		736.42	736.42		090	Y
44650		764.85	764.85		090	Y
44660		719.81	719.81		090	Y
44661		832.42	832.42		090	Y
44680		542.81	542.81		090	Y
44700		558.28	558.28		090	Y
44799		B.R.	B.R.		090	Y
44800		401.54	401.54		090	Y
44820		427.93	427.93		090	Y
44850		383.79	383.79		090	Y
44899		B.R.	B.R.		090	Y
44900		380.38	380.38		090	Y
44901		194.28	194.28		000	Y
44950		362.86	362.86		090	Y
44955		50.51	50.51		000	Y
44960		446.58	446.58		090	Y
44970		308.26	308.26		090	Y
44979		B.R.	B.R.		090	Y
45000		195.65	195.65		090	N
45005		153.34	85.31		010	N
45020		210.44	210.44		090	N
45100		200.43	137.41		090	N
45108		262.53	183.14		090	N
45110		975.52	975.52		090	Y
45111		601.51	601.51		090	Y
45112		1,044.45	1,044.45		090	Y
45113		1,034.21	1,034.21		090	Y
45114		945.49	945.49		090	Y
45116		855.17	855.17		090	Y
45119		1,036.72	1,036.72		090	Y
45120		861.77	861.77		090	Y
45121		944.35	944.35		090	Y
45123		583.54	583.54		090	Y
45126		1,513.79	1,513.79		090	Y
45130		569.43	569.43		090	Y
45135		670.44	670.44		090	Y

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45136		944.58	944.58		090	Y
45150		271.18	209.30		090	N
45160		528.03	528.03		090	Y
45170		409.95	409.95		090	Y
45190		355.35	355.35		090	Y
45300		40.27	14.79		000	N
45303		46.64	17.29		000	N
45305		62.11	34.81		000	N
45307		85.54	33.90		000	N
45308		57.56	30.03		000	N
45309		104.20	66.89		000	N
45315		100.33	48.91		000	N
45317		81.90	51.87		000	N
45320		82.36	54.83		000	N
45321		41.41	41.41		000	N
45327		59.38	59.38		000	N
45330		66.66	34.58		000	N
45331		81.90	39.59		000	N
45332		142.41	59.83		000	N
45333		132.86	60.06		000	N
45334		90.09	90.09		000	N
45337		78.03	78.03		000	N
45338		164.48	77.58		000	N
45339		156.97	102.83		000	N
45341		94.18	94.18		000	N
45342		138.09	138.09		000	N
45345		101.47	101.47		000	N
45355		113.30	113.30		000	N
45378		288.93	127.63		000	N
45378	53	66.66	34.58		000	N
45379		299.84	159.02		000	N
45380		317.13	150.83		000	N
45382		370.14	185.64		000	N
45383		368.09	196.79		000	N
45384		333.97	159.25		000	N
45385		358.77	178.82		000	N
45387		197.92	197.92		000	N
45500		271.63	271.63		090	N
45505		268.22	268.22		090	N
45520		30.71	17.75		000	N
45540		575.12	575.12		090	Y
45541		478.89	478.89		090	Y
45550		785.10	785.10		090	Y
45560		391.98	391.98		090	Y
45562		539.63	539.63		090	Y
45563		821.96	821.96		090	Y
45800		609.47	609.47		090	Y
45805		740.51	740.51		090	Y
45820		633.36	633.36		090	Y
45825		738.69	738.69		090	Y
45900		85.77	85.77		010	N
45905		334.65	76.44		010	N
45910		470.70	91.91		010	N
45915		186.10	100.33		010	N
45999		B.R.	B.R.		090	N
46020		140.37	123.53		010	N
46030		96.46	57.79		010	N
46040		248.20	192.69		090	N
46045		170.63	170.63		090	N
46050		113.30	60.29		010	N
46060		225.45	225.45		090	N
46070		124.22	124.22		090	N
46080		147.88	98.05		010	N
46083		143.55	70.30		010	N
46200		174.49	138.09		090	N
46210		182.45	114.66		090	N
46211		216.58	173.58		090	N
46220		68.02	50.51		010	N
46221		89.41	73.71		010	N
46230		162.44	100.55		010	N
46250		223.86	157.66		090	N
46255		260.94	180.64		090	N
46257		203.84	203.84		090	N
46258		216.35	216.35		090	N
46260		248.43	248.43		090	N
46261		268.22	268.22		090	N
46262		282.33	282.33		090	N
46270		210.44	151.06		090	N
46275		216.81	175.40		090	N
46280		231.60	231.60		090	N
46285		196.56	159.93		090	N
46288		268.91	268.91		090	N
46320		130.81	74.85		010	N
46500		104.88	51.64		010	N
46600		30.94	15.47		000	N
46604		53.92	41.86		000	N
46606		39.59	26.16		000	N
46608		78.03	47.55		000	N
46610		65.52	43.00		000	N
46611		91.00	58.47		000	N
46612		116.93	75.53		000	N
46614		91.45	64.16		000	N

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46615		104.88	86.45		000	N
46700		325.32	325.32		090	N
46705		272.55	272.55		090	Y
46715		278.23	278.23		090	Y
46716		547.59	547.59		090	Y
46730		920.01	920.01		090	Y
46735		1,127.49	1,127.49		090	Y
46740		1,046.73	1,046.73		090	Y
46742		1,273.77	1,273.77		090	Y
46744		1,748.79	1,748.79		090	Y
46746		1,980.39	1,980.39		090	Y
46748		2,174.67	2,174.67		090	Y
46750		376.06	376.06		090	Y
46751		352.63	352.63		090	Y
46753		291.88	291.88		090	N
46754		174.95	84.63		010	N
46760		502.78	502.78		090	Y
46761		484.57	484.57		090	Y
46762		438.62	438.62		090	Y
46900		126.26	62.34		010	N
46910		131.95	78.49		010	N
46916		118.07	82.13		010	N
46917		166.98	81.90		010	N
46922		136.05	78.49		010	N
46924		176.31	106.47		010	N
46934		235.92	170.40		090	N
46935		163.57	77.80		010	N
46936		241.83	170.85		090	N
46937		166.30	102.15		010	N
46938		255.03	187.23		090	N
46940		135.14	74.39		010	N
46942		113.75	64.84		010	N
46945		137.41	97.14		090	N
46946		186.10	121.94		090	N
46999		B.R.	B.R.		090	N
47000		236.60	59.83		000	N
47001		61.65	61.65		000	N
47010		592.64	592.64		090	Y
47011		192.24	192.24		000	Y
47015		544.63	544.63		090	Y
47100		425.43	425.43		090	Y
47120		1,231.23	1,231.23		090	Y
47122		1,859.58	1,859.58		090	Y
47125		1,672.58	1,672.58		090	Y
47130		1,802.94	1,802.94		090	Y
47133		B.R.	B.R.		000	N
47134		1,272.18	1,272.18		000	Y
47135		2,975.47	2,975.47		090	Y
47136		2,748.65	2,748.65		090	Y
47300		534.85	534.85		090	Y
47350		679.77	679.77		090	Y
47360		934.34	934.34		090	Y
47361		1,574.53	1,574.53		090	Y
47362		663.16	663.16		090	Y
47370		585.58	585.58		090	Y
47371		551.92	551.92		090	Y
47379		B.R.	B.R.		090	Y
47380		688.42	688.42		090	Y
47381		680.45	680.45		090	Y
47382		408.82	408.82		010	Y
47399		B.R.	B.R.		090	Y
47400		1,108.38	1,108.38		090	Y
47420		695.24	695.24		090	Y
47425		690.69	690.69		090	Y
47460		641.10	641.10		090	Y
47480		415.19	415.19		090	Y
47490		344.89	344.89		090	N
47500		61.43	61.43		000	N
47505		83.95	23.66		000	N
47510		400.17	400.17		090	N
47511		487.76	487.76		090	N
47525		205.89	205.89		010	N
47530		253.44	253.44		090	N
47550		98.28	98.28		000	Y
47552		201.34	201.34		000	N
47553		210.44	210.44		000	N
47554		298.71	298.71		000	N
47555		248.88	248.88		000	N
47556		279.60	279.60		000	N
47560		162.21	162.21		000	N
47561		175.63	175.63		000	N
47562		388.34	388.34		090	Y
47563		415.19	415.19		090	Y
47564		490.03	490.03		090	Y
47570		436.34	436.34		090	Y
47579		B.R.	B.R.		090	Y
47600		484.12	484.12		090	Y
47605		519.15	519.15		090	Y
47610		654.75	654.75		090	Y
47612		651.33	651.33		090	Y
47620		711.17	711.17		090	Y
47630		286.88	286.88		090	N

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47700		578.76	578.76		090	Y
47701		992.35	992.35		090	N
47711		814.45	814.45		090	Y
47712		1,050.37	1,050.37		090	Y
47715		657.25	657.25		090	Y
47716		583.54	583.54		090	Y
47720		581.72	581.72		090	Y
47721		687.05	687.05		090	Y
47740		666.12	666.12		090	Y
47741		757.12	757.12		090	Y
47760		903.63	903.63		090	Y
47765		891.57	891.57		090	Y
47780		924.10	924.10		090	Y
47785		1,094.05	1,094.05		090	Y
47800		825.37	825.37		090	Y
47801		588.54	588.54		090	Y
47802		784.65	784.65		090	Y
47900		712.99	712.99		090	Y
47999		B.R.	B.R.		090	Y
48000		944.81	944.81		090	Y
48001		1,177.54	1,177.54		090	Y
48005		1,389.34	1,389.34		090	Y
48020		548.73	548.73		090	Y
48100		456.14	456.14		090	Y
48102		314.86	165.16		010	N
48120		557.60	557.60		090	Y
48140		802.16	802.16		090	Y
48145		844.94	844.94		090	Y
48146		958.69	958.69		090	Y
48148		629.49	629.49		090	Y
48150		1,649.15	1,649.15		090	Y
48152		1,534.26	1,534.26		090	Y
48153		1,666.44	1,666.44		090	Y
48154		1,544.50	1,544.50		090	Y
48155		915.01	915.01		090	Y
48160		B.R.	B.R.		000	N
48180		853.13	853.13		090	Y
48400		61.43	61.43		000	N
48500		546.00	546.00		090	Y
48510		512.56	512.56		090	Y
48511		183.82	183.82		000	Y
48520		548.27	548.27		090	Y
48540		679.54	679.54		090	Y
48545		642.23	642.23		090	Y
48547		876.33	876.33		090	Y
48550		B.R.	B.R.		000	N
48554		1,110.20	1,110.20		090	Y
48556		581.03	581.03		090	Y
48999		B.R.	B.R.		090	Y
49000		426.79	426.79		090	Y
49002		395.39	395.39		090	Y
49010		460.23	460.23		090	Y
49020		799.89	799.89		090	Y
49021		213.17	213.17		000	N
49040		503.69	503.69		090	Y
49041		232.73	232.73		000	Y
49060		591.96	591.96		090	N
49061		224.09	224.09		000	Y
49062		437.26	437.26		090	Y
49080		136.50	42.77		000	N
49081		101.69	43.23		000	N
49085		443.40	443.40		090	N
49180		235.92	54.14		000	N
49200		398.13	398.13		090	Y
49201		564.43	564.43		090	Y
49215		1,155.25	1,155.25		090	Y
49220		544.41	544.41		090	Y
49250		323.96	323.96		090	N
49255		423.83	423.83		090	Y
49320		194.51	194.51		010	Y
49321		201.57	201.57		010	Y
49322		219.77	219.77		010	Y
49323		325.32	325.32		090	Y
49329		B.R.	B.R.		090	Y
49400		63.24	63.24		000	N
49420		74.85	74.85		000	N
49421		228.41	228.41		090	N
49422		221.13	221.13		010	N
49423		50.28	50.28		000	N
49424		27.98	27.98		000	N
49425		433.61	433.61		090	Y
49426		375.15	375.15		090	N
49427		32.53	32.53		000	N
49428		215.22	215.22		010	N
49429		262.76	262.76		010	N
49491		398.35	398.35		090	Y
49492		488.44	488.44		090	Y
49495		227.95	227.95		090	Y
49496		350.35	350.35		090	Y
49500		211.58	211.58		090	Y
49501		319.64	319.64		090	Y
49505		288.01	277.55		090	Y

- Not Covered
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49507		372.19	372.19		090	Y
49520		358.08	358.08		090	Y
49521		422.47	422.47		090	Y
49525		320.32	320.32		090	Y
49540		379.93	379.93		090	Y
49550		312.36	312.36		090	Y
49553		341.02	341.02		090	Y
49555		339.20	339.20		090	Y
49557		396.76	396.76		090	Y
49560		418.83	418.83		090	Y
49561		497.09	497.09		090	Y
49565		422.47	422.47		090	Y
49566		502.32	502.32		090	Y
49568		159.48	159.48		000	Y
49570		218.40	218.40		090	Y
49572		253.89	253.89		090	Y
49580		168.35	168.35		090	Y
49582		275.27	275.27		090	Y
49585		245.02	245.02		090	Y
49587		280.05	280.05		090	Y
49590		319.41	319.41		090	Y
49600		411.78	411.78		090	Y
49605		2,464.28	2,464.28		090	Y
49606		679.31	679.31		090	Y
49610		408.14	408.14		090	Y
49611		363.32	363.32		090	Y
49650		229.09	229.09		090	Y
49651		301.67	301.67		090	Y
49659		B.R.	B.R.		090	Y
49900		454.77	454.77		090	Y
49905		214.53	214.53		000	Y
49906		B.R.	B.R.		090	N
49999		B.R.	B.R.		090	Y
50010		423.83	423.83		090	Y
50020		659.75	659.75		090	N
50021		319.41	319.41		000	Y
50040		616.75	616.75		090	N
50045		563.52	563.52		090	Y
50060		685.46	685.46		090	Y
50065		730.96	730.96		090	Y
50070		724.81	724.81		090	Y
50075		888.16	888.16		090	Y
50080		600.14	600.14		090	N
50081		819.00	819.00		090	Y
50100		606.29	606.29		090	Y
50120		581.94	581.94		090	Y
50125		609.02	609.02		090	Y
50130		620.17	620.17		090	Y
50135		681.13	681.13		090	Y
50200		83.49	83.49		000	N
50205		421.33	421.33		090	Y
50220		620.39	620.39		090	Y
50225		714.58	714.58		090	Y
50230		771.91	771.91		090	Y
50234		782.60	782.60		090	Y
50236		914.55	914.55		090	Y
50240		825.82	825.82		090	Y
50280		570.12	570.12		090	Y
50290		546.68	546.68		090	Y
50300		B.R.	B.R.		000	N
50320		784.19	784.19		090	Y
50340		508.01	508.01		090	Y
50360		1,173.67	1,173.67		090	Y
50365		1,380.93	1,380.93		090	Y
50370		558.51	558.51		090	Y
50380		810.35	810.35		090	Y
50390		61.43	61.43		000	N
50392		105.79	105.79		000	N
50393		129.90	129.90		000	N
50394		77.58	23.89		000	N
50395		105.79	105.79		000	N
50396		69.39	69.39		000	N
50398		58.47	45.73		000	N
50400		691.83	691.83		090	Y
50405		836.75	836.75		090	Y
50500		727.77	727.77		090	Y
50520		681.59	681.59		090	Y
50525		834.01	834.01		090	Y
50526		911.37	911.37		090	Y
50540		710.94	710.94		090	Y
50541		533.94	533.94		090	Y
50544		737.10	737.10		090	Y
50545		789.43	789.43		090	Y
50546		678.63	678.63		090	Y
50547		869.51	869.51		090	Y
50548		798.75	798.75		090	Y
50549		B.R.	B.R.		090	Y
50551		245.24	175.63		000	N
50553		514.83	188.14		000	N
50555		616.30	205.43		000	N
50557		621.30	207.71		000	N
50559		212.94	212.94		000	N

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50561		599.69	237.97		000	N
50570		299.16	299.16		000	N
50572		325.32	325.32		000	N
50574		348.53	348.53		000	N
50575		438.39	438.39		000	N
50576		345.12	345.12		000	N
50578		359.68	359.68		000	N
50580		372.19	372.19		000	N
50590		462.05	337.16		090	N
50600		582.86	582.86		090	Y
50605		572.39	572.39		090	Y
50610		586.72	586.72		090	Y
50620		553.96	553.96		090	Y
50630		547.37	547.37		090	Y
50650		634.27	634.27		090	Y
50660		701.15	701.15		090	Y
50684		363.32	23.89		000	N
50686		152.43	50.51		000	N
50688		67.80	67.80		010	N
50690		381.29	36.40		000	N
50700		566.70	566.70		090	Y
50715		739.83	739.83		090	Y
50722		632.90	632.90		090	Y
50725		685.91	685.91		090	Y
50727		343.52	343.52		090	Y
50728		474.34	474.34		090	Y
50740		663.39	663.39		090	Y
50750		702.29	702.29		090	Y
50760		669.31	669.31		090	Y
50770		701.38	701.38		090	Y
50780		664.76	664.76		090	Y
50782		733.91	733.91		090	Y
50783		744.61	744.61		090	Y
50785		734.14	734.14		090	Y
50800		573.76	573.76		090	Y
50810		764.40	764.40		090	Y
50815		741.19	741.19		090	Y
50820		801.94	801.94		090	Y
50825		1,018.29	1,018.29		090	Y
50830		1,110.43	1,110.43		090	Y
50840		744.61	744.61		090	Y
50845		727.32	727.32		090	Y
50860		569.21	569.21		090	Y
50900		509.83	509.83		090	Y
50920		530.08	530.08		090	Y
50930		697.74	697.74		090	Y
50940		539.17	539.17		090	Y
50945		573.76	573.76		090	Y
50947		856.99	856.99		090	Y
50948		783.06	783.06		090	Y
50949		B.R.	B.R.		090	Y
50951		259.12	183.14		000	N
50953		527.57	195.88		000	N
50955		644.28	213.40		000	N
50957		611.75	212.48		000	N
50959		138.55	138.55		000	N
50961		680.23	189.28		000	N
50970		224.32	224.32		000	N
50972		219.99	219.99		000	N
50974		288.47	288.47		000	N
50976		283.92	283.92		000	N
50978		163.35	163.35		000	N
50980		215.22	215.22		000	N
51000		65.06	24.12		000	N
51005		101.92	32.53		000	N
51010		185.19	138.09		010	N
51020		290.06	290.06		090	Y
51030		298.02	298.02		090	N
51040		206.57	206.57		090	Y
51045		298.94	298.94		090	Y
51050		284.38	284.38		090	Y
51060		359.00	359.00		090	Y
51065		348.07	348.07		090	N
51080		270.73	270.73		090	Y
51500		384.93	384.93		090	Y
51520		372.64	372.64		090	Y
51525		517.11	517.11		090	Y
51530		472.97	472.97		090	Y
51535		488.22	488.22		090	Y
51550		570.80	570.80		090	Y
51555		755.30	755.30		090	Y
51565		778.73	778.73		090	Y
51570		863.59	863.59		090	Y
51575		1,071.98	1,071.98		090	Y
51580		1,102.24	1,102.24		090	Y
51585		1,230.55	1,230.55		090	Y
51590		1,139.09	1,139.09		090	Y
51595		1,279.23	1,279.23		090	Y
51596		1,367.73	1,367.73		090	Y
51597		1,322.91	1,322.91		090	Y
51600		147.19	27.53		000	N
51605		399.94	20.25		000	N

- Not Covered
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51610		397.22	32.76		000	N
51700		50.96	27.53		000	N
51705		73.48	38.90		010	N
51710		152.65	68.93		010	N
51715		190.65	118.07		000	N
51720		84.86	63.24		000	N
51725		172.44	172.44		000	N
51725	26	47.77	47.77		000	N
51725	TC	124.67	124.67		000	N
51726		148.10	148.10		000	N
51726	26	53.92	53.92		000	N
51726	TC	94.18	94.18		000	N
51736		39.13	39.13		000	N
51736	26	19.34	19.34		000	N
51736	TC	20.02	20.02		000	N
51741		71.66	71.66		000	N
51741	26	36.17	36.17		000	N
51741	TC	35.49	35.49		000	N
51772		147.88	147.88		000	N
51772	26	51.87	51.87		000	N
51772	TC	96.00	96.00		000	N
51784		113.98	113.98		000	N
51784	26	48.46	48.46		000	N
51784	TC	65.52	65.52		000	N
51785		116.25	116.25		000	N
51785	26	48.23	48.23		000	N
51785	TC	68.02	68.02		000	N
51792		104.88	104.88		000	N
51792	26	36.17	36.17		000	N
51792	TC	68.70	68.70		000	N
51795		149.01	149.01		000	N
51795	26	48.46	48.46		000	N
51795	TC	100.55	100.55		000	N
51797		150.60	150.60		000	N
51797	26	50.73	50.73		000	N
51797	TC	99.87	99.87		000	N
51800		633.59	633.59		090	Y
51820		679.54	679.54		090	Y
51840		414.73	414.73	EX	090	Y
51841		508.92	508.92	EX	090	Y
51845		388.80	388.80	EX	090	Y
51860		468.19	468.19		090	Y
51865		561.92	561.92		090	Y
51880		319.64	319.64		090	Y
51900		498.00	498.00		090	Y
51920		457.05	457.05		090	Y
51925		599.01	599.01	EX	090	Y
51940		1,052.42	1,052.42		090	Y
51960		851.08	851.08		090	Y
51980		436.80	436.80		090	Y
51990		455.68	455.68		090	Y
51992		488.44	488.44		090	Y
52000		126.72	63.24		000	N
52001		81.67	81.67		000	N
52005		364.23	76.89		000	N
52007		94.64	94.64		000	N
52010		207.03	94.64		000	N
52204		197.92	74.39		000	N
52214		237.51	116.48		000	N
52224		221.36	98.51		000	N
52234		147.65	147.65		000	N
52235		173.58	173.58		000	N
52240		308.03	308.03		000	N
52250		141.28	141.28		000	N
52260		123.08	123.08		000	N
52265		156.07	92.36		000	N
52270		237.74	105.56		000	N
52275		281.42	147.42		000	N
52276		291.43	156.97		000	N
52277		194.28	194.28		000	N
52281		400.40	91.00		000	N
52282		504.14	200.88		000	N
52283		239.33	117.39		000	N
52285		247.52	113.52		000	N
52290		144.01	144.01		000	N
52300		166.53	166.53		000	N
52301		172.90	172.90		000	N
52305		166.53	166.53		000	N
52310		154.93	89.64		000	N
52315		500.73	163.35		000	N
52317		758.49	210.89		000	N
52318		288.01	288.01		000	N
52320		147.42	147.42		000	N
52325		193.15	193.15		000	N
52327		163.12	163.12		000	N
52330		596.96	158.11		000	N
52332		500.05	91.23		000	N
52334		151.29	151.29		000	N
52341		196.79	196.79		000	N
52342		212.94	212.94		000	N
52343		235.92	235.92		000	N
52344		252.30	252.30		000	N

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52345		268.68	268.68		000	N
52346		302.57	302.57		000	N
52347		174.04	174.04		000	N
52351		184.05	184.05		000	N
52352		215.90	215.90		000	N
52353		250.02	250.02		000	N
52354		230.46	230.46		000	N
52355		277.09	277.09		000	N
52400		360.82	360.82		090	N
52450		331.01	331.01		090	N
52500		356.26	356.26		090	N
52510		291.88	291.88		090	N
52601		479.34	479.34		090	N
52606		336.02	336.02		090	N
52612		342.62	342.62		090	N
52614		306.22	306.22		090	N
52620		298.71	298.71		090	N
52630		319.18	319.18		090	N
52640		287.79	287.79		090	N
52647		1,608.65	355.58		090	N
52648		439.53	439.53		090	N
52700		305.76	305.76		090	N
53000		225.45	114.20		010	N
53010		180.18	180.18		090	N
53020		143.78	57.10		000	N
53025		137.41	37.08		000	N
53040		490.26	342.84		090	N
53060		206.12	130.13		010	N
53080		341.48	341.48		090	N
53085		479.80	479.80		090	Y
53200		190.87	83.72		000	N
53210		481.39	481.39		090	Y
53215		569.89	569.89		090	Y
53220		296.66	296.66		090	N
53230		372.64	372.64		090	Y
53235		388.11	388.11		090	Y
53240		275.05	275.05		090	N
53250		247.75	247.75		090	N
53260		211.80	127.40		010	N
53265		225.68	129.45		010	N
53270		235.01	138.32		010	N
53275		185.87	185.87		010	N
53400		493.68	493.68		090	Y
53405		540.08	540.08		090	Y
53410		599.46	599.46		090	Y
53415		691.14	691.14		090	Y
53420		535.76	535.76		090	N
53425		584.45	584.45		090	Y
53430		600.60	600.60		090	Y
53431		652.47	652.47		090	Y
53440		476.84	476.84		090	Y
53442		335.79	335.79		090	Y
53444		468.88	468.88		090	Y
53445		531.89	531.89		090	Y
53446		435.66	435.66		090	Y
53447		499.36	499.36		090	Y
53448		782.60	782.60		090	Y
53449		383.34	383.34		090	Y
53450		263.44	263.44		090	N
53460		294.38	294.38		090	N
53502		313.95	313.95		090	N
53505		309.17	309.17		090	Y
53510		389.48	389.48		090	Y
53515		493.90	493.90		090	Y
53520		345.57	345.57		090	N
53600		55.74	39.13		000	N
53601		53.23	32.31		000	N
53605		40.27	40.27		000	N
53620		82.13	52.78		000	N
53621		77.80	43.68		000	N
53660		44.82	24.34		000	N
53661		44.82	24.12		000	N
53665		24.12	24.12		000	N
53670		51.87	15.92		000	N
53675		95.09	48.00		000	N
53850		2,236.10	326.24		090	N
53852		1,969.92	340.34		090	N
53853		1,313.13	158.57		090	N
53899		B.R.	B.R.		090	N
54000		166.53	71.21		010	N
54001		202.70	101.24		010	N
54015		308.49	199.52		010	N
54050		94.64	40.04		010	N
54055		181.32	61.43		010	N
54056		97.14	42.32		010	N
54057		97.60	61.65		010	N
54060		175.63	83.72		010	N
54065		180.41	108.29		010	N
54100		126.04	62.34		000	N
54105		237.74	132.86		010	N
54110		427.25	427.25		090	Y
54111		535.08	535.08		090	Y

- Not Covered
A.C. – Acquisition Cost
B.R. – By Report
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
54112		605.61	605.61		090	Y
54115		412.91	300.98		090	Y
54120		422.24	422.24		090	Y
54125		534.40	534.40		090	Y
54130		750.52	750.52		090	Y
54135		959.14	959.14		090	Y
54150		182.68	86.68		010	N
54152		95.32	95.32		010	N
54160		174.49	100.55		010	N
54161		125.35	125.35		010	N
54162		137.64	137.64		010	N
54163		129.22	129.22		010	N
54164		113.52	113.52		010	N
54200		91.00	33.67		010	N
54205		359.45	359.45		090	Y
54220		104.88	80.99		000	N
54230		42.09	42.09		000	N
54231		100.33	67.57		000	N
54235		55.51	37.54		000	N
54240		68.48	68.48		000	N
54240	26	41.18	41.18		000	N
54240	TC	27.07	27.07		000	N
54250		#	#		000	N
54250	26	#	#		000	N
54250	TC	#	#		000	N
54300		450.22	450.22		090	Y
54304		525.30	525.30		090	Y
54308		507.32	507.32		090	Y
54312		566.70	566.70		090	Y
54316		664.76	664.76		090	Y
54318		505.05	505.05		090	Y
54322		526.44	526.44		090	Y
54324		661.80	661.80		090	Y
54326		627.22	627.22		090	Y
54328		635.18	635.18		090	Y
54332		675.45	675.45		090	Y
54336		797.62	797.62		090	Y
54340		438.85	438.85		090	Y
54344		629.26	629.26		090	Y
54348		682.50	682.50		090	Y
54352		965.97	965.97		090	Y
54360		484.12	484.12		090	Y
54380		565.56	565.56		090	Y
54385		639.50	639.50		090	Y
54390		846.98	846.98		090	Y
54400		361.95	361.95		090	N
54401		#	#		090	N
54405		#	#		090	Y
54406		426.56	426.56		090	Y
54408		#	#		090	Y
54410		#	#		090	Y
54411		#	#		090	Y
54415		317.36	317.36		090	Y
54416		414.05	414.05	PA	090	Y
54417		510.51	510.51	PA	090	Y
54420		470.01	470.01		090	Y
54430		427.02	427.02		090	Y
54435		289.15	289.15		090	N
54440		B.R.	B.R.		090	Y
54450		51.64	37.77		000	N
54500		174.95	41.18		000	N
54505		144.92	144.92		010	N
54512		322.37	322.37		090	Y
54520		209.76	209.76		090	N
54522		366.28	366.28		090	Y
54530		328.06	328.06		090	Y
54535		463.64	463.64		090	Y
54550		298.25	298.25		090	Y
54560		427.93	427.93		090	Y
54600		266.63	266.63		090	N
54620		190.87	190.87		010	N
54640		265.26	265.26		090	N
54650		439.76	439.76		090	Y
54660		#	#		090	N
54670		250.48	250.48		090	N
54680		477.52	477.52		090	Y
54690		427.25	427.25		090	Y
54692		439.76	439.76		090	N
54699		B.R.	B.R.		090	Y
54700		283.69	162.44		010	N
54800		203.38	73.03		000	N
54820		204.52	204.52		090	N
54830		215.67	215.67		090	N
54840		209.76	209.76		090	N
54860		250.25	250.25		090	N
54861		331.01	331.01		090	N
54900		481.84	481.84		090	N
54901		649.74	649.74		090	N
55000		85.54	45.27		000	N
55040		208.85	208.85		090	N
55041		289.61	289.61		090	N
55060		214.53	214.53		090	N

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Effective July 1, 2002

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55100		282.10	134.00		010	N
55110		219.99	219.99		090	N
55120		201.34	201.34		090	N
55150		280.28	280.28		090	Y
55175		213.17	213.17		090	N
55180		400.86	400.86		090	N
55200		171.08	171.08		090	N
55250		301.44	153.34		090	N
55300		118.53	118.53		000	N
55400		#	#		090	Y
55450		282.78	157.20		010	N
55500		219.99	219.99		090	N
55520		233.64	233.64		090	Y
55530		223.86	223.86		090	N
55535		252.53	252.53		090	Y
55540		286.42	286.42		090	Y
55550		240.69	240.69		090	Y
55559		B.R.	B.R.		090	Y
55600		251.84	251.84		090	N
55605		312.81	312.81		090	N
55650		426.56	426.56		090	Y
55680		209.07	209.07		090	N
55700		144.69	53.92		000	N
55705		197.70	197.70		010	N
55720		315.09	315.09		090	Y
55725		355.81	355.81		090	Y
55801		644.74	644.74		090	Y
55810		804.90	804.90		090	Y
55812		969.15	969.15		090	Y
55815		1,063.56	1,063.56		090	Y
55821		524.39	524.39		090	Y
55831		567.61	567.61		090	Y
55840		818.54	818.54		090	Y
55842		870.87	870.87		090	Y
55845		1,001.00	1,001.00		090	Y
55859		472.29	472.29		090	N
55860		522.11	522.11		090	N
55862		657.02	657.02		090	Y
55865		803.30	803.30		090	Y
55870		#	#		000	N
55873		701.38	701.38	PA	090	N
55899		B.R.	B.R.		090	N
55970		#	#		000	N
55980		#	#		000	N
56405		92.36	65.52		010	N
56420		90.55	64.16		010	N
56440		156.97	124.22		010	N
56441		110.34	96.00		010	N
56501		92.82	69.84		010	N
56515		139.00	121.94		010	N
56605		70.53	38.22		000	N
56606		52.32	18.65		000	N
56620		299.62	299.62		090	Y
56625		346.71	346.71		090	Y
56630		482.53	482.53		090	Y
56631		642.23	642.23		090	Y
56632		778.51	778.51		090	Y
56633		623.35	623.35		090	Y
56634		692.97	692.97		090	Y
56637		836.06	836.06		090	Y
56640		828.78	828.78		090	Y
56700		134.22	110.79		010	Y
56720		57.79	29.57		000	N
56740		203.38	180.41		010	N
56800		159.93	159.93		010	Y
56805		679.77	679.77		090	Y
56810		167.21	167.21		010	Y
57000		129.22	129.22		010	N
57010		239.78	239.78		090	N
57020		73.94	51.64		000	N
57022		111.02	111.02		010	N
57023		180.41	180.41		010	N
57061		84.86	60.97		010	N
57065		134.45	118.76		010	N
57100		66.43	40.95		000	N
57105		95.09	94.87		010	N
57106		214.99	214.99		090	Y
57107		801.26	801.26		090	Y
57109		962.32	962.32		090	Y
57110		520.98	520.98		090	Y
57111		951.63	951.63		090	Y
57112		1,022.39	1,022.39		090	Y
57120		291.66	291.66		090	Y
57130		110.57	110.57		010	Y
57135		135.82	118.76		010	N
57150		37.31	18.43		000	N
57155		236.83	236.83		090	N
57160		47.32	31.17		000	N
57170		55.74	30.26		000	N
57180		92.82	74.16		010	N
57200		167.67	167.67		090	Y
57210		210.21	210.21		090	Y

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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
57220		185.41	185.41		090	Y
57230		239.10	239.10		090	Y
57240		252.30	252.30		090	Y
57250		226.36	226.36		090	Y
57260		319.87	319.87		090	Y
57265		441.58	441.58		090	Y
57268		268.45	268.45		090	Y
57270		444.76	444.76		090	Y
57280		542.13	542.13		090	Y
57282		339.88	339.88		090	Y
57284		477.98	477.98		090	Y
57287		426.11	426.11		090	Y
57288		474.79	474.79	EX	090	Y
57289		441.35	441.35	EX	090	Y
57291		#	#		090	Y
57292		#	#		090	Y
57300		294.61	294.61		090	Y
57305		494.58	494.58		090	Y
57307		564.43	564.43		090	Y
57308		376.97	376.97		090	Y
57310		274.37	274.37		090	Y
57311		313.95	313.95		090	Y
57320		321.69	321.69		090	Y
57330		453.41	453.41		090	Y
57335		677.50	677.50		090	Y
57400		82.13	82.13		000	N
57410		105.11	67.57		000	N
57415		137.64	102.38		010	N
57452		63.02	34.58		000	N
57454		74.16	45.27		000	N
57460		118.53	96.00		000	N
57500		76.21	35.04		000	N
57505		74.85	59.15		010	N
57510		123.99	84.17		010	N
57511		104.42	63.70		010	N
57513		108.75	84.40		010	N
57520		200.20	165.62		090	N
57522		174.27	143.32		090	N
57530		203.38	203.38		090	Y
57531		1,006.23	1,006.23		090	Y
57540		445.90	445.90		090	Y
57545		476.39	476.39		090	Y
57550		225.91	225.91		090	Y
57555		353.08	353.08		090	Y
57556		320.77	320.77		090	Y
57700		148.10	148.10		090	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
57720		178.82	178.82		090	Y
57800		46.87	27.07		000	N
57820		102.83	95.78		010	N
58100		71.66	53.23		000	N
58120		171.76	138.09		010	N
58140		524.39	524.39		090	Y
58145		312.81	312.81		090	Y
58150		551.92	551.92	EX	090	Y
58152		724.59	724.59	EX	090	Y
58180		553.28	553.28	EX	090	Y
58200		791.47	791.47	EX	090	Y
58210		1,038.76	1,038.76	EX	090	Y
58240		1,384.57	1,384.57	EX	090	Y
58260		472.75	472.75	EX	090	Y
58262		533.94	533.94	EX	090	Y
58263		578.31	578.31	EX	090	Y
58267		613.11	613.11	EX	090	Y
58270		516.20	516.20	EX	090	Y
58275		564.20	564.20	EX	090	Y
58280		604.92	604.92	EX	090	Y
58285		791.02	791.02	EX	090	Y
58300		57.10	33.67		000	N
58301		68.25	42.54		000	N
58321		#	#		000	N
58322		#	#		000	N
58323		#	#		000	N
58340		306.90	28.89		000	N
58345		#	#		010	Y
58346		252.30	252.30		090	N
58350		73.94	51.41		010	N
58353		139.23	139.23		010	Y
58400		250.02	250.02		090	Y
58410		463.19	463.19		090	Y
58520		432.70	432.70		090	Y
58540		512.33	512.33		090	Y
58550		508.69	508.69	EX	010	Y
58551		508.69	508.69	EX	010	Y
58555		148.79	115.34		000	N
58558		197.24	164.71		000	N
58559		209.53	209.53		000	N
58560		239.56	239.56		000	Y
58561		330.33	330.33		000	N
58562		180.41	180.41		000	N
58563		210.21	210.21		000	N
58578		B.R.	B.R.		090	Y
58579		B.R.	B.R.		090	Y

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58600		213.62	213.62		090	Y
58605		194.74	194.74		090	Y
58611		96.19	96.19		000	Y
58615		171.99	171.99		010	Y
58660		407.45	407.45		090	Y
58661		394.49	394.49		010	Y
58662		418.60	418.60		090	Y
58670		221.59	221.59		090	N
58671		222.04	222.04		090	N
58672		#	#		090	Y
58673		498.91	498.91		090	Y
58679		B.R.	B.R.		090	Y
58700		421.78	421.78		090	Y
58720		415.19	415.19		090	Y
58740		494.36	494.36		090	Y
58750		#	#		090	Y
58752		#	#		090	Y
58760		#	#		090	Y
58770		506.19	506.19		090	Y
58800		201.57	199.97		090	N
58805		226.59	226.59		090	Y
58820		177.91	177.91		090	Y
58822		364.00	364.00		090	Y
58823		134.00	134.00		000	Y
58825		394.94	394.94		090	Y
58900		228.64	228.64		090	Y
58920		402.45	402.45		090	Y
58925		409.27	409.27		090	Y
58940		273.23	273.23		090	Y
58943		676.13	676.13		090	Y
58950		625.17	625.17		090	Y
58951		814.68	814.68		090	Y
58952		906.36	906.36		090	Y
58953		1,135.91	1,135.91		090	Y
58954		1,234.64	1,234.64		090	Y
58960		551.92	551.92		090	Y
58970		#	#		000	N
58974		#	#		000	Y
58976		#	#		000	Y
58999		B.R.	B.R.		090	Y
59000		161.39	99.84		000	N
59001		103.06	103.06		000	N
59012		128.08	128.08		000	N
59015		94.41	82.13		000	N
59020		36.40	36.40		000	N
59020	26	23.43	23.43		000	N
59020	TC	12.97	12.97		000	N
59025		48.33	48.33		000	N
59025	26	37.84	37.84		000	N
59025	TC	10.94	10.94		000	N
59030		77.35	77.35		000	N
59050		31.62	31.62		000	N
59051		26.39	26.39		000	N
59100		469.56	469.56		090	Y
59120		441.58	441.58		090	Y
59121		447.04	447.04		090	Y
59130		530.08	530.08		090	N
59135		524.16	524.16		090	N
59136		485.03	485.03		090	Y
59140		225.45	225.45		090	Y
59150		438.39	438.39		090	Y
59151		424.51	424.51		090	Y
59160		155.61	122.40		010	N
59200		Bundled	Bundled		000	N
59300		108.06	85.09		000	N
59320		93.96	93.96		000	N
59325		149.92	149.92		000	N
59350		177.45	177.45		000	Y
59400		1,898.82	1,898.82		045	N
59409		904.96	904.96		000	N
59410		1,074.10	1,074.10		045	N
59412		75.76	60.52		000	N
59414		72.34	72.34		045	N
59425		#	#		000	N
59426		#	#		000	N
59430		169.14	169.14		000	N
59510		1,898.82	1,898.82		045	N
59514		904.96	904.96		000	Y
59515		1,074.10	1,074.10		045	N
59525		602.24	602.24	EX	000	Y
59610		2,019.18	2,019.18		045	N
59612		1,025.32	1,025.32		045	N
59614		1,194.46	1,194.46		045	N
59618		2,278.59	2,278.59		045	Y
59620		1,284.73	1,284.73		045	Y
59622		1,453.87	1,453.87		045	Y
59812		186.78	158.34		090	N
59820		190.19	168.58		090	N
59821		202.02	184.05		090	N
59830		245.70	245.70		090	N
59840		196.20	196.20		010	N
59841		263.64	263.64		010	N

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59850		215.22	215.22		090	N
59851		226.59	226.59		090	N
59852		317.36	317.36		090	N
59855		235.23	235.23		090	N
59856		278.23	278.23		090	N
59857		341.25	341.25		090	N
59866		#	#		000	Y
59870		237.06	237.06		090	Y
59871		105.11	76.21		000	N
59898		B.R.	B.R.		090	Y
59899		B.R.	B.R.		045	Y
60000		97.37	93.27		010	N
60001		63.70	30.94		000	N
60100		98.05	48.91		000	N
60200		388.11	388.11		090	Y
60210		415.42	415.42		090	Y
60212		586.04	586.04		090	Y
60220		452.27	452.27		090	Y
60225		527.80	527.80		090	Y
60240		602.65	602.65		090	Y
60252		759.85	759.85		090	Y
60254		1,019.43	1,019.43		090	Y
60260		663.16	663.16		090	Y
60270		753.48	753.48		090	Y
60271		637.46	637.46		090	Y
60280		261.85	261.85		090	Y
60281		348.07	348.07		090	Y
60500		577.85	577.85		090	Y
60502		723.00	723.00		090	Y
60505		787.15	787.15		090	Y
60512		147.65	147.65		000	Y
60520		630.86	630.86		090	Y
60521		732.55	732.55		090	Y
60522		866.55	866.55		090	Y
60540		594.69	594.69		090	Y
60545		702.52	702.52		090	Y
60600		745.75	745.75		090	Y
60605		912.96	912.96		090	Y
60650		677.27	677.27		090	Y
60659		B.R.	B.R.		090	Y
60699		B.R.	B.R.		090	Y
61000		78.94	73.03		000	N
61001		83.95	70.07		000	N
61020		96.69	73.26		000	N
61026		94.18	81.67		000	N
61050		72.12	72.12		000	N
61055		91.00	91.00		000	N
61070		190.19	49.60		000	N
61105		218.85	218.85		090	N
61107		202.47	202.47		000	N
61108		428.84	428.84		090	N
61120		364.68	364.68		090	N
61140		644.28	644.28		090	Y
61150		705.48	705.48		090	N
61151		510.97	510.97		090	N
61154		608.79	608.79		090	Y
61156		665.44	665.44		090	Y
61210		233.41	233.41		000	N
61215		225.22	225.22		090	N
61250		425.43	425.43		090	Y
61253		494.58	494.58		090	Y
61304		867.23	867.23		090	Y
61305		1,044.91	1,044.91		090	Y
61312		977.34	977.34		090	Y
61313		991.22	991.22		090	Y
61314		882.47	882.47		090	Y
61315		1,096.55	1,096.55		090	Y
61320		1,019.20	1,019.20		090	Y
61321		1,107.24	1,107.24		090	Y
61330		1,017.84	1,017.84		090	Y
61332		1,157.97	1,157.97		090	Y
61333		1,047.41	1,047.41		090	Y
61334		697.06	697.06		090	Y
61340		755.76	755.76		090	Y
61343		1,191.19	1,191.19		090	Y
61345		1,077.67	1,077.67		090	Y
61440		978.25	978.25		090	Y
61450		1,008.05	1,008.05		090	Y
61458		1,074.25	1,074.25		090	Y
61460		1,116.34	1,116.34		090	Y
61470		985.76	985.76		090	Y
61480		979.16	979.16		090	Y
61490		1,022.84	1,022.84		090	Y
61500		715.26	715.26		090	Y
61501		602.42	602.42		090	Y
61510		1,125.44	1,125.44		090	Y
61512		1,381.61	1,381.61		090	Y
61514		1,003.05	1,003.05		090	Y
61516		987.58	987.58		090	Y
61518		1,488.53	1,488.53		090	Y
61519		1,639.14	1,639.14		090	Y
61520		2,149.42	2,149.42		090	Y

- Not Covered
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61521		1,762.44	1,762.44		090	Y
61522		1,153.20	1,153.20		090	Y
61524		1,103.83	1,103.83		090	Y
61526		2,019.97	2,019.97		090	N
61530		1,728.32	1,728.32		090	N
61531		599.92	599.92		090	Y
61533		792.38	792.38		090	Y
61534		852.22	852.22		090	Y
61535		490.49	490.49		090	Y
61536		1,406.18	1,406.18		090	Y
61538		1,074.48	1,074.48		090	Y
61539		1,275.37	1,275.37		090	Y
61541		1,136.14	1,136.14		090	Y
61542		1,228.27	1,228.27		090	Y
61543		1,167.53	1,167.53		090	Y
61544		1,011.69	1,011.69		090	Y
61545		1,721.72	1,721.72		090	Y
61546		1,243.97	1,243.97		090	Y
61548		865.41	865.41		090	Y
61550		462.51	462.51		090	Y
61552		682.96	682.96		090	Y
61556		834.93	834.93		090	Y
61557		895.90	895.90		090	Y
61558		913.64	913.64		090	Y
61559		1,295.16	1,295.16		090	Y
61563		1,057.42	1,057.42		090	Y
61564		1,318.82	1,318.82		090	Y
61570		953.45	953.45		090	Y
61571		1,042.41	1,042.41		090	Y
61575		1,354.76	1,354.76		090	Y
61576		1,928.06	1,928.06		090	Y
61580		1,191.19	1,191.19		090	Y
61581		1,357.95	1,357.95		090	N
61582		1,275.14	1,275.14		090	Y
61583		1,461.46	1,461.46		090	Y
61584		1,379.56	1,379.56		090	Y
61585		1,490.58	1,490.58		090	Y
61586		1,004.87	1,004.87		090	Y
61590		1,617.52	1,617.52		090	Y
61591		1,695.56	1,695.56		090	Y
61592		1,569.75	1,569.75		090	Y
61595		1,174.13	1,174.13		090	Y
61596		1,381.15	1,381.15		090	Y
61597		1,488.76	1,488.76		090	Y
61598		1,315.41	1,315.41		090	Y
61600		982.80	982.80		090	Y
61601		1,121.12	1,121.12		090	Y
61605		1,141.14	1,141.14		090	Y
61606		1,528.57	1,528.57		090	Y
61607		1,428.02	1,428.02		090	Y
61608		1,668.71	1,668.71		090	Y
61609		377.19	377.19		000	Y
61610		1,061.51	1,061.51		000	Y
61611		262.76	262.76		000	Y
61612		1,019.88	1,019.88		000	Y
61613		1,605.24	1,605.24		090	Y
61615		1,283.33	1,283.33		090	Y
61616		1,721.04	1,721.04		090	Y
61618		697.51	697.51		090	Y
61619		841.75	841.75		090	Y
61624		645.64	645.64		000	N
61626		524.16	524.16		000	N
61680		1,221.90	1,221.90		090	Y
61682		2,409.68	2,409.68		090	Y
61684		1,556.56	1,556.56		090	Y
61686		2,531.85	2,531.85		090	Y
61690		1,163.89	1,163.89		090	Y
61692		2,028.16	2,028.16		090	Y
61697		1,975.15	1,975.15		090	Y
61698		1,896.44	1,896.44		090	Y
61700		1,972.88	1,972.88		090	Y
61702		1,892.12	1,892.12		090	Y
61703		713.89	713.89		090	Y
61705		1,391.62	1,391.62		090	Y
61708		1,213.26	1,213.26		090	Y
61710		1,048.55	1,048.55		090	N
61711		1,425.51	1,425.51		090	Y
61720		690.92	690.92		090	N
61735		827.87	827.87		090	N
61750		730.96	730.96		090	N
61751		711.62	711.62		090	N
61760		878.83	878.83		090	N
61770		860.63	860.63		090	N
61790		436.12	436.12		090	N
61791		599.01	599.01		090	N
61793		705.48	705.48		090	N
61795		154.70	154.70		000	N
61850		505.73	505.73		090	Y
61860		831.51	831.51		090	Y
61862		786.01	786.01		090	Y
61870		595.82	595.82		090	Y
61875		552.14	552.14		090	Y

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61880		285.97	285.97		090	Y
61885		253.66	253.66	PA	090	N
61886		350.35	350.35	PA	090	N
61888		222.49	222.49		010	N
62000		439.99	439.99		090	N
62005		620.62	620.62		090	Y
62010		790.34	790.34		090	Y
62100		889.98	889.98		090	Y
62115		822.19	822.19		090	Y
62116		940.71	940.71		090	Y
62117		989.85	989.85		090	Y
62120		928.65	928.65		090	Y
62121		840.84	840.84		090	Y
62140		551.23	551.23		090	Y
62141		614.02	614.02		090	Y
62142		448.63	448.63		090	Y
62143		541.90	541.90		090	Y
62145		762.35	762.35		090	Y
62146		659.98	659.98		090	Y
62147		785.10	785.10		090	Y
62180		852.22	852.22		090	Y
62190		466.83	466.83		090	N
62192		509.37	509.37		090	Y
62194		173.81	173.81		010	N
62200		748.02	748.02		090	Y
62201		604.01	604.01		090	N
62220		535.76	535.76		090	Y
62223		532.35	532.35		090	Y
62225		235.69	235.69		090	N
62230		422.47	422.47		090	Y
62252		50.96	50.96		000	N
62252	26	26.39	26.39		000	N
62252	TC	24.57	24.57		000	N
62256		296.66	296.66		090	Y
62258		582.17	582.17		090	Y
62263		264.13	193.38		010	N
62268		174.95	174.95		000	N
62269		173.35	173.35		000	N
62270		120.35	37.54		000	N
62272		110.34	46.87		000	N
62273		86.91	80.08		000	N
62280		149.47	78.26		010	N
62281		166.30	76.89		010	N
62282		183.14	69.16		010	N
62284		163.57	49.14		000	N
62287		309.85	309.85		090	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
62290		201.79	101.01		000	N
62291		212.03	96.23		000	N
62292		311.22	311.22		090	N
62294		450.91	450.91		090	N
62310		136.73	61.43		000	N
62311		138.78	50.28		000	N
62318		143.10	65.06		000	N
62319		134.68	59.61		000	N
62350		253.21	253.21		090	N
62351		415.87	415.87		090	Y
62355		200.43	200.43		090	N
62360		119.21	119.21		090	N
62361		215.22	215.22		090	N
62362		267.08	267.08		090	N
62365		224.09	224.09		090	N
62367		32.08	32.08		000	N
62367	26	14.56	14.56		000	N
62367	TC	17.52	17.52		000	N
62368		49.14	49.14		000	N
62368	26	22.29	22.29		000	N
62368	TC	26.84	26.84		000	N
63001		678.86	678.86		090	Y
63003		687.05	687.05		090	Y
63005		647.01	647.01		090	Y
63011		611.98	611.98		090	Y
63012		632.90	632.90		090	Y
63015		818.77	818.77		090	Y
63016		811.04	811.04		090	Y
63017		686.82	686.82		090	Y
63020		645.64	645.64		090	Y
63030		537.81	537.81		090	Y
63035		119.44	119.44		000	Y
63040		791.47	791.47		090	Y
63042		746.65	746.65		090	Y
63043		395.74	395.74		000	Y
63044		373.33	373.33		000	Y
63045		709.57	709.57		090	Y
63046		683.87	683.87		090	Y
63047		638.14	638.14		090	Y
63048		123.99	123.99		000	Y
63055		915.69	915.69		090	Y
63056		850.17	850.17		090	Y
63057		197.70	197.70		000	Y
63064		1,032.17	1,032.17		090	Y
63066		125.13	125.13		000	Y
63075		821.73	821.73		090	Y

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63076		154.70	154.70		000	Y
63077		899.99	899.99		090	Y
63078		122.40	122.40		000	Y
63081		997.59	997.59		090	Y
63082		166.76	166.76		000	Y
63085		1,101.33	1,101.33		090	Y
63086		119.89	119.89		000	Y
63087		1,421.88	1,421.88		090	Y
63088		164.03	164.03		000	Y
63090		1,126.81	1,126.81		090	Y
63091		110.34	110.34		000	Y
63170		827.42	827.42		090	Y
63172		766.90	766.90		090	Y
63173		926.38	926.38		090	Y
63180		779.64	779.64		090	Y
63182		836.75	836.75		090	Y
63185		598.78	598.78		090	Y
63190		712.99	712.99		090	Y
63191		702.29	702.29		090	Y
63194		813.77	813.77		090	Y
63195		785.10	785.10		090	Y
63196		907.95	907.95		090	Y
63197		864.50	864.50		090	Y
63198		958.23	958.23		090	Y
63199		1,036.49	1,036.49		090	Y
63200		804.90	804.90		090	Y
63250		1,586.58	1,586.58		090	Y
63251		1,610.70	1,610.70		090	Y
63252		1,602.96	1,602.96		090	Y
63265		865.87	865.87		090	Y
63266		897.03	897.03		090	Y
63267		730.73	730.73		090	Y
63268		725.95	725.95		090	Y
63270		1,070.39	1,070.39		090	Y
63271		1,077.21	1,077.21		090	Y
63272		1,012.83	1,012.83		090	Y
63273		978.93	978.93		090	Y
63275		949.59	949.59		090	Y
63276		938.89	938.89		090	Y
63277		839.70	839.70		090	Y
63278		835.61	835.61		090	Y
63280		1,127.26	1,127.26		090	Y
63281		1,117.48	1,117.48		090	Y
63282		1,052.42	1,052.42		090	Y
63283		1,001.00	1,001.00		090	Y
63285		1,419.83	1,419.83		090	Y
63286		1,400.04	1,400.04		090	Y
63287		1,443.49	1,443.49		090	Y
63290		1,474.43	1,474.43		090	Y
63300		971.88	971.88		090	Y
63301		1,071.07	1,071.07		090	Y
63302		1,098.14	1,098.14		090	Y
63303		1,186.87	1,186.87		090	Y
63304		1,176.40	1,176.40		090	Y
63305		1,259.90	1,259.90		090	Y
63306		1,186.18	1,186.18		090	Y
63307		1,185.28	1,185.28		090	Y
63308		199.29	199.29		000	Y
63600		484.12	484.12		090	N
63610		293.93	293.93		000	N
63615		635.86	635.86		090	N
63650		228.64	228.64		090	N
63655		431.57	431.57		090	Y
63660		234.55	234.55		090	N
63685		270.95	270.95		090	Y
63688		218.63	218.63		090	N
63700		660.89	660.89		090	Y
63702		667.94	667.94		090	Y
63704		829.92	829.92		090	Y
63706		940.03	940.03		090	Y
63707		473.88	473.88		090	Y
63709		591.96	591.96		090	Y
63710		582.86	582.86		090	Y
63740		473.20	473.20		090	Y
63741		313.04	313.04		090	Y
63744		340.80	340.80		090	Y
63746		279.37	279.37		090	N
64400		88.04	32.76		000	N
64402		130.13	39.81		000	N
64405		61.88	39.59		000	N
64408		101.24	47.55		000	N
64410		108.75	41.63		000	N
64412		85.31	36.40		000	N
64413		97.83	40.95		000	N
64415		95.78	42.09		000	N
64417		107.84	42.77		000	N
64418		88.27	37.54		000	N
64420		82.36	34.13		000	N
64421		106.47	48.23		000	N
64425		94.87	50.73		000	N
64430		101.24	45.73		000	N
64435		103.29	49.14		000	N

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64445		71.44	44.36		000	N
64450		71.21	37.54		000	N
64470		136.27	54.83		000	N
64472		120.35	38.22		000	N
64475		121.26	42.32		000	N
64476		111.93	29.12		000	N
64479		153.11	66.66		000	N
64480		129.90	47.77		000	N
64483		146.97	57.79		000	N
64484		124.44	40.49		000	N
64505		87.36	40.04		000	N
64508		79.63	37.31		000	N
64510		86.91	34.58		000	N
64520		112.16	38.90		000	N
64530		107.84	45.73		000	N
64550		17.06	5.92		000	N
64553		152.88	85.54		010	N
64555		107.84	70.75		010	N
64560		108.97	77.80		010	N
64561		505.05	241.60		010	N
64565		119.44	56.88		010	N
64573		319.41	319.41	PA	090	N
64575		174.27	174.27		090	N
64577		192.01	192.01		090	N
64580		187.01	187.01		090	Y
64581		465.01	465.01		090	N
64585		116.48	102.15	PA	010	Y
64590		111.02	111.02		010	Y
64595		90.77	90.77		010	N
64600		151.29	130.13		010	N
64605		219.08	202.47		010	N
64610		277.32	277.32		010	N
64612		114.66	83.72		010	N
64613		87.81	79.85		010	N
64614		125.35	70.07		010	N
64620		135.59	82.36		010	N
64622		180.18	87.59		010	N
64623		111.93	28.89		000	N
64626		177.68	96.23		010	N
64627		113.52	34.13		000	N
64630		154.47	90.55		010	N
64640		148.56	103.74		010	N
64680		128.08	79.17		010	N
64702		197.47	197.47		090	N
64704		187.69	187.69		090	Y
64708		271.86	271.86		090	Y
64712		313.04	313.04		090	Y
64713		418.83	418.83		090	Y
64714		341.70	341.70		090	Y
64716		271.63	271.63		090	Y
64718		272.09	272.09		090	N
64719		230.46	230.46		090	N
64721		258.67	248.43		090	N
64722		191.78	191.78		090	Y
64726		176.54	176.54		090	N
64727		115.57	115.57		000	N
64732		197.92	197.92		090	Y
64734		212.94	212.94		090	N
64736		184.73	184.73		090	Y
64738		234.10	234.10		090	Y
64740		227.95	227.95		090	Y
64742		266.40	266.40		090	Y
64744		226.13	226.13		090	N
64746		252.30	252.30		090	Y
64752		287.79	287.79		090	Y
64755		472.29	472.29		090	Y
64760		258.90	258.90		090	Y
64761		228.87	228.87		090	Y
64763		312.58	312.58		090	Y
64766		321.69	321.69		090	Y
64771		314.18	314.18		090	Y
64772		295.98	295.98		090	Y
64774		217.26	217.26		090	N
64776		215.90	215.90		090	N
64778		114.43	114.43		000	N
64782		244.79	244.79		090	N
64783		137.18	137.18		000	N
64784		402.68	402.68		090	N
64786		626.99	626.99		090	Y
64787		159.25	159.25		000	N
64788		193.83	193.83		090	N
64790		457.73	457.73		090	N
64792		579.44	579.44		090	Y
64795		116.48	116.48		000	N
64802		340.34	340.34		090	Y
64804		518.47	518.47		090	Y
64809		463.64	463.64		090	Y
64818		383.57	383.57		090	Y
64820		403.36	403.36		090	N
64821		377.65	377.65		090	N
64822		377.65	377.65		090	N
64823		435.66	435.66		090	N

- Not Covered
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B.R. – By Report
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

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64831		404.04	404.04		090	N
64832		211.12	211.12		000	N
64834		421.56	421.56		090	N
64835		455.91	455.91		090	Y
64836		452.50	452.50		090	Y
64837		235.01	235.01		000	Y
64840		487.53	487.53		090	Y
64856		563.29	563.29		090	N
64857		592.41	592.41		090	Y
64858		674.76	674.76		090	Y
64859		156.29	156.29		000	Y
64861		776.23	776.23		090	Y
64862		764.40	764.40		090	Y
64864		501.18	501.18		090	Y
64865		608.11	608.11		090	Y
64866		599.46	599.46		090	Y
64868		561.01	561.01		090	Y
64870		601.06	601.06		090	Y
64872		73.94	73.94		000	Y
64874		110.79	110.79		000	Y
64876		113.98	113.98		000	Y
64885		689.78	689.78		090	Y
64886		810.58	810.58		090	Y
64890		608.33	608.33		090	Y
64891		520.06	520.06		090	Y
64892		565.34	565.34		090	Y
64893		629.95	629.95		090	Y
64895		667.94	667.94		090	Y
64896		764.40	764.40		090	Y
64897		708.89	708.89		090	Y
64898		734.60	734.60		090	Y
64901		379.93	379.93		000	Y
64902		431.34	431.34		000	Y
64905		548.05	548.05		090	Y
64907		733.46	733.46		090	Y
64999		B.R.	B.R.		090	N
65091		416.55	416.55		090	N
65093		431.80	431.80		090	N
65101		440.21	440.21		090	N
65103		455.68	455.68		090	N
65105		488.44	488.44		090	Y
65110		691.83	691.83		090	Y
65112		782.83	782.83		090	Y
65114		837.65	837.65		090	Y
65125		216.13	106.93		090	N
65130		429.52	429.52		090	N
65135		454.55	454.55		090	N
65140		470.24	470.24		090	N
65150		396.99	396.99		090	N
65155		491.63	491.63		090	N
65175		407.00	407.00		090	N
65205		30.94	21.16		000	N
65210		37.31	26.84		000	N
65220		206.12	21.16		000	N
65222		40.04	28.21		000	N
65235		337.61	337.61		090	N
65260		545.54	545.54		090	Y
65265		622.89	622.89		090	Y
65270		137.86	100.33		010	N
65272		221.36	198.15		090	N
65273		219.54	219.54		090	N
65275		251.39	247.29		090	N
65280		359.00	359.00		090	N
65285		618.12	618.12		090	Y
65286		337.61	308.26		090	N
65290		278.23	278.23		090	N
65400		338.75	304.62		090	N
65410		74.62	50.51		000	N
65420		289.15	262.99		090	N
65426		305.99	276.87		090	N
65430		233.87	50.51		000	N
65435		53.01	30.94		000	N
65436		235.69	212.94		090	N
65450		259.12	232.28		090	N
65600		206.34	114.43		090	N
65710		591.50	591.50		090	Y
65730		610.38	610.38		090	Y
65750		682.50	682.50		090	Y
65755		678.40	678.40		090	Y
65760		#	#		000	N
65765		#	#		000	N
65767		#	#		000	N
65770		763.49	763.49		090	Y
65771		#	#		000	N
65772		272.32	248.43		090	N
65775		332.60	332.60		090	N
65800		98.05	77.80		000	N
65805		98.28	78.03		000	N
65810		318.73	318.73		090	N
65815		333.51	304.85		090	N
65820		441.35	441.35		090	N
65850		482.07	482.07		090	N

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65855		208.62	174.72		010	N
65860		177.91	155.61		090	N
65865		289.15	289.15		090	N
65870		312.13	312.13		090	N
65875		321.23	321.23		090	N
65880		340.34	340.34		090	N
65900		547.37	547.37		090	Y
65920		384.93	384.93		090	N
65930		375.60	375.60		090	N
66020		92.82	73.03		010	N
66030		80.76	61.20		010	N
66130		353.99	332.83		090	N
66150		445.22	445.22		090	N
66155		443.85	443.85		090	N
66160		508.46	508.46		090	N
66165		432.25	432.25		090	Y
66170		675.67	675.67		090	Y
66172		709.35	709.35		090	Y
66180		623.81	623.81		090	Y
66185		383.79	383.79		090	Y
66220		410.41	410.41		090	Y
66225		478.43	478.43		090	Y
66250		324.42	287.79		090	N
66500		197.02	197.02		090	N
66505		209.98	209.98		090	N
66600		406.09	406.09		090	N
66605		587.18	587.18		090	N
66625		300.76	275.73		090	N
66630		321.46	321.46		090	N
66635		297.80	297.80		090	N
66680		270.95	270.95		090	N
66682		322.37	322.37		090	N
66700		275.96	275.96		090	N
66710		316.00	283.92		090	N
66720		304.17	284.15		090	N
66740		260.94	260.94		090	N
66761		224.54	195.19		090	N
66762		236.15	208.62		090	N
66770		256.85	227.73		090	N
66820		285.97	285.97		090	N
66821		144.23	134.22		090	N
66825		433.84	433.84		090	N
66830		352.63	352.63		090	N
66840		342.62	342.62		090	N
66850		384.47	384.47		090	N
66852		415.19	415.19		090	N
66920		376.28	376.28		090	N
66930		442.03	442.03	PA	090	N
66940		400.17	400.17		090	N
66982		528.03	528.03		090	N
66983		354.67	354.67		090	N
66984		418.14	418.14		090	N
66985		356.95	356.95		090	N
66986		488.90	488.90		090	N
66999		B.R.	B.R.		090	N
67005		195.42	195.42		090	N
67010		235.69	235.69		090	Y
67015		353.31	353.31		090	N
67025		578.08	337.38		090	N
67027		600.14	465.24		090	Y
67028		332.83	86.45		000	N
67030		272.32	272.32		090	Y
67031		182.23	159.70		090	N
67036		489.81	489.81		090	Y
67038		861.09	861.09		090	Y
67039		629.95	629.95		090	Y
67040		723.68	723.68		090	Y
67101		434.30	384.47		090	N
67105		351.26	303.03		090	N
67107		657.70	657.70		090	Y
67108		904.09	904.09		090	Y
67110		704.57	447.49		090	N
67112		751.43	751.43		090	Y
67115		277.09	277.09		090	N
67120		542.81	308.03		090	N
67121		534.40	534.40		090	Y
67141		311.22	285.28		090	N
67145		249.57	222.95		090	N
67208		353.76	322.37		090	N
67210		376.97	341.02		090	N
67218		802.62	802.62		090	N
67220		561.70	533.26		090	N
67221		203.38	137.86		000	N
67225		25.03	23.89		000	N
67227		366.28	322.82		090	N
67228		529.62	467.51		090	N
67250		479.57	479.57		090	N
67255		485.03	485.03		090	Y
67299		B.R.	B.R.		090	N
67311		300.76	300.76	EX*	090	N
67312		369.92	369.92	EX*	090	N
67314		334.20	334.20	EX*	090	N

- Not Covered
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67316		408.36	408.36	EX*	090	N
67318		351.72	351.72	EX*	090	N
67320		148.56	148.56	EX*	000	N
67331		140.82	140.82	EX*	000	N
67332		154.02	154.02	EX*	000	Y
67334		136.05	136.05	EX*	000	N
67335		85.31	85.31	EX*	000	N
67340		169.72	169.72	EX*	000	Y
67343		337.84	337.84		090	Y
67345		171.54	100.10		010	N
67350		112.61	112.61		000	N
67399		B.R.	B.R.		090	Y
67400		545.77	545.77		090	Y
67405		473.66	473.66		090	Y
67412		589.45	589.45		090	Y
67413		550.10	550.10		090	Y
67414		647.69	647.69		090	Y
67415		59.61	59.61		000	N
67420		944.58	944.58		090	Y
67430		741.42	741.42		090	Y
67440		728.91	728.91		090	Y
67445		754.16	754.16		090	Y
67450		716.85	716.85		090	Y
67500		40.27	23.21		000	N
67505		40.95	23.89		000	N
67515		33.90	20.70		000	N
67550		550.32	550.32		090	N
67560		557.38	557.38		090	N
67570		724.13	724.13		090	Y
67599		B.R.	B.R.		090	Y
67700		210.89	45.27		010	N
67710		205.89	35.04		010	N
67715		41.86	41.86		010	N
67800		93.50	47.32		010	N
67801		232.96	64.61		010	N
67805		245.02	75.98		010	N
67808		188.37	188.37		090	N
67810		155.38	50.96		000	N
67820		67.11	29.80		000	N
67825		163.12	56.65		010	N
67830		305.08	90.09		010	N
67835		241.83	241.83		090	N
67840		235.69	70.07		010	N
67850		241.38	86.91		010	N
67875		298.71	81.22		000	N
67880		381.97	162.89		090	N
67882		472.52	229.09		090	N
67900		403.13	297.34		090	N
67901		328.51	328.51	LE	090	N
67902		329.19	329.19	LE	090	N
67903		396.99	306.67	LE	090	N
67904		489.81	342.62	LE	090	N
67906		388.34	305.31	LE	090	N
67908		341.02	265.26	LE	090	N
67909		360.59	283.92	PA	090	N
67911		281.87	281.87		090	N
67914		389.71	170.85		090	N
67915		343.75	108.75		090	N
67916		520.29	250.48		090	N
67917		384.47	297.80		090	N
67921		376.74	158.80		090	N
67922		341.02	147.42		090	N
67923		512.10	265.95		090	N
67924		363.77	277.09		090	N
67930		371.74	156.75		010	N
67935		515.97	273.91		090	N
67938		252.98	43.23		010	N
67950		343.52	312.81		090	N
67961		348.76	271.41		090	N
67966		361.04	297.57		090	N
67971		408.36	408.36		090	Y
67973		528.94	528.94		090	Y
67974		525.52	525.52		090	Y
67975		384.93	384.93		090	N
67999		B.R.	B.R.		090	N
68020		211.12	46.87		010	N
68040		196.33	29.12		000	N
68100		213.85	46.41		000	N
68110		247.52	73.48		010	N
68115		249.80	81.22		010	N
68130		169.03	169.03		090	N
68135		232.05	63.02		010	N
68200		28.89	16.84		000	N
68320		256.85	247.52		090	N
68325		316.68	316.68		090	N
68326		310.31	310.31		090	N
68328		353.76	353.76		090	N
68330		280.96	245.93		090	N
68335		297.57	297.57		090	N
68340		461.82	196.56		090	N
68360		257.07	226.13		090	N
68362		354.90	354.90		090	N

- Not Covered
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68399		B.R.	B.R.		090	N
68400		303.26	89.41		010	N
68420		326.92	111.48		010	N
68440		202.70	32.31		010	N
68500		468.65	468.65		090	N
68505		493.45	493.45		090	N
68510		408.14	158.11		000	N
68520		346.71	346.71		090	N
68525		152.43	152.43		000	N
68530		437.71	158.34		010	N
68540		470.47	470.47		090	N
68550		551.69	551.69		090	N
68700		311.45	311.45		090	N
68705		239.33	70.75		010	N
68720		393.35	393.35		090	Y
68745		380.83	380.83		090	Y
68750		396.08	396.08		090	Y
68760		195.88	68.93		010	N
68761		102.83	55.28		010	N
68770		571.02	304.40		090	N
68801		42.09	35.04		010	N
68810		101.24	65.06		010	N
68811		111.25	111.25		010	N
68815		398.35	141.73		010	N
68840		66.20	52.10		010	N
68850		370.14	25.93		000	N
68899		B.R.	B.R.		090	N
69000		83.72	48.00		010	N
69005		108.97	98.96		010	N
69020		87.13	51.64		010	N
69090		#	#		000	N
69100		52.10	28.44		000	N
69105		54.83	43.68		000	N
69110		161.75	147.19		090	N
69120		204.30	204.30		090	N
69140		378.79	378.79		090	N
69145		140.60	120.58		090	N
69150		583.08	583.08		090	N
69155		869.05	869.05		090	Y
69200		51.64	35.95		000	N
69205		65.06	65.06		010	N
69210		27.98	20.25		000	N
69220		54.83	29.80		000	N
69222		84.86	72.57		010	N
69300		#	#		010	N
69310		483.44	483.44		090	N
69320		719.36	719.36		090	Y
69399		B.R.	B.R.		090	N
69400		54.37	30.94		000	N
69401		47.32	22.75		000	N
69405		133.54	96.91		010	N
69410		39.81	11.60		000	N
69420		85.77	48.91		010	N
69421		100.55	85.31		010	N
69424		58.92	41.86		000	N
69433		89.64	56.42		010	N
69436		93.73	93.73		010	N
69440		350.35	350.35		090	N
69450		274.37	274.37		090	N
69501		404.72	404.72		090	N
69502		542.36	542.36		090	N
69505		560.33	560.33		090	N
69511		584.67	584.67		090	N
69530		801.71	801.71		090	Y
69535		1,437.57	1,437.57		090	N
69540		80.76	65.75		010	N
69550		490.94	490.94		090	Y
69552		802.85	802.85		090	Y
69554		1,288.79	1,288.79		090	Y
69601		589.68	589.68		090	N
69602		588.09	588.09		090	N
69603		604.69	604.69		090	N
69604		603.56	603.56		090	N
69605		769.63	769.63		090	Y
69610		203.38	184.96		010	N
69620		298.48	217.94		090	N
69631		450.00	450.00		090	N
69632		572.62	572.62		090	N
69633		548.50	548.50		090	N
69635		577.85	577.85		090	N
69636		665.89	665.89		090	N
69637		661.57	661.57		090	N
69641		556.24	556.24		090	N
69642		725.73	725.73		090	N
69643		668.62	668.62		090	N
69644		730.27	730.27		090	N
69645		706.16	706.16		090	N
69646		768.50	768.50		090	N
69650		425.65	425.65		090	N
69660		509.60	509.60		090	N
69661		664.30	664.30		090	N
69662		655.65	655.65		090	N

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69666		430.43	430.43		090	N
69667		429.75	429.75		090	N
69670		511.19	511.19		090	Y
69676		436.80	436.80		090	N
69700		327.83	327.83		090	N
69710		#	#		000	N
69711		#	#		090	Y
69714		598.33	598.33	PA	090	N
69715		757.35	757.35	PA	090	N
69717		619.94	619.94	PA	090	N
69718		766.90	766.90	PA	090	N
69720		637.46	637.46		090	N
69725		1,016.24	1,016.24		090	Y
69740		629.95	629.95		090	Y
69745		687.96	687.96		090	Y
69799		B.R.	B.R.		090	N
69801		386.52	386.52		090	N
69802		572.62	572.62		090	Y
69805		579.22	579.22		090	Y
69806		542.13	542.13		090	N
69820		446.36	446.36		090	Y
69840		449.31	449.31		090	Y
69905		492.08	492.08		090	N
69910		586.27	586.27		090	N
69915		870.41	870.41		090	Y
69930		697.29	697.29		090	N
69949		B.R.	B.R.		090	N
69950		1,013.29	1,013.29		090	Y
69955		1,065.16	1,065.16		090	Y
69960		1,075.17	1,075.17		090	Y
69970		1,157.52	1,157.52		090	Y
69979		B.R.	B.R.		090	N
69990		131.04	131.04		000	Y
70010		135.36	135.36		000	N
70010	26	37.54	37.54		000	N
70010	TC	97.83	97.83		000	N
70015		68.25	68.25		000	N
70015	26	37.31	37.31		000	N
70015	TC	30.94	30.94		000	N
70030		14.79	14.79		000	N
70030	26	5.46	5.46		000	N
70030	TC	9.33	9.33		000	N
70100		17.52	17.52		000	N
70100	26	5.69	5.69		000	N
70100	TC	11.83	11.83		000	N
70110		22.07	22.07		000	N
70110	26	7.96	7.96		000	N
70110	TC	14.11	14.11		000	N
70120		19.79	19.79		000	N
70120	26	5.69	5.69		000	N
70120	TC	14.11	14.11		000	N
70130		28.44	28.44		000	N
70130	26	10.69	10.69		000	N
70130	TC	17.75	17.75		000	N
70134		27.30	27.30		000	N
70134	26	10.69	10.69		000	N
70134	TC	16.84	16.84		000	N
70140		20.25	20.25		000	N
70140	26	6.14	6.14		000	N
70140	TC	14.11	14.11		000	N
70150		25.93	25.93		000	N
70150	26	8.19	8.19		000	N
70150	TC	17.75	17.75		000	N
70160		17.29	17.29		000	N
70160	26	5.46	5.46		000	N
70160	TC	11.83	11.83		000	N
70170		31.17	31.17		000	N
70170	26	9.55	9.55		000	N
70170	TC	21.61	21.61		000	N
70190		20.70	20.70		000	N
70190	26	6.60	6.60		000	N
70190	TC	14.11	14.11		000	N
70200		26.62	26.62		000	N
70200	26	8.87	8.87		000	N
70200	TC	17.75	17.75		000	N
70210		19.57	19.57		000	N
70210	26	5.46	5.46		000	N
70210	TC	14.11	14.11		000	N
70220		25.71	25.71		000	N
70220	26	7.96	7.96		000	N
70220	TC	17.75	17.75		000	N
70240		15.47	15.47		000	N
70240	26	6.14	6.14		000	N
70240	TC	9.33	9.33		000	N
70250		21.61	21.61		000	N
70250	26	7.51	7.51		000	N
70250	TC	14.11	14.11		000	N
70260		30.71	30.71		000	N
70260	26	10.69	10.69		000	N
70260	TC	20.25	20.25		000	N
70300		9.55	9.55		000	N
70300	26	3.41	3.41		000	N

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70300	TC	6.14	6.14		000	N
70310		14.79	14.79		000	N
70310	26	5.46	5.46		000	N
70310	TC	9.33	9.33		000	N
70320		24.80	24.80		000	N
70320	26	7.05	7.05		000	N
70320	TC	17.75	17.75		000	N
70328		16.84	16.84		000	N
70328	26	5.69	5.69		000	N
70328	TC	11.15	11.15		000	N
70330		26.62	26.62		000	N
70330	26	7.51	7.51		000	N
70330	TC	19.11	19.11		000	N
70332		64.38	64.38		000	N
70332	26	16.84	16.84		000	N
70332	TC	47.55	47.55		000	N
70336		300.07	300.07		000	N
70336	26	46.41	46.41		000	N
70336	TC	253.44	253.44		000	N
70350		14.11	14.11		000	N
70350	26	5.46	5.46		000	N
70350	TC	8.64	8.64		000	N
70355		19.34	19.34		000	N
70355	26	6.37	6.37		000	N
70355	TC	12.97	12.97		000	N
70360		14.79	14.79		000	N
70360	26	5.46	5.46		000	N
70360	TC	9.33	9.33		000	N
70370		39.59	39.59		000	N
70370	26	10.01	10.01		000	N
70370	TC	29.57	29.57		000	N
70371		74.16	74.16		000	N
70371	26	26.62	26.62		000	N
70371	TC	47.55	47.55		000	N
70373		54.14	54.14		000	N
70373	26	13.65	13.65		000	N
70373	TC	40.49	40.49		000	N
70380		20.48	20.48		000	N
70380	26	5.46	5.46		000	N
70380	TC	15.02	15.02		000	N
70390		52.32	52.32		000	N
70390	26	11.83	11.83		000	N
70390	TC	40.49	40.49		000	N
70450		133.54	133.54		000	N
70450	26	26.84	26.84		000	N
70450	TC	106.70	106.70		000	N
70460		163.57	163.57		000	N
70460	26	35.49	35.49		000	N
70460	TC	128.08	128.08		000	N
70470		199.97	199.97		000	N
70470	26	40.04	40.04		000	N
70470	TC	159.93	159.93		000	N
70480		146.97	146.97		000	N
70480	26	40.27	40.27		000	N
70480	TC	106.70	106.70		000	N
70481		171.08	171.08		000	N
70481	26	43.23	43.23		000	N
70481	TC	128.08	128.08		000	N
70482		205.43	205.43		000	N
70482	26	45.50	45.50		000	N
70482	TC	159.93	159.93		000	N
70486		142.64	142.64		000	N
70486	26	35.72	35.72		000	N
70486	TC	106.70	106.70		000	N
70487		168.81	168.81		000	N
70487	26	40.95	40.95		000	N
70487	TC	128.08	128.08		000	N
70488		204.52	204.52		000	N
70488	26	44.59	44.59		000	N
70488	TC	159.93	159.93		000	N
70490		146.97	146.97		000	N
70490	26	40.27	40.27		000	N
70490	TC	106.70	106.70		000	N
70491		171.08	171.08		000	N
70491	26	43.23	43.23		000	N
70491	TC	128.08	128.08		000	N
70492		205.43	205.43		000	N
70492	26	45.50	45.50		000	N
70492	TC	159.93	159.93		000	N
70496		219.77	219.77		000	N
70496	26	56.88	56.88		000	N
70496	TC	162.89	162.89		000	N
70498		219.77	219.77		000	N
70498	26	56.88	56.88		000	N
70498	TC	162.89	162.89		000	N
70540		292.34	292.34		000	N
70540	26	41.86	41.86		000	N
70540	TC	250.48	250.48		000	N
70542		351.03	351.03		000	N
70542	26	50.51	50.51		000	N
70542	TC	300.53	300.53		000	N
70543		623.12	623.12		000	N

- Not Covered
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70543	26	66.89	66.89		000	N
70543	TC	556.24	556.24		000	N
70544		290.97	290.97	EX	000	N
70544	26	37.54	37.54	EX	000	N
70544	TC	253.44	253.44	EX	000	N
70545		290.97	290.97	EX	000	N
70545	26	37.54	37.54	EX	000	N
70545	TC	253.44	253.44	EX	000	N
70546		554.87	554.87	EX	000	N
70546	26	56.42	56.42	EX	000	N
70546	TC	498.45	498.45	EX	000	N
70547		290.97	290.97		000	N
70547	26	37.54	37.54		000	N
70547	TC	253.44	253.44		000	N
70548		290.97	290.97		000	N
70548	26	37.54	37.54		000	N
70548	TC	253.44	253.44		000	N
70549		554.87	554.87		000	N
70549	26	56.42	56.42		000	N
70549	TC	498.45	498.45		000	N
70551		300.07	300.07	EX	000	N
70551	26	46.41	46.41	EX	000	N
70551	TC	253.44	253.44	EX	000	N
70552		360.13	360.13	EX	000	N
70552	26	56.19	56.19	EX	000	N
70552	TC	303.94	303.94	EX	000	N
70553		637.23	637.23	EX	000	N
70553	26	73.94	73.94	EX	000	N
70553	TC	563.29	563.29	EX	000	N
71010		16.38	16.38		000	N
71010	26	5.69	5.69		000	N
71010	TC	10.69	10.69		000	N
71015		18.43	18.43		000	N
71015	26	6.60	6.60		000	N
71015	TC	11.83	11.83		000	N
71020		21.16	21.16		000	N
71020	26	7.05	7.05		000	N
71020	TC	14.11	14.11		000	N
71021		25.25	25.25		000	N
71021	26	8.42	8.42		000	N
71021	TC	16.84	16.84		000	N
71022		26.62	26.62		000	N
71022	26	9.78	9.78		000	N
71022	TC	16.84	16.84		000	N
71023		29.80	29.80		000	N
71023	26	12.06	12.06		000	N
71023	TC	17.75	17.75		000	N
71030		27.53	27.53		000	N
71030	26	9.78	9.78		000	N
71030	TC	17.75	17.75		000	N
71034		47.32	47.32		000	N
71034	26	14.56	14.56		000	N
71034	TC	32.76	32.76		000	N
71035		17.52	17.52		000	N
71035	26	5.69	5.69		000	N
71035	TC	11.83	11.83		000	N
71040		51.41	51.41		000	N
71040	26	18.20	18.20		000	N
71040	TC	33.21	33.21		000	N
71060		73.26	73.26		000	N
71060	26	23.21	23.21		000	N
71060	TC	50.05	50.05		000	N
71090		55.96	55.96		000	N
71090	26	17.52	17.52		000	N
71090	TC	38.45	38.45		000	N
71100		20.02	20.02		000	N
71100	26	7.05	7.05		000	N
71100	TC	12.97	12.97		000	N
71101		23.43	23.43		000	N
71101	26	8.42	8.42		000	N
71101	TC	15.02	15.02		000	N
71110		26.16	26.16		000	N
71110	26	8.42	8.42		000	N
71110	TC	17.75	17.75		000	N
71111		30.03	30.03		000	N
71111	26	10.01	10.01		000	N
71111	TC	20.25	20.25		000	N
71120		21.16	21.16		000	N
71120	26	6.37	6.37		000	N
71120	TC	14.79	14.79		000	N
71130		22.98	22.98		000	N
71130	26	7.05	7.05		000	N
71130	TC	15.92	15.92		000	N
71250		170.17	170.17		000	N
71250	26	36.40	36.40		000	N
71250	TC	133.77	133.77		000	N
71260		198.61	198.61		000	N
71260	26	38.67	38.67		000	N
71260	TC	159.93	159.93		000	N
71270		243.20	243.20		000	N
71270	26	43.23	43.23		000	N
71270	TC	199.97	199.97		000	N

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71275		260.94	260.94		000	N
71275	26	61.88	61.88		000	N
71275	TC	198.84	198.84		000	N
71550		296.66	296.66		000	N
71550	26	45.27	45.27		000	N
71550	TC	251.39	251.39		000	N
71551		354.90	354.90		000	N
71551	26	53.69	53.69		000	N
71551	TC	301.21	301.21		000	N
71552		624.26	624.26		000	N
71552	26	70.53	70.53		000	N
71552	TC	553.74	553.74		000	N
71555		310.31	310.31		000	N
71555	26	56.88	56.88		000	N
71555	TC	253.44	253.44		000	N
72010		37.54	37.54		000	N
72010	26	14.33	14.33		000	N
72010	TC	23.21	23.21		000	N
72020		14.11	14.11		000	N
72020	26	4.78	4.78		000	N
72020	TC	9.33	9.33		000	N
72040		20.70	20.70		000	N
72040	26	7.05	7.05		000	N
72040	TC	13.65	13.65		000	N
72050		30.03	30.03		000	N
72050	26	9.78	9.78		000	N
72050	TC	20.25	20.25		000	N
72052		36.86	36.86		000	N
72052	26	11.38	11.38		000	N
72052	TC	25.48	25.48		000	N
72069		18.65	18.65		000	N
72069	26	7.28	7.28		000	N
72069	TC	11.15	11.15		000	N
72070		21.84	21.84		000	N
72070	26	7.05	7.05		000	N
72070	TC	14.79	14.79		000	N
72072		23.89	23.89		000	N
72072	26	7.05	7.05		000	N
72072	TC	16.84	16.84		000	N
72074		27.75	27.75		000	N
72074	26	7.05	7.05		000	N
72074	TC	20.70	20.70		000	N
72080		22.07	22.07		000	N
72080	26	7.05	7.05		000	N
72080	TC	15.02	15.02		000	N
72090		23.89	23.89		000	N
72090	26	8.87	8.87		000	N
72090	TC	15.02	15.02		000	N
72100		22.07	22.07		000	N
72100	26	7.05	7.05		000	N
72100	TC	15.02	15.02		000	N
72110		30.49	30.49		000	N
72110	26	9.78	9.78		000	N
72110	TC	20.70	20.70		000	N
72114		38.45	38.45		000	N
72114	26	11.60	11.60		000	N
72114	TC	26.84	26.84		000	N
72120		27.30	27.30		000	N
72120	26	7.05	7.05		000	N
72120	TC	20.25	20.25		000	N
72125		170.17	170.17		000	N
72125	26	36.40	36.40		000	N
72125	TC	133.77	133.77		000	N
72126		198.15	198.15		000	N
72126	26	38.22	38.22		000	N
72126	TC	159.93	159.93		000	N
72127		240.01	240.01		000	N
72127	26	40.04	40.04		000	N
72127	TC	199.97	199.97		000	N
72128		170.17	170.17		000	N
72128	26	36.40	36.40		000	N
72128	TC	133.77	133.77		000	N
72129		198.15	198.15		000	N
72129	26	38.22	38.22		000	N
72129	TC	159.93	159.93		000	N
72130		240.01	240.01		000	N
72130	26	40.04	40.04		000	N
72130	TC	199.97	199.97		000	N
72131		170.17	170.17		000	N
72131	26	36.40	36.40		000	N
72131	TC	133.77	133.77		000	N
72132		198.38	198.38		000	N
72132	26	38.45	38.45		000	N
72132	TC	159.93	159.93		000	N
72133		240.01	240.01		000	N
72133	26	40.04	40.04		000	N
72133	TC	199.97	199.97		000	N
72141		303.71	303.71		000	N
72141	26	50.05	50.05		000	N
72141	TC	253.44	253.44		000	N
72142		364.45	364.45		000	N
72142	26	60.74	60.74		000	N

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72142	TC	303.94	303.94		000	N
72146		331.47	331.47		000	N
72146	26	50.05	50.05		000	N
72146	TC	281.42	281.42		000	N
72147		364.23	364.23		000	N
72147	26	60.52	60.52		000	N
72147	TC	303.94	303.94		000	N
72148		327.83	327.83	EX	000	N
72148	26	46.41	46.41	EX	000	N
72148	TC	281.42	281.42	EX	000	N
72149		360.36	360.36	EX	000	N
72149	26	56.42	56.42	EX	000	N
72149	TC	303.94	303.94	EX	000	N
72156		644.05	644.05		000	N
72156	26	80.76	80.76		000	N
72156	TC	563.29	563.29		000	N
72157		643.83	643.83	EX	000	N
72157	26	80.53	80.53	EX	000	N
72157	TC	563.29	563.29	EX	000	N
72158		637.46	637.46		000	N
72158	26	74.16	74.16		000	N
72158	TC	563.29	563.29		000	N
72159		339.88	339.88		000	N
72159	26	58.47	58.47		000	N
72159	TC	281.42	281.42		000	N
72170		17.29	17.29		000	N
72170	26	5.46	5.46		000	N
72170	TC	11.83	11.83		000	N
72190		21.61	21.61		000	N
72190	26	6.60	6.60		000	N
72190	TC	15.02	15.02		000	N
72191		249.57	249.57		000	N
72191	26	58.47	58.47		000	N
72191	TC	191.10	191.10		000	N
72192		167.90	167.90		000	N
72192	26	34.13	34.13		000	N
72192	TC	133.77	133.77		000	N
72193		191.33	191.33		000	N
72193	26	36.40	36.40		000	N
72193	TC	154.93	154.93		000	N
72194		230.00	230.00		000	N
72194	26	38.22	38.22		000	N
72194	TC	191.78	191.78		000	N
72195		296.89	296.89	EX	000	N
72195	26	45.50	45.50	EX	000	N
72195	TC	251.39	251.39	EX	000	N
72196		354.90	354.90	EX	000	N
72196	26	53.69	53.69	EX	000	N
72196	TC	301.21	301.21	EX	000	N
72197		627.90	627.90	EX	000	N
72197	26	70.53	70.53	EX	000	N
72197	TC	557.38	557.38	EX	000	N
72198		311.90	311.90		000	N
72198	26	58.47	58.47		000	N
72198	TC	253.44	253.44		000	N
72200		17.29	17.29		000	N
72200	26	5.46	5.46		000	N
72200	TC	11.83	11.83		000	N
72202		20.25	20.25		000	N
72202	26	6.14	6.14		000	N
72202	TC	14.11	14.11		000	N
72220		18.43	18.43		000	N
72220	26	5.46	5.46		000	N
72220	TC	12.97	12.97		000	N
72240		135.82	135.82		000	N
72240	26	28.21	28.21		000	N
72240	TC	107.61	107.61		000	N
72255		125.81	125.81		000	N
72255	26	27.98	27.98		000	N
72255	TC	97.83	97.83		000	N
72265		118.07	118.07		000	N
72265	26	25.93	25.93		000	N
72265	TC	92.14	92.14		000	N
72270		179.72	179.72		000	N
72270	26	41.86	41.86		000	N
72270	TC	138.09	138.09		000	N
72275		71.44	71.44		000	N
72275	26	22.52	22.52		000	N
72275	TC	48.91	48.91		000	N
72285		225.68	225.68		000	N
72285	26	36.17	36.17		000	N
72285	TC	189.51	189.51		000	N
72295		203.84	203.84		000	N
72295	26	26.16	26.16		000	N
72295	TC	177.68	177.68		000	N
73000		17.06	17.06		000	N
73000	26	5.23	5.23		000	N
73000	TC	11.83	11.83		000	N
73010		17.29	17.29		000	N
73010	26	5.46	5.46		000	N
73010	TC	11.83	11.83		000	N
73020		15.47	15.47		000	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

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73020	26	4.78	4.78		000	N
73020	TC	10.69	10.69		000	N
73030		18.65	18.65		000	N
73030	26	5.69	5.69		000	N
73030	TC	12.97	12.97		000	N
73040		64.61	64.61		000	N
73040	26	17.06	17.06		000	N
73040	TC	47.55	47.55		000	N
73050		21.38	21.38		000	N
73050	26	6.37	6.37		000	N
73050	TC	15.02	15.02		000	N
73060		18.43	18.43		000	N
73060	26	5.46	5.46		000	N
73060	TC	12.97	12.97		000	N
73070		16.61	16.61		000	N
73070	26	4.78	4.78		000	N
73070	TC	11.83	11.83		000	N
73080		18.43	18.43		000	N
73080	26	5.46	5.46		000	N
73080	TC	12.97	12.97		000	N
73085		64.84	64.84		000	N
73085	26	17.29	17.29		000	N
73085	TC	47.55	47.55		000	N
73090		17.06	17.06		000	N
73090	26	5.23	5.23		000	N
73090	TC	11.83	11.83		000	N
73092		16.38	16.38		000	N
73092	26	5.23	5.23		000	N
73092	TC	11.15	11.15		000	N
73100		16.61	16.61		000	N
73100	26	5.23	5.23		000	N
73100	TC	11.15	11.15		000	N
73110		17.52	17.52		000	N
73110	26	5.46	5.46		000	N
73110	TC	12.06	12.06		000	N
73115		53.23	53.23		000	N
73115	26	17.29	17.29		000	N
73115	TC	35.95	35.95		000	N
73120		16.38	16.38		000	N
73120	26	5.23	5.23		000	N
73120	TC	11.15	11.15		000	N
73130		17.52	17.52		000	N
73130	26	5.46	5.46		000	N
73130	TC	12.06	12.06		000	N
73140		13.65	13.65		000	N
73140	26	4.32	4.32		000	N
73140	TC	9.33	9.33		000	N
73200		146.28	146.28		000	N
73200	26	34.13	34.13		000	N
73200	TC	112.16	112.16		000	N
73201		170.17	170.17		000	N
73201	26	36.40	36.40		000	N
73201	TC	133.77	133.77		000	N
73202		206.34	206.34		000	N
73202	26	38.45	38.45		000	N
73202	TC	167.90	167.90		000	N
73206		226.36	226.36		000	N
73206	26	58.47	58.47		000	N
73206	TC	167.90	167.90		000	N
73218		292.34	292.34	EX	000	N
73218	26	41.86	41.86	EX	000	N
73218	TC	250.48	250.48	EX	000	N
73219		351.03	351.03	EX	000	N
73219	26	50.51	50.51	EX	000	N
73219	TC	300.53	300.53	EX	000	N
73220		623.35	623.35	EX	000	N
73220	26	67.11	67.11	EX	000	N
73220	TC	556.24	556.24	EX	000	N
73221		292.34	292.34	EX	000	N
73221	26	41.86	41.86	EX	000	N
73221	TC	250.48	250.48	EX	000	N
73222		351.03	351.03	EX	000	N
73222	26	50.51	50.51	EX	000	N
73222	TC	300.53	300.53	EX	000	N
73223		623.12	623.12	EX	000	N
73223	26	66.89	66.89	EX	000	N
73223	TC	556.24	556.24	EX	000	N
73225		309.63	309.63		000	N
73225	26	56.19	56.19		000	N
73225	TC	253.44	253.44		000	N
73500		16.15	16.15		000	N
73500	26	5.46	5.46		000	N
73500	TC	10.69	10.69		000	N
73510		19.57	19.57		000	N
73510	26	6.60	6.60		000	N
73510	TC	12.97	12.97		000	N
73520		23.21	23.21		000	N
73520	26	8.19	8.19		000	N
73520	TC	15.02	15.02		000	N
73525		64.84	64.84		000	N
73525	26	17.29	17.29		000	N
73525	TC	47.55	47.55		000	N

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73530		20.93	20.93		000	N
73530	26	9.10	9.10		000	N
73530	TC	11.83	11.83		000	N
73540		19.34	19.34		000	N
73540	26	6.37	6.37		000	N
73540	TC	12.97	12.97		000	N
73542		65.29	65.29		000	N
73542	26	17.75	17.75		000	N
73542	TC	47.55	47.55		000	N
73550		18.43	18.43		000	N
73550	26	5.46	5.46		000	N
73550	TC	12.97	12.97		000	N
73560		17.52	17.52		000	N
73560	26	5.46	5.46		000	N
73560	TC	11.83	11.83		000	N
73562		18.65	18.65		000	N
73562	26	5.69	5.69		000	N
73562	TC	12.97	12.97		000	N
73564		21.16	21.16		000	N
73564	26	7.05	7.05		000	N
73564	TC	14.11	14.11		000	N
73565		17.06	17.06		000	N
73565	26	5.69	5.69		000	N
73565	TC	11.15	11.15		000	N
73580		76.44	76.44		000	N
73580	26	17.06	17.06		000	N
73580	TC	59.38	59.38		000	N
73590		17.29	17.29		000	N
73590	26	5.46	5.46		000	N
73590	TC	11.83	11.83		000	N
73592		16.38	16.38		000	N
73592	26	5.23	5.23		000	N
73592	TC	11.15	11.15		000	N
73600		16.38	16.38		000	N
73600	26	5.23	5.23		000	N
73600	TC	11.15	11.15		000	N
73610		17.52	17.52		000	N
73610	26	5.46	5.46		000	N
73610	TC	12.06	12.06		000	N
73615		64.61	64.61		000	N
73615	26	17.06	17.06		000	N
73615	TC	47.55	47.55		000	N
73620		16.38	16.38		000	N
73620	26	5.23	5.23		000	N
73620	TC	11.15	11.15		000	N
73630		17.52	17.52		000	N
73630	26	5.46	5.46		000	N
73630	TC	12.06	12.06		000	N
73650		15.92	15.92		000	N
73650	26	5.23	5.23		000	N
73650	TC	10.69	10.69		000	N
73660		13.65	13.65		000	N
73660	26	4.32	4.32		000	N
73660	TC	9.33	9.33		000	N
73700		146.28	146.28		000	N
73700	26	34.13	34.13		000	N
73700	TC	112.16	112.16		000	N
73701		170.17	170.17		000	N
73701	26	36.40	36.40		000	N
73701	TC	133.77	133.77		000	N
73702		206.12	206.12		000	N
73702	26	38.22	38.22		000	N
73702	TC	167.90	167.90		000	N
73706		229.09	229.09		000	N
73706	26	61.20	61.20		000	N
73706	TC	167.90	167.90		000	N
73718		292.34	292.34	EX	000	N
73718	26	41.86	41.86	EX	000	N
73718	TC	250.48	250.48	EX	000	N
73719		350.81	350.81	EX	000	N
73719	26	50.28	50.28	EX	000	N
73719	TC	300.53	300.53	EX	000	N
73720		623.35	623.35	EX	000	N
73720	26	67.11	67.11	EX	000	N
73720	TC	556.24	556.24	EX	000	N
73721		292.34	292.34	EX	000	N
73721	26	41.86	41.86	EX	000	N
73721	TC	250.48	250.48	EX	000	N
73722		351.03	351.03	EX	000	N
73722	26	50.73	50.73	EX	000	N
73722	TC	300.53	300.53	EX	000	N
73723		623.12	623.12	EX	000	N
73723	26	66.89	66.89	EX	000	N
73723	TC	556.24	556.24	EX	000	N
73725		310.54	310.54		000	N
73725	26	57.10	57.10		000	N
73725	TC	253.44	253.44		000	N
74000		17.52	17.52		000	N
74000	26	5.69	5.69		000	N
74000	TC	11.83	11.83		000	N
74010		20.25	20.25		000	N
74010	26	7.28	7.28		000	N

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74010	TC	12.97	12.97		000	N
74020		22.52	22.52		000	N
74020	26	8.42	8.42		000	N
74020	TC	14.11	14.11		000	N
74022		26.62	26.62		000	N
74022	26	10.01	10.01		000	N
74022	TC	16.84	16.84		000	N
74150		165.39	165.39		000	N
74150	26	37.31	37.31		000	N
74150	TC	128.08	128.08		000	N
74160		194.74	194.74		000	N
74160	26	39.81	39.81		000	N
74160	TC	154.93	154.93		000	N
74170		235.69	235.69		000	N
74170	26	43.91	43.91		000	N
74170	TC	191.78	191.78		000	N
74175		252.53	252.53		000	N
74175	26	61.20	61.20		000	N
74175	TC	191.10	191.10		000	N
74181		296.66	296.66	EX	000	N
74181	26	45.27	45.27	EX	000	N
74181	TC	251.39	251.39	EX	000	N
74182		354.90	354.90	EX	000	N
74182	26	53.69	53.69	EX	000	N
74182	TC	301.21	301.21	EX	000	N
74183		627.90	627.90	EX	000	N
74183	26	70.53	70.53	EX	000	N
74183	TC	557.38	557.38	EX	000	N
74185		309.85	309.85		000	N
74185	26	56.42	56.42		000	N
74185	TC	253.44	253.44		000	N
74190		44.59	44.59		000	N
74190	26	15.02	15.02		000	N
74190	TC	29.57	29.57		000	N
74210		38.45	38.45		000	N
74210	26	11.38	11.38		000	N
74210	TC	26.84	26.84		000	N
74220		41.18	41.18		000	N
74220	26	14.33	14.33		000	N
74220	TC	26.84	26.84		000	N
74230		46.18	46.18		000	N
74230	26	16.61	16.61		000	N
74230	TC	29.57	29.57		000	N
74235		96.46	96.46		000	N
74235	26	37.08	37.08		000	N
74235	TC	59.38	59.38		000	N
74240		54.83	54.83		000	N
74240	26	21.61	21.61		000	N
74240	TC	33.21	33.21		000	N
74241		55.28	55.28		000	N
74241	26	21.61	21.61		000	N
74241	TC	33.67	33.67		000	N
74245		82.58	82.58		000	N
74245	26	28.66	28.66		000	N
74245	TC	53.92	53.92		000	N
74246		58.92	58.92		000	N
74246	26	21.61	21.61		000	N
74246	TC	37.31	37.31		000	N
74247		60.06	60.06		000	N
74247	26	21.61	21.61		000	N
74247	TC	38.45	38.45		000	N
74249		86.91	86.91		000	N
74249	26	28.66	28.66		000	N
74249	TC	58.24	58.24		000	N
74250		44.13	44.13		000	N
74250	26	14.56	14.56		000	N
74250	TC	29.57	29.57		000	N
74251		51.19	51.19		000	N
74251	26	21.61	21.61		000	N
74251	TC	29.57	29.57		000	N
74260		49.14	49.14		000	N
74260	26	15.47	15.47		000	N
74260	TC	33.67	33.67		000	N
74270		60.52	60.52		000	N
74270	26	21.61	21.61		000	N
74270	TC	38.90	38.90		000	N
74280		81.67	81.67		000	N
74280	26	30.94	30.94		000	N
74280	TC	50.73	50.73		000	N
74283		121.49	121.49		000	N
74283	26	63.47	63.47		000	N
74283	TC	58.01	58.01		000	N
74290		26.62	26.62		000	N
74290	26	10.01	10.01		000	N
74290	TC	16.84	16.84		000	N
74291		15.70	15.70		000	N
74291	26	6.37	6.37		000	N
74291	TC	9.33	9.33		000	N
74300		25.25	25.25		000	N
74300	26	11.38	11.38		000	N
74300	TC	13.88	13.88		000	N
74301		14.33	14.33		000	N

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74301	26	6.60	6.60		000	N
74301	TC	7.74	7.74		000	N
74305		30.94	30.94		000	N
74305	26	13.19	13.19		000	N
74305	TC	17.75	17.75		000	N
74320		88.27	88.27		000	N
74320	26	16.84	16.84		000	N
74320	TC	71.21	71.21		000	N
74327		61.88	61.88		000	N
74327	26	21.84	21.84		000	N
74327	TC	40.04	40.04		000	N
74328		93.27	93.27		000	N
74328	26	22.07	22.07		000	N
74328	TC	71.21	71.21		000	N
74329		93.27	93.27		000	N
74329	26	22.07	22.07		000	N
74329	TC	71.21	71.21		000	N
74330		99.64	99.64		000	N
74330	26	28.44	28.44		000	N
74330	TC	71.21	71.21		000	N
74340		76.21	76.21		000	N
74340	26	16.84	16.84		000	N
74340	TC	59.38	59.38		000	N
74350		95.09	95.09		000	N
74350	26	23.89	23.89		000	N
74350	TC	71.21	71.21		000	N
74355		83.04	83.04		000	N
74355	26	23.66	23.66		000	N
74355	TC	59.38	59.38		000	N
74360		88.27	88.27		000	N
74360	26	16.84	16.84		000	N
74360	TC	71.21	71.21		000	N
74363		165.62	165.62		000	N
74363	26	27.75	27.75		000	N
74363	TC	138.09	138.09		000	N
74400		53.69	53.69		000	N
74400	26	15.24	15.24		000	N
74400	TC	38.45	38.45		000	N
74410		59.38	59.38		000	N
74410	26	15.24	15.24		000	N
74410	TC	44.13	44.13		000	N
74415		63.24	63.24		000	N
74415	26	15.24	15.24		000	N
74415	TC	48.00	48.00		000	N
74420		70.98	70.98		000	N
74420	26	11.38	11.38		000	N
74420	TC	59.38	59.38		000	N
74425		40.95	40.95		000	N
74425	26	11.38	11.38		000	N
74425	TC	29.57	29.57		000	N
74430		33.90	33.90		000	N
74430	26	10.01	10.01		000	N
74430	TC	23.89	23.89		000	N
74440		37.31	37.31		000	N
74440	26	11.83	11.83		000	N
74440	TC	25.48	25.48		000	N
74445		60.97	60.97		000	N
74445	26	35.49	35.49		000	N
74445	TC	25.48	25.48		000	N
74450		43.68	43.68		000	N
74450	26	10.47	10.47		000	N
74450	TC	33.21	33.21		000	N
74455		46.18	46.18		000	N
74455	26	10.24	10.24		000	N
74455	TC	35.95	35.95		000	N
74470		45.05	45.05		000	N
74470	26	16.84	16.84		000	N
74470	TC	28.21	28.21		000	N
74475		109.20	109.20		000	N
74475	26	16.84	16.84		000	N
74475	TC	92.14	92.14		000	N
74480		109.20	109.20		000	N
74480	26	16.84	16.84		000	N
74480	TC	92.14	92.14		000	N
74485		88.27	88.27		000	N
74485	26	17.06	17.06		000	N
74485	TC	71.21	71.21		000	N
74710		34.58	34.58		000	N
74710	26	10.69	10.69		000	N
74710	TC	23.89	23.89		000	N
74740		41.41	41.41		000	N
74740	26	11.83	11.83		000	N
74740	TC	29.57	29.57		000	N
74742		90.77	90.77		000	N
74742	26	19.57	19.57		000	N
74742	TC	71.21	71.21		000	N
74775		53.01	53.01		000	N
74775	26	19.79	19.79		000	N
74775	TC	33.21	33.21		000	N
75552		303.71	303.71		000	N
75552	26	50.05	50.05		000	N
75552	TC	253.44	253.44		000	N

- Not Covered
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75553		316.45	316.45		000	N
75553	26	63.02	63.02		000	N
75553	TC	253.44	253.44		000	N
75554		311.90	311.90		000	N
75554	26	58.24	58.24		000	N
75554	TC	253.44	253.44		000	N
75555		309.63	309.63		000	N
75555	26	55.96	55.96		000	N
75555	TC	253.44	253.44		000	N
75556		B.R.	B.R.		000	N
75600		300.76	300.76		000	N
75600	26	15.92	15.92		000	N
75600	TC	284.83	284.83		000	N
75605		321.23	321.23		000	N
75605	26	36.40	36.40		000	N
75605	TC	284.83	284.83		000	N
75625		320.77	320.77		000	N
75625	26	35.95	35.95		000	N
75625	TC	284.83	284.83		000	N
75630		354.22	354.22		000	N
75630	26	57.10	57.10		000	N
75630	TC	297.12	297.12		000	N
75635		268.91	268.91		000	N
75635	26	77.80	77.80		000	N
75635	TC	191.10	191.10		000	N
75650		331.69	331.69		000	N
75650	26	46.87	46.87		000	N
75650	TC	284.83	284.83		000	N
75658		326.46	326.46		000	N
75658	26	41.63	41.63		000	N
75658	TC	284.83	284.83		000	N
75660		326.46	326.46		000	N
75660	26	41.63	41.63		000	N
75660	TC	284.83	284.83		000	N
75662		338.29	338.29		000	N
75662	26	53.46	53.46		000	N
75662	TC	284.83	284.83		000	N
75665		326.24	326.24		000	N
75665	26	41.63	41.63		000	N
75665	TC	284.83	284.83		000	N
75671		337.16	337.16		000	N
75671	26	52.32	52.32		000	N
75671	TC	284.83	284.83		000	N
75676		326.24	326.24		000	N
75676	26	41.63	41.63		000	N
75676	TC	284.83	284.83		000	N
75680		337.16	337.16		000	N
75680	26	52.32	52.32		000	N
75680	TC	284.83	284.83		000	N
75685		326.24	326.24		000	N
75685	26	41.41	41.41		000	N
75685	TC	284.83	284.83		000	N
75705		353.99	353.99		000	N
75705	26	69.16	69.16		000	N
75705	TC	284.83	284.83		000	N
75710		321.23	321.23		000	N
75710	26	36.40	36.40		000	N
75710	TC	284.83	284.83		000	N
75716		326.24	326.24		000	N
75716	26	41.41	41.41		000	N
75716	TC	284.83	284.83		000	N
75722		321.23	321.23		000	N
75722	26	36.40	36.40		000	N
75722	TC	284.83	284.83		000	N
75724		333.06	333.06		000	N
75724	26	48.23	48.23		000	N
75724	TC	284.83	284.83		000	N
75726		320.55	320.55		000	N
75726	26	35.72	35.72		000	N
75726	TC	284.83	284.83		000	N
75731		320.55	320.55		000	N
75731	26	35.72	35.72		000	N
75731	TC	284.83	284.83		000	N
75733		326.24	326.24		000	N
75733	26	41.41	41.41		000	N
75733	TC	284.83	284.83		000	N
75736		320.77	320.77		000	N
75736	26	35.95	35.95		000	N
75736	TC	284.83	284.83		000	N
75741		326.01	326.01		000	N
75741	26	41.18	41.18		000	N
75741	TC	284.83	284.83		000	N
75743		336.70	336.70		000	N
75743	26	51.87	51.87		000	N
75743	TC	284.83	284.83		000	N
75746		320.55	320.55		000	N
75746	26	35.72	35.72		000	N
75746	TC	284.83	284.83		000	N
75756		322.14	322.14		000	N
75756	26	37.31	37.31		000	N
75756	TC	284.83	284.83		000	N
75774		296.20	296.20		000	N

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75774	26	11.38	11.38		000	N
75774	TC	284.83	284.83		000	N
75790		88.72	88.72		000	N
75790	26	57.79	57.79		000	N
75790	TC	30.94	30.94		000	N
75801		148.10	148.10		000	N
75801	26	25.48	25.48		000	N
75801	TC	122.62	122.62		000	N
75803		159.25	159.25		000	N
75803	26	36.63	36.63		000	N
75803	TC	122.62	122.62		000	N
75805		163.57	163.57		000	N
75805	26	25.71	25.71		000	N
75805	TC	138.09	138.09		000	N
75807		174.72	174.72		000	N
75807	26	36.63	36.63		000	N
75807	TC	138.09	138.09		000	N
75809		32.53	32.53		000	N
75809	26	14.79	14.79		000	N
75809	TC	17.75	17.75		000	N
75810		320.77	320.77		000	N
75810	26	35.95	35.95		000	N
75810	TC	284.83	284.83		000	N
75820		43.68	43.68		000	N
75820	26	22.07	22.07		000	N
75820	TC	21.61	21.61		000	N
75822		66.66	66.66		000	N
75822	26	33.21	33.21		000	N
75822	TC	33.44	33.44		000	N
75825		320.77	320.77		000	N
75825	26	35.95	35.95		000	N
75825	TC	284.83	284.83		000	N
75827		320.55	320.55		000	N
75827	26	35.72	35.72		000	N
75827	TC	284.83	284.83		000	N
75831		320.55	320.55		000	N
75831	26	35.72	35.72		000	N
75831	TC	284.83	284.83		000	N
75833		331.69	331.69		000	N
75833	26	46.87	46.87		000	N
75833	TC	284.83	284.83		000	N
75840		321.23	321.23		000	N
75840	26	36.63	36.63		000	N
75840	TC	284.83	284.83		000	N
75842		331.47	331.47		000	N
75842	26	46.64	46.64		000	N
75842	TC	284.83	284.83		000	N
75860		321.46	321.46		000	N
75860	26	36.63	36.63		000	N
75860	TC	284.83	284.83		000	N
75870		321.23	321.23		000	N
75870	26	36.40	36.40		000	N
75870	TC	284.83	284.83		000	N
75872		320.55	320.55		000	N
75872	26	35.72	35.72		000	N
75872	TC	284.83	284.83		000	N
75880		44.13	44.13		000	N
75880	26	22.52	22.52		000	N
75880	TC	21.61	21.61		000	N
75885		329.65	329.65		000	N
75885	26	45.05	45.05		000	N
75885	TC	284.83	284.83		000	N
75887		329.65	329.65		000	N
75887	26	45.05	45.05		000	N
75887	TC	284.83	284.83		000	N
75889		320.55	320.55		000	N
75889	26	35.72	35.72		000	N
75889	TC	284.83	284.83		000	N
75891		320.55	320.55		000	N
75891	26	35.72	35.72		000	N
75891	TC	284.83	284.83		000	N
75893		301.67	301.67		000	N
75893	26	16.84	16.84		000	N
75893	TC	284.83	284.83		000	N
75894		587.40	587.40		000	N
75894	26	41.41	41.41		000	N
75894	TC	546.00	546.00		000	N
75896		516.42	516.42		000	N
75896	26	41.63	41.63		000	N
75896	TC	475.02	475.02		000	N
75898		75.98	75.98		000	N
75898	26	52.10	52.10		000	N
75898	TC	23.89	23.89		000	N
75900		490.03	490.03		000	N
75900	26	15.24	15.24		000	N
75900	TC	474.57	474.57		000	N
75940		301.89	301.89		000	N
75940	26	17.06	17.06		000	N
75940	TC	284.83	284.83		000	N
75945		116.25	116.25		000	N
75945	26	12.97	12.97		000	N
75945	TC	103.29	103.29		000	N

- Not Covered
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75946		64.84	64.84		000	N
75946	26	12.74	12.74		000	N
75946	TC	52.10	52.10		000	N
75952		B.R.	B.R.		000	N
75952	26	154.93	154.93		000	N
75952	TC	B.R.	B.R.		000	N
75953		B.R.	B.R.		000	N
75953	26	55.28	55.28		000	N
75953	TC	B.R.	B.R.		000	N
75960		363.09	363.09		000	N
75960	26	26.16	26.16		000	N
75960	TC	336.93	336.93		000	N
75961		370.60	370.60		000	N
75961	26	133.09	133.09		000	N
75961	TC	237.51	237.51		000	N
75962		373.56	373.56		000	N
75962	26	17.29	17.29		000	N
75962	TC	356.26	356.26		000	N
75964		201.11	201.11		000	N
75964	26	11.38	11.38		000	N
75964	TC	189.73	189.73		000	N
75966		398.35	398.35		000	N
75966	26	42.09	42.09		000	N
75966	TC	356.26	356.26		000	N
75968		201.34	201.34		000	N
75968	26	11.60	11.60		000	N
75968	TC	189.73	189.73		000	N
75970		287.33	287.33		000	N
75970	26	26.39	26.39		000	N
75970	TC	260.94	260.94		000	N
75978		373.10	373.10		000	N
75978	26	16.84	16.84		000	N
75978	TC	356.26	356.26		000	N
75980		167.44	167.44		000	N
75980	26	45.05	45.05		000	N
75980	TC	122.62	122.62		000	N
75982		182.91	182.91		000	N
75982	26	45.05	45.05		000	N
75982	TC	138.09	138.09		000	N
75984		66.66	66.66		000	N
75984	26	22.52	22.52		000	N
75984	TC	44.13	44.13		000	N
75989		108.52	108.52		000	N
75989	26	37.31	37.31		000	N
75989	TC	71.21	71.21		000	N
75992		373.33	373.33		000	N
75992	26	17.06	17.06		000	N
75992	TC	356.26	356.26		000	N
75993		201.34	201.34		000	N
75993	26	11.60	11.60		000	N
75993	TC	189.73	189.73		000	N
75994		398.35	398.35		000	N
75994	26	42.09	42.09		000	N
75994	TC	356.26	356.26		000	N
75995		397.67	397.67		000	N
75995	26	41.41	41.41		000	N
75995	TC	356.26	356.26		000	N
75996		200.88	200.88		000	N
75996	26	11.15	11.15		000	N
75996	TC	189.73	189.73		000	N
76000		35.26	35.26		000	N
76000	26	5.69	5.69		000	N
76000	TC	29.57	29.57		000	N
76001		80.53	80.53		000	N
76001	26	21.16	21.16		000	N
76001	TC	59.38	59.38		000	N
76003		46.64	46.64		000	N
76003	26	17.06	17.06		000	N
76003	TC	29.57	29.57		000	N
76005		47.55	47.55		000	N
76005	26	17.97	17.97		000	N
76005	TC	29.57	29.57		000	N
76006		14.56	14.56		000	N
76010		17.52	17.52		000	N
76010	26	5.69	5.69		000	N
76010	TC	11.83	11.83		000	N
76012		#	#		000	N
76012	26	45.50	45.50		000	N
76012	TC	B.R.	B.R.		000	N
76013		#	#		000	N
76013	26	52.32	52.32		000	N
76013	TC	B.R.	B.R.		000	N
76020		17.97	17.97		000	N
76020	26	6.14	6.14		000	N
76020	TC	11.83	11.83		000	N
76040		26.62	26.62		000	N
76040	26	8.87	8.87		000	N
76040	TC	17.75	17.75		000	N
76061		36.86	36.86		000	N
76061	26	14.11	14.11		000	N
76061	TC	22.75	22.75		000	N
76062		49.60	49.60		000	N

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76062	26	16.84	16.84		000	N
76062	TC	32.76	32.76		000	N
76065		38.45	38.45		000	N
76065	26	21.61	21.61		000	N
76065	TC	16.84	16.84		000	N
76066		35.04	35.04		000	N
76066	26	9.78	9.78		000	N
76066	TC	25.25	25.25		000	N
76070		#	#		000	N
76070	26	#	#		000	N
76070	TC	#	#		000	N
76075		79.63	79.63		000	N
76075	26	9.55	9.55		000	N
76075	TC	70.07	70.07		000	N
76076		24.34	24.34		000	N
76076	26	7.05	7.05		000	N
76076	TC	17.29	17.29		000	N
76078		23.89	23.89		000	N
76078	26	6.60	6.60		000	N
76078	TC	17.29	17.29		000	N
76080		40.72	40.72		000	N
76080	26	16.84	16.84		000	N
76080	TC	23.89	23.89		000	N
76085		11.15	11.15		000	N
76085	26	2.05	2.05		000	N
76085	TC	9.10	9.10		000	N
76086		70.98	70.98		000	N
76086	26	11.38	11.38		000	N
76086	TC	59.38	59.38		000	N
76088		97.14	97.14		000	N
76088	26	14.11	14.11		000	N
76088	TC	82.81	82.81		000	N
76090		45.95	45.95		000	N
76090	26	22.07	22.07		000	N
76090	TC	23.89	23.89		000	N
76091		56.65	56.65		000	N
76091	26	27.07	27.07		000	N
76091	TC	29.57	29.57		000	N
76092		51.19	51.19		000	N
76092	26	22.07	22.07		000	N
76092	TC	29.12	29.12		000	N
76093		449.77	449.77		000	N
76093	26	50.96	50.96		000	N
76093	TC	398.58	398.58		000	N
76094		591.73	591.73		000	N
76094	26	50.96	50.96		000	N
76094	TC	540.77	540.77		000	N
76095		212.26	212.26		000	N
76095	26	50.28	50.28		000	N
76095	TC	161.98	161.98		000	N
76096		47.32	47.32		000	N
76096	26	17.75	17.75		000	N
76096	TC	29.57	29.57		000	N
76098		14.56	14.56		000	N
76098	26	5.23	5.23		000	N
76098	TC	9.33	9.33		000	N
76100		46.41	46.41		000	N
76100	26	18.20	18.20		000	N
76100	TC	28.21	28.21		000	N
76101		50.51	50.51		000	N
76101	26	18.20	18.20		000	N
76101	TC	32.31	32.31		000	N
76102		57.56	57.56		000	N
76102	26	18.20	18.20		000	N
76102	TC	39.36	39.36		000	N
76120		35.95	35.95		000	N
76120	26	12.06	12.06		000	N
76120	TC	23.89	23.89		000	N
76125		26.39	26.39		000	N
76125	26	8.64	8.64		000	N
76125	TC	17.75	17.75		000	N
76140		#	#		000	N
76150		9.33	9.33		000	N
76350		B.R.	B.R.		000	N
76355		225.00	225.00		000	N
76355	26	38.45	38.45		000	N
76355	TC	186.55	186.55		000	N
76360		222.72	222.72		000	N
76360	26	36.17	36.17		000	N
76360	TC	186.55	186.55		000	N
76362		327.37	327.37		000	N
76362	26	125.35	125.35		000	N
76362	TC	202.02	202.02		000	N
76370		93.50	93.50		000	N
76370	26	26.84	26.84		000	N
76370	TC	66.66	66.66		000	N
76375		85.09	85.09		000	N
76375	26	5.23	5.23		000	N
76375	TC	80.08	80.08		000	N
76380		109.66	109.66		000	N
76380	26	30.49	30.49		000	N
76380	TC	78.94	78.94		000	N

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76390		297.57	297.57		000	N
76390	26	44.13	44.13		000	N
76390	TC	253.44	253.44		000	N
76393		299.84	299.84		000	N
76393	26	46.87	46.87		000	N
76393	TC	252.98	252.98		000	N
76394		400.17	400.17	EX	000	N
76394	26	132.41	132.41	EX	000	N
76394	TC	267.77	267.77	EX	000	N
76400		303.71	303.71		000	N
76400	26	50.05	50.05		000	N
76400	TC	253.44	253.44		000	N
76490		100.55	100.55		000	N
76490	26	63.02	63.02		000	N
76490	TC	37.31	37.31		000	N
76499		B.R.	B.R.		000	N
76499	26	B.R.	B.R.		000	N
76499	TC	B.R.	B.R.		000	N
76506		53.01	53.01		000	N
76506	26	20.70	20.70		000	N
76506	TC	32.31	32.31		000	N
76511		77.12	77.12		000	N
76511	26	31.85	31.85		000	N
76511	TC	45.27	45.27		000	N
76512		73.71	73.71		000	N
76512	26	22.07	22.07		000	N
76512	TC	51.64	51.64		000	N
76513		83.27	83.27		000	N
76513	26	22.29	22.29		000	N
76513	TC	60.74	60.74		000	N
76516		60.29	60.29		000	N
76516	26	18.20	18.20		000	N
76516	TC	42.09	42.09		000	N
76519		57.33	57.33		000	N
76519	26	18.20	18.20		000	N
76519	TC	39.13	39.13		000	N
76529		76.44	76.44		000	N
76529	26	19.11	19.11		000	N
76529	TC	57.10	57.10		000	N
76536		49.82	49.82		000	N
76536	26	17.52	17.52		000	N
76536	TC	32.31	32.31		000	N
76604		46.64	46.64		000	N
76604	26	17.06	17.06		000	N
76604	TC	29.57	29.57		000	N
76645		40.95	40.95		000	N
76645	26	17.06	17.06		000	N
76645	TC	23.89	23.89		000	N
76700		70.07	70.07		000	N
76700	26	25.48	25.48		000	N
76700	TC	44.59	44.59		000	N
76705		50.96	50.96		000	N
76705	26	18.65	18.65		000	N
76705	TC	32.31	32.31		000	N
76770		67.80	67.80		000	N
76770	26	23.21	23.21		000	N
76770	TC	44.59	44.59		000	N
76775		50.51	50.51		000	N
76775	26	18.20	18.20		000	N
76775	TC	32.31	32.31		000	N
76778		67.80	67.80		000	N
76778	26	23.21	23.21		000	N
76778	TC	44.59	44.59		000	N
76800		67.11	67.11		000	N
76800	26	34.81	34.81		000	N
76800	TC	32.31	32.31		000	N
76805		78.94	78.94		000	N
76805	26	31.17	31.17		000	N
76805	TC	47.55	47.55		000	N
76810		157.89	157.89		000	N
76810	26	62.79	62.79		000	N
76810	TC	95.09	95.09		000	N
76815		53.01	53.01		000	N
76815	26	20.70	20.70		000	N
76815	TC	32.31	32.31		000	N
76816		43.45	43.45		000	N
76816	26	18.20	18.20		000	N
76816	TC	25.25	25.25		000	N
76818		70.30	70.30		000	N
76818	26	33.67	33.67		000	N
76818	TC	36.63	36.63		000	N
76819		61.20	61.20		000	N
76819	26	24.57	24.57		000	N
76819	TC	36.63	36.63		000	N
76825		97.83	97.83		000	N
76825	26	53.23	53.23		000	N
76825	TC	44.59	44.59		000	N
76826		42.32	42.32		000	N
76826	26	26.16	26.16		000	N
76826	TC	16.15	16.15		000	N
76827		57.79	57.79		000	N
76827	26	18.43	18.43		000	N

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76827	TC	39.36	39.36		000	N
76828		43.91	43.91		000	N
76828	26	18.20	18.20		000	N
76828	TC	25.71	25.71		000	N
76830		56.19	56.19		000	N
76830	26	21.61	21.61		000	N
76830	TC	34.58	34.58		000	N
76831		57.33	57.33		000	N
76831	26	22.75	22.75		000	N
76831	TC	34.58	34.58		000	N
76856		56.19	56.19		000	N
76856	26	21.61	21.61		000	N
76856	TC	34.58	34.58		000	N
76857		35.72	35.72		000	N
76857	26	11.83	11.83		000	N
76857	TC	23.89	23.89		000	N
76870		54.60	54.60		000	N
76870	26	20.02	20.02		000	N
76870	TC	34.58	34.58		000	N
76872		56.42	56.42		000	N
76872	26	21.84	21.84		000	N
76872	TC	34.58	34.58		000	N
76873		96.91	96.91		000	N
76873	26	48.69	48.69		000	N
76873	TC	48.00	48.00		000	N
76880		50.96	50.96		000	N
76880	26	18.65	18.65		000	N
76880	TC	32.31	32.31		000	N
76885		57.79	57.79		000	N
76885	26	23.21	23.21		000	N
76885	TC	34.58	34.58		000	N
76886		51.87	51.87		000	N
76886	26	19.57	19.57		000	N
76886	TC	32.31	32.31		000	N
76930		56.19	56.19		000	N
76930	26	21.61	21.61		000	N
76930	TC	34.58	34.58		000	N
76932		56.19	56.19		000	N
76932	26	21.61	21.61		000	N
76932	TC	34.58	34.58		000	N
76936		205.43	205.43		000	N
76936	26	62.79	62.79		000	N
76936	TC	142.64	142.64		000	N
76941		78.03	78.03		000	N
76941	26	43.45	43.45		000	N
76941	TC	34.58	34.58		000	N
76942		55.74	55.74		000	N
76942	26	21.16	21.16		000	N
76942	TC	34.58	34.58		000	N
76945		55.74	55.74		000	N
76945	26	21.16	21.16		000	N
76945	TC	34.58	34.58		000	N
76946		46.64	46.64		000	N
76946	26	12.29	12.29		000	N
76946	TC	34.58	34.58		000	N
76948		46.41	46.41		000	N
76948	26	11.83	11.83		000	N
76948	TC	34.58	34.58		000	N
76950		48.00	48.00		000	N
76950	26	18.43	18.43		000	N
76950	TC	29.57	29.57		000	N
76965		167.90	167.90		000	N
76965	26	42.09	42.09		000	N
76965	TC	126.04	126.04		000	N
76970		36.40	36.40		000	N
76970	26	12.51	12.51		000	N
76970	TC	23.89	23.89		000	N
76975		60.06	60.06		000	N
76975	26	25.48	25.48		000	N
76975	TC	34.58	34.58		000	N
76977		20.48	20.48		000	N
76977	26	1.82	1.82		000	N
76977	TC	18.65	18.65		000	N
76986		97.37	97.37		000	N
76986	26	37.99	37.99		000	N
76986	TC	59.38	59.38		000	N
76999		B.R.	B.R.		000	N
76999	26	B.R.	B.R.		000	N
76999	TC	B.R.	B.R.		000	N
77261		45.27	45.27		000	N
77262		68.02	68.02		000	N
77263		101.24	101.24		000	N
77280		100.55	100.55		000	N
77280	26	22.07	22.07		000	N
77280	TC	78.49	78.49		000	N
77285		159.25	159.25		000	N
77285	26	32.99	32.99		000	N
77285	TC	126.26	126.26		000	N
77290		196.33	196.33		000	N
77290	26	49.14	49.14		000	N
77290	TC	147.42	147.42		000	N
77295		776.23	776.23		000	N

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77295	26	144.01	144.01		000	N
77295	TC	632.22	632.22		000	N
77299		B.R.	B.R.		000	N
77299	26	B.R.	B.R.		000	N
77299	TC	B.R.	B.R.		000	N
77300		50.05	50.05		000	N
77300	26	19.57	19.57		000	N
77300	TC	30.49	30.49		000	N
77301		#	#		000	N
77301	26	#	#		000	N
77301	TC	#	#		000	N
77305		64.16	64.16		000	N
77305	26	22.07	22.07		000	N
77305	TC	42.09	42.09		000	N
77310		85.99	85.99		000	N
77310	26	32.99	32.99		000	N
77310	TC	52.78	52.78		000	N
77315		109.43	109.43		000	N
77315	26	49.14	49.14		000	N
77315	TC	60.29	60.29		000	N
77321		121.26	121.26		000	N
77321	26	29.80	29.80		000	N
77321	TC	91.45	91.45		000	N
77326		83.04	83.04		000	N
77326	26	29.57	29.57		000	N
77326	TC	53.46	53.46		000	N
77327		122.40	122.40		000	N
77327	26	43.91	43.91		000	N
77327	TC	78.49	78.49		000	N
77328		177.91	177.91		000	N
77328	26	65.97	65.97		000	N
77328	TC	112.16	112.16		000	N
77331		38.90	38.90		000	N
77331	26	27.53	27.53		000	N
77331	TC	11.38	11.38		000	N
77332		47.32	47.32		000	N
77332	26	16.84	16.84		000	N
77332	TC	30.49	30.49		000	N
77333		69.61	69.61		000	N
77333	26	26.62	26.62		000	N
77333	TC	43.00	43.00		000	N
77334		112.84	112.84		000	N
77334	26	39.13	39.13		000	N
77334	TC	73.48	73.48		000	N
77336		67.34	67.34		000	N
77370		78.72	78.72		000	N
77399		B.R.	B.R.		000	N
77399	26	B.R.	B.R.		000	N
77399	TC	B.R.	B.R.		000	N
77401		40.27	40.27		000	N
77402		40.27	40.27		000	N
77403		40.27	40.27		000	N
77404		40.27	40.27		000	N
77406		40.27	40.27		000	N
77407		47.32	47.32		000	N
77408		47.32	47.32		000	N
77409		47.32	47.32		000	N
77411		47.32	47.32		000	N
77412		52.78	52.78		000	N
77413		52.78	52.78		000	N
77414		52.78	52.78		000	N
77416		52.78	52.78		000	N
77417		13.42	13.42		000	N
77418		371.51	371.51		000	N
77427		104.42	104.42		000	N
77431		58.70	58.70		000	N
77432		259.12	259.12		000	N
77470		318.27	318.27		000	N
77470	26	65.97	65.97		000	N
77470	TC	252.30	252.30		000	N
77499		B.R.	B.R.		000	N
77499	26	B.R.	B.R.		000	N
77499	TC	B.R.	B.R.		000	N
77520		B.R.	B.R.		000	N
77522		B.R.	B.R.		000	N
77523		B.R.	B.R.		000	N
77525		B.R.	B.R.		000	N
77600		118.07	118.07		000	N
77600	26	49.14	49.14		000	N
77600	TC	68.70	68.70		000	N
77605		158.80	158.80		000	N
77605	26	66.89	66.89		000	N
77605	TC	91.91	91.91		000	N
77610		117.85	117.85		000	N
77610	26	48.91	48.91		000	N
77610	TC	68.70	68.70		000	N
77615		157.66	157.66		000	N
77615	26	65.75	65.75		000	N
77615	TC	91.91	91.91		000	N
77620		118.30	118.30		000	N
77620	26	49.60	49.60		000	N
77620	TC	68.70	68.70		000	N

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77750		184.50	184.50		090	N
77750	26	154.25	154.25		090	N
77750	TC	30.26	30.26		090	N
77761		171.54	171.54		090	N
77761	26	114.66	114.66		090	N
77761	TC	56.88	56.88		090	N
77762		260.26	260.26		090	N
77762	26	178.36	178.36		090	N
77762	TC	81.67	81.67		090	N
77763		371.96	371.96		090	N
77763	26	270.73	270.73		090	N
77763	TC	101.47	101.47		090	N
77776		196.79	196.79		090	N
77776	26	147.19	147.19		090	N
77776	TC	49.60	49.60		090	N
77777		323.73	323.73		090	N
77777	26	228.18	228.18		090	N
77777	TC	95.78	95.78		090	N
77778		468.88	468.88		090	N
77778	26	352.63	352.63		090	N
77778	TC	116.25	116.25		090	N
77781		511.65	511.65		090	N
77781	26	52.32	52.32		090	N
77781	TC	459.32	459.32		090	N
77782		537.81	537.81		090	N
77782	26	78.49	78.49		090	N
77782	TC	459.32	459.32		090	N
77783		576.71	576.71		090	N
77783	26	117.39	117.39		090	N
77783	TC	459.32	459.32		090	N
77784		635.86	635.86		090	N
77784	26	176.54	176.54		090	N
77784	TC	459.32	459.32		090	N
77789		45.50	45.50		090	N
77789	26	35.26	35.26		090	N
77789	TC	10.24	10.24		090	N
77790		44.59	44.59		000	N
77790	26	32.99	32.99		000	N
77790	TC	11.38	11.38		000	N
77799		B.R.	B.R.		000	N
77799	26	B.R.	B.R.		000	N
77799	TC	B.R.	B.R.		000	N
78000		28.21	28.21		000	N
78000	26	6.14	6.14		000	N
78000	TC	22.07	22.07		000	N
78001		37.77	37.77		000	N
78001	26	8.19	8.19		000	N
78001	TC	29.57	29.57		000	N
78003		32.53	32.53		000	N
78003	26	10.47	10.47		000	N
78003	TC	22.07	22.07		000	N
78006		69.39	69.39		000	N
78006	26	15.47	15.47		000	N
78006	TC	53.92	53.92		000	N
78007		73.94	73.94		000	N
78007	26	15.70	15.70		000	N
78007	TC	58.24	58.24		000	N
78010		53.69	53.69		000	N
78010	26	12.29	12.29		000	N
78010	TC	41.41	41.41		000	N
78011		68.70	68.70		000	N
78011	26	14.11	14.11		000	N
78011	TC	54.60	54.60		000	N
78015		79.40	79.40		000	N
78015	26	21.16	21.16		000	N
78015	TC	58.24	58.24		000	N
78016		104.88	104.88		000	N
78016	26	26.16	26.16		000	N
78016	TC	78.72	78.72		000	N
78018		149.92	149.92		000	N
78018	26	27.30	27.30		000	N
78018	TC	122.85	122.85		000	N
78020		49.82	49.82		000	N
78020	26	19.11	19.11		000	N
78020	TC	30.71	30.71		000	N
78070		67.34	67.34		000	N
78070	26	25.93	25.93		000	N
78070	TC	41.41	41.41		000	N
78075		146.51	146.51		000	N
78075	26	23.89	23.89		000	N
78075	TC	122.85	122.85		000	N
78099		B.R.	B.R.		000	N
78099	26	B.R.	B.R.		000	N
78099	TC	B.R.	B.R.		000	N
78102		63.93	63.93		000	N
78102	26	17.52	17.52		000	N
78102	TC	46.41	46.41		000	N
78103		95.32	95.32		000	N
78103	26	23.66	23.66		000	N
78103	TC	71.66	71.66		000	N
78104		117.39	117.39		000	N
78104	26	25.25	25.25		000	N

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78104	TC	92.14	92.14		000	N
78110		27.75	27.75		000	N
78110	26	6.14	6.14		000	N
78110	TC	21.61	21.61		000	N
78111		65.29	65.29		000	N
78111	26	7.05	7.05		000	N
78111	TC	58.24	58.24		000	N
78120		46.87	46.87		000	N
78120	26	7.51	7.51		000	N
78120	TC	39.36	39.36		000	N
78121		75.76	75.76		000	N
78121	26	10.24	10.24		000	N
78121	TC	65.52	65.52		000	N
78122		118.53	118.53		000	N
78122	26	14.33	14.33		000	N
78122	TC	104.20	104.20		000	N
78130		83.72	83.72		000	N
78130	26	19.34	19.34		000	N
78130	TC	64.38	64.38		000	N
78135		130.59	130.59		000	N
78135	26	20.25	20.25		000	N
78135	TC	110.34	110.34		000	N
78140		108.06	108.06		000	N
78140	26	19.11	19.11		000	N
78140	TC	89.18	89.18		000	N
78160		93.73	93.73		000	N
78160	26	10.69	10.69		000	N
78160	TC	82.81	82.81		000	N
78162		86.91	86.91		000	N
78162	26	14.33	14.33		000	N
78162	TC	72.34	72.34		000	N
78170		133.54	133.54		000	N
78170	26	13.42	13.42		000	N
78170	TC	120.12	120.12		000	N
78172		37.54	37.54		000	N
78172	26	16.84	16.84		000	N
78172	TC	20.70	20.70		000	N
78185		66.20	66.20		000	N
78185	26	12.74	12.74		000	N
78185	TC	53.46	53.46		000	N
78190		164.26	164.26		000	N
78190	26	34.81	34.81		000	N
78190	TC	129.45	129.45		000	N
78191		185.19	185.19		000	N
78191	26	19.34	19.34		000	N
78191	TC	165.85	165.85		000	N
78195		130.36	130.36		000	N
78195	26	37.99	37.99		000	N
78195	TC	92.14	92.14		000	N
78199		B.R.	B.R.		000	N
78199	26	B.R.	B.R.		000	N
78199	TC	B.R.	B.R.		000	N
78201		67.34	67.34		000	N
78201	26	13.88	13.88		000	N
78201	TC	53.46	53.46		000	N
78202		81.45	81.45		000	N
78202	26	16.15	16.15		000	N
78202	TC	65.06	65.06		000	N
78205		156.29	156.29		000	N
78205	26	22.52	22.52		000	N
78205	TC	133.77	133.77		000	N
78206		161.07	161.07		000	N
78206	26	30.26	30.26		000	N
78206	TC	130.59	130.59		000	N
78215		81.90	81.90		000	N
78215	26	15.47	15.47		000	N
78215	TC	66.43	66.43		000	N
78216		96.91	96.91		000	N
78216	26	17.97	17.97		000	N
78216	TC	78.72	78.72		000	N
78220		99.87	99.87		000	N
78220	26	15.47	15.47		000	N
78220	TC	84.40	84.40		000	N
78223		109.43	109.43		000	N
78223	26	26.62	26.62		000	N
78223	TC	82.81	82.81		000	N
78230		63.70	63.70		000	N
78230	26	14.11	14.11		000	N
78230	TC	49.60	49.60		000	N
78231		88.50	88.50		000	N
78231	26	16.61	16.61		000	N
78231	TC	71.66	71.66		000	N
78232		94.87	94.87		000	N
78232	26	14.79	14.79		000	N
78232	TC	80.08	80.08		000	N
78258		88.50	88.50		000	N
78258	26	23.43	23.43		000	N
78258	TC	65.06	65.06		000	N
78261		114.66	114.66		000	N
78261	26	22.07	22.07		000	N
78261	TC	92.59	92.59		000	N
78262		117.85	117.85		000	N

- Not Covered
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78262	26	21.61	21.61		000	N
78262	TC	96.23	96.23		000	N
78264		117.85	117.85		000	N
78264	26	24.57	24.57		000	N
78264	TC	93.27	93.27		000	N
78267		7.81	7.81		000	N
78268		66.93	66.93		000	N
78270		41.63	41.63		000	N
78270	26	6.37	6.37		000	N
78270	TC	35.26	35.26		000	N
78271		43.68	43.68		000	N
78271	26	6.37	6.37		000	N
78271	TC	37.31	37.31		000	N
78272		61.20	61.20		000	N
78272	26	8.64	8.64		000	N
78272	TC	52.55	52.55		000	N
78278		141.28	141.28		000	N
78278	26	30.94	30.94		000	N
78278	TC	110.34	110.34		000	N
78282		26.39	26.39		000	N
78282	26	11.83	11.83		000	N
78282	TC	14.56	14.56		000	N
78290		90.09	90.09		000	N
78290	26	21.38	21.38		000	N
78290	TC	68.70	68.70		000	N
78291		97.14	97.14		000	N
78291	26	27.98	27.98		000	N
78291	TC	69.16	69.16		000	N
78299		B.R.	B.R.		000	N
78299	26	B.R.	B.R.		000	N
78299	TC	B.R.	B.R.		000	N
78300		75.98	75.98		000	N
78300	26	19.57	19.57		000	N
78300	TC	56.42	56.42		000	N
78305		108.97	108.97		000	N
78305	26	26.16	26.16		000	N
78305	TC	82.81	82.81		000	N
78306		123.76	123.76		000	N
78306	26	27.30	27.30		000	N
78306	TC	96.69	96.69		000	N
78315		140.37	140.37		000	N
78315	26	32.08	32.08		000	N
78315	TC	108.29	108.29		000	N
78320		166.76	166.76		000	N
78320	26	32.99	32.99		000	N
78320	TC	133.77	133.77		000	N
78350		24.34	24.34		000	N
78350	26	7.05	7.05		000	N
78350	TC	17.29	17.29		000	N
78351		44.59	9.78		000	N
78399		B.R.	B.R.		000	N
78399	26	B.R.	B.R.		000	N
78399	TC	B.R.	B.R.		000	N
78414		31.39	31.39		000	N
78414	26	14.11	14.11		000	N
78414	TC	17.29	17.29		000	N
78428		76.67	76.67		000	N
78428	26	25.48	25.48		000	N
78428	TC	51.19	51.19		000	N
78445		57.56	57.56		000	N
78445	26	15.47	15.47		000	N
78445	TC	42.09	42.09		000	N
78455		112.84	112.84		000	N
78455	26	22.98	22.98		000	N
78455	TC	90.09	90.09		000	N
78456		123.08	123.08		000	N
78456	26	31.62	31.62		000	N
78456	TC	91.23	91.23		000	N
78457		84.63	84.63		000	N
78457	26	24.34	24.34		000	N
78457	TC	60.29	60.29		000	N
78458		119.66	119.66		000	N
78458	26	28.89	28.89		000	N
78458	TC	91.00	91.00		000	N
78459		#	#		000	N
78459	26	#	#		000	N
78459	TC	#	#		000	N
78460		80.53	80.53		000	N
78460	26	27.07	27.07		000	N
78460	TC	53.46	53.46		000	N
78461		146.06	146.06		000	N
78461	26	39.13	39.13		000	N
78461	TC	106.70	106.70		000	N
78464		194.51	194.51		000	N
78464	26	34.58	34.58		000	N
78464	TC	159.93	159.93		000	N
78465		313.27	313.27		000	N
78465	26	46.64	46.64		000	N
78465	TC	266.86	266.86		000	N
78466		81.45	81.45		000	N
78466	26	22.07	22.07		000	N
78466	TC	59.38	59.38		000	N

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78468		108.29	108.29		000	N
78468	26	25.48	25.48		000	N
78468	TC	82.81	82.81		000	N
78469		147.42	147.42		000	N
78469	26	29.35	29.35		000	N
78469	TC	118.30	118.30		000	N
78472		156.07	156.07		000	N
78472	26	31.17	31.17		000	N
78472	TC	124.67	124.67		000	N
78473		233.41	233.41		000	N
78473	26	46.87	46.87		000	N
78473	TC	186.55	186.55		000	N
78478		55.28	55.28		000	N
78478	26	19.79	19.79		000	N
78478	TC	35.49	35.49		000	N
78480		55.28	55.28		000	N
78480	26	19.79	19.79		000	N
78480	TC	35.49	35.49		000	N
78481		149.69	149.69		000	N
78481	26	31.62	31.62		000	N
78481	TC	118.30	118.30		000	N
78483		225.22	225.22		000	N
78483	26	47.32	47.32		000	N
78483	TC	177.91	177.91		000	N
78491		#	#		000	N
78491	26	#	#		000	N
78491	TC	#	#		000	N
78492		#	#		000	N
78492	26	#	#		000	N
78492	TC	#	#		000	N
78494		196.33	196.33		000	N
78494	26	37.54	37.54		000	N
78494	TC	158.80	158.80		000	N
78496		174.95	174.95		000	N
78496	26	16.15	16.15		000	N
78496	TC	158.80	158.80		000	N
78499		B.R.	B.R.		000	N
78499	26	B.R.	B.R.		000	N
78499	TC	B.R.	B.R.		000	N
78580		101.01	101.01		000	N
78580	26	23.43	23.43		000	N
78580	TC	77.58	77.58		000	N
78584		103.51	103.51		000	N
78584	26	30.94	30.94		000	N
78584	TC	72.34	72.34		000	N
78585		161.98	161.98		000	N
78585	26	34.35	34.35		000	N
78585	TC	127.63	127.63		000	N
78586		71.21	71.21		000	N
78586	26	12.51	12.51		000	N
78586	TC	58.70	58.70		000	N
78587		78.94	78.94		000	N
78587	26	15.47	15.47		000	N
78587	TC	63.24	63.24		000	N
78588		106.93	106.93		000	N
78588	26	34.35	34.35		000	N
78588	TC	72.57	72.57		000	N
78591		77.35	77.35		000	N
78591	26	12.74	12.74		000	N
78591	TC	64.38	64.38		000	N
78593		93.73	93.73		000	N
78593	26	15.47	15.47		000	N
78593	TC	78.03	78.03		000	N
78594		129.22	129.22		000	N
78594	26	16.61	16.61		000	N
78594	TC	112.61	112.61		000	N
78596		199.97	199.97		000	N
78596	26	40.04	40.04		000	N
78596	TC	159.93	159.93		000	N
78599		B.R.	B.R.		000	N
78599	26	B.R.	B.R.		000	N
78599	TC	B.R.	B.R.		000	N
78600		79.17	79.17		000	N
78600	26	13.88	13.88		000	N
78600	TC	65.06	65.06		000	N
78601		93.05	93.05		000	N
78601	26	15.92	15.92		000	N
78601	TC	76.89	76.89		000	N
78605		93.73	93.73		000	N
78605	26	16.61	16.61		000	N
78605	TC	76.89	76.89		000	N
78606		107.61	107.61		000	N
78606	26	20.25	20.25		000	N
78606	TC	87.36	87.36		000	N
78607		187.91	187.91		000	N
78607	26	39.36	39.36		000	N
78607	TC	148.56	148.56		000	N
78608		#	#		000	N
78609		#	#		000	N
78610		45.50	45.50		000	N
78610	26	9.55	9.55		000	N
78610	TC	35.95	35.95		000	N

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78615		100.55	100.55		000	N
78615	26	13.42	13.42		000	N
78615	TC	86.91	86.91		000	N
78630		135.14	135.14		000	N
78630	26	21.38	21.38		000	N
78630	TC	113.98	113.98		000	N
78635		77.58	77.58		000	N
78635	26	19.79	19.79		000	N
78635	TC	57.79	57.79		000	N
78645		95.78	95.78		000	N
78645	26	17.97	17.97		000	N
78645	TC	77.58	77.58		000	N
78647		161.98	161.98		000	N
78647	26	28.44	28.44		000	N
78647	TC	133.77	133.77		000	N
78650		124.22	124.22		000	N
78650	26	19.11	19.11		000	N
78650	TC	105.11	105.11		000	N
78660		64.61	64.61		000	N
78660	26	16.61	16.61		000	N
78660	TC	48.00	48.00		000	N
78699		B.R.	B.R.		000	N
78699	26	B.R.	B.R.		000	N
78699	TC	B.R.	B.R.		000	N
78700		83.04	83.04		000	N
78700	26	14.11	14.11		000	N
78700	TC	68.70	68.70		000	N
78701		95.78	95.78		000	N
78701	26	15.24	15.24		000	N
78701	TC	80.53	80.53		000	N
78704		112.84	112.84		000	N
78704	26	23.43	23.43		000	N
78704	TC	89.64	89.64		000	N
78707		131.27	131.27		000	N
78707	26	30.26	30.26		000	N
78707	TC	101.01	101.01		000	N
78708		139.23	139.23		000	N
78708	26	38.22	38.22		000	N
78708	TC	101.01	101.01		000	N
78709		145.37	145.37		000	N
78709	26	44.59	44.59		000	N
78709	TC	101.01	101.01		000	N
78710		154.47	154.47		000	N
78710	26	20.70	20.70		000	N
78710	TC	133.77	133.77		000	N
78715		45.50	45.50		000	N
78715	26	9.55	9.55		000	N
78715	TC	35.95	35.95		000	N
78725		52.32	52.32		000	N
78725	26	12.06	12.06		000	N
78725	TC	40.49	40.49		000	N
78730		44.59	44.59		000	N
78730	26	11.38	11.38		000	N
78730	TC	33.21	33.21		000	N
78740		65.97	65.97		000	N
78740	26	17.97	17.97		000	N
78740	TC	48.00	48.00		000	N
78760		81.22	81.22		000	N
78760	26	20.70	20.70		000	N
78760	TC	60.52	60.52		000	N
78761		94.87	94.87		000	N
78761	26	22.52	22.52		000	N
78761	TC	72.34	72.34		000	N
78799		B.R.	B.R.		000	N
78799	26	B.R.	B.R.		000	N
78799	TC	B.R.	B.R.		000	N
78800		97.60	97.60		000	N
78800	26	20.70	20.70		000	N
78800	TC	76.89	76.89		000	N
78801		120.35	120.35		000	N
78801	26	25.03	25.03		000	N
78801	TC	95.55	95.55		000	N
78802		152.43	152.43		000	N
78802	26	27.30	27.30		000	N
78802	TC	125.13	125.13		000	N
78803		183.14	183.14		000	N
78803	26	34.58	34.58		000	N
78803	TC	148.56	148.56		000	N
78805		100.10	100.10		000	N
78805	26	23.21	23.21		000	N
78805	TC	76.89	76.89		000	N
78806		172.90	172.90		000	N
78806	26	27.30	27.30		000	N
78806	TC	145.83	145.83		000	N
78807		183.59	183.59		000	N
78807	26	35.04	35.04		000	N
78807	TC	148.56	148.56		000	N
78810		B.R.	B.R.	PA	000	N
78810	26	48.25	48.25	PA	000	N
78810	TC	B.R.	B.R.	PA	000	N
78890		Bundled	Bundled		000	N
78890	26	Bundled	Bundled		000	N

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78890	TC	Bundled	Bundled		000	N
78891		Bundled	Bundled		000	N
78891	26	Bundled	Bundled		000	N
78891	TC	Bundled	Bundled		000	N
78990		#	#		000	N
78999		B.R.	B.R.		000	N
78999	26	B.R.	B.R.		000	N
78999	TC	B.R.	B.R.		000	N
79000		116.02	116.02		000	N
79000	26	56.65	56.65		000	N
79000	TC	59.38	59.38		000	N
79001		63.02	63.02		000	N
79001	26	33.21	33.21		000	N
79001	TC	29.57	29.57		000	N
79020		116.02	116.02		000	N
79020	26	56.65	56.65		000	N
79020	TC	59.38	59.38		000	N
79030		125.81	125.81		000	N
79030	26	66.43	66.43		000	N
79030	TC	59.38	59.38		000	N
79035		139.46	139.46		000	N
79035	26	79.85	79.85		000	N
79035	TC	59.38	59.38		000	N
79100		101.69	101.69		000	N
79100	26	42.32	42.32		000	N
79100	TC	59.38	59.38		000	N
79200		122.40	122.40		000	N
79200	26	63.02	63.02		000	N
79200	TC	59.38	59.38		000	N
79300		117.62	117.62		000	N
79300	26	53.01	53.01		000	N
79300	TC	64.61	64.61		000	N
79400		121.71	121.71		000	N
79400	26	62.34	62.34		000	N
79400	TC	59.38	59.38		000	N
79420		105.56	105.56		000	N
79420	26	47.55	47.55		000	N
79420	TC	58.01	58.01		000	N
79440		123.99	123.99		000	N
79440	26	64.61	64.61		000	N
79440	TC	59.38	59.38		000	N
79900		#	#		000	N
79999		B.R.	B.R.		000	N
79999	26	B.R.	B.R.		000	N
79999	TC	B.R.	B.R.		000	N
80048		6.35	6.35		000	N
80050		32.84	32.84		000	N
80051		6.35	6.35		000	N
80053		8.48	8.48		000	N
80055		48.12	48.12		000	N
80061		13.31	13.31		000	N
80069		6.35	6.35		000	N
80074		47.32	47.32		000	N
80076		6.35	6.35		000	N
80090		52.29	52.29		000	N
80100		14.45	14.45		000	N
80101		13.68	13.68		000	N
80102		13.16	13.16		000	N
80103		B.R.	B.R.		000	N
80150		14.98	14.98		000	N
80152		17.79	17.79		000	N
80154		18.38	18.38		000	N
80156		14.47	14.47		000	N
80157		9.88	9.88		000	N
80158		17.94	17.94		000	N
80160		17.11	17.11		000	N
80162		13.19	13.19		000	N
80164		13.46	13.46		000	N
80166		15.40	15.40		000	N
80168		16.24	16.24		000	N
80170		16.29	16.29		000	N
80172		16.19	16.19		000	N
80173		14.47	14.47		000	N
80174		17.11	17.11		000	N
80176		14.60	14.60		000	N
80178		6.56	6.56		000	N
80182		13.46	13.46		000	N
80184		11.38	11.38		000	N
80185		13.17	13.17		000	N
80186		13.68	13.68		000	N
80188		16.49	16.49		000	N
80190		16.64	16.64		000	N
80192		16.64	16.64		000	N
80194		14.50	14.50		000	N
80196		7.05	7.05		000	N
80197		13.64	13.64		000	N
80198		14.06	14.06		000	N
80200		16.01	16.01		000	N
80201		11.85	11.85		000	N
80202		13.46	13.46		000	N
80299		13.60	13.60		000	N
80400		32.40	32.40		000	N

- Not Covered
A.C. – Acquisition Cost
B.R. – By Report
* - PA may be required

Effective 7/01/02
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
80402		86.38	86.38		000	N
80406		77.75	77.75		000	N
80408		124.70	124.70		000	N
80410		79.83	79.83		000	N
80412		315.70	315.70		000	N
80414		51.31	51.31		000	N
80415		55.54	55.54		000	N
80416		131.15	131.15		000	N
80417		43.72	43.72		000	N
80418		556.99	556.99		000	N
80420		71.57	71.57		000	N
80422		45.79	45.79		000	N
80424		34.58	34.58		000	N
80426		137.21	137.21		000	N
80428		65.75	65.75		000	N
80430		77.44	77.44		000	N
80432		134.21	134.21		000	N
80434		100.48	100.48		000	N
80435		101.67	101.67		000	N
80436		72.88	72.88		000	N
80438		49.91	49.91		000	N
80439		66.55	66.55		000	N
80440		57.76	57.76		000	N
80500		13.42	12.51		000	N
80502		45.27	44.82		000	N
81000		3.14	3.14		000	N
81001		3.14	3.14		000	N
81002		2.55	2.55		000	N
81003		2.23	2.23		000	N
81005		2.16	2.16		000	N
81007		2.55	2.55		000	N
81015		3.02	3.02		000	N
81020		3.66	3.66		000	N
81025		3.73	3.73		000	N
81050		2.98	2.98		000	N
81099		B.R.	B.R.		000	N
82000		12.31	12.31		000	N
82003		17.94	17.94		000	N
82009		4.49	4.49		000	N
82010		8.12	8.12		000	N
82013		11.10	11.10		000	N
82016		13.78	13.78		000	N
82017		5.46	5.46		000	N
82024		36.42	36.42		000	N
82030		25.63	25.63		000	N
82040		4.93	4.93		000	N
82042		5.14	5.14		000	N
82043		5.75	5.75		000	N
82044		4.55	4.55		000	N
82055		10.73	10.73		000	N
82075		11.98	11.98		000	N
82085		9.65	9.65		000	N
82088		40.49	40.49		000	N
82101		29.82	29.82		000	N
82103		13.34	13.34		000	N
82104		14.37	14.37		000	N
82105		16.67	16.67		000	N
82106		16.67	16.67		000	N
82108		25.32	25.32		000	N
82120		1.66	1.66		000	N
82127		13.78	13.78		000	N
82128		13.78	13.78		000	N
82131		16.76	16.76		000	N
82135		16.36	16.36		000	N
82136		5.46	5.46		000	N
82139		5.46	5.46		000	N
82140		14.48	14.48		000	N
82143		6.83	6.83		000	N
82145		15.44	15.44		000	N
82150		6.44	6.44		000	N
82154		28.65	28.65		000	N
82157		29.09	29.09		000	N
82160		24.86	24.86		000	N
82163		20.40	20.40		000	N
82164		14.50	14.50		000	N
82172		15.39	15.39		000	N
82175		14.42	14.42		000	N
82180		9.82	9.82		000	N
82190		12.14	12.14		000	N
82205		11.38	11.38		000	N
82232		16.08	16.08		000	N
82239		17.02	17.02		000	N
82240		26.41	26.41		000	N
82247		4.59	4.59		000	N
82248		4.59	4.59		000	N
82252		4.52	4.52		000	N
82261		5.46	5.46		000	N
82270		3.23	3.23		000	N
82273		3.23	3.23		000	N
82274		B.R.	B.R.		000	N
82286		6.84	6.84		000	N
82300		22.99	22.99		000	N

- Not Covered
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82306		29.41	29.41		000	N
82307		32.02	32.02		000	N
82308		26.61	26.61		000	N
82310		5.12	5.12		000	N
82330		13.57	13.57		000	N
82331		5.14	5.14		000	N
82340		6.00	6.00		000	N
82355		11.50	11.50		000	N
82360		12.80	12.80		000	N
82365		12.81	12.81		000	N
82370		12.45	12.45		000	N
82373		17.95	17.95		000	N
82374		4.86	4.86		000	N
82375		12.24	12.24		000	N
82376		5.95	5.95		000	N
82378		18.85	18.85		000	N
82379		5.46	5.46		000	N
82380		9.17	9.17		000	N
82382		17.08	17.08		000	N
82383		24.90	24.90		000	N
82384		17.29	17.29		000	N
82387		3.90	3.90		000	N
82390		10.67	10.67		000	N
82397		13.02	13.02		000	N
82415		12.59	12.59		000	N
82435		4.57	4.57		000	N
82436		5.00	5.00		000	N
82438		3.79	3.79		000	N
82441		5.97	5.97		000	N
82465		4.33	4.33		000	N
82480		7.83	7.83		000	N
82482		7.64	7.64		000	N
82485		20.52	20.52		000	N
82486		17.95	17.95		000	N
82487		15.86	15.86		000	N
82488		21.23	21.23		000	N
82489		18.38	18.38		000	N
82491		17.95	17.95		000	N
82492		17.95	17.95		000	N
82495		20.15	20.15		000	N
82507		27.17	27.17		000	N
82520		15.06	15.06		000	N
82523		#	#		000	N
82525		10.73	10.73		000	N
82528		22.37	22.37		000	N
82530		16.61	16.61		000	N
82533		16.20	16.20		000	N
82540		4.60	4.60		000	N
82541		17.95	17.95		000	N
82542		17.95	17.95		000	N
82543		17.95	17.95		000	N
82544		17.95	17.95		000	N
82550		6.48	6.48		000	N
82552		13.31	13.31		000	N
82553		11.47	11.47		000	N
82554		11.79	11.79		000	N
82565		5.08	5.08		000	N
82570		5.14	5.14		000	N
82575		9.39	9.39		000	N
82585		8.51	8.51		000	N
82595		6.44	6.44		000	N
82600		19.28	19.28		000	N
82607		14.98	14.98		000	N
82608		14.24	14.24		000	N
82615		4.90	4.90		000	N
82626		25.11	25.11		000	N
82627		22.09	22.09		000	N
82633		16.47	16.47		000	N
82634		20.24	20.24		000	N
82638		12.17	12.17		000	N
82646		20.52	20.52		000	N
82649		25.54	25.54		000	N
82651		25.65	25.65		000	N
82652		38.24	38.24		000	N
82654		13.76	13.76		000	N
82657		17.95	17.95		000	N
82658		17.95	17.95		000	N
82664		16.18	16.18		000	N
82666		21.35	21.35		000	N
82668		18.67	18.67		000	N
82670		27.77	27.77		000	N
82671		32.10	32.10		000	N
82672		21.55	21.55		000	N
82677		24.04	24.04		000	N
82679		20.00	20.00		000	N
82690		17.18	17.18		000	N
82693		9.11	9.11		000	N
82696		23.44	23.44		000	N
82705		4.62	4.62		000	N
82710		16.69	16.69		000	N
82715		2.77	2.77		000	N
82725		9.80	9.80		000	N

- Not Covered
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Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
82726		17.95	17.95		000	N
82728		13.54	13.54		000	N
82731		64.00	64.00		000	N
82735		18.43	18.43		000	N
82742		19.67	19.67		000	N
82746		14.61	14.61		000	N
82747		17.21	17.21		000	N
82757		17.23	17.23		000	N
82759		21.35	21.35		000	N
82760		11.12	11.12		000	N
82775		20.93	20.93		000	N
82776		8.33	8.33		000	N
82784		9.24	9.24		000	N
82785		16.36	16.36		000	N
82787		4.18	4.18		000	N
82800		6.48	6.48		000	N
82803		12.11	12.11		000	N
82805		24.19	24.19		000	N
82810		8.67	8.67		000	N
82820		9.94	9.94		000	N
82926		3.87	3.87		000	N
82928		5.49	5.49		000	N
82938		17.59	17.59		000	N
82941		17.53	17.53		000	N
82943		14.20	14.20		000	N
82945		3.90	3.90		000	N
82946		14.98	14.98		000	N
82947		3.90	3.90		000	N
82948		3.14	3.14		000	N
82950		4.72	4.72		000	N
82951		12.80	12.80		000	N
82952		3.90	3.90		000	N
82953		15.05	15.05		000	N
82955		9.63	9.63		000	N
82960		6.03	6.03		000	N
82962		1.80	1.80		000	N
82963		21.35	21.35		000	N
82965		7.68	7.68		000	N
82975		14.60	14.60		000	N
82977		7.15	7.15		000	N
82978		14.16	14.16		000	N
82979		6.84	6.84		000	N
82980		18.21	18.21		000	N
82985		11.65	11.65		000	N
83001		17.01	17.01		000	N
83002		17.29	17.29		000	N
83003		16.44	16.44		000	N
83008		16.68	16.68		000	N
83010		12.50	12.50		000	N
83012		17.08	17.08		000	N
83013		66.93	66.93		000	N
83014		7.81	7.81		000	N
83015		18.72	18.72		000	N
83018		8.31	8.31		000	N
83020		9.99	9.99		000	N
83020	26	12.51	12.51		000	N
83021		17.95	17.95		000	N
83026		2.34	2.34		000	N
83030		8.22	8.22		000	N
83033		5.18	5.18		000	N
83036		9.65	9.65		000	N
83045		4.93	4.93		000	N
83050		7.28	7.28		000	N
83051		7.26	7.26		000	N
83055		4.89	4.89		000	N
83060		8.22	8.22		000	N
83065		6.84	6.84		000	N
83068		8.42	8.42		000	N
83069		3.92	3.92		000	N
83070		4.72	4.72		000	N
83071		6.83	6.83		000	N
83080		5.46	5.46		000	N
83088		29.34	29.34		000	N
83090		16.76	16.76		000	N
83150		6.95	6.95		000	N
83491		17.41	17.41		000	N
83497		12.81	12.81		000	N
83498		26.99	26.99		000	N
83499		25.04	25.04		000	N
83500		18.55	18.55		000	N
83505		24.15	24.15		000	N
83516		11.47	11.47		000	N
83518		8.43	8.43		000	N
83519		12.61	12.61		000	N
83520		12.86	12.86		000	N
83525		11.37	11.37		000	N
83527		12.87	12.87		000	N
83528		15.80	15.80		000	N
83540		6.44	6.44		000	N
83550		8.69	8.69		000	N
83570		8.30	8.30		000	N
83582		13.78	13.78		000	N

- Not Covered
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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
83586		12.72	12.72		000	N
83593		26.14	26.14		000	N
83605		10.61	10.61		000	N
83615		6.00	6.00		000	N
83625		12.72	12.72		000	N
83632		20.08	20.08		000	N
83633		5.47	5.47		000	N
83634		11.45	11.45		000	N
83655		12.02	12.02		000	N
83661		17.29	17.29		000	N
83662		18.79	18.79		000	N
83663		9.40	9.40		000	N
83664		4.70	4.70		000	N
83670		9.10	9.10		000	N
83690		6.84	6.84		000	N
83715		11.19	11.19		000	N
83716		6.38	6.38		000	N
83718		8.13	8.13		000	N
83719		11.56	11.56		000	N
83721		9.48	9.48		000	N
83727		17.08	17.08		000	N
83735		6.66	6.66		000	N
83775		7.33	7.33		000	N
83785		24.43	24.43		000	N
83788		17.95	17.95		000	N
83789		17.95	17.95		000	N
83805		17.51	17.51		000	N
83825		16.16	16.16		000	N
83835		16.83	16.83		000	N
83840		16.22	16.22		000	N
83857		10.67	10.67		000	N
83858		14.73	14.73		000	N
83864		19.78	19.78		000	N
83866		9.79	9.79		000	N
83872		5.82	5.82		000	N
83873		17.10	17.10		000	N
83874		12.83	12.83		000	N
83883		13.51	13.51		000	N
83885		24.35	24.35		000	N
83887		23.53	23.53		000	N
83890		5.54	5.54		000	N
83891		5.54	5.54		000	N
83892		5.54	5.54		000	N
83893		5.54	5.54		000	N
83894		5.54	5.54		000	N
83896		5.54	5.54		000	N
83897		5.54	5.54		000	N
83898		23.17	23.17		000	N
83901		23.17	23.17		000	N
83902		11.88	11.88		000	N
83903		23.17	23.17		000	N
83904		23.17	23.17		000	N
83905		23.17	23.17		000	N
83906		23.17	23.17		000	N
83912		5.54	5.54		000	N
83912	26	12.51	12.51		000	N
83915		11.08	11.08		000	N
83916		13.86	13.86		000	N
83918		22.75	22.75		000	N
83919		16.36	16.36		000	N
83921		16.36	16.36		000	N
83925		19.33	19.33		000	N
83930		6.56	6.56		000	N
83935		6.38	6.38		000	N
83937		29.67	29.67		000	N
83945		12.80	12.80		000	N
83950		64.00	64.00		000	N
83970		41.01	41.01		000	N
83986		2.86	2.86		000	N
83992		14.60	14.60		000	N
84022		12.62	12.62		000	N
84030		5.30	5.30		000	N
84035		2.09	2.09		000	N
84060		6.56	6.56		000	N
84061		7.87	7.87		000	N
84066		9.60	9.60		000	N
84075		5.14	5.14		000	N
84078		7.25	7.25		000	N
84080		14.70	14.70		000	N
84081		16.42	16.42		000	N
84085		6.70	6.70		000	N
84087		10.26	10.26		000	N
84100		4.72	4.72		000	N
84105		5.14	5.14		000	N
84106		4.26	4.26		000	N
84110		8.05	8.05		000	N
84119		8.56	8.56		000	N
84120		14.62	14.62		000	N
84126		14.70	14.70		000	N
84127		11.58	11.58		000	N
84132		4.57	4.57		000	N
84133		4.27	4.27		000	N

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84134		14.50	14.50		000	N
84135		19.01	19.01		000	N
84138		18.81	18.81		000	N
84140		20.55	20.55		000	N
84143		22.68	22.68		000	N
84144		20.43	20.43		000	N
84146		19.25	19.25		000	N
84150		8.69	8.69		000	N
84152		18.28	18.28		000	N
84153		18.28	18.28		000	N
84154		18.28	18.28		000	N
84155		3.64	3.64		000	N
84160		5.14	5.14		000	N
84165		10.67	10.67		000	N
84165	26	12.51	12.51		000	N
84181		16.93	16.93		000	N
84181	26	12.06	12.06		000	N
84182		17.88	17.88		000	N
84182	26	12.06	12.06		000	N
84202		14.26	14.26		000	N
84203		8.55	8.55		000	N
84206		17.70	17.70		000	N
84207		17.19	17.19		000	N
84210		10.79	10.79		000	N
84220		9.38	9.38		000	N
84228		11.56	11.56		000	N
84233		64.00	64.00		000	N
84234		64.45	64.45		000	N
84235		51.99	51.99		000	N
84238		36.33	36.33		000	N
84244		21.86	21.86		000	N
84252		4.62	4.62		000	N
84255		25.37	25.37		000	N
84260		30.78	30.78		000	N
84270		21.59	21.59		000	N
84275		8.05	8.05		000	N
84285		23.40	23.40		000	N
84295		4.78	4.78		000	N
84300		4.83	4.83		000	N
84305		21.12	21.12		000	N
84307		18.17	18.17		000	N
84311		6.95	6.95		000	N
84315		1.66	1.66		000	N
84375		3.80	3.80		000	N
84376		5.47	5.47		000	N
84377		5.47	5.47		000	N
84378		11.45	11.45		000	N
84379		11.45	11.45		000	N
84392		4.72	4.72		000	N
84402		25.30	25.30		000	N
84403		25.65	25.65		000	N
84425		21.10	21.10		000	N
84430		10.55	10.55		000	N
84432		15.96	15.96		000	N
84436		6.83	6.83		000	N
84437		5.18	5.18		000	N
84439		8.69	8.69		000	N
84442		6.95	6.95		000	N
84443		16.64	16.64		000	N
84445		50.53	50.53		000	N
84446		14.09	14.09		000	N
84449		17.88	17.88		000	N
84450		5.13	5.13		000	N
84460		5.26	5.26		000	N
84466		12.69	12.69		000	N
84478		5.72	5.72		000	N
84479		6.44	6.44		000	N
84480		14.09	14.09		000	N
84481		7.21	7.21		000	N
84482		15.66	15.66		000	N
84484		9.78	9.78		000	N
84485		7.46	7.46		000	N
84488		7.25	7.25		000	N
84490		7.56	7.56		000	N
84510		6.00	6.00		000	N
84512		7.65	7.65		000	N
84520		3.92	3.92		000	N
84525		1.66	1.66		000	N
84540		4.62	4.62		000	N
84545		6.19	6.19		000	N
84550		4.49	4.49		000	N
84560		4.72	4.72		000	N
84577		12.40	12.40		000	N
84578		3.22	3.22		000	N
84580		4.08	4.08		000	N
84583		5.00	5.00		000	N
84585		15.40	15.40		000	N
84586		35.11	35.11		000	N
84588		33.73	33.73		000	N
84590		11.52	11.52		000	N
84591		11.52	11.52		000	N
84597		13.62	13.62		000	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
84600		15.97	15.97		000	N
84620		11.77	11.77		000	N
84630		10.51	10.51		000	N
84681		20.67	20.67		000	N
84702		14.96	14.96		000	N
84703		7.46	7.46		000	N
84830		3.73	3.73		000	N
84999		7.17	7.17		000	N
85002		4.47	4.47		000	N
85007		3.42	3.42		000	N
85008		3.42	3.42		000	N
85009		3.70	3.70		000	N
85013		2.35	2.35		000	N
85014		2.35	2.35		000	N
85018		2.35	2.35		000	N
85021		5.55	5.55		000	N
85022		5.46	5.46		000	N
85023		8.42	8.42		000	N
85024		8.41	8.41		000	N
85025		7.72	7.72		000	N
85027		6.44	6.44		000	N
85031		5.88	5.88		000	N
85041		2.99	2.99		000	N
85044		4.27	4.27		000	N
85045		5.54	5.54		000	N
85046		5.55	5.55		000	N
85048		2.53	2.53		000	N
85060		14.79	14.79		000	N
85097		61.88	31.62		000	N
85130		11.82	11.82		000	N
85170		2.86	2.86		000	N
85175		4.52	4.52		000	N
85210		6.10	6.10		000	N
85220		16.18	16.18		000	N
85230		13.86	13.86		000	N
85240		17.80	17.80		000	N
85244		20.29	20.29		000	N
85245		22.81	22.81		000	N
85246		22.81	22.81		000	N
85247		22.81	22.81		000	N
85250		16.18	16.18		000	N
85260		17.80	17.80		000	N
85270		16.18	16.18		000	N
85280		19.23	19.23		000	N
85290		16.18	16.18		000	N
85291		8.83	8.83		000	N
85292		18.82	18.82		000	N
85293		18.82	18.82		000	N
85300		11.78	11.78		000	N
85301		10.75	10.75		000	N
85302		11.94	11.94		000	N
85303		13.74	13.74		000	N
85305		11.52	11.52		000	N
85306		15.23	15.23		000	N
85307		15.23	15.23		000	N
85335		12.80	12.80		000	N
85337		10.36	10.36		000	N
85345		4.27	4.27		000	N
85347		4.23	4.23		000	N
85348		3.70	3.70		000	N
85360		8.35	8.35		000	N
85362		6.84	6.84		000	N
85366		8.56	8.56		000	N
85370		11.29	11.29		000	N
85378		7.09	7.09		000	N
85379		10.11	10.11		000	N
85384		7.99	7.99		000	N
85385		7.99	7.99		000	N
85390		5.13	5.13		000	N
85390	26	11.38	11.38		000	N
85400		8.79	8.79		000	N
85410		7.66	7.66		000	N
85415		11.11	11.11		000	N
85420		6.50	6.50		000	N
85421		10.12	10.12		000	N
85441		4.18	4.18		000	N
85445		6.77	6.77		000	N
85460		2.49	2.49		000	N
85461		6.59	6.59		000	N
85475		8.59	8.59		000	N
85520		13.01	13.01		000	N
85525		11.78	11.78		000	N
85530		14.09	14.09		000	N
85536		6.44	6.44		000	N
85540		8.54	8.54		000	N
85547		8.54	8.54		000	N
85549		17.29	17.29		000	N
85555		5.77	5.77		000	N
85557		13.27	13.27		000	N
85576		21.35	21.35		000	N
85576	26	12.29	12.29		000	N
85585		3.06	3.06		000	N

- Not Covered
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85590		4.27	4.27		000	N
85595		4.44	4.44		000	N
85597		17.86	17.86		000	N
85610		3.90	3.90		000	N
85611		3.92	3.92		000	N
85612		9.51	9.51		000	N
85613		9.51	9.51		000	N
85635		8.69	8.69		000	N
85651		3.53	3.53		000	N
85652		2.68	2.68		000	N
85660		5.49	5.49		000	N
85670		5.74	5.74		000	N
85675		6.81	6.81		000	N
85705		9.38	9.38		000	N
85730		5.77	5.77		000	N
85732		6.44	6.44		000	N
85810		8.16	8.16		000	N
85999		B.R.	B.R.		000	N
86000		6.94	6.94		000	N
86001		5.19	5.19		000	N
86003		5.19	5.19		000	N
86005		4.93	4.93		000	N
86021		14.96	14.96		000	N
86022		14.92	14.92		000	N
86023		12.37	12.37		000	N
86038		12.01	12.01		000	N
86039		11.09	11.09		000	N
86060		7.25	7.25		000	N
86063		4.99	4.99		000	N
86077		32.76	31.62		000	N
86078		33.44	31.62		000	N
86079		33.21	31.85		000	N
86140		5.14	5.14		000	N
86141		12.86	12.86		000	N
86146		25.28	25.28		000	N
86147		25.28	25.28		000	N
86148		15.96	15.96		000	N
86155		3.47	3.47		000	N
86156		6.66	6.66		000	N
86157		8.01	8.01		000	N
86160		11.93	11.93		000	N
86161		11.93	11.93		000	N
86162		20.19	20.19		000	N
86171		5.77	5.77		000	N
86185		8.89	8.89		000	N
86215		13.17	13.17		000	N
86225		13.65	13.65		000	N
86226		10.99	10.99		000	N
86235		17.82	17.82		000	N
86243		11.83	11.83		000	N
86255		11.98	11.98		000	N
86255	26	12.51	12.51		000	N
86256		11.98	11.98		000	N
86256	26	12.51	12.51		000	N
86277		15.64	15.64		000	N
86280		8.13	8.13		000	N
86294		19.49	19.49		000	N
86300		20.68	20.68		000	N
86301		20.68	20.68		000	N
86304		20.68	20.68		000	N
86308		5.14	5.14		000	N
86309		4.90	4.90		000	N
86310		7.33	7.33		000	N
86316		20.68	20.68		000	N
86317		13.51	13.51		000	N
86318		12.86	12.86		000	N
86320		22.27	22.27		000	N
86320	26	12.51	12.51		000	N
86325		22.22	22.22		000	N
86325	26	12.51	12.51		000	N
86327		22.54	22.54		000	N
86327	26	14.33	14.33		000	N
86329		13.95	13.95		000	N
86331		11.91	11.91		000	N
86332		24.22	24.22		000	N
86334		22.20	22.20		000	N
86334	26	12.51	12.51		000	N
86336		B.R.	B.R.		000	N
86337		21.28	21.28		000	N
86340		14.98	14.98		000	N
86341		19.66	19.66		000	N
86343		12.38	12.38		000	N
86344		7.94	7.94		000	N
86353		48.71	48.71		000	N
86359		37.48	37.48		000	N
86360		46.68	46.68		000	N
86361		17.97	17.97		000	N
86376		14.46	14.46		000	N
86378		19.57	19.57		000	N
86382		16.80	16.80		000	N
86384		11.32	11.32		000	N
86403		10.12	10.12		000	N

- Not Covered
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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
86406		10.57	10.57		000	N
86430		5.64	5.64		000	N
86431		5.64	5.64		000	N
86485		B.R.	B.R.		000	N
86490		6.83	6.83		000	N
86510		7.28	7.28		000	N
86580		5.92	5.92		000	N
86585		4.55	4.55		000	N
86586		B.R.	B.R.		000	N
86590		10.96	10.96		000	N
86592		4.24	4.24		000	N
86593		4.38	4.38		000	N
86602		10.11	10.11		000	N
86603		12.79	12.79		000	N
86606		14.96	14.96		000	N
86609		12.81	12.81		000	N
86611		10.11	10.11		000	N
86612		12.82	12.82		000	N
86615		13.11	13.11		000	N
86617		15.39	15.39		000	N
86618		16.93	16.93		000	N
86619		13.29	13.29		000	N
86622		8.88	8.88		000	N
86625		13.04	13.04		000	N
86628		11.94	11.94		000	N
86631		11.76	11.76		000	N
86632		12.62	12.62		000	N
86635		11.40	11.40		000	N
86638		12.04	12.04		000	N
86641		14.32	14.32		000	N
86644		13.07	13.07		000	N
86645		16.74	16.74		000	N
86648		12.14	12.14		000	N
86651		13.11	13.11		000	N
86652		13.11	13.11		000	N
86653		13.11	13.11		000	N
86654		13.11	13.11		000	N
86658		12.95	12.95		000	N
86663		13.04	13.04		000	N
86664		15.20	15.20		000	N
86665		18.03	18.03		000	N
86666		10.11	10.11		000	N
86668		10.34	10.34		000	N
86671		7.59	7.59		000	N
86674		14.62	14.62		000	N
86677		14.42	14.42		000	N
86682		12.92	12.92		000	N
86684		15.75	15.75		000	N
86687		8.34	8.34		000	N
86688		13.93	13.93		000	N
86689		26.75	26.75		000	N
86692		17.05	17.05		000	N
86694		13.07	13.07		000	N
86695		13.11	13.11		000	N
86696		19.23	19.23		000	N
86698		12.42	12.42		000	N
86701		8.83	8.83		000	N
86702		13.44	13.44		000	N
86703		13.63	13.63		000	N
86704		11.98	11.98		000	N
86705		11.70	11.70		000	N
86706		10.67	10.67		000	N
86707		11.49	11.49		000	N
86708		12.31	12.31		000	N
86709		11.18	11.18		000	N
86710		13.47	13.47		000	N
86713		15.21	15.21		000	N
86717		12.17	12.17		000	N
86720		13.11	13.11		000	N
86723		13.11	13.11		000	N
86727		12.79	12.79		000	N
86729		11.87	11.87		000	N
86732		13.11	13.11		000	N
86735		12.96	12.96		000	N
86738		13.16	13.16		000	N
86741		13.11	13.11		000	N
86744		13.11	13.11		000	N
86747		14.93	14.93		000	N
86750		12.14	12.14		000	N
86753		12.31	12.31		000	N
86756		12.81	12.81		000	N
86757		19.23	19.23		000	N
86759		13.11	13.11		000	N
86762		13.07	13.07		000	N
86765		12.81	12.81		000	N
86768		10.25	10.25		000	N
86771		13.11	13.11		000	N
86774		8.64	8.64		000	N
86777		13.07	13.07		000	N
86778		14.31	14.31		000	N
86781		13.16	13.16		000	N
86784		12.48	12.48		000	N

- Not Covered
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86787		12.81	12.81		000	N
86790		12.81	12.81		000	N
86793		13.11	13.11		000	N
86800		15.80	15.80		000	N
86803		14.19	14.19		000	N
86804		15.39	15.39		000	N
86805		21.41	21.41		000	N
86806		17.29	17.29		000	N
86807		20.76	20.76		000	N
86808		13.07	13.07		000	N
86812		25.64	25.64		000	N
86813		57.61	57.61		000	N
86816		27.67	27.67		000	N
86817		63.98	63.98		000	N
86821		56.10	56.10		000	N
86822		36.32	36.32		000	N
86849		B.R.	B.R.		000	N
86850		6.90	6.90		000	N
86860		B.R.	B.R.		000	N
86870		B.R.	B.R.		000	N
86880		5.33	5.33		000	N
86885		5.68	5.68		000	N
86886		5.14	5.14		000	N
86890		112.03	112.03		000	N
86891		B.R.	B.R.		000	N
86900		2.96	2.96		000	N
86901		2.96	2.96		000	N
86903		9.38	9.38		000	N
86904		9.45	9.45		000	N
86905		3.47	3.47		000	N
86906		7.39	7.39		000	N
86910		#	#		000	N
86911		#	#		000	N
86915		B.R.	B.R.		000	N
86920		B.R.	B.R.		000	N
86921		B.R.	B.R.		000	N
86922		B.R.	B.R.		000	N
86927		B.R.	B.R.		000	N
86930		B.R.	B.R.		000	N
86931		B.R.	B.R.		000	N
86932		B.R.	B.R.		000	N
86940		8.15	8.15		000	N
86941		12.03	12.03		000	N
86945		B.R.	B.R.		000	N
86950		3.66	3.66		000	N
86965		B.R.	B.R.		000	N
86970		B.R.	B.R.		000	N
86971		B.R.	B.R.		000	N
86972		B.R.	B.R.		000	N
86975		B.R.	B.R.		000	N
86976		B.R.	B.R.		000	N
86977		B.R.	B.R.		000	N
86978		B.R.	B.R.		000	N
86985		B.R.	B.R.		000	N
86999		12.99	12.99		000	N
87001		5.18	5.18		000	N
87003		16.72	16.72		000	N
87015		6.64	6.64		000	N
87040		10.26	10.26		000	N
87045		9.38	9.38		000	N
87046		2.34	2.34		000	N
87070		8.56	8.56		000	N
87071		4.69	4.69		000	N
87073		4.69	4.69		000	N
87075		9.40	9.40		000	N
87076		8.02	8.02		000	N
87077		8.02	8.02		000	N
87081		6.59	6.59		000	N
87084		8.56	8.56		000	N
87086		8.02	8.02		000	N
87088		6.38	6.38		000	N
87101		7.66	7.66		000	N
87102		8.35	8.35		000	N
87103		8.96	8.96		000	N
87106		10.26	10.26		000	N
87107		10.26	10.26		000	N
87109		10.73	10.73		000	N
87110		19.47	19.47		000	N
87116		10.73	10.73		000	N
87118		10.88	10.88		000	N
87140		5.54	5.54		000	N
87143		12.45	12.45		000	N
87147		5.14	5.14		000	N
87149		19.92	19.92		000	N
87152		5.20	5.20		000	N
87158		5.20	5.20		000	N
87164		10.67	10.67		000	N
87164	26	11.38	11.15		000	N
87166		4.62	4.62		000	N
87168		4.24	4.24		000	N
87169		4.24	4.24		000	N
87172		4.24	4.24		000	N

- Not Covered
A.C. – Acquisition Cost
B.R. – By Report
* - PA may be required

Effective 7/01/02
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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
87176		5.18	5.18		000	N
87177		8.84	8.84		000	N
87181		4.72	4.72		000	N
87184		6.85	6.85		000	N
87185		4.72	4.72		000	N
87186		8.58	8.58		000	N
87187		10.30	10.30		000	N
87188		6.59	6.59		000	N
87190		5.62	5.62		000	N
87197		14.93	14.93		000	N
87198		11.92	11.92		000	N
87199		11.92	11.92		000	N
87205		4.24	4.24		000	N
87206		5.33	5.33		000	N
87207		5.95	5.95		000	N
87207	26	12.74	12.51		000	N
87210		4.24	4.24		000	N
87220		4.24	4.24		000	N
87230		19.61	19.61		000	N
87250		19.04	19.04		000	N
87252		25.90	25.90		000	N
87253		20.07	20.07		000	N
87254		4.76	4.76		000	N
87260		11.92	11.92		000	N
87265		11.92	11.92		000	N
87270		11.92	11.92		000	N
87272		11.92	11.92		000	N
87273		11.92	11.92		000	N
87274		11.92	11.92		000	N
87275		11.92	11.92		000	N
87276		11.92	11.92		000	N
87277		11.92	11.92		000	N
87278		11.92	11.92		000	N
87279		11.92	11.92		000	N
87280		11.92	11.92		000	N
87281		11.92	11.92		000	N
87283		11.92	11.92		000	N
87285		11.92	11.92		000	N
87290		11.92	11.92		000	N
87299		11.92	11.92		000	N
87300		5.96	5.96		000	N
87301		11.92	11.92		000	N
87320		11.92	11.92		000	N
87324		11.92	11.92		000	N
87327		11.92	11.92		000	N
87328		11.92	11.92		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
87332		11.92	11.92		000	N
87335		11.92	11.92		000	N
87336		11.92	11.92		000	N
87337		11.92	11.92		000	N
87338		11.92	11.92		000	N
87339		11.92	11.92		000	N
87340		10.26	10.26		000	N
87341		10.26	10.26		000	N
87350		11.45	11.45		000	N
87380		16.31	16.31		000	N
87385		11.92	11.92		000	N
87390		17.53	17.53		000	N
87391		17.53	17.53		000	N
87400		11.92	11.92		000	N
87420		11.92	11.92		000	N
87425		11.92	11.92		000	N
87427		11.92	11.92		000	N
87430		11.92	11.92		000	N
87449		11.92	11.92		000	N
87450		9.53	9.53		000	N
87451		9.53	9.53		000	N
87470		19.92	19.92		000	N
87471		34.87	34.87		000	N
87472		42.56	42.56		000	N
87475		19.92	19.92		000	N
87476		34.87	34.87		000	N
87477		42.56	42.56		000	N
87480		19.92	19.92		000	N
87481		34.87	34.87		000	N
87482		41.48	41.48		000	N
87485		19.92	19.92		000	N
87486		34.87	34.87		000	N
87487		42.56	42.56		000	N
87490		19.92	19.92		000	N
87491		34.87	34.87		000	N
87492		34.73	34.73		000	N
87495		19.92	19.92		000	N
87496		34.87	34.87		000	N
87497		42.56	42.56		000	N
87510		19.92	19.92		000	N
87511		34.87	34.87		000	N
87512		41.48	41.48		000	N
87515		19.92	19.92		000	N
87516		34.87	34.87		000	N
87517		42.56	42.56		000	N
87520		19.92	19.92		000	N

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87521		34.87	34.87		000	N
87522		42.56	42.56		000	N
87525		19.92	19.92		000	N
87526		34.87	34.87		000	N
87527		41.48	41.48		000	N
87528		19.92	19.92		000	N
87529		34.87	34.87		000	N
87530		42.56	42.56		000	N
87531		19.92	19.92		000	N
87532		34.87	34.87		000	N
87533		41.48	41.48		000	N
87534		19.92	19.92		000	N
87535		34.87	34.87		000	N
87536		84.55	84.55		000	N
87537		19.92	19.92		000	N
87538		34.87	34.87		000	N
87539		42.56	42.56		000	N
87540		19.92	19.92		000	N
87541		34.87	34.87		000	N
87542		41.48	41.48		000	N
87550		19.92	19.92		000	N
87551		34.87	34.87		000	N
87552		42.56	42.56		000	N
87555		19.92	19.92		000	N
87556		34.87	34.87		000	N
87557		42.56	42.56		000	N
87560		19.92	19.92		000	N
87561		34.87	34.87		000	N
87562		42.56	42.56		000	N
87580		19.92	19.92		000	N
87581		34.87	34.87		000	N
87582		41.48	41.48		000	N
87590		19.92	19.92		000	N
87591		34.87	34.87		000	N
87592		42.56	42.56		000	N
87620		19.92	19.92		000	N
87621		34.87	34.87		000	N
87622		41.48	41.48		000	N
87650		19.92	19.92		000	N
87651		34.87	34.87		000	N
87652		41.48	41.48		000	N
87797		19.92	19.92		000	N
87798		34.87	34.87		000	N
87799		42.56	42.56		000	N
87800		19.92	19.92		000	N
87801		34.87	34.87		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
87802		11.92	11.92		000	N
87803		11.92	11.92		000	N
87804		11.92	11.92		000	N
87810		11.92	11.92		000	N
87850		11.92	11.92		000	N
87880		11.92	11.92		000	N
87899		11.92	11.92		000	N
87901		255.81	255.81		000	N
87902		255.81	255.81		000	N
87903		485.53	485.53		000	N
87904		25.90	25.90		000	N
87999		B.R.	B.R.		000	N
88000		#	#		000	N
88005		#	#		000	N
88007		#	#		000	N
88012		#	#		000	N
88014		#	#		000	N
88016		#	#		000	N
88020		#	#		000	N
88025		#	#		000	N
88027		#	#		000	N
88028		#	#		000	N
88029		#	#		000	N
88036		#	#		000	N
88037		#	#		000	N
88040		#	#		000	N
88045		#	#		000	N
88099		#	#		000	N
88104		29.80	29.80		000	N
88104	26	18.88	18.88		000	N
88104	TC	10.92	10.92		000	N
88106		29.80	29.80		000	N
88106	26	18.88	18.88		000	N
88106	TC	10.92	10.92		000	N
88107		41.18	41.18		000	N
88107	26	25.71	25.71		000	N
88107	TC	15.47	15.47		000	N
88108		35.04	35.04		000	N
88108	26	18.88	18.88		000	N
88108	TC	15.92	15.92		000	N
88125		13.19	13.19		000	N
88125	26	8.87	8.87		000	N
88125	TC	4.32	4.32		000	N
88130		14.95	14.95		000	N
88140		7.94	7.94		000	N
88141		14.11	14.11		000	N

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88142		28.00	28.00		000	N
88143		28.00	28.00		000	N
88144		28.00	28.00		000	N
88145		28.00	28.00		000	N
88147		15.73	15.73		000	N
88148		21.00	21.00		000	N
88150		14.60	14.60		000	N
88152		14.60	14.60		000	N
88153		14.60	14.60		000	N
88154		14.60	14.60		000	N
88155		8.28	8.28		000	N
88160		35.26	35.26		000	N
88160	26	16.84	16.84		000	N
88160	TC	18.20	18.20		000	N
88161		40.04	40.04		000	N
88161	26	16.84	16.84		000	N
88161	TC	23.21	23.21		000	N
88162		34.81	34.81		000	N
88162	26	25.71	25.71		000	N
88162	TC	9.10	9.10		000	N
88164		14.60	14.60		000	N
88165		14.60	14.60		000	N
88166		14.60	14.60		000	N
88167		14.60	14.60		000	N
88172		29.80	29.80		000	N
88172	26	20.25	20.25		000	N
88172	TC	9.55	9.55		000	N
88173		73.94	73.94		000	N
88173	26	46.87	46.87		000	N
88173	TC	27.07	27.07		000	N
88180		22.52	22.52		000	N
88180	26	12.29	12.29		000	N
88180	TC	10.24	10.24		000	N
88182		60.06	60.06		000	N
88182	26	26.16	26.16		000	N
88182	TC	33.90	33.90		000	N
88199		B.R.	B.R.		000	N
88199	26	B.R.	B.R.		000	N
88199	TC	B.R.	B.R.		000	N
88230		115.76	115.76		000	N
88233		139.84	139.84		000	N
88235		146.32	146.32		000	N
88237		125.50	125.50		000	N
88239		146.59	146.59		000	N
88240		#	#		000	N
88241		#	#		000	N
88245		147.91	147.91		000	N
88248		172.07	172.07		000	N
88249		172.07	172.07		000	N
88261		175.61	175.61		000	N
88262		123.85	123.85		000	N
88263		149.31	149.31		000	N
88264		123.85	123.85		000	N
88267		178.63	178.63		000	N
88269		165.26	165.26		000	N
88271		21.28	21.28		000	N
88272		26.60	26.60		000	N
88273		31.92	31.92		000	N
88274		34.58	34.58		000	N
88275		39.90	39.90		000	N
88280		24.93	24.93		000	N
88283		28.25	28.25		000	N
88285		18.88	18.88		000	N
88289		34.21	34.21		000	N
88291		17.29	17.29		000	N
88299		15.25	15.25		000	N
88300		10.01	10.01		000	N
88300	26	2.96	2.96		000	N
88300	TC	7.05	7.05		000	N
88302		20.25	20.25		000	N
88302	26	4.55	4.55		000	N
88302	TC	15.70	15.70		000	N
88304		27.30	27.30		000	N
88304	26	7.51	7.51		000	N
88304	TC	20.02	20.02		000	N
88305		58.70	58.70		000	N
88305	26	25.25	25.25		000	N
88305	TC	33.44	33.44		000	N
88307		100.10	100.10		000	N
88307	26	53.92	53.92		000	N
88307	TC	46.18	46.18		000	N
88309		131.72	131.72		000	N
88309	26	76.89	76.89		000	N
88309	TC	55.06	55.06		000	N
88311		10.69	10.69		000	N
88311	26	8.19	8.19		000	N
88311	TC	2.50	2.50		000	N
88312		51.64	51.64		000	N
88312	26	18.20	18.20		000	N
88312	TC	33.21	33.21		000	N
88313		39.59	39.59		000	N
88313	26	8.19	8.19		000	N

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88313	TC	31.39	31.39		000	N
88314		30.71	30.71		000	N
88314	26	15.02	15.02		000	N
88314	TC	15.47	15.47		000	N
88318		23.43	23.43		000	N
88318	26	14.33	14.33		000	N
88318	TC	9.10	9.10		000	N
88319		68.93	68.93		000	N
88319	26	17.75	17.75		000	N
88319	TC	51.19	51.19		000	N
88321		44.13	43.68		000	N
88323		63.24	63.24		000	N
88323	26	45.73	45.73		000	N
88323	TC	17.29	17.29		000	N
88325		73.94	73.94		000	N
88329		24.34	22.52		000	N
88331		48.00	48.00		000	N
88331	26	40.04	40.04		000	N
88331	TC	7.96	7.96		000	N
88332		24.80	24.80		000	N
88332	26	19.79	19.79		000	N
88332	TC	5.00	5.00		000	N
88342		53.01	53.01		000	N
88342	26	28.66	28.66		000	N
88342	TC	24.34	24.34		000	N
88346		47.77	47.77		000	N
88346	26	28.89	28.89		000	N
88346	TC	18.88	18.88		000	N
88347		63.93	63.93		000	N
88347	26	28.66	28.66		000	N
88347	TC	35.26	35.26		000	N
88348		196.10	196.10		000	N
88348	26	50.73	50.73		000	N
88348	TC	145.37	145.37		000	N
88349		214.31	214.31		000	N
88349	26	25.71	25.71		000	N
88349	TC	188.60	188.60		000	N
88355		99.19	99.19		000	N
88355	26	62.56	62.56		000	N
88355	TC	36.63	36.63		000	N
88356		184.96	184.96		000	N
88356	26	101.24	101.24		000	N
88356	TC	83.72	83.72		000	N
88358		106.70	106.70		000	N
88358	26	95.09	95.09		000	N
88358	TC	11.60	11.60		000	N
88362		128.31	128.31		000	N
88362	26	72.80	72.80		000	N
88362	TC	55.51	55.51		000	N
88365		68.48	68.48		000	N
88365	26	31.39	31.39		000	N
88365	TC	37.08	37.08		000	N
88371		12.29	12.29		000	N
88371	26	12.06	11.83		000	N
88372		18.44	18.44		000	N
88372	26	12.51	12.51		000	N
88380		B.R.	B.R.	PA	000	N
88380	26	B.R.	B.R.	PA	000	N
88380	TC	B.R.	B.R.	PA	000	N
88399		B.R.	B.R.		000	N
88399	26	B.R.	B.R.		000	N
88399	TC	B.R.	B.R.		000	N
88400		2.29	2.29		000	N
89050		4.70	4.70		000	N
89051		5.47	5.47		000	N
89060		7.10	7.10		000	N
89060	26	12.74	12.51		000	N
89100		66.43	19.11		000	N
89105		63.47	15.70		000	N
89125		4.29	4.29		000	N
89130		61.43	13.42		000	N
89132		30.94	5.69		000	N
89135		76.44	24.12		000	N
89136		52.10	6.83		000	N
89140		75.98	26.16		000	N
89141		91.91	28.89		000	N
89160		2.33	2.33		000	N
89190		4.72	4.72		000	N
89250		#	#		000	N
89251		#	#		000	N
89252		#	#		000	N
89253		#	#		000	N
89254		#	#		000	N
89255		#	#		000	N
89256		#	#		000	N
89257		#	#		000	N
89258		#	#		000	N
89259		#	#		000	N
89260		#	#		000	N
89261		#	#		000	N
89264		#	#		000	N
89300		#	#		000	N

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89310		#	#		000	N
89320		#	#		000	N
89321		Bundled	Bundled		000	N
89325		#	#		000	N
89329		#	#		000	N
89330		#	#		000	N
89350		9.33	9.33		000	N
89355		2.33	2.33		000	N
89360		10.24	10.24		000	N
89365		2.65	2.65		000	N
89399		B.R.	B.R.		000	N
89399	26	B.R.	B.R.		000	N
89399	TC	B.R.	B.R.		000	N
90281		#	#		000	N
90283		#	#		000	N
90287		#	#		000	N
90288		#	#		000	N
90291		#	#		000	N
90296		#	#		000	N
90371		126.88	126.88		000	N
90375		142.08	142.08		000	N
90376		149.52	149.52		000	N
90378		*Refer to page C13*			000	N
90379		#	#		000	N
90384		#	#		000	N
90385		#	#		000	N
90386		#	#		000	N
90389		#	#		000	N
90393		#	#		000	N
90396		111.25	111.25		000	N
90399		#	#		000	N
90471		5.00	5.00		000	N
90472		3.00	3.00		000	N
90473		#	#		000	N
90474		#	#		000	N
90476		#	#		000	N
90477		#	#		000	N
90581		#	#		000	N
90585		163.60	163.60		000	N
90586		163.60	163.60		000	N
90632		58.30	58.30		000	N
90633		31.98	31.98		000	N
90634		#	#		000	N
90636		85.95	85.95		000	N
90645		25.26	25.26		000	N
90646		21.41	21.41		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
90647		18.49	18.49		000	N
90648		24.23	24.23		000	N
90657		3.02	3.02		000	N
90658		4.70	4.70		000	N
90659		3.02	3.02		000	N
90660		#	#		000	N
90665		57.25	57.25		000	N
90669		64.53	64.53		000	N
90675		138.76	138.76		000	N
90676		80.66	80.66		000	N
90680		#	#		000	N
90690		8.57	8.57		000	N
90691		42.44	42.44		000	N
90692		1.05	1.05		000	N
90693		#	#		000	N
90700		17.69	17.69		000	N
90701		12.90	12.90		000	N
90702		3.38	3.38		000	N
90703		2.70	2.70		000	N
90704		18.59	18.59		000	N
90705		16.12	16.12		000	N
90706		16.89	16.89		000	N
90707		38.96	38.96		000	N
90708		22.57	22.57		000	N
90709		23.75	23.75		000	N
90710		#	#		000	N
90712		18.20	18.20		000	N
90713		18.47	18.47		000	N
90716		61.01	61.01		000	N
90717		67.26	67.26		000	N
90718		6.76	6.76		000	N
90719		#	#		000	N
90720		32.80	32.80		000	N
90721		#	#		000	N
90723		#	#		000	N
90725		2.88	2.88		000	N
90727		#	#		000	N
90732		25.49	25.49		000	N
90733		71.50	71.50		000	N
90735		43.03	43.03		000	N
90740		184.72	184.72		000	N
90743		66.42	66.42		000	N
90744		27.13	27.13		000	N
90746		65.76	65.76		000	N
90747		184.72	184.72		000	N
90748		47.62	47.62		000	N

- Not Covered
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90749		B.R.	B.R.		000	N
90780		25.48	25.48		000	N
90781		12.74	12.74		000	N
90782		2.50	2.50		000	N
90783		9.33	9.33		000	N
90784		10.92	10.92		000	N
90788		2.73	2.73		000	N
90799		B.R.	B.R.		000	N
90801		90.32	85.54		000	N
90802		95.78	91.68		000	N
90804		40.04	36.86		000	N
90805		45.05	41.41		000	N
90806		59.83	56.88		000	N
90807		64.61	61.43		000	N
90808		#	#		000	N
90809		#	#		000	N
90810		43.23	40.27		000	N
90811		48.23	44.82		000	N
90812		63.70	61.20		000	N
90813		68.93	65.06		000	N
90814		#	#		000	N
90815		#	#		000	N
90816		41.86	38.45		000	N
90817		46.41	42.54		000	N
90818		61.65	58.24		000	N
90819		66.20	62.11		000	N
90821		#	#		000	N
90822		#	#		000	N
90823		46.18	41.41		000	N
90824		50.73	46.18		000	N
90826		66.43	61.65		000	N
90827		70.53	65.52		000	N
90828		#	#		000	N
90829		#	#		000	N
90845		57.33	54.14		000	N
90846		#	#		000	N
90847		#	#		000	N
90849		#	#		000	N
90853		21.61	17.97		000	N
90857		22.98	19.34		000	N
90862		31.85	28.89		000	N
90865		104.20	86.68		000	N
90870		60.06	60.06		000	N
90871		86.22	86.22		000	N
90875		#	#		000	N
90876		#	#		000	N
90880		#	#		000	N
90882		#	#		000	N
90885		Bundled	Bundled		000	N
90887		#	#		000	N
90889		Bundled	Bundled		000	N
90899		B.R.	B.R.		000	N
90901		#	#		000	N
90911		40.72	29.80		000	N
90918		384.02	384.02		000	N
90919		300.76	300.76		000	N
90920		259.35	259.35		000	N
90921		170.85	170.85		000	N
90922		12.51	12.51		000	N
90923		10.01	10.01		000	N
90924		8.64	8.64		000	N
90925		5.92	5.92		000	N
90935		47.77	47.77		000	N
90937		76.21	76.21		000	N
90939		B.R.	B.R.		000	N
90940		B.R.	B.R.		000	N
90945		50.05	50.05		000	N
90947		78.26	78.26		000	N
90989		B.R.	B.R.		000	N
90993		B.R.	B.R.		000	N
90997		67.57	67.57		000	N
90999		B.R.	B.R.		000	N
91000		24.57	24.57		000	N
91000	26	22.75	22.75		000	N
91000	TC	1.82	1.82		000	N
91010		89.64	89.64		000	N
91010	26	39.59	39.59		000	N
91010	TC	50.05	50.05		000	N
91011		97.83	97.83		000	N
91011	26	47.32	47.32		000	N
91011	TC	50.51	50.51		000	N
91012		88.95	88.95		000	N
91012	26	46.41	46.41		000	N
91012	TC	42.77	42.77		000	N
91020		102.38	102.38		000	N
91020	26	45.27	45.27		000	N
91020	TC	57.33	57.33		000	N
91030		73.48	73.48		000	N
91030	26	28.89	28.89		000	N
91030	TC	44.82	44.82		000	N
91032		80.99	80.99		000	N
91032	26	38.22	38.22		000	N

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91032	TC	42.77	42.77		000	N
91033		92.59	92.59		000	N
91033	26	41.18	41.18		000	N
91033	TC	51.19	51.19		000	N
91052		68.93	68.93		000	N
91052	26	25.03	25.03		000	N
91052	TC	44.13	44.13		000	N
91055		73.26	73.26		000	N
91055	26	28.21	28.21		000	N
91055	TC	45.05	45.05		000	N
91060		17.29	17.29		000	N
91060	26	13.88	13.88		000	N
91060	TC	3.41	3.41		000	N
91065		109.66	109.66		000	N
91065	26	6.37	6.37		000	N
91065	TC	103.51	103.51		000	N
91100		36.40	36.40		000	N
91105		13.42	13.42		000	N
91122		106.47	106.47		000	N
91122	26	56.19	56.19		000	N
91122	TC	50.51	50.51		000	N
91123		Bundled	Bundled		000	N
91132		B.R.	B.R.		000	N
91132	26	17.06	17.06		000	N
91132	TC	B.R.	B.R.		000	N
91133		B.R.	B.R.		000	N
91133	26	21.38	21.38		000	N
91133	TC	B.R.	B.R.		000	N
91299		B.R.	B.R.		000	N
91299	26	B.R.	B.R.		000	N
91299	TC	B.R.	B.R.		000	N
92002		42.32	28.89		000	N
92004		77.35	54.83		000	N
92012		38.45	22.29		000	N
92014		57.33	36.63	LE	000	N
92015		43.45	12.29	LE	000	N
92018		83.04	83.04		000	N
92019		44.13	44.13		000	N
92020		30.26	12.51		000	N
92060		32.99	32.99		000	N
92060	26	22.75	22.75		000	N
92060	TC	10.01	10.01		000	N
92065		#	#		000	N
92065	26	#	#		000	N
92065	TC	#	#		000	N
92070		#	#		000	N
92081		50.73	50.73		000	N
92081	26	12.06	12.06		000	N
92081	TC	38.90	38.90		000	N
92082		29.80	29.80		000	N
92082	26	14.79	14.79		000	N
92082	TC	15.24	15.24		000	N
92083		46.41	46.41		000	N
92083	26	16.61	16.61		000	N
92083	TC	29.57	29.57		000	N
92100		38.22	30.26		000	N
92120		37.31	25.71		000	N
92130		39.81	25.93		000	N
92135		42.32	42.32		000	N
92135	26	12.06	12.06		000	N
92135	TC	30.26	30.26		000	N
92136		58.24	58.24		000	N
92136	26	18.20	18.20		000	N
92136	TC	40.04	40.04		000	N
92140		34.58	16.38		000	N
92225		14.11	12.74		000	N
92226		12.74	11.15		000	N
92230		53.69	18.65		000	N
92235		79.85	79.85		000	N
92235	26	27.53	27.53		000	N
92235	TC	52.10	52.10		000	N
92240		146.51	146.51		000	N
92240	26	37.31	37.31		000	N
92240	TC	109.20	109.20		000	N
92250		41.86	41.86		000	N
92250	26	14.79	14.79		000	N
92250	TC	27.07	27.07		000	N
92260		10.24	7.05		000	N
92265		47.32	47.32		000	N
92265	26	27.30	27.30		000	N
92265	TC	20.02	20.02		000	N
92270		45.50	45.50		000	N
92270	26	27.30	27.30		000	N
92270	TC	18.20	18.20		000	N
92275		52.10	52.10		000	N
92275	26	33.67	33.67		000	N
92275	TC	18.43	18.43		000	N
92283		21.16	21.16		000	N
92283	26	5.69	5.69		000	N
92283	TC	15.70	15.70		000	N
92284		45.95	45.95		000	N
92284	26	7.74	7.74		000	N

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Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
92284	TC	38.45	38.45		000	N
92285		23.21	23.21		000	N
92285	26	6.83	6.83		000	N
92285	TC	16.61	16.61		000	N
92286		84.40	84.40		000	N
92286	26	22.29	22.29		000	N
92286	TC	62.11	62.11		000	N
92287		91.23	25.71		000	N
92310		#	#		000	N
92311		#	#		000	N
92312		#	#		000	N
92313		#	#		000	N
92314		#	#		000	N
92315		#	#		000	N
92316		#	#		000	N
92317		#	#		000	N
92325		#	#		000	N
92326		#	#		000	N
92330		#	#		000	N
92335		#	#		000	N
92340		24.12	12.06	LE	000	N
92341		27.30	15.02	LE	000	N
92342		29.12	16.84	LE	000	N
92352		24.12	12.06		000	N
92353		28.44	16.15		000	N
92354		194.97	194.97		000	N
92355		#	#		000	N
92358		#	#		000	N
92370		20.02	10.47		000	N
92371		13.88	13.88		000	N
92390		#	#		000	N
92391		#	#		000	N
92392		#	#		000	N
92393		#	#		000	N
92395		#	#		000	N
92396		#	#		000	N
92499		B.R.	B.R.		000	N
92499	26	B.R.	B.R.		000	N
92499	TC	B.R.	B.R.		000	N
92502		64.38	64.38		000	N
92504		29.57	6.37		000	N
92506		59.61	30.03		000	N
92507		47.55	18.43		000	N
92508		46.64	9.55		000	N
92510		83.27	53.92		000	N
92511		50.73	29.12		000	N
92512		38.67	16.61		000	N
92516		31.62	15.47		000	N
92520		29.57	27.53		000	N
92525		73.94	48.91		000	N
92526		48.46	18.88		000	N
92531		Bundled	Bundled		000	N
92532		Bundled	Bundled		000	N
92533		Bundled	Bundled		000	N
92534		Bundled	Bundled		000	N
92541		43.00	43.00		000	N
92541	26	13.88	13.88		000	N
92541	TC	29.12	29.12		000	N
92542		40.04	40.04		000	N
92542	26	11.60	11.60		000	N
92542	TC	28.44	28.44		000	N
92543		11.60	11.60		000	N
92543	26	3.64	3.64		000	N
92543	TC	7.96	7.96		000	N
92544		37.54	37.54		000	N
92544	26	9.10	9.10		000	N
92544	TC	28.44	28.44		000	N
92545		36.17	36.17		000	N
92545	26	8.19	8.19		000	N
92545	TC	27.98	27.98		000	N
92546		58.01	58.01		000	N
92546	26	10.01	10.01		000	N
92546	TC	48.00	48.00		000	N
92547		28.66	28.66		000	N
92548		#	#		000	N
92548	26	#	#		000	N
92548	TC	#	#		000	N
92551		10.18	10.18		000	N
92552		10.24	10.24		000	N
92553		15.24	15.24		000	N
92555		8.87	8.87		000	N
92556		13.42	13.42		000	N
92557		27.75	27.75		000	N
92559		#	#		000	N
92560		#	#		000	N
92561		#	#		000	N
92562		#	#		000	N
92563		#	#		000	N
92564		#	#		000	N
92565		#	#		000	N
92567		12.29	12.29		000	N
92568		8.87	8.87		000	N

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92569		9.55	9.55		000	N
92571		#	#		000	N
92572		#	#		000	N
92573		#	#		000	N
92575		#	#		000	N
92576		#	#		000	N
92577		#	#		000	N
92579		16.84	16.84		000	N
92582		16.84	16.84		000	N
92583		#	#		000	N
92584		57.10	57.10		000	N
92585		59.38	59.38		000	N
92585	26	16.84	16.84		000	N
92585	TC	42.54	42.54		000	N
92586		42.32	42.32		000	N
92587		34.81	34.81		000	N
92587	26	4.78	4.78		000	N
92587	TC	30.03	30.03		000	N
92588		46.64	46.64		000	N
92588	26	12.51	12.51		000	N
92588	TC	34.13	34.13		000	N
92589		12.74	12.74		000	N
92590		#	#		000	N
92591		#	#		000	N
92592		#	#		000	N
92593		#	#		000	N
92594		#	#		000	N
92595		#	#		000	N
92596		#	#		000	N
92597		65.52	43.68		000	N
92598		40.49	32.31		000	N
92599		B.R.	B.R.		000	N
92599	26	B.R.	B.R.		000	N
92599	TC	B.R.	B.R.		000	N
92950		125.81	116.48		000	N
92953		10.69	10.69		000	N
92960		103.29	73.03		000	N
92961		149.01	149.01		000	N
92970		111.48	111.48		000	N
92971		60.74	60.74		000	N
92973		108.29	108.29		000	N
92974		117.62	117.62		000	N
92975		236.37	236.37		000	N
92977		182.68	182.68		000	N
92978		162.21	162.21		000	N
92978	26	59.15	59.15		000	N
92978	TC	103.29	103.29		000	N
92979		98.51	98.51		000	N
92979	26	46.41	46.41		000	N
92979	TC	52.10	52.10		000	N
92980		490.94	490.94		000	N
92981		137.86	137.86		000	N
92982		362.86	362.86		000	N
92984		98.28	98.28		000	N
92986		750.75	750.75		090	N
92987		781.46	781.46		090	N
92990		599.69	599.69		090	N
92992		B.R.	B.R.		090	Y
92993		B.R.	B.R.		090	Y
92995		399.72	399.72		000	N
92996		107.84	107.84		000	N
92997		385.84	385.84		000	N
92998		187.91	187.91		000	N
93000		15.92	15.92		000	N
93005		10.24	10.24		000	N
93010		5.69	5.69		000	N
93012		#	#		000	N
93014		16.38	16.38		000	N
93015		62.56	62.56		000	N
93016		14.33	14.33		000	N
93017		38.45	38.45		000	N
93018		9.78	9.78		000	N
93024		63.93	63.93		000	N
93024	26	37.99	37.99		000	N
93024	TC	25.93	25.93		000	N
93025		#	#		000	N
93025	26	#	#		000	N
93025	TC	#	#		000	N
93040		8.42	8.42		000	N
93041		3.41	3.41		000	N
93042		5.00	5.00		000	N
93224		95.32	95.32		000	N
93225		28.44	28.44		000	N
93226		50.05	50.05		000	N
93227		16.84	16.84		000	N
93230		101.24	101.24		000	N
93231		34.81	34.81		000	N
93232		49.60	49.60		000	N
93233		16.84	16.84		000	N
93235		73.71	73.71		000	N
93236		59.38	59.38		000	N
93237		14.11	14.11		000	N

- Not Covered
A.C. – Acquisition Cost
B.R. – By Report
* - PA may be required

Effective 7/01/02
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
93268		99.19	99.19		000	N
93270		28.44	28.44		000	N
93271		54.14	54.14		000	N
93272		16.61	16.61		000	N
93278		34.81	34.81		000	N
93278	26	8.19	8.19		000	N
93278	TC	26.62	26.62		000	N
93303		128.99	128.99		000	N
93303	26	41.41	41.41		000	N
93303	TC	87.59	87.59		000	N
93304		68.70	68.70		000	N
93304	26	24.12	24.12		000	N
93304	TC	44.59	44.59		000	N
93307		117.62	117.62		000	N
93307	26	30.03	30.03		000	N
93307	TC	87.59	87.59		000	N
93308		61.88	61.88		000	N
93308	26	17.29	17.29		000	N
93308	TC	44.59	44.59		000	N
93312		157.66	157.66		000	N
93312	26	70.75	70.75		000	N
93312	TC	86.91	86.91		000	N
93313		144.01	27.30		000	N
93314		127.40	127.40		000	N
93314	26	40.49	40.49		000	N
93314	TC	86.91	86.91		000	N
93315		176.77	176.77		000	N
93315	26	89.86	89.86		000	N
93315	TC	86.91	86.91		000	N
93316		169.26	27.98		000	N
93317		145.60	145.60		000	N
93317	26	58.92	58.92		000	N
93317	TC	86.91	86.91		000	N
93318		B.R.	B.R.		000	N
93318	26	70.75	70.75		000	N
93318	TC	B.R.	B.R.		000	N
93320		51.64	51.64		000	N
93320	26	12.51	12.51		000	N
93320	TC	39.36	39.36		000	N
93321		30.49	30.49		000	N
93321	26	5.00	5.00		000	N
93321	TC	25.71	25.71		000	N
93325		68.70	68.70		000	N
93325	26	2.50	2.50		000	N
93325	TC	66.20	66.20		000	N
93350		88.04	88.04		000	N
93350	26	47.77	47.77		000	N
93350	TC	40.49	40.49		000	N
93501		482.76	482.76		000	N
93501	26	99.42	99.42		000	N
93501	TC	383.34	383.34		000	N
93503		84.63	84.63		000	N
93505		189.51	189.51		000	N
93505	26	144.01	144.01		000	N
93505	TC	45.27	45.27		000	N
93508		419.51	419.51		000	N
93508	26	135.36	135.36		000	N
93508	TC	284.15	284.15		000	N
93510		981.44	981.44		000	N
93510	26	143.32	143.32		000	N
93510	TC	838.11	838.11		000	N
93511		981.66	981.66		000	N
93511	26	166.07	166.07		000	N
93511	TC	815.59	815.59		000	N
93514		1,044.68	1,044.68		000	N
93514	26	228.87	228.87		000	N
93514	TC	815.59	815.59		000	N
93524		1,294.70	1,294.70		000	N
93524	26	228.64	228.64		000	N
93524	TC	1,066.07	1,066.07		000	N
93526		1,293.34	1,293.34		000	N
93526	26	197.92	197.92		000	N
93526	TC	1,095.41	1,095.41		000	N
93527		1,306.53	1,306.53		000	N
93527	26	240.24	240.24		000	N
93527	TC	1,066.07	1,066.07		000	N
93528		1,364.77	1,364.77		000	N
93528	26	298.48	298.48		000	N
93528	TC	1,066.07	1,066.07		000	N
93529		1,224.63	1,224.63		000	N
93529	26	158.57	158.57		000	N
93529	TC	1,066.07	1,066.07		000	N
93530		519.61	519.61		000	N
93530	26	136.27	136.27		000	N
93530	TC	383.34	383.34		000	N
93531		1,366.14	1,366.14		000	N
93531	26	270.73	270.73		000	N
93531	TC	1,095.41	1,095.41		000	N
93532		1,395.26	1,395.26		000	N
93532	26	329.19	329.19		000	N
93532	TC	1,066.07	1,066.07		000	N
93533		1,283.33	1,283.33		000	N

- Not Covered
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93533	26	217.03	217.03		000	N
93533	TC	1,066.07	1,066.07		000	N
93539		28.44	13.19		000	N
93540		29.57	14.11		000	N
93541		9.55	9.55		000	N
93542		9.55	9.55		000	N
93543		19.34	9.55		000	N
93544		17.97	8.19		000	N
93545		28.66	13.19		000	N
93555		167.90	167.90		000	N
93555	26	26.62	26.62		000	N
93555	TC	141.51	141.51		000	N
93556		250.02	250.02		000	N
93556	26	27.30	27.30		000	N
93556	TC	222.72	222.72		000	N
93561		27.98	27.98		000	N
93561	26	15.24	15.24		000	N
93561	TC	12.74	12.74		000	N
93562		12.06	12.06		000	N
93562	26	5.00	5.00		000	N
93562	TC	7.28	7.28		000	N
93571		162.44	162.44		000	N
93571	26	59.15	59.15		000	N
93571	TC	103.29	103.29		000	N
93572		99.42	99.42		000	N
93572	26	47.32	47.32		000	N
93572	TC	52.10	52.10		000	N
93600		114.66	114.66		000	N
93600	26	70.07	70.07		000	N
93600	TC	44.59	44.59		000	N
93602		95.55	95.55		000	N
93602	26	70.07	70.07		000	N
93602	TC	25.48	25.48		000	N
93603		107.84	107.84		000	N
93603	26	69.39	69.39		000	N
93603	TC	38.45	38.45		000	N
93609		225.68	225.68		000	N
93609	26	163.80	163.80		000	N
93609	TC	61.88	61.88		000	N
93610		130.36	130.36		000	N
93610	26	99.19	99.19		000	N
93610	TC	31.17	31.17		000	N
93612		136.05	136.05		000	N
93612	26	99.19	99.19		000	N
93612	TC	36.86	36.86		000	N
93613		B.R.	B.R.		000	N
93615		38.45	38.45		000	N
93615	26	31.17	31.17		000	N
93615	TC	7.28	7.28		000	N
93616		53.46	53.46		000	N
93616	26	46.18	46.18		000	N
93616	TC	7.28	7.28		000	N
93618		230.91	230.91		000	N
93618	26	140.82	140.82		000	N
93618	TC	90.09	90.09		000	N
93619		415.87	415.87		000	N
93619	26	240.47	240.47		000	N
93619	TC	175.40	175.40		000	N
93620		586.04	586.04		000	N
93620	26	382.43	382.43		000	N
93620	TC	203.61	203.61		000	N
93621		155.38	155.38		000	N
93621	26	70.07	70.07		000	N
93621	TC	85.31	85.31		000	N
93622		243.65	243.65		000	N
93622	26	111.70	111.70		000	N
93622	TC	131.95	131.95		000	N
93623		209.07	209.07		000	N
93623	26	94.18	94.18		000	N
93623	TC	114.89	114.89		000	N
93624		203.61	203.61		000	N
93624	26	158.57	158.57		000	N
93624	TC	45.27	45.27		000	N
93631		390.84	390.84		000	N
93631	26	247.52	247.52		000	N
93631	TC	143.55	143.55		000	N
93640		278.92	278.92		000	N
93640	26	116.02	116.02		000	N
93640	TC	162.89	162.89		000	N
93641		358.77	358.77		000	N
93641	26	195.88	195.88		000	N
93641	TC	162.89	162.89		000	N
93642		322.82	322.82		000	N
93642	26	159.70	159.70		000	N
93642	TC	162.89	162.89		000	N
93650		345.80	345.80		000	N
93651		536.90	536.90		000	N
93652		583.54	583.54		000	N
93660		98.96	98.96		000	N
93660	26	61.88	61.88		000	N
93660	TC	37.08	37.08		000	N
93662		B.R.	B.R.		000	N

- Not Covered
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93662	26	96.00	96.00		000	N
93662	TC	B.R.	B.R.		000	N
93668		#	#		000	N
93701		#	#		000	N
93701	26	#	#		000	N
93701	TC	#	#		000	N
93720		21.61	21.61		000	N
93721		16.38	16.38		000	N
93722		5.46	5.46		000	N
93724		250.25	250.25		000	N
93724	26	160.16	160.16		000	N
93724	TC	90.09	90.09		000	N
93727		17.52	17.52		000	N
93731		26.16	26.16		000	N
93731	26	14.79	14.79		000	N
93731	TC	11.38	11.38		000	N
93732		41.86	41.86		000	N
93732	26	30.03	30.03		000	N
93732	TC	11.83	11.83		000	N
93733		22.29	22.29		000	N
93733	26	5.69	5.69		000	N
93733	TC	16.84	16.84		000	N
93734		20.25	20.25		000	N
93734	26	12.51	12.51		000	N
93734	TC	7.96	7.96		000	N
93735		34.35	34.35		000	N
93735	26	24.12	24.12		000	N
93735	TC	10.24	10.24		000	N
93736		19.57	19.57		000	N
93736	26	5.00	5.00		000	N
93736	TC	14.79	14.79		000	N
93740		Bundled	Bundled		000	N
93740	26	Bundled	Bundled		000	N
93740	TC	Bundled	Bundled		000	N
93741		40.95	40.95		000	N
93741	26	25.93	25.93		000	N
93741	TC	15.02	15.02		000	N
93742		44.59	44.59		000	N
93742	26	29.57	29.57		000	N
93742	TC	15.02	15.02		000	N
93743		50.28	50.28		000	N
93743	26	33.67	33.67		000	N
93743	TC	16.61	16.61		000	N
93744		53.46	53.46		000	N
93744	26	38.45	38.45		000	N
93744	TC	15.02	15.02		000	N
93760		#	#		000	N
93762		#	#		000	N
93770		Bundled	Bundled		000	N
93770	26	Bundled	Bundled		000	N
93770	TC	Bundled	Bundled		000	N
93784		27.07	27.07		000	N
93786		21.61	21.61		000	N
93788		B.R.	B.R.		000	N
93790		5.69	5.69		000	N
93797		#	#		000	N
93798		#	#		000	N
93799		B.R.	B.R.		000	N
93799	26	B.R.	B.R.		000	N
93799	TC	B.R.	B.R.		000	N
93875		32.76	32.76		000	N
93875	26	7.05	7.05		000	N
93875	TC	25.71	25.71		000	N
93880		105.79	105.79		000	N
93880	26	19.34	19.34		000	N
93880	TC	86.68	86.68		000	N
93882		70.53	70.53		000	N
93882	26	13.19	13.19		000	N
93882	TC	57.33	57.33		000	N
93886		128.99	128.99		000	N
93886	26	31.17	31.17		000	N
93886	TC	97.83	97.83		000	N
93888		85.54	85.54		000	N
93888	26	20.25	20.25		000	N
93888	TC	65.29	65.29		000	N
93922		35.04	35.04		000	N
93922	26	7.96	7.96		000	N
93922	TC	27.07	27.07		000	N
93923		65.52	65.52		000	N
93923	26	14.56	14.56		000	N
93923	TC	50.96	50.96		000	N
93924		71.89	71.89		000	N
93924	26	16.38	16.38		000	N
93924	TC	55.51	55.51		000	N
93925		105.56	105.56		000	N
93925	26	18.65	18.65		000	N
93925	TC	86.91	86.91		000	N
93926		70.53	70.53		000	N
93926	26	12.51	12.51		000	N
93926	TC	58.01	58.01		000	N
93930		106.93	106.93		000	N
93930	26	14.56	14.56		000	N

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93930	TC	92.36	92.36		000	N
93931		71.21	71.21		000	N
93931	26	9.78	9.78		000	N
93931	TC	61.43	61.43		000	N
93965		36.86	36.86		000	N
93965	26	11.15	11.15		000	N
93965	TC	25.71	25.71		000	N
93970		117.85	117.85		000	N
93970	26	21.61	21.61		000	N
93970	TC	96.00	96.00		000	N
93971		78.26	78.26		000	N
93971	26	14.33	14.33		000	N
93971	TC	63.93	63.93		000	N
93975		166.30	166.30		000	N
93975	26	57.10	57.10		000	N
93975	TC	108.97	108.97		000	N
93976		111.25	111.25		000	N
93976	26	38.22	38.22		000	N
93976	TC	73.03	73.03		000	N
93978		110.34	110.34		000	N
93978	26	20.70	20.70		000	N
93978	TC	89.41	89.41		000	N
93979		73.71	73.71		000	N
93979	26	14.33	14.33		000	N
93979	TC	59.38	59.38		000	N
93980		120.58	120.58		000	N
93980	26	39.59	39.59		000	N
93980	TC	81.22	81.22		000	N
93981		88.72	88.72		000	N
93981	26	13.65	13.65		000	N
93981	TC	75.08	75.08		000	N
93990		65.97	65.97		000	N
93990	26	7.96	7.96		000	N
93990	TC	58.01	58.01		000	N
94010		23.21	23.21		000	N
94010	26	5.46	5.46		000	N
94010	TC	17.75	17.75		000	N
94014		22.75	22.75		000	N
94015		6.83	6.83		000	N
94016		15.92	15.92		000	N
94060		39.36	39.36		000	N
94060	26	9.55	9.55		000	N
94060	TC	29.80	29.80		000	N
94070		93.05	93.05		000	N
94070	26	18.20	18.20		000	N
94070	TC	74.85	74.85		000	N
94150		Bundled	Bundled		000	N
94150	26	Bundled	Bundled		000	N
94150	TC	Bundled	Bundled		000	N
94200		10.69	10.69		000	N
94200	26	3.64	3.64		000	N
94200	TC	7.05	7.05		000	N
94240		35.72	35.72		000	N
94240	26	7.96	7.96		000	N
94240	TC	27.75	27.75		000	N
94250		16.84	16.84		000	N
94250	26	3.64	3.64		000	N
94250	TC	13.19	13.19		000	N
94260		12.29	12.29		000	N
94260	26	4.09	4.09		000	N
94260	TC	8.42	8.42		000	N
94350		29.80	29.80		000	N
94350	26	7.96	7.96		000	N
94350	TC	21.84	21.84		000	N
94360		18.43	18.43		000	N
94360	26	7.96	7.96		000	N
94360	TC	10.47	10.47		000	N
94370		53.01	53.01		000	N
94370	26	7.96	7.96		000	N
94370	TC	45.27	45.27		000	N
94375		18.20	18.20		000	N
94375	26	9.55	9.55		000	N
94375	TC	8.64	8.64		000	N
94400		26.16	26.16		000	N
94400	26	12.06	12.06		000	N
94400	TC	14.11	14.11		000	N
94450		29.35	29.35		000	N
94450	26	12.06	12.06		000	N
94450	TC	17.06	17.06		000	N
94620		54.37	54.37		000	N
94620	26	19.57	19.57		000	N
94620	TC	34.81	34.81		000	N
94621		63.02	63.02		000	N
94621	26	43.68	43.68		000	N
94621	TC	19.34	19.34		000	N
94640		17.29	17.29		000	N
94642		39.85	39.85		000	N
94650		#	#		000	N
94651		#	#		000	N
94652		#	#		000	N
94656		36.17	36.17		000	N
94657		25.25	25.25		000	N

- Not Covered
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94660		32.99	23.21		000	N
94662		22.98	22.98		000	N
94664		12.74	12.74		000	N
94665		12.97	12.97		000	N
94667		23.89	23.89		000	N
94668		17.52	17.52		000	N
94680		33.90	33.90		000	N
94680	26	8.19	8.19		000	N
94680	TC	25.71	25.71		000	N
94681		36.86	36.86		000	N
94681	26	6.37	6.37		000	N
94681	TC	30.49	30.49		000	N
94690		38.90	38.90		000	N
94690	26	2.27	2.27		000	N
94690	TC	36.63	36.63		000	N
94720		37.31	37.31		000	N
94720	26	7.96	7.96		000	N
94720	TC	29.35	29.35		000	N
94725		24.12	24.12		000	N
94725	26	7.96	7.96		000	N
94725	TC	16.38	16.38		000	N
94750		30.26	30.26		000	N
94750	26	7.05	7.05		000	N
94750	TC	23.21	23.21		000	N
94760		Bundled	Bundled		000	N
94761		Bundled	Bundled		000	N
94762		18.43	18.43		000	N
94770		25.48	25.48		000	N
94770	26	4.55	4.55		000	N
94770	TC	21.16	21.16		000	N
94772		176.97	176.97		000	N
94772	26	79.64	79.64		000	N
94772	TC	97.32	97.32		000	N
94799		B.R.	B.R.		000	N
94799	26	B.R.	B.R.		000	N
94799	TC	B.R.	B.R.		000	N
95004		2.27	2.27		000	N
95010		13.88	5.23		000	N
95015		12.51	5.00		000	N
95024		3.41	3.41		000	N
95027		3.41	3.41		000	N
95028		5.23	5.23		000	N
95044		4.55	4.55		000	N
95052		5.69	5.69		000	N
95056		4.09	4.09		000	N
95060		7.96	7.96		000	N
95065		4.55	4.55		000	N
95070		50.28	50.28		000	N
95071		64.16	64.16		000	N
95075		40.27	31.85		000	N
95078		#	#		000	N
95115		8.87	8.87		000	N
95117		11.38	11.38		000	N
95120		#	#		000	N
95125		#	#		000	N
95130		#	#		000	N
95131		#	#		000	N
95132		#	#		000	N
95133		#	#		000	N
95134		#	#		000	N
95144		7.28	2.27		000	N
95145		12.29	2.27		000	N
95146		15.70	2.27		000	N
95147		22.52	2.27		000	N
95148		20.25	2.27		000	N
95149		25.48	2.27		000	N
95165		6.37	2.05		000	N
95170		7.51	2.05		000	N
95180		84.17	65.52		000	N
95199		B.R.	B.R.		000	N
95250		#	#		000	N
95805		183.82	183.82		000	N
95805	26	59.38	59.38		000	N
95805	TC	124.44	124.44		000	N
95806		#	#		000	N
95806	26	#	#		000	N
95806	TC	#	#		000	N
95807		290.52	290.52		000	N
95807	26	51.19	51.19		000	N
95807	TC	239.56	239.56		000	N
95808		286.88	286.88		000	N
95808	26	83.95	83.95		000	N
95808	TC	202.93	202.93		000	N
95810		477.07	477.07		000	N
95810	26	110.57	110.57		000	N
95810	TC	366.50	366.50		000	N
95811		489.58	489.58		000	N
95811	26	118.76	118.76		000	N
95811	TC	371.05	371.05		000	N
95812		117.62	117.62		000	N
95812	26	35.95	35.95		000	N
95812	TC	81.67	81.67		000	N

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95813		168.81	168.81		000	N
95813	26	56.88	56.88		000	N
95813	TC	111.93	111.93		000	N
95816		105.11	105.11		000	N
95816	26	36.40	36.40		000	N
95816	TC	68.93	68.93		000	N
95819		126.26	126.26		000	N
95819	26	36.40	36.40		000	N
95819	TC	90.09	90.09		000	N
95822		68.02	68.02		000	N
95822	26	36.40	36.40		000	N
95822	TC	31.62	31.62		000	N
95824		35.95	35.95		000	N
95824	26	25.93	25.93		000	N
95824	TC	10.01	10.01		000	N
95827		87.81	87.81		000	N
95827	26	35.49	35.49		000	N
95827	TC	52.32	52.32		000	N
95829		867.69	867.69		000	N
95829	26	212.03	212.03		000	N
95829	TC	655.65	655.65		000	N
95830		126.04	57.56		000	N
95831		18.43	9.33		000	N
95832		17.75	9.33		000	N
95833		23.21	16.38		000	N
95834		27.53	20.25		000	N
95851		16.38	5.69		000	N
95852		13.88	3.87		000	N
95857		27.53	17.75		000	N
95858		61.65	61.65		000	N
95858	26	52.32	52.32		000	N
95858	TC	9.33	9.33		000	N
95860		49.60	49.60		000	N
95860	26	32.53	32.53		000	N
95860	TC	17.06	17.06		000	N
95861		69.16	69.16		000	N
95861	26	52.10	52.10		000	N
95861	TC	17.06	17.06		000	N
95863		84.63	84.63		000	N
95863	26	63.24	63.24		000	N
95863	TC	21.38	21.38		000	N
95864		107.84	107.84		000	N
95864	26	67.34	67.34		000	N
95864	TC	40.72	40.72		000	N
95867		40.04	40.04		000	N
95867	26	26.84	26.84		000	N
95867	TC	13.19	13.19		000	N
95868		56.19	56.19		000	N
95868	26	40.27	40.27		000	N
95868	TC	15.92	15.92		000	N
95869		17.29	17.29		000	N
95869	26	12.51	12.51		000	N
95869	TC	5.00	5.00		000	N
95870		17.29	17.29		000	N
95870	26	12.51	12.51		000	N
95870	TC	5.00	5.00		000	N
95872		63.93	63.93		000	N
95872	26	50.05	50.05		000	N
95872	TC	13.88	13.88		000	N
95875		58.01	58.01		000	N
95875	26	36.63	36.63		000	N
95875	TC	21.38	21.38		000	N
95900		26.84	26.84		000	N
95900	26	14.33	14.33		000	N
95900	TC	12.51	12.51		000	N
95903		32.76	32.76		000	N
95903	26	20.02	20.02		000	N
95903	TC	12.74	12.74		000	N
95904		22.98	22.98		000	N
95904	26	11.60	11.60		000	N
95904	TC	11.38	11.38		000	N
95920		102.38	102.38		000	N
95920	26	72.80	72.80		000	N
95920	TC	29.57	29.57		000	N
95921		37.31	37.31		000	N
95921	26	28.66	28.66		000	N
95921	TC	8.64	8.64		000	N
95922		40.72	40.72		000	N
95922	26	32.08	32.08		000	N
95922	TC	8.64	8.64		000	N
95923		80.31	80.31		000	N
95923	26	30.03	30.03		000	N
95923	TC	50.28	50.28		000	N
95925		38.67	38.67		000	N
95925	26	17.97	17.97		000	N
95925	TC	20.70	20.70		000	N
95926		38.90	38.90		000	N
95926	26	18.20	18.20		000	N
95926	TC	20.70	20.70		000	N
95927		39.59	39.59		000	N
95927	26	18.88	18.88		000	N
95927	TC	20.70	20.70		000	N

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95930		27.53	27.53		000	N
95930	26	11.83	11.83		000	N
95930	TC	15.92	15.92		000	N
95933		37.77	37.77		000	N
95933	26	19.79	19.79		000	N
95933	TC	17.97	17.97		000	N
95934		22.29	22.29		000	N
95934	26	17.29	17.29		000	N
95934	TC	5.00	5.00		000	N
95936		23.43	23.43		000	N
95936	26	18.43	18.43		000	N
95936	TC	5.00	5.00		000	N
95937		29.12	29.12		000	N
95937	26	21.38	21.38		000	N
95937	TC	7.74	7.74		000	N
95950		155.16	155.16		000	N
95950	26	51.41	51.41		000	N
95950	TC	103.74	103.74		000	N
95951		1,059.01	1,059.01		000	N
95951	26	201.11	201.11		000	N
95951	TC	857.90	857.90		000	N
95953		247.52	247.52		000	N
95953	26	102.83	102.83		000	N
95953	TC	144.69	144.69		000	N
95954		159.70	159.70		000	N
95954	26	81.45	81.45		000	N
95954	TC	78.26	78.26		000	N
95955		78.03	78.03		000	N
95955	26	32.76	32.76		000	N
95955	TC	45.27	45.27		000	N
95956		362.63	362.63		000	N
95956	26	102.38	102.38		000	N
95956	TC	260.49	260.49		000	N
95957		105.56	105.56		000	N
95957	26	66.43	66.43		000	N
95957	TC	39.13	39.13		000	N
95958		181.55	181.55		000	N
95958	26	141.73	141.73		000	N
95958	TC	39.81	39.81		000	N
95961		132.63	132.63		000	N
95961	26	102.83	102.83		000	N
95961	TC	29.57	29.57		000	N
95962		139.00	139.00		000	N
95962	26	109.20	109.20		000	N
95962	TC	29.57	29.57		000	N
95965		B.R.	B.R.	PA	000	N
95965	26	256.85	256.85	PA	000	N
95965	TC	B.R.	B.R.	PA	000	N
95966		B.R.	B.R.	PA	000	N
95966	26	130.13	130.13	PA	000	N
95966	TC	B.R.	B.R.	PA	000	N
95967		B.R.	B.R.	PA	000	N
95967	26	113.98	113.98	PA	000	N
95967	TC	B.R.	B.R.	PA	000	N
95970		14.79	14.33		000	N
95971		#	#		000	N
95972		#	#		000	N
95973		#	#		000	N
95974		101.69	101.69		000	N
95975		57.56	57.56		000	N
95999		21.71	21.71		000	N
96000		#	#		000	N
96001		#	#		000	N
96002		#	#		000	N
96003		#	#		000	N
96004		#	#		000	N
96100		*Refer to MAA's*			000	N
96105		*Psychologist Billing*			000	N
96110		*Instructions in order*			000	N
96111		*to bill for*			000	N
96115		*Neuropsychological*			000	N
96117		*Testing.*			000	N
96150		#	#		000	N
96151		#	#		000	N
96152		#	#		000	N
96153		#	#		000	N
96154		#	#		000	N
96155		#	#		000	N
96400		3.56	3.56		000	N
96405		61.64	19.53		000	N
96406		95.89	30.95		000	N
96408		24.61	24.61		000	N
96410		39.07	39.07		000	N
96412		29.17	29.17		000	N
96414		34.00	34.00		000	N
96420		31.71	31.71		000	N
96422		31.45	31.45		000	N
96423		12.18	12.18		000	N
96425		36.27	36.27		000	N
96440		266.85	89.03		000	N
96445		280.80	84.22		000	N
96450		222.72	73.05		000	N

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96520		22.58	22.58		000	N
96530		26.89	26.89		000	N
96542		157.27	50.73		000	N
96545		Bundled	Bundled		000	N
96549		B.R.	B.R.		000	N
96567		#	#		000	N
96570		#	#		000	N
96571		#	#		000	N
96900		10.69	10.69		000	N
96902		Bundled	Bundled		000	N
96910		32.08	32.08		000	N
96912		36.17	36.17		000	N
96913		53.46	53.46		000	N
96999		B.R.	B.R.		000	N
97001		41.63	37.31		000	N
97002		22.29	20.48		000	N
97003		43.68	35.26		000	N
97004		#	#		000	N
97005		#	#		000	N
97006		#	#		000	N
97010		Bundled	Bundled		000	N
97012		8.42	8.42	LE	000	N
97014		8.64	8.64	LE	000	N
97016		7.51	7.51	LE	000	N
97018		4.32	4.32	LE	000	N
97020		2.73	2.73	LE	000	N
97022		10.01	10.01	LE	000	N
97024		2.73	2.73	LE	000	N
97026		2.73	2.73	LE	000	N
97028		3.41	3.41	LE	000	N
97032		10.69	10.69	LE	000	N
97033		8.87	8.87	LE	000	N
97034		8.19	8.19	LE	000	N
97035		6.83	6.83	LE	000	N
97036		14.33	14.33	LE	000	N
97039		6.37	6.37	LE	000	N
97110		16.38	16.38	LE	000	N
97112		17.06	17.06	LE	000	N
97113		17.97	17.97	LE	000	N
97116		14.11	14.11	LE	000	N
97124		12.97	12.97	LE	000	N
97139		9.78	9.78	LE	000	N
97140		15.24	15.24	LE	000	N
97150		10.92	10.92	LE	000	N
97504		16.38	16.38		000	N
97520		15.24	15.24	LE	000	N
97530		20.70	20.70	LE	000	N
97532		13.88	13.88	LE	000	N
97533		15.02	15.02	LE	000	N
97535		18.43	18.43	LE	000	N
97537		15.02	15.02	LE	000	N
97542		#	#		000	N
97545		#	#		000	N
97546		#	#		000	N
97601		25.93	25.93		000	N
97602		19.11	10.01		000	N
97703		16.15	16.15		000	N
97750		15.92	15.92		000	N
97780		#	#		000	N
97781		#	#		000	N
97799		B.R.	B.R.		000	N
97802		10.47	10.47		000	N
97803		10.47	10.47		000	N
97804		4.10	4.10		000	N
98925		19.11	13.42		000	N
98926		25.03	20.70		000	N
98927		32.08	27.30		000	N
98928		37.31	32.53		000	N
98929		42.54	36.40		000	N
98940		16.15	13.19		000	N
98941		22.07	19.34		000	N
98942		28.66	25.93		000	N
98943		#	#		000	N
99000		Bundled	Bundled		000	N
99001		Bundled	Bundled		000	N
99002		Bundled	Bundled		000	N
99024		Bundled	Bundled		000	N
99025		Bundled	Bundled		000	N
99050		7.96	7.96		000	N
99052		11.38	11.38		000	N
99054		11.38	11.38		000	N
99056		Bundled	Bundled		000	N
99058		Bundled	Bundled		000	N
99070		Bundled	Bundled		000	N
99071		Bundled	Bundled		000	N
99075		#	#		000	N
99078		Bundled	Bundled		000	N
99080		Bundled	Bundled		000	N
99082		5.49	5.49		000	N
99090		Bundled	Bundled		000	N
99091		Bundled	Bundled		000	N
99100		Bundled	Bundled		000	N

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99116		Bundled	Bundled		000	N
99135		Bundled	Bundled		000	N
99140		Bundled	Bundled		000	N
99141		Bundled	Bundled		000	N
99142		Bundled	Bundled		000	N
99170		87.13	53.23		000	N
99172		#	#		000	N
99173		Bundled	Bundled		000	N
99175		31.85	31.85		000	N
99183		72.57	72.57		000	N
99185		14.56	14.56		000	N
99186		45.50	45.50		000	N
99190		73.26	73.26		000	N
99191		44.82	44.82		000	N
99192		33.44	33.44		000	N
99195		10.01	10.01		000	N
99199		#	#		000	N
99201		19.21	12.67		000	N
99201	1C	33.48	22.08		000	N
99202		34.54	25.35		000	N
99202	1C	60.20	44.17		000	N
99203		51.51	38.63		000	N
99203	1C	89.76	67.32		000	N
99204		73.18	57.23		000	N
99204	1C	127.52	99.74		000	N
99205		93.00	76.24		000	N
99205	1C	162.07	132.86		000	N
99211		11.45	4.91		000	N
99211	1C	19.95	8.55		000	N
99212		20.44	12.88		000	N
99212	1C	35.62	22.44		000	N
99213		28.21	19.01		000	N
99213	1C	49.16	33.13		000	N
99214		44.35	31.27		000	N
99214	1C	77.30	54.50		000	N
99215		65.00	50.49		000	N
99215	1C	113.27	87.98		000	N
99217		40.04	40.04		000	N
99218		40.04	40.04		000	N
99219		66.89	66.89		000	N
99220		93.73	93.73		000	N
99221		40.49	40.49	EX*	000	N
99222		67.34	67.34	EX*	000	N
99223		93.96	93.96	EX*	000	N
99231		20.25	20.25		000	N
99232		33.44	33.44		000	N
99233		47.55	47.55		000	N
99234		80.99	80.99		000	N
99235		107.15	107.15		000	N
99236		133.32	133.32		000	N
99238		41.18	41.18		000	N
99239		56.65	56.65		000	N
99241		29.35	20.70		000	N
99242		54.37	42.09		000	N
99243		72.34	55.96		000	N
99244		102.38	82.81		000	N
99245		132.63	109.88		000	N
99251		21.61	21.61		000	N
99252		43.23	43.23		000	N
99253		59.15	59.15		000	N
99254		85.09	85.09		000	N
99255		117.16	117.16		000	N
99261		13.42	13.42		000	N
99262		27.07	27.07		000	N
99263		40.27	40.27		000	N
99271		26.16	14.56		000	N
99272		40.49	27.30		000	N
99273		53.92	38.90		000	N
99274		73.03	56.19		000	N
99275		92.36	73.94		000	N
99281		9.78	9.78		000	N
99282		16.38	16.38		000	N
99283		36.63	36.63		000	N
99284		57.33	57.33		000	N
99285		89.41	89.41		000	N
99288		#	#		000	N
99289		#	#		000	N
99290		#	#		000	N
99291		129.90	123.30		000	N
99292		67.34	61.43		000	N
99295		476.84	476.84		000	N
99296		243.42	243.42		000	N
99297		122.62	122.62		000	N
99298		85.99	85.99		000	N
99301		43.91	37.31		000	N
99302		59.61	50.28		000	N
99303		74.16	62.34		000	N
99311		25.03	18.65		000	N
99312		38.67	31.17		000	N
99313		52.78	44.13		000	N
99315		#	#		000	N
99316		#	#		000	N

- Not Covered
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99321		27.53	27.53		000	N
99322		39.36	39.36		000	N
99323		50.96	50.96		000	N
99331		24.57	24.57		000	N
99332		32.08	32.08		000	N
99333		39.81	39.81		000	N
99341		36.40	36.40		000	N
99342		55.06	55.06		000	N
99343		81.90	81.90		000	N
99344		106.02	106.02		000	N
99345		130.13	130.13		000	N
99347		28.89	28.89		000	N
99348		46.18	46.18		000	N
99349		71.44	71.44		000	N
99350		103.74	103.74		000	N
99354		74.39	56.19		000	N
99355		69.39	55.74		000	N
99356		53.69	53.69		000	N
99357		54.14	54.14		000	N
99358		Bundled	Bundled		000	N
99359		Bundled	Bundled		000	N
99360		27.30	27.30		000	N
99361		40.49	27.98		000	N
99362		72.34	56.19		000	N
99371		6.37	4.32		000	N
99372		12.51	8.42		000	N
99373		18.88	12.74		000	N
99374		Bundled	Bundled		000	N
99375		76.21	76.21		000	N
99377		Bundled	Bundled		000	N
99378		85.31	85.31		000	N
99379		Bundled	Bundled		000	N
99380		79.40	55.74		000	N
99381		59.39	36.90		000	N
99382		68.60	44.95		000	N
99383		77.82	52.06		000	N
99384		82.41	57.31		000	N
99385		87.01	60.52		000	N
99386		#	#		000	N
99387		#	#		000	N
99391		46.03	33.37		000	N
99392		55.25	40.40		000	N
99393		63.99	45.04		000	N
99394		68.60	50.19		000	N
99395		73.21	54.26		000	N
99396		#	#		000	N
99397		#	#		000	N
99401		25.25	15.24		000	N
99402		42.09	31.39		000	N
99403		#	#		000	N
99404		#	#		000	N
99411		#	#		000	N
99412		#	#		000	N
99420		#	#		000	N
99429		#	#		000	N
99431		56.28	56.28		000	N
99432		86.56	64.12		000	N
99433		29.92	29.92		000	N
99435		73.73	73.73		000	N
99436		46.18	46.18		000	N
99440		94.87	94.87		000	N
99450		#	#		000	N
99455		#	#		000	N
99456		#	#		000	N
99499		B.R.	B.R.		000	N
99500		#	#		000	N
99501		#	#		000	N
99502		#	#		000	N
99503		#	#		000	N
99504		#	#		000	N
99505		#	#		000	N
99506		#	#		000	N
99507		#	#		000	N
99508		#	#		000	N
99509		#	#		000	N
99510		#	#		000	N
99511		#	#		000	N
99512		#	#		000	N
99539		#	#		000	N
99551		#	#		000	N
99552		#	#		000	N
99553		#	#		000	N
99554		#	#		000	N
99555		#	#		000	N
99556		#	#		000	N
99557		#	#		000	N
99558		#	#		000	N
99559		#	#		000	N
99560		#	#		000	N
99561		#	#		000	N
99562		#	#		000	N
99563		#	#		000	N

- Not Covered
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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

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99564		#	#		000	N
99565		#	#		000	N
99566		#	#		000	N
99567		#	#		000	N
99568		#	#		000	N
99569		#	#		000	N
0001T		B.R.	B.R.		000	N
0002T		B.R.	B.R.		000	N
0003T		#	#		000	N
0005T		B.R.	B.R.		000	N
0006T		B.R.	B.R.		000	N
0007T		B.R.	B.R.		000	N
0008T		B.R.	B.R.		000	N
0009T		B.R.	B.R.	PA	000	N
0010T		B.R.	B.R.	PA	000	N
0012T		B.R.	B.R.	PA	000	N
0013T		B.R.	B.R.	PA	000	N
0014T		#	#		000	N
0016T		#	#		000	N
0017T		#	#		000	N
0018T		#	#		000	N
0019T		#	#		000	N
0020T		#	#		000	N
0021T		#	#		000	N
0023T		B.R.	B.R.		000	N
0024T		#	#		000	N
0025T		#	#		000	N
0026T		#	#		000	N
0028T		#	#		000	N
A4250		A.C.	A.C.		000	N
A4260		451.68	451.68		000	N
A4261		47.00	47.00		000	N
A4263		Bundled	Bundled		000	N
A4300		Bundled	Bundled		000	N
A4550		Bundled	Bundled		000	N
A4561		A.C.	A.C.		000	N
A4562		A.C.	A.C.		000	N
A4565		6.21	6.21		000	N
A4570		14.52	14.52		000	N
A4572		9.78	9.78		000	N
A4614		24.29	24.29		000	N
A4627		23.70	23.70		000	N
A4641		A.C.	A.C.		000	N
A4642		A.C.	A.C.		000	N
A4643		A.C.	A.C.		000	N
A4644		A.C.	A.C.		000	N
A4645		A.C.	A.C.		000	N
A4646		A.C.	A.C.		000	N
A4647		Bundled	Bundled		000	N
A9500		80.00	80.00		000	N
A9502		A.C.	A.C.		000	N
A9503		A.C.	A.C.		000	N
A9504		A.C.	A.C.		000	N
A9505		34.00	34.00		000	N
A9507		A.C.	A.C.		000	N
A9508		A.C.	A.C.		000	N
A9510		A.C.	A.C.		000	N
A9511		A.C.	A.C.		000	N
A9600		A.C.	A.C.		000	N
A9605		A.C.	A.C.		000	N
A9700		A.C.	A.C.		000	N
A9900		A.C.	A.C.	PA	000	N
G0001		#	#		000	N
G0002		88.04	15.70		000	N
G0004		#	#		000	N
G0005		#	#		000	N
G0006		#	#		000	N
G0007		#	#		000	N
G0008		#	#		000	N
G0009		#	#		000	N
G0010		#	#		000	N
G0015		137.86	137.86		000	N
G0025		Bundled	Bundled		000	N
G0026		4.24	4.24		000	N
G0027		#	#		000	N
G0030		B.R.	B.R.	PA	000	N
G0030	26	46.41	46.41	PA	000	N
G0030	TC	B.R.	B.R.	PA	000	N
G0031		B.R.	B.R.	PA	000	N
G0031	26	59.15	59.15	PA	000	N
G0031	TC	B.R.	B.R.	PA	000	N
G0032		B.R.	B.R.	PA	000	N
G0032	26	46.64	46.64	PA	000	N
G0032	TC	B.R.	B.R.	PA	000	N
G0033		B.R.	B.R.	PA	000	N
G0033	26	59.15	59.15	PA	000	N
G0033	TC	B.R.	B.R.	PA	000	N
G0034		B.R.	B.R.	PA	000	N
G0034	26	46.64	46.64	PA	000	N
G0034	TC	B.R.	B.R.	PA	000	N
G0035		B.R.	B.R.	PA	000	N
G0035	26	59.15	59.15	PA	000	N

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G0035	TC	B.R.	B.R.	PA	000	N
G0036		B.R.	B.R.	PA	000	N
G0036	26	46.41	46.41	PA	000	N
G0036	TC	B.R.	B.R.	PA	000	N
G0037		B.R.	B.R.	PA	000	N
G0037	26	59.15	59.15	PA	000	N
G0037	TC	B.R.	B.R.	PA	000	N
G0038		B.R.	B.R.	PA	000	N
G0038	26	46.41	46.41	PA	000	N
G0038	TC	B.R.	B.R.	PA	000	N
G0039		B.R.	B.R.	PA	000	N
G0039	26	59.38	59.34	PA	000	N
G0039	TC	B.R.	B.R.	PA	000	N
G0040		B.R.	B.R.	PA	000	N
G0040	26	46.41	46.41	PA	000	N
G0040	TC	B.R.	B.R.	PA	000	N
G0041		B.R.	B.R.	PA	000	N
G0041	26	59.15	59.15	PA	000	N
G0041	TC	B.R.	B.R.	PA	000	N
G0042		B.R.	B.R.	PA	000	N
G0042	26	46.41	46.41	PA	000	N
G0042	TC	B.R.	B.R.	PA	000	N
G0043		B.R.	B.R.	PA	000	N
G0043	26	59.15	59.15	PA	000	N
G0043	TC	B.R.	B.R.	PA	000	N
G0044		B.R.	B.R.	PA	000	N
G0044	26	46.41	46.41	PA	000	N
G0044	TC	B.R.	B.R.	PA	000	N
G0045		B.R.	B.R.	PA	000	N
G0045	26	59.15	59.15	PA	000	N
G0045	TC	B.R.	B.R.	PA	000	N
G0046		B.R.	B.R.	PA	000	N
G0046	26	46.41	46.41	PA	000	N
G0046	TC	B.R.	B.R.	PA	000	N
G0047		B.R.	B.R.	PA	000	N
G0047	26	59.15	59.15	PA	000	N
G0047	TC	B.R.	B.R.	PA	000	N
G0050		19.34	19.34		000	N
G0101		22.29	14.33		000	N
G0102		Bundled	Bundled		000	N
G0103		18.28	18.28		000	N
G0104		66.66	34.58		000	N
G0105		288.93	127.63		000	N
G0106		81.67	81.67		000	N
G0106	26	30.94	30.94		000	N
G0106	TC	50.73	50.73		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
G0107		3.23	3.23		000	N
G0108		#	#		000	N
G0109		#	#		000	N
G0110		#	#		000	N
G0111		#	#		000	N
G0112		#	#		000	N
G0113		#	#		000	N
G0114		#	#		000	N
G0115		#	#		000	N
G0116		#	#		000	N
G0117		Bundled	Bundled		000	N
G0118		Bundled	Bundled		000	N
G0120		81.67	81.67		000	N
G0120	26	30.94	30.94		000	N
G0120	TC	50.73	50.73		000	N
G0121		288.93	127.63		000	N
G0122		83.04	83.04		000	N
G0122	26	32.31	32.31		000	N
G0122	TC	50.73	50.73		000	N
G0123		#	#		000	N
G0124		#	#		000	N
G0125		1,360.00	1,360.00	EX	000	N
G0125	26	46.64	46.64	EX	000	N
G0125	TC	1,313.36	1,313.36	EX	000	N
G0127		#	#		000	N
G0128		#	#		000	N
G0130		26.62	26.62		000	N
G0130	26	7.74	7.74		000	N
G0130	TC	18.88	18.88		000	N
G0131		81.22	81.22		000	N
G0131	26	8.87	8.87		000	N
G0131	TC	72.57	72.57		000	N
G0132		26.62	26.62		000	N
G0132	26	7.74	7.74		000	N
G0132	TC	18.88	18.88		000	N
G0141		#	#		000	N
G0143		#	#		000	N
G0144		#	#		000	N
G0145		#	#		000	N
G0147		#	#		000	N
G0148		#	#		000	N
G0151		#	#		000	N
G0152		#	#		000	N
G0153		#	#		000	N
G0154		#	#		000	N
G0155		#	#		000	N

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G0156		#	#		000	N
G0166		#	#		000	N
G0167		#	#		000	N
G0168		63.93	14.79		000	N
G0173		B.R.	B.R.		000	N
G0175		0.00	0.00		000	N
G0176		0.00	0.00		000	N
G0177		0.00	0.00		000	N
G0185		B.R.	B.R.		090	N
G0186		B.R.	B.R.		090	N
G0187		B.R.	B.R.		090	N
G0192		#	#		000	N
G0193		B.R.	B.R.		000	N
G0194		B.R.	B.R.		000	N
G0195		79.85	52.55		000	N
G0196		79.85	52.55		000	N
G0197		79.63	48.23		000	N
G0198		49.14	36.17		000	N
G0199		67.34	36.17		000	N
G0200		79.63	48.23		000	N
G0201		49.14	36.17		000	N
G0202		79.40	79.40		000	N
G0202	26	22.75	22.75		000	N
G0202	TC	56.65	56.65		000	N
G0204		83.95	83.95		000	N
G0204	26	28.21	28.21		000	N
G0204	TC	55.74	55.74		000	N
G0206		67.80	67.80		000	N
G0206	26	22.75	22.75		000	N
G0206	TC	45.05	45.05		000	N
G0210		B.R.	B.R.	EX	000	N
G0210	26	48.23	48.23	EX	000	N
G0210	TC	B.R.	B.R.	EX	000	N
G0211		B.R.	B.R.	EX	000	N
G0211	26	48.23	48.23	EX	000	N
G0211	TC	B.R.	B.R.	EX	000	N
G0212		B.R.	B.R.	EX	000	N
G0212	26	48.23	48.23	EX	000	N
G0212	TC	B.R.	B.R.	EX	000	N
G0213		B.R.	B.R.	EX	000	N
G0213	26	48.23	48.23	EX	000	N
G0213	TC	B.R.	B.R.	EX	000	N
G0214		B.R.	B.R.	EX	000	N
G0214	26	48.23	48.23	EX	000	N
G0214	TC	B.R.	B.R.	EX	000	N
G0215		B.R.	B.R.	EX	000	N
G0215	26	48.23	48.23	EX	000	N
G0215	TC	B.R.	B.R.	EX	000	N
G0216		B.R.	B.R.	EX	000	N
G0216	26	48.23	48.23	EX	000	N
G0216	TC	B.R.	B.R.	EX	000	N
G0217		B.R.	B.R.	EX	000	N
G0217	26	48.23	48.23	EX	000	N
G0217	TC	B.R.	B.R.	EX	000	N
G0218		B.R.	B.R.	EX	000	N
G0218	26	48.23	48.23	EX	000	N
G0218	TC	B.R.	B.R.	EX	000	N
G0219		#	#	EX	000	N
G0219	26	#	#	EX	000	N
G0219	TC	#	#	EX	000	N
G0220		B.R.	B.R.	EX	000	N
G0220	26	48.23	48.23	EX	000	N
G0220	TC	B.R.	B.R.	EX	000	N
G0221		B.R.	B.R.	EX	000	N
G0221	26	48.23	48.23	EX	000	N
G0221	TC	B.R.	B.R.	EX	000	N
G0222		B.R.	B.R.	EX	000	N
G0222	26	48.23	48.23	EX	000	N
G0222	TC	B.R.	B.R.	EX	000	N
G0223		B.R.	B.R.	EX	000	N
G0223	26	48.23	48.23	EX	000	N
G0223	TC	B.R.	B.R.	EX	000	N
G0224		B.R.	B.R.	EX	000	N
G0224	26	48.23	48.23	EX	000	N
G0224	TC	B.R.	B.R.	EX	000	N
G0225		B.R.	B.R.	EX	000	N
G0225	26	48.23	48.23	EX	000	N
G0225	TC	B.R.	B.R.	EX	000	N
G0226		B.R.	B.R.	EX	000	N
G0226	26	48.23	48.23	EX	000	N
G0226	TC	B.R.	B.R.	EX	000	N
G0227		B.R.	B.R.	EX	000	N
G0227	26	48.23	48.23	EX	000	N
G0227	TC	B.R.	B.R.	EX	000	N
G0228		B.R.	B.R.	EX	000	N
G0228	26	48.23	48.23	EX	000	N
G0228	TC	B.R.	B.R.	EX	000	N
G0229		B.R.	B.R.	EX	000	N
G0229	26	48.23	48.23	EX	000	N
G0229	TC	B.R.	B.R.	EX	000	N
G0230		B.R.	B.R.	EX	000	N
G0230	26	48.23	48.23	EX	000	N

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2002 PROCEDURE CODES AND MAXIMUM ALLOWABLE FEES

Effective July 1, 2002

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
G0230	TC	B.R.	B.R.	EX	000	N
G0231		B.R.	B.R.	EX	000	N
G0231	26	48.23	48.23	EX	000	N
G0231	TC	B.R.	B.R.	EX	000	N
G0232		B.R.	B.R.	EX	000	N
G0232	26	48.23	48.23	EX	000	N
G0232	TC	B.R.	B.R.	EX	000	N
G0233		B.R.	B.R.	EX	000	N
G0233	26	48.23	48.23	EX	000	N
G0233	TC	B.R.	B.R.	EX	000	N
G0234		B.R.	B.R.	EX	000	N
G0234	26	48.23	48.23	EX	000	N
G0234	TC	B.R.	B.R.	EX	000	N
G0236		11.15	11.15		000	N
G0236	26	2.05	2.05		000	N
G0236	TC	9.10	9.10		000	N
G0237		#	#		000	N
G0238		#	#		000	N
G0239		#	#		000	N
G0240		#	#		000	N
G0241		#	#		000	N
G0242		B.R.	B.R.		000	N
G0243		B.R.	B.R.		000	N
G0244		#	#		000	N
G0245		#	#		000	N
G0246		#	#		000	N
G0247		#	#		000	N
G0248		#	#		000	N
G0249		#	#		000	N
G0250		#	#		000	N
G0251		#	#		000	N
G0252		#	#		000	N
G0252	26	#	#		000	N
G0252	TC	#	#		000	N
G0253		B.R.	B.R.	EX	000	N
G0253	26	48.23	48.23	EX	000	N
G0253	TC	B.R.	B.R.	EX	000	N
G0254		B.R.	B.R.	EX	000	N
G0254	26	48.23	48.23	EX	000	N
G0254	TC	B.R.	B.R.	EX	000	N
G9001		#	#		000	N
G9002		#	#		000	N
G9003		#	#		000	N
G9004		#	#		000	N
G9005		#	#		000	N
G9006		#	#		000	N

Procedure Code	Mod	NFS Setting Fee	FS Setting Fee	PA Req?	Global Days	Asst at Surgery
G9007		#	#		000	N
G9008		#	#		000	N
G9009		#	#		000	N
G9010		#	#		000	N
G9011		#	#		000	N
G9012		#	#		000	N
G9016		#	#		000	N
J0120		10.83	10.83		000	N
J0130		480.62	480.62		000	N
J0150		32.09	32.09		000	N
J0151		199.14	199.14		000	N
J0170		0.54	0.54		000	N
J0190		2.96	2.96		000	N
J0200		17.84	17.84		000	N
J0205		35.16	35.16		000	N
J0207		367.30	367.30		000	N
J0210		11.13	11.13		000	N
J0256		1.96	1.96		000	N
J0270		3.81	3.81		000	N
J0275		17.58	17.58		000	N
J0280		0.99	0.99		000	N
J0282		15.76	15.76		000	N
J0285		10.36	10.36		000	N
J0286		119.85	119.85		000	N
J0290		1.40	1.40		000	N
J0295		7.03	7.03		000	N
J0300		2.06	2.06		000	N
J0330		0.09	0.09		000	N
J0350		2,523.67	2,523.67		000	N
J0360		16.69	16.69		000	N
J0380		1.19	1.19		000	N
J0390		17.67	17.67		000	N
J0395		170.88	170.88		000	N
J0456		23.12	23.12		000	N
J0460		2.16	2.16		000	N
J0470		5.94	5.94		000	N
J0475		218.94	218.94		000	N
J0476		69.42	69.42		000	N
J0500		14.05	14.05		000	N
J0515		3.48	3.48		000	N
J0520		4.99	4.99		000	N
J0530		9.06	9.06		000	N
J0540		18.12	18.12		000	N
J0550		36.24	36.24		000	N
J0560		5.29	5.29		000	N
J0570		5.29	5.29		000	N

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J0580		10.60	10.60		000	N
J0585		4.37	4.37		000	N
J0587		8.23	8.23		000	N
J0600		37.56	37.56		000	N
J0610		1.15	1.15		000	N
J0620		4.82	4.82		000	N
J0630		27.90	27.90		000	N
J0635		12.35	12.35		000	N
J0640		16.41	16.41		000	N
J0670		0.68	0.68		000	N
J0690		1.57	1.57		000	N
J0692		8.01	8.01		000	N
J0694		9.71	9.71		000	N
J0696		13.28	13.28		000	N
J0697		6.01	6.01		000	N
J0698		11.40	11.40		000	N
J0702		4.56	4.56		000	N
J0704		2.11	2.11		000	N
J0706		2.95	2.95		000	N
J0710		1.46	1.46		000	N
J0713		6.32	6.32		000	N
J0715		5.77	5.77		000	N
J0720		5.91	5.91		000	N
J0725		3.12	3.12		000	N
J0735		51.68	51.68		000	N
J0740		752.94	752.94		000	N
J0743		14.52	14.52		000	N
J0744		12.82	12.82		000	N
J0745		1.05	1.05		000	N
J0760		6.62	6.62		000	N
J0770		37.38	37.38		000	N
J0780		2.79	2.79		000	N
J0800		4.27	4.27		000	N
J0835		14.37	14.37		000	N
J0850		598.15	598.15		000	N
J0895		12.65	12.65		000	N
J0900		1.53	1.53		000	N
J0945		0.80	0.80		000	N
J0970		A.C.	A.C.		000	N
J1000		3.61	3.61		000	N
J1020		2.23	2.23		000	N
J1030		6.11	6.11		000	N
J1040		10.09	10.09		000	N
J1050		31.24	31.24		000	N
J1055		49.99	49.99		000	N
J1056		24.02	24.02		000	N
J1060		3.48	3.48		000	N
J1070		4.04	4.04		000	N
J1080		7.02	7.02		000	N
J1095		2.16	2.16		000	N
J1100		0.23	0.23		000	N
J1110		13.67	13.67		000	N
J1120		27.77	27.77		000	N
J1160		4.41	4.41		000	N
J1165		0.68	0.68		000	N
J1170		1.20	1.20		000	N
J1180		7.37	7.37		000	N
J1190		182.24	182.24		000	N
J1200		0.75	0.75		000	N
J1205		9.37	9.37		000	N
J1212		39.11	39.11		000	N
J1230		0.70	0.70		000	N
J1240		0.65	0.65		000	N
J1245		26.26	26.26		000	N
J1250		10.68	10.68		000	N
J1260		15.41	15.41		000	N
J1270		5.14	5.14		000	N
J1320		2.06	2.06		000	N
J1325		16.92	16.92		000	N
J1327		13.35	13.35		000	N
J1330		4.22	4.22		000	N
J1364		5.56	5.56		000	N
J1380		8.36	8.36		000	N
J1390		0.64	0.64		000	N
J1410		51.62	51.62		000	N
J1435		0.18	0.18		000	N
J1436		59.63	59.63		000	N
J1438		138.58	138.58		000	N
J1440		176.04	176.04		000	N
J1441		280.44	280.44		000	N
J1450		85.12	85.12		000	N
J1452		890.00	890.00		000	N
J1455		11.37	11.37		000	N
J1460		1.60	1.60		000	N
J1470		3.20	3.20		000	N
J1480		4.81	4.81		000	N
J1490		6.41	6.41		000	N
J1500		8.01	8.01		000	N
J1510		9.61	9.61		000	N
J1520		11.21	11.21		000	N
J1530		12.82	12.82		000	N
J1540		14.42	14.42		000	N

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J1550		16.02	16.02		000	N
J1560		16.02	16.02		000	N
J1561		40.05	40.05		000	N
J1563		71.20	71.20		000	N
J1565		15.30	15.30		000	N
J1570		31.75	31.75		000	N
J1580		1.78	1.78		000	N
J1590		0.85	0.85		000	N
J1600		10.51	10.51		000	N
J1610		42.72	42.72		000	N
J1620		180.22	180.22		000	N
J1626		17.37	17.37		000	N
J1630		4.01	4.01		000	N
J1631		25.32	25.32		000	N
J1642		0.06	0.06		000	N
J1644		0.24	0.24		000	N
J1645		13.66	13.66		000	N
J1650		5.18	5.18		000	N
J1655		7.48	7.48		000	N
J1670		106.80	106.80		000	N
J1700		0.32	0.32		000	N
J1710		4.97	4.97		000	N
J1720		1.70	1.70		000	N
J1730		109.64	109.64		000	N
J1742		225.44	225.44		000	N
J1745		61.55	61.55		000	N
J1750		16.78	16.78		000	N
J1755		12.24	12.24		000	N
J1785		3.51	3.51		000	N
J1790		5.10	5.10		000	N
J1800		11.08	11.08		000	N
J1810		7.72	7.72		000	N
J1820		1.73	1.73		000	N
J1825		219.22	219.22		000	N
J1830		64.08	64.08		000	N
J1835		32.90	32.90		000	N
J1840		3.09	3.09		000	N
J1850		0.46	0.46		000	N
J1885		1.49	1.49		000	N
J1890		9.61	9.61		000	N
J1910		12.44	12.44		000	N
J1940		1.14	1.14		000	N
J1950		476.36	476.36		000	N
J1955		32.04	32.04		000	N
J1956		18.42	18.42		000	N
J1960		3.52	3.52		000	N
J1980		7.40	7.40		000	N
J1990		23.41	23.41		000	N
J2000		2.02	2.02		000	N
J2010		4.14	4.14		000	N
J2020		33.91	33.91	PA	000	N
J2060		2.95	2.95		000	N
J2150		2.60	2.60		000	N
J2175		0.52	0.52		000	N
J2180		4.07	4.07		000	N
J2210		3.63	3.63		000	N
J2250		0.81	0.81		000	N
J2260		46.02	46.02		000	N
J2270		0.84	0.84		000	N
J2271		7.71	7.71		000	N
J2275		6.94	6.94		000	N
J2300		1.35	1.35		000	N
J2310		2.12	2.12		000	N
J2320		5.99	5.99		000	N
J2321		11.98	11.98		000	N
J2322		23.89	23.89		000	N
J2352		131.60	131.60		000	N
J2355		221.39	221.39		000	N
J2360		14.44	14.44		000	N
J2370		1.98	1.98		000	N
J2400		16.76	16.76		000	N
J2405		5.71	5.71		000	N
J2410		2.62	2.62		000	N
J2430		249.08	249.08		000	N
J2440		6.66	6.66		000	N
J2460		0.86	0.86		000	N
J2500		24.38	24.38		000	N
J2510		7.06	7.06		000	N
J2515		0.54	0.54		000	N
J2540		0.82	0.82		000	N
J2543		4.81	4.81		000	N
J2545		87.89	87.89		000	N
J2550		0.87	0.87		000	N
J2560		2.53	2.53		000	N
J2590		0.72	0.72		000	N
J2597		3.86	3.86		000	N
J2650		0.74	0.74		000	N
J2670		3.66	3.66		000	N
J2680		13.20	13.20		000	N
J2690		5.16	5.16		000	N
J2700		0.62	0.62		000	N
J2710		0.61	0.61		000	N

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J2720		0.61	0.61		000	N
J2725		22.86	22.86		000	N
J2730		96.46	96.46		000	N
J2760		31.15	31.15		000	N
J2765		1.77	1.77		000	N
J2770		95.61	95.61		000	N
J2780		1.34	1.34		000	N
J2790		112.27	112.27		000	N
J2792		21.07	21.07		000	N
J2795		0.08	0.08		000	N
J2800		3.56	3.56		000	N
J2810		1.01	1.01		000	N
J2820		27.22	27.22		000	N
J2910		13.65	13.65		000	N
J2912		0.74	0.74		000	N
J2915		38.27	38.27		000	N
J2920		1.48	1.48		000	N
J2930		1.80	1.80		000	N
J2940		39.25	39.25	PA	000	N
J2941		39.25	39.25	PA	000	N
J2950		0.43	0.43		000	N
J2993		1,223.75	1,223.75		000	N
J2995		113.76	113.76		000	N
J2997		24.48	24.48		000	N
J3000		5.94	5.94		000	N
J3010		1.58	1.58		000	N
J3030		24.30	24.30		000	N
J3070		2.23	2.23		000	N
J3100		2,447.50	2,447.50		000	N
J3105		2.00	2.00		000	N
J3120		0.53	0.53		000	N
J3130		1.07	1.07		000	N
J3140		0.92	0.92		000	N
J3150		0.88	0.88		000	N
J3230		3.24	3.24		000	N
J3240		434.30	434.30		000	N
J3245		432.97	432.97		000	N
J3250		1.28	1.28		000	N
J3260		6.48	6.48		000	N
J3265		2.25	2.25		000	N
J3280		4.31	4.31		000	N
J3301		1.42	1.42		000	N
J3302		0.19	0.19		000	N
J3303		2.44	2.44		000	N
J3305		111.25	111.25		000	N
J3310		6.68	6.68		000	N
J3320		25.11	25.11		000	N
J3350		1.19	1.19		000	N
J3360		2.73	2.73		000	N
J3364		53.03	53.03		000	N
J3365		436.73	436.73		000	N
J3370		4.87	4.87		000	N
J3395		1,366.15	1,366.15		000	N
J3400		11.11	11.11		000	N
J3410		0.64	0.64		000	N
J3420		0.11	0.11		000	N
J3430		2.18	2.18		000	N
J3470		5.81	5.81		000	N
J3475		0.27	0.27		000	N
J3480		0.11	0.11		000	N
J3485		0.89	0.89		000	N
J3490		A.C.	A.C.		000	N
J3520		#	#		000	N
J3530		A.C.	A.C.		000	N
J3535		A.C.	A.C.		000	N
J3570		#	#		000	N
J7030		10.09	10.09		000	N
J7040		9.47	9.47		000	N
J7042		10.38	10.38		000	N
J7050		9.92	9.92		000	N
J7051		0.43	0.43		000	N
J7060		9.83	9.83		000	N
J7070		11.32	11.32		000	N
J7100		126.10	126.10		000	N
J7110		92.97	92.97		000	N
J7120		12.53	12.53		000	N
J7130		0.89	0.89		000	N
J7190		#	#		000	N
J7191		#	#		000	N
J7192		#	#		000	N
J7193		#	#		000	N
J7194		#	#		000	N
J7195		#	#		000	N
J7197		#	#		000	N
J7198		#	#		000	N
J7199		#	#		000	N
J7300		280.00	280.00		000	N
J7302		355.50	355.50		000	N
J7308		#	#		000	N
J7310		4,450.00	4,450.00		000	N
J7316		26.12	26.12		000	N
J7320		209.15	209.15		000	N

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J7330		#	#		000	N
J7340		A.C.	A.C.	PA	000	N
J7500		#	#		000	N
J7501		#	#		000	N
J7502		#	#		000	N
J7504		#	#		000	N
J7505		#	#		000	N
J7506		#	#		000	N
J7507		2.62	2.62		000	N
J7508		13.11	13.11		000	N
J7509		0.48	0.48		000	N
J7510		0.03	0.03		000	N
J7511		304.56	304.56		000	N
J7513		372.20	372.20		000	N
J7515		1.23	1.23		000	N
J7516		23.50	23.50		000	N
J7517		A.C.	A.C.		000	N
J7520		6.10	6.10		000	N
J7525		205.81	205.81		000	N
J7599		A.C.	A.C.		000	N
J7608		4.83	4.83		000	N
J7618		0.13	0.13		000	N
J7619		0.14	0.14		000	N
J7622		0.06	0.06		000	N
J7624		0.05	0.05		000	N
J7626		A.C.	A.C.		000	N
J7628		0.23	0.23		000	N
J7629		0.25	0.25		000	N
J7631		0.18	0.18		000	N
J7635		0.14	0.14		000	N
J7636		0.16	0.16		000	N
J7637		0.09	0.09		000	N
J7638		0.10	0.10		000	N
J7639		16.61	16.61		000	N
J7641		0.47	0.47		000	N
J7642		0.29	0.29		000	N
J7643		0.31	0.31		000	N
J7644		2.98	2.98		000	N
J7648		0.16	0.16		000	N
J7649		0.17	0.17		000	N
J7658		0.29	0.29		000	N
J7659		A.C.	A.C.		000	N
J7668		0.23	0.23		000	N
J7669		0.25	0.25		000	N
J7680		2.00	2.00		000	N
J7681		2.13	2.13		000	N
J7682		46.92	46.92		000	N
J7683		0.04	0.04		000	N
J7684		0.06	0.06		000	N
J7699		A.C.	A.C.		000	N
J7799		A.C.	A.C.		000	N
J8499		#	#		000	N
J8510		1.62	1.62		000	N
J8520		1.87	1.87		000	N
J8521		6.23	6.23		000	N
J8530		2.09	2.09		000	N
J8560		47.68	47.68		000	N
J8600		2.23	2.23		000	N
J8610		3.11	3.11		000	N
J8700		5.34	5.34		000	N
J8999		#	#		000	N
J9000		42.82	42.82		000	N
J9001		378.34	378.34		000	N
J9015		672.60	672.60		000	N
J9017		26.13	26.13		000	N
J9020		59.70	59.70		000	N
J9031		166.49	166.49		000	N
J9040		289.37	289.37		000	N
J9045		123.60	123.60		000	N
J9050		127.26	127.26		000	N
J9060		42.74	42.74		000	N
J9062		213.73	213.73		000	N
J9065		58.83	58.83		000	N
J9070		5.98	5.98		000	N
J9080		11.34	11.34		000	N
J9090		23.81	23.81		000	N
J9091		47.64	47.64		000	N
J9092		95.27	95.27		000	N
J9093		6.13	6.13		000	N
J9094		11.64	11.64		000	N
J9095		24.42	24.42		000	N
J9096		48.86	48.86		000	N
J9097		97.75	97.75		000	N
J9100		5.94	5.94		000	N
J9110		23.75	23.75		000	N
J9120		13.23	13.23		000	N
J9130		12.68	12.68		000	N
J9140		23.94	23.94		000	N
J9150		76.63	76.63		000	N
J9151		64.60	64.60		000	N
J9160		999.88	999.88		000	N
J9165		14.41	14.41		000	N

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J9170		312.72	312.72		000	N
J9180		667.08	667.08		000	N
J9181		10.45	10.45		000	N
J9182		103.73	103.73		000	N
J9185		311.13	311.13		000	N
J9190		2.47	2.47		000	N
J9200		142.50	142.50		000	N
J9201		112.05	112.05		000	N
J9202		446.49	446.49		000	N
J9206		140.70	140.70		000	N
J9208		161.35	161.35		000	N
J9209		36.48	36.48		000	N
J9211		432.83	432.83		000	N
J9212		4.09	4.09		000	N
J9213		34.88	34.88		000	N
J9214		13.50	13.50		000	N
J9215		7.86	7.86		000	N
J9216		285.65	285.65		000	N
J9217		446.69	446.69		000	N
J9218		75.31	75.31		000	N
J9219		5,399.80	5,399.80		000	N
J9230		12.01	12.01		000	N
J9245		416.77	416.77		000	N
J9250		0.62	0.62		000	N
J9260		6.18	6.18		000	N
J9265		164.07	164.07		000	N
J9266		1,321.65	1,321.65		000	N
J9268		1,787.19	1,787.19		000	N
J9270		93.80	93.80		000	N
J9280		121.65	121.65		000	N
J9290		413.30	413.30		000	N
J9291		869.25	869.25		000	N
J9293		266.19	266.19		000	N
J9300		2,024.69	2,024.69		000	N
J9310		454.55	454.55		000	N
J9320		117.64	117.64		000	N
J9340		116.97	116.97		000	N
J9350		695.01	695.01		000	N
J9355		52.83	52.83		000	N
J9357		526.68	526.68		000	N
J9360		4.10	4.10		000	N
J9370		32.07	32.07		000	N
J9375		52.16	52.16		000	N
J9380		154.57	154.57		000	N
J9390		99.28	99.28		000	N
J9600		2,603.67	2,603.67		000	N
J9999		A.C.	A.C.		000	N
L8600		650.00	650.00		000	N
L8603		333.13	333.13		000	N
L8606		170.87	170.87		000	N
L9900		A.C.	A.C.		000	N
P3000		14.60	14.60		000	N
P3001		14.11	14.11		000	N
P9010		55.11	55.11		000	N
P9011		A.C.	A.C.		000	N
P9012		26.20	26.20		000	N
P9016		45.53	45.53		000	N
P9017		47.82	47.82		000	N
P9019		A.C.	A.C.		000	N
P9020		A.C.	A.C.		000	N
P9021		66.64	66.64		000	N
P9022		20.50	20.50		000	N
P9023		A.C.	A.C.		000	N
P9031		A.C.	A.C.		000	N
P9032		A.C.	A.C.		000	N
P9033		A.C.	A.C.		000	N
P9034		A.C.	A.C.		000	N
P9035		A.C.	A.C.		000	N
P9036		A.C.	A.C.		000	N
P9037		A.C.	A.C.		000	N
P9038		A.C.	A.C.		000	N
P9039		A.C.	A.C.		000	N
P9040		A.C.	A.C.		000	N
P9041		A.C.	A.C.		000	N
P9043		A.C.	A.C.		000	N
P9044		A.C.	A.C.		000	N
P9045		A.C.	A.C.		000	N
P9046		A.C.	A.C.		000	N
P9047		A.C.	A.C.		000	N
P9048		A.C.	A.C.		000	N
P9050		A.C.	A.C.		000	N
P9612		2.45	2.45		000	N
P9615		#	#		000	N
Q0111		4.24	4.24		000	N
Q0112		4.24	4.24		000	N
Q0113		5.37	5.37		000	N
Q0114		7.10	7.10		000	N
Q0115		9.84	9.84		000	N
Q0136		11.53	11.53		000	N
Q0144		A.C.	A.C.		000	N
Q0163		0.02	0.02		000	N
Q0164		0.53	0.53		000	N

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Q0165		0.81	0.81		000	N
Q0166		41.88	41.88		000	N
Q0167		2.98	2.98		000	N
Q0168		5.90	5.90		000	N
Q0169		0.07	0.07		000	N
Q0170		0.03	0.03		000	N
Q0171		0.24	0.24		000	N
Q0172		0.39	0.39		000	N
Q0173		0.33	0.33		000	N
Q0174		0.48	0.48		000	N
Q0175		0.57	0.57		000	N
Q0176		0.68	0.68		000	N
Q0177		0.19	0.19		000	N
Q0178		0.20	0.20		000	N
Q0179		24.74	24.74		000	N
Q0180		65.24	65.24		000	N
Q0181		A.C.	A.C.		000	N
Q0183		#	#		000	N
Q0184		#	#		000	N
Q0187		1,495.20	1,495.20		000	N
Q2001		27.86	27.86		000	N
Q2002		13.35	13.35		000	N
Q2003		183.95	183.95		000	N
Q2004		22.05	22.05		000	N
Q2005		331.53	331.53		000	N
Q2006		496.94	496.94		000	N
Q2007		25.49	25.49		000	N
Q2008		682.33	682.33		000	N
Q2009		8.01	8.01		000	N
Q2010		25.67	25.67		000	N
Q2011		0.84	0.84		000	N
Q2012		130.53	130.53		000	N
Q2013		14.16	14.16		000	N
Q2014		14.78	14.78		000	N
Q2017		182.95	182.95		000	N
Q2018		#	#		000	N
Q2019		1,171.06	1,171.06		000	N
Q2020		13.97	13.97		000	N
Q2021		116.63	116.63		000	N
Q2022		0.89	0.89		000	N
Q3001		A.C.	A.C.		000	N
Q3002		A.C.	A.C.		000	N
Q3003		A.C.	A.C.		000	N
Q3004		A.C.	A.C.		000	N
Q3005		A.C.	A.C.		000	N
Q3006		A.C.	A.C.		000	N
Q3007		A.C.	A.C.		000	N
Q3008		A.C.	A.C.		000	N
Q3009		A.C.	A.C.		000	N
Q3010		A.C.	A.C.		000	N
Q3011		A.C.	A.C.		000	N
Q3012		A.C.	A.C.		000	N
Q3014		#	#		000	N
Q9920		11.53	11.53		000	N
Q9921		11.53	11.53		000	N
Q9922		11.53	11.53		000	N
Q9923		11.53	11.53		000	N
Q9924		11.53	11.53		000	N
Q9925		11.53	11.53		000	N
Q9926		11.53	11.53		000	N
Q9927		11.53	11.53		000	N
Q9928		11.53	11.53		000	N
Q9929		11.53	11.53		000	N
Q9930		11.53	11.53		000	N
Q9931		11.53	11.53		000	N
Q9932		11.53	11.53		000	N
Q9933		11.53	11.53		000	N
Q9934		11.53	11.53		000	N
Q9935		11.53	11.53		000	N
Q9936		11.53	11.53		000	N
Q9937		11.53	11.53		000	N
Q9938		11.53	11.53		000	N
Q9939		11.53	11.53		000	N
Q9940		11.53	11.53		000	N
R0070		43.69	43.69		000	N
R0075		14.19	14.19		000	N
R0076		Bundled	Bundled		000	N
S0079		A.C.	A.C.		000	N
S0087		A.C.	A.C.		000	N
S0088		A.C.	A.C.		000	N
S0090		#	#		000	N
S0091		A.C.	A.C.		000	N
S0092		A.C.	A.C.		000	N
S0093		A.C.	A.C.	PA	000	N
S0155		A.C.	A.C.		000	N
S0170		A.C.	A.C.		000	N
S0171		A.C.	A.C.		000	N
S0172		A.C.	A.C.		000	N
S0173		A.C.	A.C.		000	N
S0174		A.C.	A.C.		000	N
S0175		A.C.	A.C.		000	N
S0176		A.C.	A.C.		000	N

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S0177		A.C.	A.C.		000	N
S0178		A.C.	A.C.		000	N
S0179		A.C.	A.C.		000	N
S0181		A.C.	A.C.		000	N
S0182		A.C.	A.C.		000	N
S0183		A.C.	A.C.		000	N
S0187		A.C.	A.C.		000	N
S0189		A.C.	A.C.		000	N
S0190		80.10	80.10		000	N
S0191		0.96	0.96		000	N
S3600		3.35	3.35		000	N
S4989		116.31	116.31		000	N
V2623		853.41	853.41		000	N
V2624		64.39	64.39		000	N
V2625		391.46	391.46		000	N
V2626		211.01	211.01		000	N
V2627		1,362.83	1,362.83		000	N
V2628		321.79	321.79		000	N
V2630		342.42	342.42		000	N
V2631		342.42	342.42		000	N
V2632		342.42	342.42		000	N
0002M		47.76	47.76		000	N
0025M		40.50	40.50		000	N
0026M		20.25	20.25		000	N
0122D		18.93	18.93		000	N
0252M		18.70	18.70		000	N
0310M		103.99	103.99		000	N
0857J		10.57	10.57		000	N
1112J		A.C.	A.C.		000	N
1600L		61.85	61.85		000	N
1601L		111.20	111.20		000	N
1602L		43.80	43.80		000	N
1603L		B.R.	B.R.		000	N
1604L		150.96	150.96		000	N
1949M		950.00	950.00		000	N
2978M		9.00	9.00		000	N
2979M		11.00	11.00		000	N
2980M		14.25	14.25		000	N
2981M		16.50	16.50		000	N
2982M		1.35	1.35		000	N
2983M		1.75	1.75		000	N
2984M		2.65	2.65		000	N
2985M		3.00	3.00		000	N
2986M		3.50	3.50		000	N
2987M		3.75	3.75		000	N
4693M		131.95	78.49		000	N
4960A		A.C.	A.C.		000	N
5930M		50.00	50.00		000	N
5935M		282.61	282.61		000	N
5941M		282.61	282.61		000	N
5947M		1,039.52	1,039.52		045	N
5951M		74.31	74.31		000	N
5952M		126.28	126.28		000	N
5953M		30.55	30.55		000	N
5954M		37.84	37.84		000	N
5955M		91.18	91.18		000	N
5959M		282.61	282.61		000	N
7612M		8.74	8.74		000	N
7698M		B.R.	B.R.		000	N
9011M		35.87	35.87		000	N
9012M		21.37	21.37		000	N
9020M		27.63	27.63		000	N
9083M		36.12	36.12		000	N
9084M		94.26	94.26		000	N
9085M		19.76	19.76		000	N
9086M		29.97	29.97		000	N
9087M		49.42	49.42		000	N
9089M		66.71	66.71		000	N
9254M		104.47	104.47		000	N
9274M		15.17	15.17		000	N
9275M		123.53	123.53	LE	000	N
9276M		46.33	46.33	LE	000	N
9277M		140.75	140.75	LE	000	N
9301M		12.68	12.68		000	N
9302M		3.69	3.69		000	N
9303M		9.28	9.28		000	N
9593M		28.42	28.42		000	N
9912M		45.00	45.00		000	N

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State-Unique and Selected HCPCS Procedure Codes

MAA has moved the fees for all reimbursable HCPCS codes and state-unique codes to the complete list of procedure codes and maximum allowable fees. All state-unique procedure code descriptions and limitations, and those HCPCS codes with special limitations or requirements, are listed below. However, this list may not be all-inclusive. Limitations or requirements detailed in MAA's billing instructions and/or WAC remain applicable.

Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
Developmental Disabilities Program		
0310M	Annual physical exam (Use diagnosis code V93.0)	$103.99
Tuberculosis Treatment Services		
9011M	Initial TB examination	$35.87
9012M	Follow-up TB examination	$21.37
AIDS Counseling Services		
9020M	Risk factor reduction intervention for HIV/AIDS clients only one precounselinng session and one postcounseling session (Use diagnosis code V65.9 if lab test results are negative.)	$27.63
Detox		
0025M	Detox physician care - admission	$40.50
0026M	Detox physician care – follow-up	$20.25
EPSDT		
0252M	Interperiodic screening	$18.70
Clozaril		
0857J	Clozaril case coordination	$10.57

Anesthesia

Effective for dates of service on and after July 1, 2002, state-unique codes 5911M – 5915M have been discontinued and replaced with CPT codes. Please refer to Section F for the appropriate coding.

Cast Materials Only – Plaster or Fiberglass

The reimbursement for cast materials is based on the size and number of rolls used in preparing a cast instead of the type of cast prepared. The maximum allowable fees are for the cost of one roll and whether the cast was fiberglass or plaster. When billing, use the procedure code for the size of rolls and the number of each used. Below are the procedure codes that should be used when billing for cast materials:

Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
2978M	Fiberglass, 2" x 4 yd roll	$9.00
2979M	Fiberglass, 3" x 4 yd roll	$11.00
2980M	Fiberglass, 4" x 4 yd roll	$14.25
2981M	Fiberglass, 5" x 4 yd roll	$16.56
2982M	Plaster, 2" x 3 yd roll	$1.35
2983M	Plaster, 3" x 3 yd roll	$1.75
2984M	Plaster, 4" x 5 yd roll	$2.65
2985M	Plaster, 5" x 5 yd roll	$3.00
2986M	Plaster, 6" x 5 yd roll	$3.50
2987M	Plaster, 8" x 5 yd roll	$3.75

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
Maternity Care And Delivery		
5930M	Initial prenatal assessment; includes medical history, physical examination, and identification of risk factors	$50.00
5941M	High-risk vaginal delivery, add-on fee (to be used by delivering physician only)	$282.61
5935M	Labor management	$282.61
5947M	Antepartum and postpartum care and assist at cesarean section **(do not use modifier 80)**	$1,039.52
5951M	Routine antepartum care, first and second trimester, per month	$74.31
5952M	Routine antepartum care, third trimester, per month	$126.28
5953M	High-risk management, first trimester, add-on, per month	$30.55
5954M	High-risk management, second trimester, add-on, per month	$37.84
5955M	High-risk management, third trimester, add-on, per month	$91.18
Note:	Bill one unit per calendar month. Use a separate detail line for each calendar month, indicating the date of service. If you perform total obstetrical care including antepartum, delivery and postpartum, you may bill one of the global obstetric codes.	
5959M	High-risk cesarean section, add-on fee	$282.61
Laboratory Stat		
Effective for dates of service on and after July 1, 2002, state-unique code 8949M is discontinued and replaced with HCPCS code S3600.		
S3600	Stat lab request	$3.35

Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
Radiology		
7612M	Transportation and set-up of portable radiologic equipment; at bedside or in operating room not otherwise specified **(Included in DRG for inpatient services. Outpatient services are payable by special agreement only.)**	$8.74
7698M	Transportation and set-up of portable equipment, ultrasound, bedside or operating room **(Included in DRG for inpatient services. Outpatient services are paid by special agreement only.)** For each additional patient, use R0075.	B.R.
R0070	Transportation of portable x-ray equipment and personnel to home or nursing home, per trip to facility or location; one patient seen ***(MAA's fee includes set-up)***	$43.69
R0075	Transportation of portable x-ray equipment and personnel to home or nursing home, per trip to facility or location; more than one patient seen, per patient ***(MAA's fee includes set-up)***	$14.19
R0076	Transportation of portable EKG to facility or location, per patient (payable only with 93000 or 93005) ***(MAA's fee includes set-up)***	Bundled
Surgery		
4693M	Infared coagulation internal hemorrhoids	Non-facility $131.95 Facility: $78.49
Physical Medicine		
0002M	Custom splint (cockup and/or dynamic)	$47.76

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting

Family Contraceptive Management

J1055	Depro Provera, 150 mg contraceptive injection; allowed once every 65 days.	$49.99

Effective for dates of service on and after May 1, 2002, state-unique code 1111J for Lunelle has been discontinued and replaced with HCPCS code J1056.

J1056	Lunelle, monthly contraceptive injection; allowed once every 23 days	$24.02
1112J	Emergency Contraception Pills (ECP)	Acquisition Cost

Norplant/IUC/Diaphragm

A4260	Levonorgestrel (contraceptive) implants systems, including implants & supplies *One Norplant System allowed in 5 years.*	$451.68

Effective for dates of service on and after July 1, 2002, state-unique code 9911M for a non-copper IUD is discontinued and replaced with HCPCS code S4989.

S4989	Intrauterine device (Progestacert) (For intrauterine copper contraceptive device, see J7300)	$116.31
9912M	Diaphragm	$45.00

Effective for dates of service on and after July 1, 2002, state-unique code 9913M for Mirena IUD is discontinued and replaced with HCPCS code J7302.

J7302	Mirena IUD	$355.50
A4261	Cervical cap for contraceptive use	$47.00

Drug-Induced Abortions (RU-486)

S0190	Mifeprestone, oral, 200 mg	$80.10
S0191	Misoprostol, oral, 200 mcg	$0.96

Psychiatry

9089M	Certification activities related to elective inpatient psychiatric admission for clients younger than 21 years of age to an inpatient psychiatric facility. Billed by a member of a certification team (e.g., physician, psychiatrist).	$66.71
0070M	Psychological evaluation	$67.80

Involuntary Treatment Act (ITA)

9083M	Involuntary Treatment Act physical exam	$36.12
9084M	Involuntary Treatment Act psychiatric admission and evaluation	$94.26
9085M	Involuntary Treatment Act court testimony, under 20 minutes	$19.76
9086M	Involuntary Treatment Act court testimony, 20-50 minutes	$29.97
9087M	Involuntary Treatment Act court testimony, over 50 minutes	$49.42

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
Ophthalmology		
9274M	Materials used for glasses repair (specify materials billed)	$15.17
9275M	Fitting (including dispensing) fee for therapeutic bandage lenses. **(Including 14-day follow-up care.)**	$123.53
9276M	Fitting (including dispensing) fee for contact lenses. **(Including 30-day follow-up care for training period.)**	$46.33
9277M	Fitting of contact lenses for treatment of disease. **(Including 90-day follow-up care.)**	$140.75
Cardiography		
9301M	Computer-simulated ECG with interpretation and report	$12.68
9302M	Transmission and assimilation only	$3.69
9303M	Over-reading (interpretation) and report only	$9.28
Application of Fluoride Varnish (physician and ARNPs)		
0122D	Application of fluoride varnish (Physician and ARNPs). Allowed 3 times in a 12-month period for children 18 years of age and younger.	$18.93
Hyalgan/Synvisc (See page C17 for policy)		
J7316	Sodium Hyalruonate, 5 mg, for intra-articular injection (Hyalgan) ***Maximum of 5 injections** ***Maximum of 20 units** ***5 mg = one unit**	$26.12
J7320	Hylan G-F 20, 16 mg, for intra-articular injection (Synvisc) ***Maximum of 3 injections.** ***One injection = one unit**	$209.15
Verteporfin		
J3395	Injection, verteporfin, 15 mg **Limited to ICD-9 diagnosis code 362.52 (exudative senile macular degeneration)**	$1,366.15
Indwelling Catheter		
G0002	Insertion, temporary indwelling catheter, Foley type • Payable only when performed in an office setting; • Not allowed if performed on the same day as a major surgery; • Not allowed if performed during the post-operative period of a major surgery.	$88.04
Neurology		
9593M	F-wave-auditory brainstem	$28.42
Vestibular Function Test, With Recording (e.g., ENG, PENG, And Medical Diagnostic Evaluation)		
9254M	Electronystamographic testing, complete with recording and interpretation (ENG)	$104.47

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting	Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting

Podiatry/Orthotics

1600L Single fabricated orthotic $61.85
- ***Must include modifier RT or LT.***
- *Limited to 2 units per client, per lifetime.*
- *Limited to 1 unit per date of service.*
- *Do not bill in combination with 1601L.*

1601L Pair fabricated orthotic $111.20
- *Must include fabrication for both right and left feet.*
- *Limited to 1 unit per calendar year.*
- *Do not bill in combination with 1600L.*

1602L Impression casting, each foot $43.80
- ***Must include modifier RT or LT.***
- *Limited to 2 units per client, per lifetime.*
- *Limited to 1 unit per date of service.*
- *Do not bill in combination with 1604L.*

1603L Prefabricated orthotic B.R.
(attach invoice if over $50.00)
- ***Must include modifier RT or LT.***
- *Limited to 2 units per client, per calendar year.*
- *Do not bill in combination with 1600L or 1601L.*

1604L Impression casting, custom shoes, pair $150.96
- *Must include fabrication for both right and left feet.*
- *Limited to 1 unit per calendar year.*
- *Do not bill in combination with 1602L.*

MAA reimburses podiatrists for state-unique codes 1600L, 1602L, and 1603L only when they are billed with one of the following modifiers: (RT) or (LT).

NOTE: **Orthotic fees include dispensing.** Any other procedure codes for prosthetic/orthotics must be billed using a prosthetic/orthotic provider number.

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Bundled Services Not Paid Separately

☞ **NOTE: MAA is currently in the process of evaluating and adopting Medicare's Correct Coding Initiative (CCI) policies and edits. Therefore, any procedures or services that are currently bundled by Medicare are bundled by MAA, as well.**

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Supplies Included in Office Call (Bundled Supplies)

Note:

*Items with an asterisk on the following list are considered prosthetics when used for a **permanent** condition. They may be paid for permanent conditions if they are provided in the physician's office. They are not considered prosthetics if the condition is acute or temporary. Please indicate on the claim if billing for a permanent condition.

Examples would be Foley catheters and accessories for permanent incontinence or ostomy supplies for permanent conditions. The Foley catheter used to obtain a urine specimen, used after surgery, or used to treat an acute obstruction would not be paid separately because it is treating a temporary problem. If a patient had an indwelling Foley catheter for permanent incontinence, and a problem developed for which the physician was required to replace the Foley, then the catheter would be considered a prosthetic and would be paid separately.

HCPCS Code	Description
A4206	Syringe with needle, sterile 1cc
A4207	Syringe with needle, sterile 2cc
A4208	Syringe with needle, sterile 3cc
A4209	Syringe with needle, sterile 5cc
A4211	Supplies for self-administered injections
A4212	Huber-type needle, each
A4213	Syringe, sterile, 20 CC or greater
A4214	Sterile saline or water, 30 CC
A4215	Needles only, sterile, any size
A4220	Refill kit for implantable infusion pump
A4244	Alcohol or peroxide, per pint
A4245	Alcohol wipes, per box
A4246	Betadine or phisohex solution
A4247	Betadine or iodine swabs/wipes
A4253	Blood glucose test
A4256	Normal, low and high cal solution
A4258	Spring-powered device for lancet, each
A4259	Lancets, per box
A4262	Temporary lacrimal duct implant, each
A4263	Permanent lacrimal duct implant, each
A4265	Paraffin, per pound
A4270	Disposable endoscope sheath, each
A4300	Implantable access partial/catheter
A4301	Implantable access total system
A4305	Disposable drug delivery system, flow rate 50 ML or more per hour

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HCPCS Code	Description
A4306	Disposable drug delivery system, flow rate 5 ML or less per hour
A4310	Insertion tray w/o drainage bag
A4311	Insertion tray without drainage bag
A4312	Insertion tray without drainage bag
A4313	Insertion tray without drainage bag
A4314	Insertion tray with drainage bag
A4315	Insertion tray with drainage bag
A4316	Insertion tray with drainage bag
A4320	Irrigation tray for bladder
A4322	Irrigation syringe, bulb or piston
A4323	Sterile saline irrigation solution
A4326*	Male external catheter
A4327*	Female external urinary collection metal cup, each
A4328*	Female external urinary collection pouch, each
A4329*	External catheter starter set
A4330	Perinal fecal collection pouch
A4335*	Incontinence supply; miscellaneous
A4338*	Indwelling catheter; Foley type
A4340*	Indwelling catheter; Spec type
A4344*	Indwelling catheter; Foley type
A4346*	Indwelling catheter; Foley type
A4347*	Male external catheter
A4351	Intermittent urinary catheter
A4352	Intermittent urinary catheter
A4353	Catheter insert tray with cath/tube/bag
A4354	Insertion tray with drainage bag
A4355	Irrigation tubing set
A4356*	External urethral clamp device
A4357*	Bedside drainage bag, day or night
A4358*	Urinary leg bag; vinyl
A4359*	Urinary suspensory, without leg bag
A4361*	Ostomy faceplate
A4362*	Skin barrier; solid, 4 x 4
A4364*	Adhesive for ostomy or catheter
A4365*	Ostomy bag, disposable, closed
A4367*	Ostomy belt
A4368*	Stoma wicks, each
A4397	Irrigation supply; sleeve
A4398*	Irrigation supply; bags
A4399*	Irrigation supply; cone/catheter
A4400*	Ostomy irrigation set
A4402	Lubricant
A4404*	Ostomy rings
A4421*	Ostomy supply; miscellaneous
A4454	Tape, all tapes, all sizes
A4455	Adhesive remover or solvent
A4460	Elastic bandage
A4465	Non-elastic binder for extremity
A4470	Gravlee jet washer
A4480	Vabra aspirator
A4550	Surgical tray

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CPT Code	Description
A4556	Electrodes (e.g., apnea monitor)
A4557	Lead wires (e.g., apnea monitor)
A4558	Conductive paste or gel
A4647	Supply of paramagnetic contrast material (e.g., gadolinium)
A4649	Surgical supply; miscellaneous
A5051*	Pouch, closed; with barrier
A5052*	Pouch, closed; without barrier
A5053*	Pouch, closed; use on faceplate
A5054*	Pouch, closed; use on barrier
A5055*	Stoma cap
A5061*	Pouch, drainable; with barrier
A5062*	Pouch, drainable; without barrier
A5063*	Pouch, drainable; use on barrier
A5064*	Pouch, drainable; with faceplate
A5071*	Pouch, urinary; with barrier
A5072*	Pouch, urinary; without barrier
A5073*	Pouch, urinary; use on barrier
A5074*	Pouch, urinary; with faceplate
A5075*	Pouch, urinary; use on faceplate
A5081*	Continent device; plug
A5082*	Continent device; catheter
A5093*	Ostomy accessory; convex insert
A5102*	Bedside drainage bottle
A5105*	Urinary supensory; with leg bag
A5112*	Urinary leg bag; latex
A5113*	Leg strap; latex, per set
A5114*	Leg strap; foam or fabric
A5119*	Skin barrier; wipes, box per 50
A5121*	Skin barrier; solid, 6 x 6
A5122*	Skin barrier; solid, 8 x 8
A5123*	Skin barrier; with flange
A5126*	Adhesive; disc or foam pad
A5131*	Appliance cleaner
A6020	Collagen based wound dressing
A6021	Collagen dressing <=16 sq in
A6022	Collagen drsg>6<=48 sq in
A6023	Collagen dressing >48 sq in
A6024	Collagen dsg wound filler
A6025	Silicone gel sheet, each
A6154	Wound pouch, each
A6231	Hydrogel dsg <=16 sq in
A6232	Hydrogel dsg>16<=48 sq in
A6233	Hydrogel dressing >48 sq in
G0025	Collagen skin test kit
99070	Special supplies (CPT code)

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Office Procedures That Are Billable With Procedure Code A4550

☞ **NOTE: Effective for dates of service on and after July 1, 2002, Medicare has bundled HCPCS code A4550 into the appropriate procedures. The relative value units (RVUs) of those procedures have been adjusted to take into account the cost of the surgical trays. Therefore, HCPCS code A4550 is no longer separately payable.**

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Supplies Reimbursed Separately When Dispensed from Physician's Office

Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
A4250	Urine test or reagent strips	Acquisition Cost
	Effective for dates of service on and after July 1, 2002, HCPCS codes A4263 and A4300 are bundled.	
~~A4263~~	~~Permanent, long-term, non-dissolvable lacrimal duct implant, each. In order to receive payment for this supply, it must be billed with the CPT code 68761, closure of lacrimal pumctum; by plug, each.~~	
~~A4300~~	~~Implantable vascular access partal/catheter. In order to receive payment for this supply, it must be billed with CPT code 36533, insertion of implantable venous access part, with or without subcutaneous reservoir.~~	
	Braces, Belts, And Supportive Devices	
A4572	Rib belt	$9.78
4960A	Brace	Acquisition Cost
	Miscellaneous Supplies	
	Effective for dates of service on and after July 1, 2002, HCPCS code A4550 is bundled.	
~~A4550~~	~~Surgical trays~~	
A4561	Pessary rubber, any type	Acquisition Cost
A4562	Pessary, nonrubber, any type	Acquisition Cost
A4565	Slings	$6.21
A4570	Splint	$14.52
A9900	Miscellaneous DME supply, accessory, and/or service component of another HCPCS code. **(To be used only for cochlear implant replacement parts. Prior authorization is required for the replacement parts and will be manually priced by MAA's authorization department.)**	B.R.
L8600	Breast implants	$650.00
1949M	Tissue expander implant	$950.00
L3807	WHFO, extension assist, with inflatable palmer air support, with or without thumb extension	Acquisition Cost
L9900	Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS "1" code	Acquisition Cost
	Supplies for Radiologic Procedures	
A4641	Supply of radio-pharmaceutical diagnostic imaging agent, not otherwise classified	Acquisition Cost
A4642	Supply of satumomab pendetide, radiopharmaceutical diagnostic imaging, per dose	Acquisition Cost

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
A4643	Supply of high high dose contrast material(s) during magnetic resonance imaging, e.g., gadoteridol injection, (consistent with contrast labeling criteria) Separate payment will be allowed for high dose contrast material when expedited authorized third magnetic resonance imaging (MRI) is performed.	Acquisition Cost
A4644	Supply of Low Osmolar Contrast Material (100-199 mgs of iodine) Brand Name — Generic Name Omnipague 140 and 180 — Iohexal Optiray 160 — Ioversol	Acquisition Cost
A4645	Supply of Low Osmolar Contrast Material (200-299 mgs of Iodine) Brand Name — Generic Name Ominpaque 210 and 240 — Iohexal Optiray 240 — Ioversaol Isovue 200 — Iopamidol	Acquisition Cost
A4646	Supply of Low Osmolar Contrast Material (300-399 mgs of Iodine) Brand Name — Generic Name Omnipaque 300 and 350 — Iohexal Hexabrix — Ioxaglate Optiray 320 — Ioversol Isovue 300 Ultravist	Acquisition Cost
A4647	Supply of paramagnetic contrast material (e.g., gadolinium)	Bundled
A9500	Supply of radiopharmaeutical diagnostic imaging agent, technitium tc 99M sestamibi, per dose	$80.00
A9502	Supply of radiopharmaceutical diagnostic imaging, technetium tc 99M, tetrofosmin, per unit dose	Acquisition Cost
A9503	Supply of radiopharmaceutical diagnostic imaging agent, technetium tc 99M, medionate, up to 30 MCI	Acquisition Cost
A9504	Supply of radiopharmaceutical diagnostic imaging agent, technetium tc 99M, apcitide	Acquisition Cost
A9505	Supply of radio-pharmaceutical diagnostic imaging agent, thallous cloride TL 201, per MCI	$34.00
A9507	Supply of radiopharmaceutical diagnostic imaging agent, indium in 111 capromab pendetide, per dose	Acquisition Cost
A9508	Supply of radiopharmaceutical diagnostic imaging agent, iobenguane sulfate I-131, per 0.5 mCi	Acquisition Cost
A9510	Supply of radio-pharmaceutical diagnostic imaging agent, technetium TC99M disoferin, per vial	Acquisition Cost
A9600	Supply of therapeutic radiopharmaceutical, strontium-89 chloride, per MCI	Acquisition Cost
A9605	Supply of therapeutic radio pharmaceutical samarium sm 153 lexidronamm, 50 mcl	Acquisition Cost

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting
A9700	Supply of injectable contrast material for use in echocardiography, per study	Acquisition Cost
Q3001	Radioelements for brachytherapy, any type each	Acquisition Cost
Q3002	Supply of radio-pharmaceutical diagnostic imaging agent, allium GA 67, per mCi	Acquisition Cost
Q3003	Supply of radio-pharmaceutical diagnostic imaging agent, technitium Tc 99m	Acquisition Cost
Q3004	Supply of radio-pharmaceutical diagnostic imaging agent, xenon XE 133, per 10 mCi	Acquisition Cost
Q3005	Supply of radio-pharmaceutical diagnostic imaging agent, technetium Tc 99m mertiatide, per mCi	Acquisition Cost
Q3006	Supply of radio-pharmaceutical diagnostic imaging agent, technetium Tc 99 glucepatate, per 5 mCi	Acquisition Cost
Q3007	Supply of radio-pharmaceutical diagnostic imaging agent, sodium phosphate P32, per mCi	Acquisition Cost
Q3008	Supply of radio-pharmaceutical diagnostic imaging agent, indium 111 – in pentetreotide, per 3 mCi	Acquisition Cost
Q3009	Supply of radio-pharmaceutical diagnostic imaging agent, technetium Tc 99m oxidronate per mCi	Acquisition Cost
Q3010	Supply of radio-pharmaceutical diagnostic imaging agent, technetium Tc 99m – labeled red blood cells, per mCi	Acquisition Cost
Q3011	Supply of radio-pharmaceutical diagnostic imaging agent, chromic phosphate P32 suspension, per mCi	Acquisition Cost
Q3012	Supply of oral radio-pharmaceutical diagnostic imaging agent, cyanocobalamin cobalt Co57, per 0.5 mCi	Acquisition Cost

Metered Dose Inhalers and Accessories

Effective for claims with dates of service on and after November 1, 2001, state-unique codes 4992A and 4993A are discontinued. ***Please use HCPCS code A4627.***

State-unique code 6645E is discontinued. Please use HCPCS code A4614.

A4614	Peak flow meter	$24.29
A4627	Spacer bag, or reservoir, with/ without mask (for use with metered dose inhaler)	$23.70

Inhalation Solutions

J7610-J7699 (See Section L.)

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Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting	Procedure Code	Description	Maximum Allowable Fee Non-Facility Setting/ Facility Setting

Urinary Tract Implants

Urinary tract implants, listed below, are covered only for treatment of type III stress urinary incontinence resulting from intrinsic sphincter deficiency (ISD) (ICD-9-Dx code 599.82). **The procedure and drug DO NOT require prior authorization, but are limited.** See below and Section I.

Prior to prescribing urinary tract implants, the physician must:

- Have urology training in the use of a cystoscope and must have completed a urinary tract implant training program for the type of implant used.
- Document that the client has shown no incontinence improvement through other therapies for at least 12 months prior to collagen therapy.
- Administer and evaluate a skin test for collagen sensitivity over a four-week period prior to collagen therapy. A negative sensitivity must be documented in the client's record.

All services provided must be billed on the same claim form:

- CPT code 95028 – skin test for collagen sensitivity; only one is allowed — $5.38

Effective for dates of service on and after July 1, 2002, HCPCS code G0025 is bundled.

- ~~HCPCS code G0025 Collagen skin test kit~~
- CPT code 51715 – Implant procedure
  - Non-Facility Setting — $190.65
  - Facility Setting — $118.07
- HCPCS code L8603 — $333.13
  Collagen implant, urinary tract, per 2.5 ml syringe
- HCPCS code L8606 — $170.87
  Synthetic implant, urinary tract, per 1 ml syringe

NOTE: If the implants are done outside the physician's office, then L8603 and L8606 are not allowed.

MAA will cover the first three (3) implants only, using an combination of L8603 and/or L8606, per client. Each 2.5 ml syringe of L8603 or each 1 ml syringe of L8606 is 1 implant.

- **All invoices must be retained in the physician's office for supplies that cost less than $50.00 and must be made available to MAA upon request.**
- **All invoices must be submitted to MAA for supplies that cost $50.00 or more.**

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Injection Drug Codes

MAA's fees for Injectable Drug Codes are the maximum allowances used to reimburse covered drugs and biologicals administered incident to a provider's professional service. MAA follows the Centers for Medicare & Medicaid's (CMS) payment policy used by Medicare to set the maximum allowances.

MAA obtains the Average Wholesale Price (AWP) for most of the HCPCS level II drug and biological codes from the Part B Medicare Carrier for Washington. MAA implements updates to the rates from the Medicare carrier on a quarterly basis. Unlike Medicare, the MAA effective dates are based on dates of service, not the date the claim was received. For codes where the Medicare Carrier has not established a rate, MAA determines the maximum allowances for covered drugs using the following methodology:

Pricing Methodology

1. For a single-source drug or biological, the AWP equals the AWP of the single product.
2. For a multi-source drug or biological, the AWP is equal to the lesser of the median AWP of all of the generic forms of the drug or biological or the lowest brand name product AWP. A "brand-name" product is defined as a product that is marketed under a labeled name that is other than the generic chemical name for the drug or biological.
3. After determining the AWP according to #1 and #2 above, the amount is multiplied by 0.95 for chemotherapy drugs, and 0.89 for all other drugs to arrive at the fee schedule maximum allowance.

When billing for the drugs and biologicals, providers must use the descriptions of the procedure code and include the correct number of units on the claim form in order to be reimbursed the appropriate amount. For drugs that are priced at "acquisition cost," providers must include a copy of the manufacturer's invoice if the total charge of the claim exceeds $1,100.00. If the total charges are equal to or less than $1,100.00, providers must retain a copy of the manufacturer's invoice in the client's record. Do not bill unclassified or unspecified drug codes unless there is no specific code for the drug being administered. The name, National Drug Code (NDC), strength, dosage, and quantity of the drug must be included with the unclassified or unspecified drug code for coverage and payment consideration.

HCPCS codes J8499 and J8999 for oral prescription drugs are not covered.

Injectable drugs can be injected subcutaneously, intramuscularly, or intravenously. The injectable drugs can be billed only out of the physician's office supply. Name, strength and dosage of the drug must be documented and retained in the client's record.

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Chemotherapy Drug (J9000-J9999)

- Bill number of units used based on the description of the drug code. For example, if 250 mg of Cisplatin (J9062) is given to the patient, the correct number of units is five (5).
- Claims with HCPCS code J9999 must include drug used, dosage, strength and NDC in the *Comments* field.
- Maximum allowable fee is 95% of the Average Wholesale Price (AWP).

All Other Drugs

- Bill number of units used based on the description of the drug code. For example, if 20 mg of Hyalgan (J7316) is given to the patient, the correct number of units is four (4).
- Claims with HCPCS code J3490 must include drug used, dosage, strength and NDC in the *Comments* field.
- Maximum allowable fee is 89% of the AWP.

Prior Authorization

Those drugs that require written/fax prior authorization are noted in the fee schedule with a "PA" next to them. For information on how to request prior authorization, please see section I.

Rounding of Units

The following guidelines should be used to round the dosage given to the patient to the appropriate number of units for billing purposes:

I. Single-Dose Vials:

For single-dose vials, bill the total amount of the drug contained in the vial(s) used including partial vials. The HCPCS descriptions for the drug codes establish the unit of service. Based on this unit definition, the maximum allowable per unit is MAA's maximum allowable price. MAA's payment is the billed amount or MAA's maximum allowable rate, whichever is less.

Example:

If a total of 150 mg of Etoposide were required for the therapy, and two 100 mg single dose vials were required to obtain the total dosage, then the total of the two 100 mg vials would be billable. In this case, the procedure would be billed under J9181 (Etoposide, 10 mg), with the maximum allowable price at $4.38 per 10 mg unit, the total allowable would be $87.60 (200 mg divided by 10 = 20 units x $4.38). This would then be compared to the billed amount.

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II. Multi-Dose Vials:

For multi-dose vials, bill only the number of units (rounded to the nearest whole unit) of the drug used. The HCPCS descriptions for the drug codes establish the unit of service. Based on this unit definition, the maximum allowable per unit is MAA's maximum allowable price. MAA's payment is the billed amount or MAA's maximum allowable rate, whichever is less.

Example:

If a total of 750 mg of Cytarabine were required for the therapy, and was taken from a 2,000 mg multi-dose vial, then only the 750 mg used would be billable. In this case, the procedure would be billed under J9110 (Cytarabine, 500 mg), with the maximum allowable price at $23.75 per 500 mg unit, the total allowable would be $47.50 [750 mg divided by 500 = 2 (1.5 rounded) units x $23.75].

III. Unlisted Drugs (J3490 and J9999):

When there is no HCPCS code available to define the drug used and unit of service, the provider determines the number of units used and bills total units. Claims must include the drug used, dosage, strength and NDC in the *Comments* field. Claims will be denied if the information is not included on the claim. The NDC for the drug determines the total allowable by using MAA's pricing multiplied by the number of units billed. The same policies regarding the billing of single and multi-dose vials apply. Reimbursement is the billed amount or MAA's maximum allowable rate, whichever is less.

☞ **NOTE: The list of all injection drug codes and maximum allowable fees has been moved to the complete fee schedule section (Section I)**

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82: **Assistant Surgeon (When Qualified Resident Surgeon Not Available)**: The unavailability of a qualified resident surgeon is a prerequisite for use of modifier 82 appended to the usual procedure code number(s). *Payment is 20% of the maximum global allowance.*

90: **Reference (Outside) Laboratory**: When laboratory procedures are performed by a lab other than the referring lab, the procedure must be identified by adding modifier 90 to the procedure code. *The referenced lab provider number must be entered in the performing number field on the HCFA-1500 claim form or electronic claim record. The referral lab must be CLIA certified.*

91: Repeat Clinical diagnostic Laboratory Test Performed on the same day to obtain subsequent report test value(s) (Separate Specimens Taken in Separate Encounter[s]) has been added. ***This modifier does affect payment***. *Modifier 91 should be used when repeat tests are performed on the same day, by the same provider to obtain reportable test values with separate specimens taken at different times only when it is necessary to obtain multiple results in the course of treatment. When billing for a repeat test, use 91 modifier with the appropriate procedure code.*

99: **Multiple Modifiers**: Under certain circumstances, two ore more modifiers may be necessary to completely describe a service. *Modifier 99 must be used* ***only when two or more modifiers affect pricing*** *(applicable modifiers in list below). Modifier 99 must be added to the basic procedure, and two ore more of the applicable modifiers from the list below must be listed in field 24D.*

26	Professional component
50	Bilateral surgery
53	Discontinued procedure
54	Surgical care only
55	Postoperative management only
56	Preoperative management only
62	Two surgeons
66	Surgical team
78	Return to operating room for related procedure during post-op period
80	Assistant surgeon
81	Minimum assistant surgeon
82	Assistant surgeon (when qualified resident surgeon not available)
TC	Technical component
1M	Special agreement
1C	Children's services
SL	State-supplied vaccine
LT	Left
RT	Right
1R	Radiological consultation
91	Repeat clinical diagnostic lab, same day
9T	Major trauma

LT **Left Side**: Used to identify procedures performed on the left side of the body. *MAA requires this modifier with some procedure codes for proper reimbursement.*

QP Documentation is on file showing that the lab test(s) was ordered individually or ordered as a CPT recognized panel other than automated profile codes. *This modifier is now used FOR INFORMATION ONLY. Internal control reimbursement methodology for automated multi-channel test will be applied. This modifier is not appropriate to use when billing for repeat tests or to indicate not as a panel.*

Q6 **Physician Services**: Services furnished by a locum tenens physician. *For informational purposes only; no extra allowance will be allowed.*

RT **Right Side**: Used to identify procedures performed on the right side of the body. *MAA requires this modifier with some procedure codes for proper reimbursement.*

SL **State-supplied Vaccine**: *This modifier must be used with those immunization procedure codes indicated in section C to identify those immunization materials obtained from the Department of Health (DOH). This code replaces state-unique code 1H.*

Level III
State-Unique Modifiers

1C **Children's Primary Health Care**: Use to receive a pediatric reimbursement rate for children's primary health care and office/outpatient procedure codes (CPT codes 99201-99215) when services are provided for a baby, and are billed using the parent's PIC. **Do not use this modifier when billing under baby's PIC.**

Effective with dates of service on and after July 1, 2002, state-unique modifier 1H is discontinued and replaced with HCPCS modifier SL.

~~1H **Immunization Material Obtained from a Health Department** (clients 18 years of age and younger): Use with the appropriate immunization procedure code to identify that the immunization material was obtained from a health department.~~
~~**Do not bill this modifier in combination with 90471 or 90472.**~~

1M **Use of Facility or Equipment Owned by the Physician Used in Outpatient Hospital or Emergency Room**: This modifier is to be used by providers who have an existing "special agreement with MAA."

1R **Consultation on X-ray Examination**: When billing a consultation, the consulting physician should bill the specific radiological x-ray code with modifier 1R (Professional Component). For example, the initial physician would bill with the global chest x-ray (CPT code 71020) or the professional component (71020-26), but the second consulting physician would bill only for the chest x-ray consultations (e.g., 71020-1R).

9T **Major Trauma**: Use to enhance payment for direct services provided by a Designated Trauma Services member for clients who require major trauma services with an injury severity score of 9 or greater. **Do not use this modifier when billing for laboratory services.**

Modifiers LT and RT have been moved to the HCPCS modifiers page.

~~LT/RT:~~

~~Modifier used when the procedure is not designated bilateral or you have performed the procedure only on the left or right side of the body.~~

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Anesthesia Modifiers

AA Anesthesia services personally furnished by an anesthesiologist. This includes services provided by faculty anesthesiologists involving a physician-in-training (resident). Reimbursement is 100 percent of the allowed amount. Modifier AA cannot be billed in combination with QX.

When supervising, the physician should use one of the modifiers below. Reimbursement for these modifiers is 50 percent of the allowed amount. Modifier QX should be billed by the Certified Registered Nurse Anesthetist (CRNA).

AD Medical supervision by a physician for more than four concurrent anesthesia services.

QK Medical direction of two, three, or four concurrent anesthesia procedures involving qualified individuals.

QS Monitored anesthesia services. **This modifier is not covered by MAA.**

To bill for monitored anesthesia care services, the following applies:

If the physician personally performs the case, modifier AA should be used and reimbursement is 100 percent of the allowed amount.

If the physician directs four or fewer concurrent cases and monitored care represents two or more of the case modifiers, modifier QK should be used and reimbursement is 50 percent of the allowed amount.

QX Certified Registered Nurse Anesthetist (CRNA) service with medical direction by a physician should be used when under the supervision of a physician. Reimbursement is 50 percent of the allowed amount. This modifier is payable in combination with Modifiers AD, or QK which is used by the supervising anesthesiologist. Modifier QX cannot be billed in combination with AA.

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9d. Enter the insurance plan name or the program name (e.g., the insured's health maintenance organization, private supplementary insurance).

Please note: DSHS, Welfare, Provider Services, EPSDT, HO or Healthy Options First Steps, and Medicare, etc., are inappropriate entries for this field.

10. **Is Patient's Condition Related To:** Required. Check *yes* or *no* to indicate whether employment, auto accident or other accident involvement applies to one or more of the services described in *field 24*. ***Indicate the name of the coverage source in field 10d*** (L&I, name of insurance company, etc.).

11. **Insured's Policy Group or FECA (Federal Employees Compensation Act) Number**: When applicable. This information applies to the insured person listed in *field 4*. Enter the insured's policy and/or group number and his/her Social Security Number. The data in this field will indicate that the client has other insurance coverage and Medicaid pays as payer of last resort.

11a. **Insured's Date of Birth**: When applicable, enter the insured's birthdate, if different from *field 3*.

11b. **Employer's Name or School Name**: When applicable, enter the insured's employer's name or school name.

11c. **Insurance Plan Name or Program Name**: When applicable, show the insurance plan or program name to identify the primary insurance involved. *(Note: This may or may not be associated with a group plan.)*

11d. **Is There Another Health Benefit Plan?**: Indicate *yes* or *no*. If yes, you should have completed *fields 9a. – d*.

17. **Name of Referring Physician or Other Source**: When applicable, enter the referring physician or Primary Care Case Manager (PCCM) name. This field *must* be completed for consultations, or for referred laboratory or radiology services (or any other services indicated in your billing instructions as requiring a referral source).

17a. **I.D. Number of Referring Physician**: When applicable, 1) enter the seven-digit, MAA-assigned identification number of the provider who *referred or ordered* the medical service; OR 2) when the PCCM referred the service, enter his/her seven-digit identification number here. *If the provider does not have an MAA provider ID number, be certain field 17 is completed.*

19. **Reserved For Local Use**: When applicable, enter indicator **B**, *Baby on Parent's PIC*, or other comments necessary to process the claim.

21. **Diagnosis or Nature of Illness or Injury**: When applicable, enter the appropriate diagnosis code(s) in areas 1, 2, 3, and 4.

22. **Medicaid Resubmission**: When applicable. If this billing is being submitted beyond the 365-day billing time limit, enter the ICN that verifies that your claim was originally submitted within the time limit. (The ICN number is the *claim number* listed on the Remittance and Status Report).

23. **Prior Authorization Number**: When applicable. If the service or equipment you are billing for requires authorization, enter the nine-digit number assigned to you. Only one authorization number is allowed per claim.

24A. **Date(s) of Service**: Required. Enter the "from" and "to" dates using all six digits for each date. Enter the month, day, and year of service numerically (e.g., August 4, 2002 = 080402).

24B. **Place of Service**: Required. See pages J2 and J3 for correct POS codes. These are the only appropriate place of service codes:

24C. **Type of Service**: Required. Enter a **3** for all services billed.

24D. **Procedures, Services or Supplies CPT/HCPCS**: Required. Enter the appropriate procedure code for the services being billed. **Modifier**: When appropriate enter a modifier.

24E. **Diagnosis Code**: Required. Enter the ICD-9-CM diagnosis code related to the procedure or service being billed (for each item listed in 24D). A diagnosis code is required for each service or line billed. Enter the code exactly as shown in ICD-9-CM, or relate each line item to *field 21* by entering a 1, 2, 3, or 4.

24F. **$ Charges**: Required. Enter your usual and customary charges for the service performed. If more than one unit is being billed, the charge shown must be for the total of the units billed. Do not include dollar signs or decimals in this field. Do not include sales tax. Sales tax is automatically calculated by the system and included in your remittance amount.

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Numbered Memo 02-32 MAA Physician-Related Services

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