KY Medicaid Physician Fee Schedule 2026

Revised 5.21.2026

Notes:

- **Red indicates new codes or changes for the most current revision date.**
- **Blue indicates code is end dated**
- **See Physician Adminstered Drug List (PAD)** for injectables.
- **See Clinical Lab Fee Schedule** for lab and pathology codes https://www.chfs.ky.gov/agencies/dms/Pages/feesrates.aspx

Vaccines For children (VFC):

- Providers will receive a single administration fee for each vaccine provided, regardless of the number of anigen/toxoid components.
- SL modifier must be used for vaccines procured through the Vaccine for Children Program including the administration code.Federal Register https://www.federalregister.gov/documents/2012/11/06/2012-26507/rin-0938-aq63
CDC VFC Operations Guide https://www.cdc.gov/vaccines-for-children/media/pdfs/2024/08/vfc-ops-guide_version-4.0_july-2024_low-res-508-rev-2.pdf
- UB modifier to be used for Certified Community Health Worker (CHW) services. Rendering must be Physician, APRN, or Physician Assistant
- Codes listed as "$**0.00**" pay 45% of billed amount (PT-86 Radiology and X-ray are reimbursed at 60%) not to exceed provider's usual and customary charge
- Advanced Practice Registered Nurse's (APRN) and Physician Assistant's (PA) receive 75% of physician rate.
- The Anesthesia Base Rate is $15.20. Each 15 minute increment=1 time unit.
- Billing Instructions: http://www.kymmis.com/kymmis/Provider%20Relations/billingInst.aspx
- The appearance on this fee schedule of a code and rate is not a guarantee of coverage nor payment.
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Procedure Code	Procedure Description	Prior Auth Required	Inpatient Rate Facility	Outpatient Rate Non-Facility	Vaccines For Children (VFC) only SL modifier	Technical Component TC Modifier	Professional Component 26 Modifier	Base Unit Value	Notes
Vaccines									
90378	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY FOR INJECTION INTO TISSUE OR MUSCLE 50MG			$327.21	ZERO				Birth to 24 months
90380	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 0.5 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90382	RESPIRATORY SYNCYTIAL VIRUS, MONOCLONAL ANTIBODY, SEASONAL DOSE, 0.7 ML, FOR INTRAMUSCULAR USE		$556.00	$556.00	ZERO				Added Effective 1/1/2026, Code added to offer detailed description of dosage, and age

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90460	ADMINISTRATION OF FIRST VACCINE OR TOXOID COMPONENT WITH COUNSELING (18 YEARS OR YOUNGER)			$27.49	$19.93				Rate Eff: 8/1/22
90461	ADMINISTRATION OF VACCINE OR TOXOID COMPONENT WITH COUNSELING (18 YEARS OR YOUNGER), EACH ADDITIONAL VACCINE OR TOXOID COMPONENT			$18.40					
90471	ADMINISTRATION OF VACCINE			$27.49	$19.93				Rate Eff: 8/1/22
90472	ADMINISTRATION OF VACCINE, EACH ADDITIONAL VACCINE		$9.80	$9.80	$11.96				
90473	ADMINISTRATION OF NASAL OR ORAL VACCINE, 1 VACCINE			$27.49	$19.93				Rate Eff: 8/1/22
90474	ADMINISTRATION OF NASAL OR ORAL VACCINE, EACH ADDITIONAL VACCINE		$9.80	$9.80	$11.96				
90480	ADMINISTRATION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE BY INTRAMUSCULAR INJECTION, FIRST COMPONENT OF EACH VACCINE ADMINISTERED		$8.98	$19.53	$19.93				
90589	CHIKUNGUNYA VIRUS VACCINE			$0.00					Termed 8/22/2025, DMS Removed
90611	SMALLPOX AND MONKEYPOX VACCINE, ATTENUATED VACCINIA VIRUS, LIVE, NON-REPLICATING, PRESERVATIVE FREE, 0.5 ML DOSAGE, SUSPENSION, FOR SUBCUTANEOUS USE			No Pay	ZERO				
90619	MENINGOCOCCAL CONJUGATE VACCINE, SEROGROUPS A, C, W, Y, QUADRIVALENT, TETANUS TOXOID CARRIER			$82.00	ZERO				

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90620	MENINGOCOCCAL RECOMBINANT PROTEIN AND OUTER MEMBRANE VESICLE VACCINE, SEROGROUP B		$0.00	$0.00	ZERO				
90621	MENINGOCOCCAL RECOMBINANT LIPOPROTEIN VACCINE, SEROGROUP B 2/3 DOSE IM			$95.75	ZERO				
90622	VACCINIA (SMALLPOX) VIRUS VACCINE, LIVE, LYOPHILIZED, 0.3 ML DOSAGE, FOR PERCUTANEOUS USE			No Pay					
90623	MENINGOCOCCAL CONJUGATE VACCINE SEROGROUPS A, C, W, Y, B-FHBP, PENTAVALENT, TETANUS TOXOID CARRIER			$211.60	ZERO				
90624	MENINGOCOCCAL PENTAVALENT VACCINE, MEN B-4C RECOMBINANT PROTEINS AND OUTER MEMBRANE VESICLE AND CONJUGATED MEN A, C, W, Y-DIPHTHERIA TOXOID CARRIER, FOR INTRAMUSCULAR USE		$262.50	$262.50					
90626	INACTIVATED TICK-BORNE ENCEPHALITIS VIRUS VACCINE, 0.25 ML DOSAGE, FOR INTRAMUSCULAR USE			$319.10					
90627	INACTIVATED TICK-BORNE ENCEPHALITIS VIRUS VACCINE, 0.5 ML DOSAGE, FOR INTRAMUSCULAR USE			$319.10					
90632	HEPATITIS A VACCINE ADULT DOSAGE			$65.70					Rate Eff: 4/1/22 Age 18 and older
90633	HEPATITIS A VACCINE PEDIATRIC OR ADOLESCENT DOSAGE			$29.55	ZERO				Age 12 months to 18 years old
90634	HEPATITIS A VACCINE PEDIATRIC OR ADOLESCENT DOSAGE (3 DOSE SCHEDULE)			$29.55					Age 12 months to 18 years old
90636	HEPATITIS A AND HEPATITIS B VACCINE			$112.35					Rate Eff: 4/1/22 Age 18 and older

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90637	INFLUENZA VIRUS VACCINE, QUADRIVALENT (QIRV), MRNA; 30 MCG/0.5 ML DOSAGE, FOR INTRAMUSCULAR USE		$0.00	$0.00					
90638	INFLUENZA VIRUS VACCINE, QUADRIVALENT (QIRV), MRNA; 60 MCG/0.5 ML DOSAGE, FOR INTRAMUSCULAR USE		$0.00	$0.00					
90644	MENINGOCOCCAL CONJUGATE VACCINE, SEROGROUPS C & Y AND HAEMOPHILUS INFLUENZAE TYPE B VACCINE			$115.18					
90647	HAEMOPHILUS INFLUENZAE TYPE B VACCINE, PRP-OMP CONJUGATE			$22.77	ZERO				
90648	HAEMOPHILUS INFLUENZAE TYPE B VACCINE, PRP-T CONJUGATE			$26.21	ZERO				
90649	HUMAN PAPILLOMAVIRUS VACCINE, TYPES 6, 11, 16, 18, QUADRIVALENT			$141.38	ZERO				Ages 9 to 26 years old
90650	2VHPV VACCINE 3 DOSE IM HUMAN PAPILLOMAVIRUS VACCINE, TYPES 16, 18, BIVALENT			$128.75					
90651	9VHPV VACCINE 2/3 DOSE IM HUMAN PAPILLOMAVIRUS VACCINE TYPES 6, 11, 16, 18, 31, 33, 45, 52, 58, NONAVALENT			$253.60	ZERO				Rate Eff: 4/1/22 Ages 9 to 26 years old
90653	FLU VACCINE IIV, ADJUVANTED IM, INFLUENZA VACCINE, INACTIVATED			$98.16					Rate changed from $83.49 to 98.16 effective 8/1/2025 to 7/31/2026 Age 65 years and older
90655	INFLUENZA VACCINE, TRIVALENT, SPLIT VIRUS, PRESERVATIVE-FREE, 0.25 ML DOSAGE			$18.40	ZERO				Age 6 months to 35 months.
90656	INFLUENZA VACCINE, TRIVALENT, SPLIT VIRUS, PRESERVATIVE-FREE, 0.5 ML DOSAGE			$23.22	ZERO				Rate changed from $22.35 to $23.22 effective 8/1/2025 to 7/31/2026 Age 6 months and older

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90657	INFLUENZA VACCINE, TRIVALENT, 0.25 ML DOSAGE			$18.40	ZERO				Age 6 months and older
90658	INFLUENZA VACCINE, TRIVALENT, 0.5 ML DOSAGE			$21.86	ZERO				Rate update effective 8/1/2024 Age 6 months and older
90660	INFLUENZA VACCINE, TRIVALENT FOR NASAL ADMINISTRATION			$29.14	ZERO				Ages 2 to 49 years old
90661	INFLUENZA VACCINE, TRIVALENT, DERIVED FROM CELL CULTURES, ANTIBIOTIC FREE, 0.5 ML DOSAGE, FOR INTRAMUSCULAR USE			$49.50	ZERO				Rate changed from $36.85 to $49.50 effective 8/1/2025 to 7/31/2026 Age 6 months and older
90662	INFLUENZA VACCINE SPLIT VIRUS, PRESERVATIVE FREE			$83.49					Rate Update effective 8/1/2024 Age 65 and older
90670	PNEUMOCOCCAL VACCINE, 13-VALENT			$257.99	ZERO				Rate Eff: 4/1/22
90671	PNEUMOCOCCAL CONJUGATE VACCINE, 15 VALENT (PCV15), FOR INTRAMUSCULAR USE			$246.20	ZERO				Rate Eff: 1/1/22
90672	INFLUENZA VACCINE, QUADRIVALENT FOR NASAL ADMINISTRATION			$27.79	ZERO				Rate Update effective 8/1/2023 Age 2 years to 49 years old
90673	FLU VACC RIV3 NO PRESERV , TRIVALENT DERIVED FROM RECOMBINANT DNA			$83.49					Rate Update effective 8/1/2024
90674	INFLUENZA VACCINE, QUADRIVALENT DERIVED FROM CELL CULTURES, PRESERVATIVE AND ANTIBIOTIC FREE			$34.17	ZERO				Rate Update effective 8/1/2023
90675	RABIES VACCINE FOR INJECTION INTO MUSCLE			$382.33					Rate Update effective 8/1/2023
90676	RABIES VACCINE FOR INJECTION INTO SKIN			$111.96					
90677	PNEUMOCOCCAL CONJUGATE VACCINE, 20 VALENT (PCV20), FOR INTRAMUSCULAR USE			$283.72	ZERO				Rate Eff: 4/1/22

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90678	RESPIRATORY SYNCYTIAL VIRUS VACCINE, PREF, SUBUNIT, BIVALENT, FOR INTRAMUSCULAR USE			$320.14					60 & older, preg women 32-36 weeks
90679	RESPIRATORY SYNCYTIAL VIRUS VACCINE, PREF, RECOMBINANT, SUBUNIT, ADJUVANTED, FOR INTRAMUSCULAR USE			$274.40					Age 60 and older
90680	ROTAVIRUS VACCINE, PENTAVALENT			$75.20	ZERO				
90681	ROTAVIRUS VACCINE, HUMAN, ATTENUATED			$106.57	ZERO				
90682	INFLUENZA VACCINE, QUADRIVALENT DERIVED FROM RECOMBINANT DNA			$73.40					Rate Update effective 8/1/2023 Age 18 years and older
90683	RESPIRATORY SYNCYTIAL VIRUS VACCINE MRNA LIPID NANOPARTICLES			$274.40					Effective 1/1/2024 Age 60 years and older
90684	PNEUMOCOCCAL CONJUGATE VACCINE, 21 VALENT (PCV21), FOR INTRAMUSCULAR USE		$316.42	$316.42					
90685	INFLUENZA VACCINE, QUADRIVALENT, PRESERVATIVE FREE, 0.25 ML DOSAGE			$23.23	ZERO				Rate Eff: 8/1/22 Age 6 months to 35 months.
90686	INFLUENZA VACCINE, QUADRIVALENT, PRESERVATIVE FREE, 0.5 ML DOSAGE			$22.35	ZERO				Rate Update effective 8/1/2023 Age 6 months and older
90687	INFLUENZA VACCINE, QUADRIVALENT, 0.25 ML DOSAGE			$14.35	ZERO				Rate Update effective 8/1/2023 Effective 1/1/2025 Age 6 months to 35 months
90688	INFLUENZA VACCINE, QUADRIVALENT, 0.5 ML DOSAGE			$20.88	ZERO				Rate Update effective 8/1/2023 Age 6 months and older
90689	INFLUENZA VACCINE, QUADRIVALENT INACTIVATED, 0.25 ML DOSAGE			$22.79					
90690	TYPHOID VACCINE			$88.99					
90691	TYPHOID VACCINE FOR INJECTION INTO MUSCLE			$89.12					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90694	INFLUENZA VACCINE, QUADRIVALENT INACTIVATED, 0.5 ML DOSAGE			$77.36					Rate Update effective 8/1/2023
90696	DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, AND POLIO VACCINE			$48.00	ZERO				Age 4 to 6 years old
90697	DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO, HAEMOPHILUS INFLUENZAE TYPE B, AND HEPATITIS B VACCINE			$132.77	ZERO				
90698	DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO, AND HAEMOPHILUS INFLUENZAE TYPE B VACCINE			$70.72	ZERO				
90700	DIPHTHERIA, TETANUS, AND ACELLULAR PERTUSSIS VACCINE (YOUNGER THAN 7 YEARS)			$23.47	ZERO				Ages 0 to 7 years old
90702	DIPHTHERIA AND TETANUS VACCINE (YOUNGER THAN 7 YEARS)			$23.47	ZERO				Ages 0 to 7 years old
90707	MEASLES, MUMPS, AND RUBELLA VACCINE			$87.31	ZERO				Rate Eff: 4/1/22
90710	MEASLES, MUMPS, RUBELLA, AND VARICELLA VACCINE			$157.64	ZERO				
90713	POLIOVIRUS VACCINE			$35.00	ZERO				Rate Eff: 4/1/22
90714	DIPHTHERIA AND TETANUS VACCINE (7 YEARS OR OLDER)			$27.94	ZERO				Rate Eff: 4/1/22 Age 7 years and older
90715	DIPHTHERIA, TETANUS, AND ACELLULAR PERTUSSIS VACCINE (7 YEARS OR OLDER)			$35.64	ZERO				Rate Eff: 4/1/22 Age 7 years and older
90716	VARICELLA VACCINE			$150.98	ZERO				Rate Eff: 4/1/22
90723	DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, HEPATITIS B, AND POLIO VACCINE			$70.72	ZERO				
90732	PNEUMOCOCCAL VACCINE, 23-VALENT			$133.47	ZERO				Rate Eff: 4/1/22 Age 2 years and older

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90733	MENINGOCOCCAL VACCINE, SEROGROUPS A, C, Y, W-135			$106.49					
90734	MENINGOCOCCAL VACCINE, SEROGROUPS A, C, W, Y, DIPHTHERIA TOXOID CARRIER VACCINE			$117.41	ZERO				
90736	SHINGLES VACCINE FOR INJECTION UNDER SKIN			$165.59					
90739	HEPATITIS B VACCINE (HEPB), CPG-ADJUVANTED, ADULT DOSAGE, 2 DOSE OR 4 DOSE SCHEDULE, FOR INTRAMUSCULAR USE			$117.99					
90740	HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE			$119.42					
90743	HEPATITIS B VACCINE, ADOLESCENT DOSAGE			$24.22	ZERO				
90744	HEPATITIS B VACCINE, PEDIATRIC OR ADOLESCENT DOSAGE (3 DOSE SCHEDULE)			$24.22	ZERO				Age 0 to 20 years old
90746	HEPATITIS B VACCINE, ADULT DOSAGE (3 DOSE SCHEDULE)			$65.12					Rate Eff: 4/1/22
90747	HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE (4 DOSE SCHEDULE)			$119.42					
90748	HEPATITIS B AND HAEMOPHILUS INFLUENZAE TYPE B VACCINE			$43.56					
90750	SHINGLES VACCINE FOR INJECTION INTO MUSCLE			$280.00					
90756	INFLUENZA VACCINE, QUADRIVALENT DERIVED FROM CELL CULTURES			$32.37					Rate Update effective 8/1/2023
90758	LIVE ZAIRE EBOLAVIRUS VACCINE, FOR INTRAMUSCULAR USE			$0.00					
90759	VACCINE FOR HEPATITIS B (3 DOSE SCHEDULE) FOR INJECTION INTO MUSCLE, 10 MCG DOSAGE			$74.53					Rate Eff: 4/1/22

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
91304	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, RECOMBINANT SPIKE PROTEIN NANOPARTICLE, SAPONIN-BASED ADJUVANT, 5 MCG/0.5ML DOSAGE, FOR INTRAMUSCULAR USE			$0.00	ZERO				Rate updated from $148.20 to $0.00 effective 1/1/2026 Rate updated from $0 to $148.20 effective 10/1/2023 Limited to 12 years of age and older.
91318	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, MRNA-LNP, SPIKE PROTEIN, 3 MCG/0.3 ML DOSAGE, TRIS-SUCROSE FORMULATION, FOR INTRAMUSCULAR USE		$65.55	$65.55	ZERO				Age 6 months to 4 years old
91319	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, MRNA-LNP, SPIKE PROTEIN, 10 MCG/0.3 ML DOSAGE, TRIS-SUCROSE FORMULATION, FOR INTRAMUSCULAR USE		$87.78	$87.78	ZERO				Age 5 to 11 years old
91320	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, MRNA-LNP, SPIKE PROTEIN, 30 MCG/0.3 ML DOSAGE, TRIS-SUCROSE FORMULATION, FOR INTRAMUSCULAR USE		$155.89	$155.89	ZERO				Age 12 years and older
91321	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, MRNA-LNP, 25 MCG/0.25 ML DOSAGE, FOR INTRAMUSCULAR USE		$147.06	$147.06	ZERO				Age 6 months to 11 years old
91322	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (COVID-19) VACCINE, MRNA-LNP, 50 MCG/0.5 ML DOSAGE, FOR INTRAMUSCULAR USE		$161.65	$161.65	ZERO				Age 12 years and older

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
91323	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) VACCINE, MRNA-LNP, 10 MCG/0.2 ML DOSAGE, FOR INTRAMUSCULAR USE		$201.91	$201.91					Added effective 1/1/2026, Adding code as a part of detailed dosage
96380	RSV MONOC ANTB ADMINISTRATION OF SEASONAL DOSE BY INTRAMUSCULAR INJECTION, WITH COUNSELING BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL		$18.58	$18.58	$18.58				
96381	ADMINISTRATION OF RESPIRATORY SYNCYTIAL VIRUS, MONOCLONAL ANTIBODY, SEASONAL DOSE BY INTRAMUSCULAR INJECTION		$15.98	$15.98	$15.98				
Other procedures									
00100	ANES FOR PROCEDURES ON SALIVARY GLANDS		*	*				5.00	
00102	ANESTHESIA FOR PLASTIC REPAIR OF LIP DEFECT		*	*				6.00	
00103	ANESTHESIA FOR PROCEDURE ON EYELID		*	*				5.00	
00104	ANESTHESIA FOR ELECTROSHOCK THERAPY		*	*				4.00	
00120	ANESTHESIA FOR OTHER PROCEDURE ON EXTERNAL MIDDLE AND INNER EAR		*	*				5.00	
00124	ANESTHESIA FOR EXAM OF EAR USING AN ENDOSCOPE		*	*				4.00	
00126	ANESTHESIA FOR INCISION OF EAR DRUM		*	*				4.00	
00140	ANESTHESIA FOR OTHER PROCEDURE ON EYE		*	*				5.00	
00142	ANESTHESIA FOR LENS SURGERY		*	*				6.00	
00144	ANESTHESIA FOR PROCEDURE ON EYE FOR CORNEAL TRANSPLANT		*	*				6.00	
00145	ANESTHESIA FOR RETINAL SURGERY		*	*				6.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00147	ANESTHESIA FOR PROCEDURE ON EYE FOR REMOVAL OF IRIS		*	*				6.00	
00148	ANESTHESIA FOR EXAM OF INNER EYE USING AN ENDOSCOPE		*	*				4.00	
00160	ANESTHESIA FOR OTHER PROCEDURE ON NOSE AND SINUSES		*	*				5.00	
00162	ANESTHESIA FOR EXTENSIVE SURGERY ON NOSE AND SINUSES		*	*				7.00	
00164	ANESTHESIA FOR BIOPSY OF SOFT TISSUE OF NOSE AND SINUS		*	*				4.00	
00170	ANESTHESIA FOR OTHER PROCEDURE ON MOUTH		*	*				5.00	
00172	ANESTHESIA FOR PROCEDURE ON MOUTH TO REPAIR PALATE DEFORMITY		*	*				6.00	
00174	ANESTHESIA FOR PROCEDURE ON THROAT FOR REMOVAL OF TUMOR		*	*				6.00	
00176	ANESTHESIA FOR EXTENSIVE SURGERY ON MOUTH		*	*				7.00	
00190	ANESTHESIA FOR OTHER PROCEDURE ON FACE BONES OR SKULL		*	*				5.00	
00192	ANESTHESIA FOR EXTENSIVE SURGERY ON FACE BONES OR SKULL		*	*				7.00	
00210	ANESTHESIA FOR OTHER PROCEDURE ON BRAIN		*	*				11.00	
00211	ANESTHESIA FOR REMOVAL OF BLOOD COLLECTION FROM BRAIN		*	*				10.00	
00212	ANESTHESIA FOR REMOVAL OF FLUID FROM BRAIN		*	*				5.00	
00214	ANESTHESIA FOR PROCEDURE TO CREATE HOLES IN SKULL INCLUDING X-RAY IMAGING		*	*				9.00	
00215	ANESTHESIA FOR PROCEDURE TO REPAIR SKULL OR SKULL FRACTURE		*	*				9.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00216	ANESTHESIA FOR PROCEDURE ON BLOOD VESSELS IN BRAIN		*	*				15.00	
00218	ANESTHESIA FOR PROCEDURE ON BRAIN WHILE SITTING UP		*	*				13.00	
00220	ANESTHESIA FOR PROCEDURE TO DRAIN BRAIN AND SPINAL CORD FLUID		*	*				10.00	
00222	ANESTHESIA FOR PROCEDURE ON NERVE IN BRAIN		*	*				6.00	
00300	ANESTHESIA FOR OTHER PROCEDURE ON SKIN, MUSCLES, OR NERVES OF HEAD, NECK, AND UPPER BACK		*	*				5.00	
00320	ANESTHESIA FOR OTHER PROCEDURE ON NECK AREA (1 YEAR OR OLDER)		*	*				6.00	
00322	ANESTHESIA FOR NEEDLE BIOPSY OF THYROID		*	*				3.00	
00326	ANESTHESIA FOR OTHER PROCEDURE ON NECK AREA (YOUNGER THAN 1 YEAR)		*	*				8.00	
00350	ANESTHESIA FOR OTHER PROCEDURE ON LARGE BLOOD VESSEL OF NECK		*	*				10.00	
00352	ANESTHESIA FOR TYING LARGE BLOOD VESSELS OF NECK		*	*				5.00	
00400	ANESTHESIA FOR OTHER PROCEDURE ON SKIN OF ARMS, LEGS, AND FRONT BODY		*	*				3.00	
00402	ANESTHESIA FOR RECONSTRUCTION OF BREAST		*	*				5.00	
00404	ANESTHESIA FOR REMOVAL OF ALL OR PART OF BREAST		*	*				5.00	
00406	ANESTHESIA FOR REMOVAL OF BREAST AND LYMPH NODES		*	*				13.00	
00410	ANESTHESIA FOR PROCEDURE TO CORRECT ABNORMAL HEART RHYTHM		*	*				4.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00450	ANESTHESIA FOR OTHER PROCEDURE ON COLLAR BONE AND SHOULDER BLADE		*	*				5.00	
00454	ANESTHESIA FOR BIOPSY OF COLLAR BONE		*	*				3.00	
00470	ANESTHESIA FOR OTHER PARTIAL REMOVAL OF RIB		*	*				6.00	
00472	ANESTHESIA FOR PARTIAL REMOVAL OF RIB AND CHEST WALL REPAIR		*	*				10.00	
00474	ANESTHESIA FOR EXTENSIVE PARTIAL REMOVAL OF RIB		*	*				13.00	
00500	ANESTHESIA FOR PROCEDURE ON ESOPHAGUS		*	*				15.00	
00520	ANESTHESIA FOR OTHER CLOSED PROCEDURE ON CHEST		*	*				6.00	
00522	ANESTHESIA FOR CLOSED NEEDLE BIOPSY OF LUNG		*	*				4.00	
00524	ANESTHESIA FOR CLOSED DRAINAGE OF LUNG FLUID		*	*				4.00	
00528	ANESTHESIA FOR CLOSED EXAM OF CHEST USING AN ENDOSCOPE		*	*				8.00	
00529	ANESTHESIA FOR CLOSED EXAM OF CHEST USING AN ENDOSCOPE WITH 1 LUNG INFLATED		*	*				11.00	
00530	ANESTHESIA FOR INSERTION OF PERMANENT HEART PACEMAKER		*	*				4.00	
00532	ANESTHESIA FOR ACCESS TO CENTRAL VEIN		*	*				4.00	
00534	ANESTHESIA FOR INSERTION OR REPLACE OF PACING HEART DEFIBRILLATOR		*	*				7.00	
00537	ANESTHESIA FOR PROCEDURE TO ASSESS HEART ELECTRICAL ACTIVITY		*	*				10.00	
00539	ANESTHESIA FOR RECONSTRUCTION OF AIRWAY		*	*				18.00	
00540	ANESTHESIA FOR OTHER PROCEDURE ON CHEST		*	*				12.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00541	ANESTHESIA FOR PROCEDURE ON CHEST WITH 1 LUNG INFLATED		*	*				15.00	
00542	ANESTHESIA FOR REMOVAL OF TISSUE FROM AROUND LUNG		*	*				15.00	
00546	ANESTHESIA FOR REMOVAL OF LUNG WITH CHEST WALL REPAIR		*	*				15.00	
00548	ANESTHESIA FOR PROCEDURE ON AIRWAY		*	*				17.00	
00550	ANESTHESIA FOR REMOVAL OF BREAST BONE TISSUE		*	*				10.00	
00560	ANESTHESIA FOR PROCEDURE ON HEART AND LARGE BLOOD VESSELS		*	*				15.00	
00561	ANESTHESIA FOR PROCEDURE ON HEART AND LARGE BLOOD VESSELS USING HEART-LUNG MACHINE (YOUNGER THAN 1 YEAR)		*	*				25.00	
00562	ANESTHESIA FOR PROCEDURE ON HEART AND LARGE BLOOD VESSELS USING HEART-LUNG MACHINE (1 YEAR OR OLDER)		*	*				20.00	
00563	ANESTHESIA FOR PROCEDURE ON HEART AND LARGE BLOOD VESSELS USING HEART-LUNG MACHINE AND STOPPING BLOOD FLOW		*	*				25.00	
00566	ANESTHESIA FOR HEART ARTERY BYPASS GRAFTING		*	*				25.00	
00567	ANESTHESIA FOR HEART ARTERY BYPASS GRAFTING ON HEART-LUNG MACHINE		*	*				18.00	
00580	ANESTHESIA FOR HEART OR HEART-LUNG TRANSPLANT		*	*				20.00	
00600	ANESTHESIA FOR OTHER PROCEDURE ON UPPER SPINE		*	*				10.00	
00604	ANESTHESIA FOR PROCEDURE ON UPPER SPINE WITH SITTING UP		*	*				13.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00620	ANESTHESIA FOR OTHER PROCEDURE ON MIDDLE SPINE		*	*				10.00	
00625	ANESTHESIA FOR PROCEDURE ON MIDDLE SPINE THROUGH CHEST WALL		*	*				13.00	
00626	ANESTHESIA FOR PROCEDURE ON MIDDLE SPINE THROUGH CHEST WALL WITH 1 LUNG INFLATED		*	*				15.00	
00630	ANESTHESIA FOR OTHER PROCEDURE ON LOWER SPINE		*	*				8.00	
00632	ANESTHESIA FOR REMOVAL OF NERVES IN LOWER SPINE		*	*				7.00	
00635	ANESTHESIA FOR SPINAL TAP		*	*				4.00	
00640	ANESTHESIA FOR MANIPULATION OR CLOSED PROCEDURE OF SPINE		*	*				3.00	
00670	ANESTHESIA FOR EXTENSIVE SURGERY ON SPINE		*	*				13.00	
00700	ANESTHESIA FOR OTHER PROCEDURE ON UPPER FRONT ABDOMEN		*	*				4.00	
00702	ANESTHESIA FOR BIOPSY OF LIVER		*	*				4.00	
00730	ANESTHESIA FOR PROCEDURE ON UPPER REAR ABDOMEN		*	*				5.00	
00731	ANESTHESIA FOR OTHER PROCEDURE ON ESOPHAGUS, STOMACH, OR UPPER SMALL BOWEL USING AN ENDOSCOPE		*	*				5.00	Added Effective 1/1/2018
00732	ANESTHESIA FOR PROCEDURE ON GALLBLADDER, PANCREAS, OR LIVER USING AN ENDOSCOPE		*	*				6.00	Added Effective 1/1/2018
00750	ANESTHESIA FOR OTHER REPAIR OF UPPER ABDOMEN HERNIA		*	*				4.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00752	ANESTHESIA FOR PROCEDURE TO REPAIR UPPER ABDOMINAL INCISIONAL HERNIA AND/OR WOUND OPENING		*	*				6.00	
00754	ANESTHESIA FOR PROCEDURE TO REPAIR UPPER ABDOMINAL HERNIA PRESENT AT BIRTH		*	*				7.00	
00756	ANESTHESIA FOR PROCEDURE TO REPAIR ABDOMINAL HERNIA		*	*				7.00	
00770	ANESTHESIA FOR PROCEDURE ON LARGE BLOOD VESSELS IN ABDOMEN		*	*				15.00	
00790	ANESTHESIA FOR OTHER PROCEDURE ON UPPER ABDOMEN		*	*				7.00	
00792	ANESTHESIA FOR PARTIAL REMOVAL OF LIVER OR MANAGEMENT OF BLEEDING INCLUDING USE OF AN ENDOSCOPE		*	*				13.00	
00794	ANESTHESIA FOR REMOVAL OF PANCREAS INCLUDING USE OF AN ENDOSCOPE		*	*				8.00	
00796	ANESTHESIA FOR LIVER TRANSPLANT RECIPIENT INCLUDING USE OF AN ENDOSCOPE		*	*				30.00	
00797	ANESTHESIA FOR PROCEDURE ON STOMACH FOR WEIGHT LOSS		*	*				11.00	
00800	ANESTHESIA FOR OTHER PROCEDURE ON LOWER FRONT ABDOMEN		*	*				4.00	
00802	ANESTHESIA FOR REMOVAL OF EXCESS TISSUE OF LOWER REAR ABDOMEN		*	*				5.00	
00811	ANESTHESIA FOR OTHER PROCEDURE ON LARGE BOWEL USING AN ENDOSCOPE		*	*				4.00	Added Effective 1/1/2018
00812	ANESTHESIA FOR EXAM OF COLON USING AN ENDOSCOPE		*	*				3.00	Added Effective 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00813	ANESTHESIA FOR PROCEDURE ON SMALL AND LARGE BOWEL USING AN ENDOSCOPE		*	*				3.00	Added Effective 1/1/2018
00820	ANESTHESIA FOR PROCEDURE ON LOWER REAR ABDOMEN		*	*				5.00	
00830	ANESTHESIA FOR OTHER REPAIR OF LOWER ABDOMEN HERNIA (1 YEAR OR OLDER)		*	*				4.00	
00832	ANESTHESIA FOR REPAIR OF ABDOMINAL WALL HERNIA		*	*				6.00	
00834	ANESTHESIA FOR OTHER REPAIR OF LOWER ABDOMEN HERNIA (YOUNGER THAN 1 YEAR)		*	*				5.00	
00836	ANESTHESIA FOR REPAIR OF LOWER ABDOMEN HERNIA (INFANT YOUNGER THAN 37 WEEKS AT BIRTH AND YOUNGER THAN 50 WEEKS OF AGE AT TIME OF SURGERY		*	*				6.00	
00840	ANESTHESIA FOR OTHER PROCEDURE ON LOWER ABDOMEN		*	*				6.00	
00842	ANESTHESIA FOR REMOVAL OF AMNIOTIC FLUID FROM UTERUS		*	*				4.00	
00844	ANESTHESIA FOR PROCEDURE ON LARGE BOWEL		*	*				7.00	
00846	ANESTHESIA FOR REMOVAL OF UTERUS INCLUDING USE OF AN ENDOSCOPE		*	*				8.00	
00848	ANESTHESIA FOR REMOVAL OF PELVIC ORGANS INCLUDING USE OF AN ENDOSCOPE		*	*				8.00	
00851	ANESTHESIA FOR TYING OR INCISION OF FALLOPIAN TUBES USING AN ENDOSCOPE		*	*				6.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00860	ANESTHESIA FOR OTHER PROCEDURE ON LOWER ABDOMEN OUTSIDE ABDOMINAL CAVITY		*	*				6.00	
00862	ANESTHESIA FOR PROCEDURE ON UPPER URINARY TUBES OR REMOVAL OF KIDNEY FOR TRANSPLANT		*	*				7.00	
00864	ANESTHESIA FOR TOTAL REMOVAL OF BLADDER		*	*				8.00	
00865	ANESTHESIA FOR EXTENSIVE REMOVAL OF PROSTATE		*	*				7.00	
00866	ANESTHESIA FOR REMOVAL OF ADRENAL GLAND		*	*				10.00	
00868	ANESTHESIA FOR KIDNEY TRANSPLANT		*	*				10.00	
00870	ANESTHESIA FOR REMOVAL OF URINARY BLADDER STONE		*	*				5.00	
00872	ANESTHESIA FOR SHOCK WAVE THERAPY FOR URINARY SYSTEM STONES WITH WATER BATH		*	*				7.00	
00873	ANESTHESIA FOR SHOCK WAVE THERAPY FOR URINARY SYSTEM STONES WITHOUT WATER BATH		*	*				5.00	
00880	ANESTHESIA FOR OTHER PROCEDURE ON LARGE BLOOD VESSEL OF LOWER ABDOMEN		*	*				15.00	
00882	ANESTHESIA FOR TYING OF LARGE VEIN OF LOWER ABDOMEN		*	*				10.00	
00902	ANESTHESIA FOR PROCEDURE ON ANUS AND RECTUM		*	*				5.00	
00904	ANESTHESIA FOR EXTENSIVE PROCEDURE ON PERINEUM		*	*				7.00	
00906	ANESTHESIA FOR REMOVAL OF EXTERNAL FEMALE GENITALS		*	*				4.00	
00908	ANESTHESIA FOR REMOVAL OF PROSTATE		*	*				6.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00910	ANESTHESIA FOR OTHER PROCEDURE ON URINARY SYSTEM THROUGH URETHRA		*	*				3.00	
00912	ANESTHESIA FOR REMOVAL OF URINARY BLADDER TUMORS INCLUDING USE OF AN ENDOSCOPE		*	*				5.00	
00914	ANESTHESIA FOR REMOVAL OF PROSTATE INCLUDING USE OF AN ENDOSCOPE		*	*				5.00	
00916	ANESTHESIA FOR PROCEDURE TO CONTROL URINARY SYSTEM BLEEDING INCLUDING USE OF AN ENDOSCOPE		*	*				5.00	
00918	ANESTHESIA FOR FRAGMENTING, MANIPULATION AND/OR REMOVAL OF KIDNEY STONE INCLUDING USE OF AN ENDOSCOPE		*	*				5.00	
00920	ANESTHESIA FOR OTHER PROCEDURE ON MALE GENITALS		*	*				3.00	
00921	ANESTHESIA FOR VASECTOMY		*	*				3.00	
00922	ANESTHESIA FOR PROCEDURE ON MALE GENITAL GLANDS		*	*				6.00	
00924	ANESTHESIA FOR PROCEDURE ON UNDESCENDED TESTICLE		*	*				4.00	
00926	ANESTHESIA FOR REMOVAL OF TESTICLE THROUGH GROIN		*	*				4.00	
00928	ANESTHESIA FOR REMOVAL OF TESTICLE THROUGH INCISION IN ABDOMEN		*	*				6.00	
00930	ANESTHESIA FOR RELOCATION OF UNDESCENDED TESTICLE INTO SCROTUM		*	*				4.00	
00932	ANESTHESIA FOR COMPLETE AMPUTATION OF PENIS		*	*				4.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
00934	ANESTHESIA FOR AMPUTATION OF PENIS AND REMOVAL OF LYMPH NODES OF GROIN		*	*				6.00	
00936	ANESTHESIA FOR AMPUTATION OF PENIS AND REMOVAL OF LYMPH NODES ON BOTH SIDES OF GROIN AND PELVIS (INGUINAL AND ILIAC NODES)		*	*				8.00	
00938	ANESTHESIA FOR INSERTION OF PENILE PROSTHESIS		*	*				4.00	
00940	ANESTHESIA FOR OTHER PROCEDURE ON FEMALE GENITALS		*	*				3.00	
00942	ANESTHESIA FOR REPAIR OR REMOVAL OF VAGINA AND URINARY PROCEDURE		*	*				4.00	
00944	ANESTHESIA FOR VAGINAL REMOVAL OF UTERUS		*	*				6.00	
00948	ANESTHESIA FOR SUTURE CLOSURE OF CERVIX		*	*				4.00	
00950	ANESTHESIA FOR EXAM OF CERVIX USING AN ENDOSCOPE		*	*				5.00	
00952	ANESTHESIA FOR EXAM OF UTERUS USING AN ENDOSCOPE		*	*				4.00	
01112	ANESTHESIA FOR BONE MARROW ASPIRATION AND/OR BIOPSY AT PELVIC BONE		*	*				5.00	
01120	ANESTHESIA FOR PROCEDURE ON HIP BONE		*	*				6.00	
01130	ANESTHESIA FOR APPLICATION OR REVISION OF BODY CAST		*	*				3.00	
01140	ANESTHESIA FOR AMPUTATION OF LEG INCLUDING PELVIC BONE		*	*				15.00	
01150	ANESTHESIA FOR EXTENSIVE REMOVAL OF GROWTH OF HIP BONE		*	*				10.00	
01160	ANESTHESIA FOR CLOSED PROCEDURE ON PUBIC BONE OR PELVIC JOINT		*	*				4.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01170	ANESTHESIA FOR PROCEDURE ON PUBIC BONE OR PELVIC JOINT		*	*				8.00	
01173	ANESTHESIA FOR REPAIR OF BROKEN HIP BONE		*	*				12.00	
01200	ANESTHESIA FOR CLOSED PROCEDURE ON HIP JOINT		*	*				4.00	
01202	ANESTHESIA FOR PROCEDURE ON HIP JOINT USING AN ENDOSCOPE		*	*				4.00	
01210	ANESTHESIA FOR OTHER PROCEDURE ON HIP JOINT		*	*				6.00	
01212	ANESTHESIA FOR REMOVAL OF HIP BONE AT JOINT		*	*				10.00	
01214	ANESTHESIA FOR TOTAL HIP REPLACEMENT		*	*				8.00	
01215	ANESTHESIA FOR REVISION OF TOTAL HIP REPLACEMENT		*	*				10.00	
01220	ANESTHESIA FOR CLOSED PROCEDURE ON UPPER 2/3RD OF THIGH BONE		*	*				4.00	
01230	ANESTHESIA FOR PROCEDURE ON UPPER 2/3RD OF THIGH BONE		*	*				6.00	
01232	ANESTHESIA FOR AMPUTATION ON UPPER 2/3RD OF THIGH BONE		*	*				5.00	
01234	ANESTHESIA FOR REMOVAL OF MUSCLE OR TISSUE ON UPPER 2/3RD OF THIGH BONE		*	*				8.00	
01250	ANESTHESIA FOR PROCEDURE ON NERVES, MUSCLES, TENDONS, AND TISSUE OF UPPER LEG		*	*				4.00	
01260	ANESTHESIA FOR PROCEDURE ON VEINS IN UPPER LEG		*	*				3.00	
01270	ANESTHESIA FOR OTHER PROCEDURE ON ARTERY OF UPPER LEG		*	*				8.00	
01272	ANESTHESIA FOR TYING OF ARTERY OF UPPER LEG		*	*				4.00	
01274	ANESTHESIA FOR REMOVAL OF BLOOD CLOT IN ARTERY OF UPPER LEG		*	*				6.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01320	ANESTHESIA FOR PROCEDURE ON NERVES, MUSCLES, TENDONS, AND TISSUE OF KNEE		*	*				4.00	
01340	ANESTHESIA FOR CLOSED PROCEDURE ON LOWER 1/3RD OF THIGH BONE		*	*				4.00	
01360	ANESTHESIA FOR PROCEDURE ON LOWER 1/3RD OF THIGH BONE		*	*				5.00	
01380	ANESTHESIA FOR CLOSED PROCEDURE ON KNEE JOINT		*	*				3.00	
01382	ANESTHESIA FOR EXAM OF KNEE JOINT USING AN ENDOSCOPE		*	*				3.00	
01390	ANESTHESIA FOR CLOSED PROCEDURE ON KNEECAP AND/OR UPPER PART OF LOWER LEG BONES		*	*				3.00	
01392	ANESTHESIA FOR PROCEDURE ON KNEECAP AND/OR UPPER PART OF LOWER LEG BONES		*	*				4.00	
01400	ANESTHESIA FOR OTHER PROCEDURE OR EXAM OF KNEE JOINT USING AN ENDOSCOPE		*	*				4.00	
01402	ANESTHESIA FOR PROCEDURE FOR TOTAL KNEE JOINT REPLACEMENT		*	*				7.00	
01404	ANESTHESIA FOR REMOVAL OF LEG AT KNEE JOINT		*	*				5.00	
01420	ANESTHESIA FOR APPLICATION, REMOVAL, OR REPAIR OF CAST TO KNEE		*	*				3.00	
01430	ANESTHESIA FOR OTHER PROCEDURE ON VEIN OF KNEE		*	*				3.00	
01432	ANESTHESIA FOR REPAIR OF ABNORMAL ARTERY-VEIN FORMATION OF KNEE		*	*				6.00	
01440	ANESTHESIA FOR OTHER PROCEDURE ON ARTERY OF KNEE		*	*				8.00	
01442	ANESTHESIA FOR REMOVAL OF BLOOD CLOT OF ARTERY BEHIND KNEE		*	*				8.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01444	ANESTHESIA FOR REPAIR OF BULGING (ANEURYSM) DEFECT IN KNEE ARTERY		*	*				8.00	
01462	ANESTHESIA FOR CLOSED PROCEDURE ON LOWER LEG, ANKLE, AND FOOT		*	*				3.00	
01464	ANESTHESIA FOR PROCEDURE ON ANKLE OR FOOT USING AN ENDOSCOPE		*	*				3.00	
01470	ANESTHESIA FOR OTHER PROCEDURE ON NERVES, MUSCLES, TENDONS, AND TISSUE OF LOWER LEG, ANKLE, AND FOOT		*	*				3.00	
01472	ANESTHESIA FOR REPAIR OF ACHILLES TENDON		*	*				5.00	
01474	ANESTHESIA FOR REPAIR OF CALF MUSCLE		*	*				5.00	
01480	ANESTHESIA FOR OTHER PROCEDURE ON LOWER LEG, ANKLE, AND FOOT BONES		*	*				3.00	
01482	ANESTHESIA FOR OPEN AMPUTATION BELOW THE KNEE		*	*				4.00	
01484	ANESTHESIA FOR OPEN RECONSTRUCTION OF LOWER LEG, ANKLE, AND/OR FOOT BONE		*	*				4.00	
01486	ANESTHESIA FOR OPEN TOTAL ANKLE JOINT REPLACEMENT		*	*				7.00	
01490	ANESTHESIA FOR APPLICATION, REMOVAL, OR REPAIR OF CAST TO LOWER LEG		*	*				3.00	
01500	ANESTHESIA FOR OTHER PROCEDURE ON ARTERY OF LOWER LEG		*	*				8.00	
01502	ANESTHESIA FOR REMOVAL OF BLOOD CLOT IN ARTERY OF LOWER LEG		*	*				6.00	
01520	ANESTHESIA FOR OTHER PROCEDURE ON VEIN OF LOWER LEG		*	*				3.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01522	ANESTHESIA FOR REMOVAL OF OBSTRUCTION IN VEIN OF LOWER LEG		*	*				5.00	
01610	ANESTHESIA FOR PROCEDURE ON NERVES, MUSCLES, TENDONS, FASCIA, AND BURSAE OF SHOULDER AND UNDERARM		*	*				5.00	
01620	ANESTHESIA FOR CLOSED PROCEDURE ON TOP OF ARM BONE AND SHOULDER JOINT		*	*				4.00	
01622	ANESTHESIA FOR EXAM OF SHOULDER JOINT USING AN ENDOSCOPE		*	*				4.00	
01630	ANESTHESIA FOR OTHER PROCEDURE ON TOP OF ARM BONE AND SHOULDER JOINT		*	*				5.00	
01634	ANESTHESIA FOR REMOVAL OF ARM AT SHOULDER JOINT		*	*				9.00	
01636	ANESTHESIA FOR OPEN OR ENDOSCOPIC AMPUTATION OF ARM, SHOULDER BLADE, AND COLLAR BONE		*	*				15.00	
01638	ANESTHESIA FOR OPEN OR ENDOSCOPIC TOTAL SHOULDER JOINT REPLACEMENT		*	*				10.00	
01650	ANESTHESIA FOR OTHER PROCEDURE ON ARTERIES OF SHOULDER AND UNDERARM		*	*				6.00	
01652	ANESTHESIA FOR REPAIR OF BULGING ARTERY OF SHOULDER AND UNDERARM		*	*				10.00	
01654	ANESTHESIA FOR BYPASS GRAFT ON ARTERY OF SHOULDER AND UNDERARM		*	*				8.00	
01656	ANESTHESIA FOR BYPASS GRAFT FROM GROIN ARTERY TO SHOULDER AND UNDERARM ARTERY		*	*				10.00	
01670	ANESTHESIA FOR PROCEDURE ON VEINS OF SHOULDER AND UNDERARM		*	*				4.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01680	ANESTHESIA FOR OTHER APPLICATION, REMOVAL, OR REPAIR OF CAST		*	*				3.00	
01710	ANESTHESIA FOR OTHER PROCEDURES ON NERVES, MUSCLES, TENDONS, AND TISSUE OF UPPER ARM AND ELBOW		*	*				3.00	
01712	ANESTHESIA FOR PROCEDURE ON TENDON OF ELBOW TO SHOULDER		*	*				5.00	
01714	ANESTHESIA FOR REPAIR OF ELBOW TO SHOULDER TENDON		*	*				5.00	
01716	ANESTHESIA FOR PROCEDURE ON TENDON OF UPPER ARM MUSCLE		*	*				5.00	
01730	ANESTHESIA FOR CLOSED PROCEDURE ON UPPER ARM AND ELBOW		*	*				3.00	
01732	ANESTHESIA FOR EXAM OF ELBOW JOINT USING AN ENDOSCOPE		*	*				3.00	
01740	ANESTHESIA FOR OTHER PROCEDURE ON ELBOW		*	*				4.00	
01742	ANESTHESIA FOR INCISION OR PARTIAL REMOVAL OF UPPER ARM BONE		*	*				5.00	
01744	ANESTHESIA FOR REPAIR OF NONHEALED BROKEN UPPER ARM BONE		*	*				5.00	
01756	ANESTHESIA FOR EXTENSIVE PROCEDURE ON ELBOW		*	*				6.00	
01758	ANESTHESIA FOR REMOVAL OF CYST OR GROWTH OF UPPER ARM		*	*				5.00	
01760	ANESTHESIA FOR TOTAL ELBOW JOINT REPLACEMENT		*	*				7.00	
01770	ANESTHESIA FOR OTHER PROCEDURE ON ARTERIES OF UPPER ARM AND ELBOW		*	*				6.00	
01772	ANESTHESIA FOR REMOVAL OF BLOOD CLOT FROM UPPER ARM OR ELBOW ARTERY		*	*				6.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01780	ANESTHESIA FOR OTHER PROCEDURE ON VEINS OF UPPER ARM AND ELBOW		*	*				3.00	
01782	ANESTHESIA FOR SUTURE OF VEIN OF UPPER ARM AND ELBOW		*	*				4.00	
01810	ANESTHESIA FOR PROCEDURE ON NERVES, MUSCLES, TENDONS, AND TISSUE OF FOREARM, WRIST, AND HAND		*	*				3.00	
01820	ANESTHESIA FOR CLOSED PROCEDURE ON BONES OF FOREARM, WRIST, OR HAND		*	*				3.00	
01829	ANESTHESIA FOR CLOSED PROCEDURE ON BONES OF FOREARM, WRIST, OR HAND		*	*				3.00	
01830	ANESTHESIA FOR OTHER PROCEDURE ON FOREARM, WRIST, OR HAND BONES		*	*				3.00	
01832	ANESTHESIA FOR TOTAL WRIST JOINT REPLACEMENT		*	*				6.00	
01840	ANESTHESIA FOR OTHER PROCEDURE ON ARTERIES OF FOREARM, WRIST, AND HAND		*	*				6.00	
01842	ANESTHESIA FOR REMOVAL OF BLOOD CLOT IN ARTERY OF FOREARM, WRIST, AND HAND		*	*				6.00	
01844	ANESTHESIA FOR PLACEMENT OR REVISION OF BLOOD FLOW SHUNT		*	*				6.00	
01850	ANESTHESIA FOR OTHER PROCEDURE ON VEINS OF FOREARM, WRIST, AND HAND		*	*				3.00	
01852	ANESTHESIA FOR SUTURE OF FOREARM, WRIST, OR HAND VEIN		*	*				4.00	
01860	ANESTHESIA FOR APPLICATION, REMOVAL, OR REPAIR CAST TO FOREARM, WRIST AND HAND		*	*				3.00	
01916	ANESTHESIA FOR X-RAY EXAM OF ARTERIES AND VEINS USING CONTRAST		*	*				5.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01920	ANESTHESIA FOR X-RAY ON HEART VESSELS AND CHAMBERS		*	*				7.00	
01922	ANESTHESIA FOR X-RAY OR RADIATION THERAPY		*	*				7.00	
01924	ANESTHESIA FOR X-RAY ON ARTERIES		*	*				6.00	
01925	ANESTHESIA FOR X-RAY ON ARTERY OF NECK OR HEART		*	*				8.00	
01926	ANESTHESIA FOR X-RAY ON ARTERY OF BRAIN, HEART, OR CHEST		*	*				10.00	
01930	ANESTHESIA FOR OTHER X-RAY ON VEIN OR LYMPH SYSTEM		*	*				5.00	
01931	ANESTHESIA FOR X-RAY ON VEIN OF LIVER		*	*				7.00	
01932	ANESTHESIA FOR X-RAY ON VEIN OF CHEST OR NECK		*	*				7.00	
01933	ANESTHESIA FOR X-RAY ON VEIN OF BRAIN		*	*				8.00	
01937	ANESTHESIA FOR INJECTION, DRAINAGE OR ASPIRATION PROCEDURES ON SPINE OR SPINAL CORD OF NECK OR UPPER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				4.00	Added 1/1/2022
01938	ANESTHESIA FOR INJECTION, DRAINAGE OR ASPIRATION PROCEDURES ON SPINE OR SPINAL CORD OF LOWER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				4.00	Added 1/1/2022
01939	ANESTHESIA FOR NERVE DESTRUCTION PROCEDURES ON SPINE OR SPINAL CORD OF NECK OR UPPER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				4.00	Added 1/1/2022
01940	ANESTHESIA FOR NERVE DESTRUCTION PROCEDURES ON SPINE OR SPINAL CORD OF LOWER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				4.00	Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01941	ANESTHESIA FOR NERVE MODULATION PROCEDURE SPINAL CORD OR REPAIR OF BONE OF SPINE OF NECK OR UPPER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				5.00	Added 1/1/2022
01942	ANESTHESIA FOR NERVE MODULATION PROCEDURE SPINAL CORD OR REPAIR OF BONE OF SPINE OF LOWER BACK ACCESSED THROUGH SKIN USING IMAGING GUIDANCE		*	*				5.00	Added 1/1/2022
01951	ANESTHESIA FOR TREATMENT OF SECOND AND THIRD DEGREE BURN, LESS THAN 4% OF TOTAL BODY SURFACE AREA		*	*				3.00	
01952	ANESTHESIA FOR TREATMENT OF SECOND AND THIRD DEGREE BURN, 4-9% OF TOTAL BODY SURFACE AREA		*	*				5.00	
01953	ANESTHESIA FOR TREATMENT OF SECOND AND THIRD DEGREE BURN, EACH ADDITIONAL 9% OF TOTAL BODY SURFACE AREA OR LESS		*	*				1.00	
01958	ANESTHESIA FOR PROCEDURE TO TURN THE POSITION OF FETUS IN UTERUS		*	*				5.00	
01960	ANESTHESIA FOR VAGINAL DELIVERY		$215.00	$215.00				5.00	
01961	ANESTHESIA FOR CESAREAN DELIVERY		$335.00	$335.00				7.00	
01962	ANESTHESIA FOR PROCEDURE TO REMOVE UTERUS FOLLOWING DELIVERY		*	*				8.00	
01963	ANESTHESIA FOR CESAREAN AND REMOVAL OF UTERUS		*	*				10.00	

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
01965	ANESTHESIA FOR INCOMPLETE OR MISSED ABORTION		*	*				4.00	
01966	ANESTHESIA FOR INDUCED ABORTION		*	*				4.00	
01967	ANESTHESIA FOR LABOR DURING PLANNED VAGINAL DELIVERY		$350.00	$350.00				5.00	
01968	ANESTHESIA FOR CESAREAN DELIVERY FOLLOWING LABOR		$25.00	$25.00				3.00	
01969	ANESTHESIA FOR CESAREAN REMOVAL OF UTERUS FOLLOWING LABOR		$25.00	$25.00				5.00	
01990	PHYSIOLOGICAL SUPPORT FOR HARVESTING OF ORGANS		*	*				7.00	
01991	ANESTHESIA FOR NERVE BLOCK AND INJECTION		*	*				3.00	
01992	ANESTHESIA FOR NERVE BLOCK AND INJECTION PROCEDURE, PRONE POSITION		*	*				5.00	
01996	DAILY HOSPITAL MANAGEMENT OF CONTINUOUS SPINAL DRUG ADMINISTRATION		$87.06	$87.06				3.00	Updated Effective 01/01/2020
01999	OTHER ANESTHESIA PROCEDURE	Yes	$0.00	$0.00					
10004	FINE NEEDLE ASPIRATION BIOPSY, EACH ADDITIONAL GROWTH		$35.29	$41.55					Effective 1/1/2019
10005	FINE NEEDLE ASPIRATION BIOPSY USING ULTRASOUND GUIDANCE, FIRST GROWTH		$59.76	$98.66					Effective 1/1/2019
10006	FINE NEEDLE ASPIRATION BIOPSY USING ULTRASOUND GUIDANCE, EACH ADDITIONAL GROWTH		$40.72	$48.03					Effective 1/1/2019
10007	FINE NEEDLE ASPIRATION BIOPSY USING FLUOROSCOPIC GUIDANCE, FIRST GROWTH		$76.60	$217.33					Effective 1/1/2019
10008	FINE NEEDLE ASPIRATION BIOPSY USING FLUOROSCOPIC GUIDANCE, EACH ADDITIONAL GROWTH		$49.94	$123.04					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
10009	FINE NEEDLE ASPIRATION BIOPSY OF GROWTH USING CT GUIDANCE, FIRST GROWTH		$93.03	$353.34					Effective 1/1/2019
10010	FINE NEEDLE ASPIRATION BIOPSY OF GROWTH USING CT GUIDANCE, EACH ADDITIONAL GROWTH		$67.99	$213.94					Effective 1/1/2019
10011	FINE NEEDLE ASPIRATION BIOPSY OF GROWTH USING MRI GUIDANCE, FIRST GROWTH		$0.00	$0.00					Effective 1/1/2019
10012	FINE NEEDLE ASPIRATION BIOPSY OF GROWTH USING MRI GUIDANCE, EACH ADDITIONAL GROWTH		$0.00	$0.00					Effective 1/1/2019
10021	FINE NEEDLE ASPIRATION BIOPSY, FIRST GROWTH		$65.38	$65.38		$12.88	$52.50		
10030	DRAINAGE OF FLUID COLLECTION IN SOFT TISSUE USING IMAGING GUIDANCE		$125.74	$581.61					
10035	PLACEMENT OF SOFT TISSUE LOCATING DEVICE USING X-RAY, FIRST GROWTH	Yes	$70.75	$398.81					Added Effective 1/1/2016
10036	PLACEMENT OF SOFT TISSUE LOCATING DEVICE USING X-RAY, EACH ADDITIONAL GROWTH	Yes	$35.62	$344.28					Added Effective 1/1/2016
10040	REMOVAL OF ACNE		$36.49	$92.41					
10060	SIMPLE OR SINGLE DRAINAGE OF SKIN ABSCESS		$39.74	$45.64					
10061	COMPLICATED OR MULTIPLE DRAINAGE OF SKIN ABSCESS		$82.81	$91.40					
10080	SIMPLE DRAINAGE OF CYST OF TAILBONE		$55.46	$62.16					
10081	COMPLICATED DRAINAGE OF CYST OF TAILBONE		$89.20	$104.08					
10120	REMOVAL OF FOREIGN BODY FROM TISSUE, ACCESSED BENEATH THE SKIN, SIMPLE		$42.30	$48.47					
10121	REMOVAL OF FOREIGN BODY FROM TISSUE, ACCESSED BENEATH THE SKIN, COMPLEX		$93.79	$107.20					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
10140	DRAINAGE OF BLOOD OR FLUID ACCUMULATION		$51.08	$57.52					
10160	ASPIRATION OF ABSCESS, BLOOD, OR CYST		$40.06	$45.15					
10180	COMPLEX DRAINAGE OF WOUND INFECTION AFTER SURGERY		$97.09	$97.09					
11000	REMOVAL OF INFLAMED OR INFECTED SKIN, UP TO 10% OF BODY SURFACE		$33.04	$38.40					
11001	REMOVAL OF INFLAMED OR INFECTED SKIN, EACH ADDITIONAL 10% OF BODY SURFACE OR LESS		$17.18	$20.66					
11004	REMOVAL OF INFECTED SKIN, TISSUE OR MUSCLE OF GENITALS		$422.77	$422.77					
11005	REMOVAL OF INFECTED SKIN, TISSUE OR MUSCLE OF ABDOMEN		$574.70	$574.70					
11006	REMOVAL OF INFECTED SKIN, TISSUE OR MUSCLE OF GENITALS, PERINEUM, OR ABDOMEN		$531.05	$531.05					
11008	REMOVAL OF INFECTED ARTIFICIAL MATERIAL OR MESH FROM ABDOMEN		$215.69	$215.69					
11010	REMOVAL OF FOREIGN MATERIAL FROM SKIN AND TISSUE AT OPEN BROKEN AND/OR DISLOCATED BONE		$237.46	$237.46					
11011	REMOVAL OF FOREIGN MATERIAL FROM SKIN, TISSUE, AND MUSCLE AT OPEN BROKEN AND/OR DISLOCATED BONE		$283.02	$283.02					
11012	REMOVAL OF FOREIGN MATERIAL FROM SKIN, TISSUE, MUSCLE, AND BONE AT OPEN BROKEN AND/OR DISLOCATED BONE		$393.35	$393.35					
11042	REMOVAL OF SKIN AND TISSUE, 20.0 SQ CM OR LESS		$48.18	$48.18					
11043	REMOVAL OF MUSCLE AND/OR TISSUE, 20.0 SQ CM OR LESS		$110.51	$110.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11044	REMOVAL OF BONE, 20.0 SQ CM OR LESS		$154.45	$154.45					
11045	REMOVAL OF SKIN AND TISSUE, EACH ADDITIONAL 20.0 SQ CM OR LESS		$15.73	$27.00					
11046	REMOVAL OF MUSCLE AND/OR TISSUE, EACH ADDITIONAL 20.0 SQ CM OR LESS		$33.23	$46.88					
11047	REMOVAL OF BONE, EACH ADDITIONAL 20.0 SQ CM OR LESS		$57.86	$77.14					
11055	REMOVAL OF NONCANCER THICKENED SKIN GROWTH, 1 GROWTH		$14.74	$14.74					
11056	REMOVAL OF NONCANCER THICKENED SKIN GROWTH, 2-4 GROWTHS		$20.76	$20.76					
11057	REMOVAL OF NONCANCER THICKENED SKIN GROWTH, MORE THAN 4 GROWTHS		$22.12	$22.12					
11102	BIOPSY OF RELATED SKIN GROWTH, FIRST GROWTH		$31.95	$75.29					Effective 1/1/2019
11103	BIOPSY OF RELATED SKIN GROWTH, EACH ADDITIONAL GROWTH		$18.49	$40.69					Effective 1/1/2019
11104	PUNCH BIOPSY, FIRST SKIN GROWTH		$40.09	$94.66					Effective 1/1/2019
11105	PUNCH BIOPSY, EACH ADDITIONAL SKIN GROWTH		$21.86	$46.66					Effective 1/1/2019
11106	INCISION BIOPSY, FIRST SKIN GROWTH		$48.77	$114.57					Effective 1/1/2019
11107	INCISION BIOPSY, EACH ADDITIONAL SKIN GROWTH		$26.08	$55.06					Effective 1/1/2019
11200	REMOVAL OF SKIN TAG, 1-15 SKIN TAGS		$26.99	$32.75					
11201	REMOVAL OF SKIN TAG, EACH ADDITIONAL 10 SKIN TAGS		$10.40	$12.68					
11300	SHAVING OF SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.5 CM OR LESS		$23.29	$30.40					
11301	SHAVING OF SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.6-1.0 CM		$35.39	$44.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11302	SHAVING OF SKIN GROWTH OF BODY, ARMS, OR LEGS, 1.1-2.0 CM		$44.93	$56.87					
11303	SHAVING OF SKIN GROWTH OF BODY, ARMS, OR LEGS, MORE THAN 2.0 CM		$58.76	$76.99					
11305	SHAVING OF SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.5 CM OR LESS		$27.85	$34.82					
11306	SHAVING OF SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.6-1.0 CM		$40.27	$49.79					
11307	SHAVING OF SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 1.1-2.0 CM		$48.49	$61.09					
11308	SHAVING OF SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, MORE THAN 2.0 CM		$64.28	$83.06					
11310	SHAVING OF SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.5 CM OR LESS		$32.13	$41.39					
11311	SHAVING OF SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.6-1.0 CM		$44.15	$55.55					
11312	SHAVING OF SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 1.1-2.0 CM		$52.91	$67.93					
11313	SHAVING OF SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 2.0 CM		$71.16	$91.15					
11400	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.5 CM OR LESS		$33.56	$40.67					
11401	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.6-1.0 CM		$47.71	$56.69					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11402	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 1.1-2.0 CM		$59.90	$71.83					
11403	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 2.1-3.0 CM		$73.72	$89.41					
11404	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 3.1-4.0 CM		$85.73	$104.23					
11406	REMOVAL OF NONCANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, MORE THAN 4.0 CM		$137.96	$137.96					
11420	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.5 CM OR LESS		$37.83	$44.80					
11421	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.6-1.0 CM		$54.65	$64.17					
11422	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 1.1-2.0 CM		$65.21	$77.82					
11423	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 2.1-3.0 CM		$83.42	$100.99					
11424	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 3.1-4.0 CM		$97.94	$116.58					
11426	REMOVAL OF NONCANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, MORE THAN 4.0 CM		$165.58	$165.58					
11440	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.5 CM OR LESS		$42.99	$52.24					
11441	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.6-1.0 CM		$59.12	$70.52					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11442	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 1.1-2.0 CM		$71.10	$86.12					
11443	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.1-3.0 CM		$94.69	$114.13					
11444	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 3.1-4.0 CM		$122.00	$141.72					
11446	REMOVAL OF NONCANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 4.0 CM		$158.53	$182.40					
11450	REMOVAL OF SKIN AND TISSUE OF UNDERARMS FOR INFLAMED SWEAT GLANDS WITH SIMPLE OR INTERMEDIATE REPAIR		$158.28	$158.28					
11451	REMOVAL OF SKIN AND TISSUE OF UNDERARMS FOR INFLAMED SWEAT GLANDS WITH COMPLEX REPAIR		$200.47	$200.47					
11462	REMOVAL OF SKIN AND TISSUE OF GROIN FOR INFLAMED SWEAT GLANDS WITH SIMPLE OR INTERMEDIATE REPAIR		$142.64	$142.64					
11463	REMOVAL OF SKIN AND TISSUE OF GROIN FOR INFLAMED SWEAT GLANDS WITH COMPLICATED REPAIR		$173.41	$173.41					
11470	REMOVAL OF SKIN AND TISSUE OF ANUS OR NAVEL FOR INFLAMED SWEAT GLANDS WITH SIMPLE OR INTERMEDIATE REPAIR		$176.46	$176.46					
11471	REMOVAL OF SKIN AND TISSUE OF ANUS OR NAVEL FOR INFLAMED SWEAT GLANDS WITH COMPLICATED REPAIR		$202.65	$202.65					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11600	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.5 CM OR LESS		$57.49	$72.65					
11601	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 0.6-1.0 CM		$76.72	$95.36					
11602	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 1.1-2.0 CM		$88.16	$112.56					
11603	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 2.1-3.0 CM		$102.77	$132.94					
11604	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, 3.1-4.0 CM		$115.29	$150.03					
11606	REMOVAL OF CANCER SKIN GROWTH OF BODY, ARMS, OR LEGS, MORE THAN 4.0 CM		$194.50	$194.50					
11620	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.5 CM OR LESS		$58.74	$76.71					
11621	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.6-1.0 CM		$83.70	$107.17					
11622	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 1.1-2.0 CM		$101.32	$130.82					
11623	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 2.1-3.0 CM		$125.18	$159.78					
11624	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 3.1-4.0 CM		$150.01	$193.05					
11626	REMOVAL OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, MORE THAN 4.0 CM		$227.10	$227.10					
11640	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.5 CM OR LESS		$69.20	$91.33					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11641	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.6-1.0 CM		$102.53	$130.56					
11642	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 1.1-2.0 CM		$124.56	$159.03					
11643	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.1-3.0 CM		$148.41	$188.77					
11644	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 3.1-4.0 CM		$187.14	$234.21					
11646	REMOVAL OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 4.0 CM		$302.11	$302.11					
11719	TRIMMING OF FINGERNAILS OR TOENAILS		$9.61	$9.61					
11720	REMOVAL OF FINGERNAILS OR TOENAILS, 1-5 NAILS		$18.20	$18.20					
11721	REMOVAL OF FINGERNAILS OR TOENAILS, 6 OR MORE NAILS		$30.70	$30.70					
11730	SIMPLE SEPARATION OF FINGERNAIL OR TOENAIL FROM NAIL BED, FIRST NAIL		$40.17	$46.20					
11732	SIMPLE SEPARATION OF FINGERNAIL OR TOENAIL FROM NAIL BED, EACH ADDITIONAL NAIL		$14.99	$18.34					
11740	REMOVAL OF BLOOD ACCUMULATION UNDER FINGERNAIL OR TOENAIL		$17.06	$22.29					
11750	PERMANENT REMOVAL FINGERNAIL OR TOENAIL		$81.49	$109.65					
11755	BIOPSY OF FINGERNAIL OR TOENAIL		$67.91	$67.91					
11760	REPAIR OF FINGERNAIL OR TOENAIL BED		$59.55	$72.03					
11762	REPAIR OF FINGERNAIL OR TOENAIL BED WITH GRAFT		$123.63	$158.10					
11765	REMOVAL OF SKIN OF FINGERNAIL OR TOENAIL		$26.83	$33.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
11770	SIMPLE REMOVAL OF CYST OF TAILBONE		$157.43	$157.43					
11771	EXTENSIVE REMOVAL OF CYST OF TAILBONE		$294.71	$294.71					
11772	COMPLICATED REMOVAL OF CYST OF TAILBONE		$340.45	$340.45					
11900	INJECTION INTO SKIN GROWTH, 1-7 GROWTHS		$19.10	$22.45					
11901	INJECTION INTO SKIN GROWTH, MORE THAN 7 GROWTHS		$29.70	$35.20					
11954	INJECTION OF FILLING MATERIAL UNDER SKIN, MORE THAN 10.0 CC	Yes	$88.88	$88.88					
11960	INSERTION OF TISSUE EXPANDER	Yes	$420.53	$420.53					
11970	REPLACEMENT OF TISSUE EXPANDER WITH PERMANENT IMPLANT	Yes	$462.51	$462.51					
11971	REMOVAL OF TISSUE EXPANDER		$125.92	$125.92					
11976	REMOVAL OF IMPLANTABLE CONTRACEPTIVE CAPSULES		$93.85	$93.85					
11980	PLACEMENT OF HORMONE PELLET UNDER SKIN		$51.38	$74.97					
11981	INSERTION OF DRUG DELIVERY IMPLANT INTO TISSUE		$61.32	$86.88					
11982	REMOVAL OF DRUG DELIVERY IMPLANT FROM TISSUE		$73.80	$99.36					
11983	REMOVAL WITH REINSERTION OF DRUG DELIVERY IMPLANT INTO TISSUE		$136.79	$162.35					
12001	SIMPLE REPAIR OF SURFACE WOUND OF SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, 2.5 CM OR LESS		$64.92	$64.92					
12002	SIMPLE REPAIR OF SURFACE WOUND OF SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, 2.6-7.5 CM		$76.00	$76.00					
12004	SIMPLE REPAIR OF SURFACE WOUND OF SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, 7.6-12.5 CM		$97.27	$97.27					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
12005	SIMPLE REPAIR OF SURFACE WOUND OF SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, 12.6-20.0 CM		$125.29	$125.29					
12006	SIMPLE REPAIR OF SURFACE WOUND OF SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, 20.1-30.0 CM		$158.58	$158.58					
12007	SIMPLE REPAIR OF SURFACE WOUND TO SCALP, NECK, UNDERARMS, TRUNK, ARMS, OR LEGS, MORE THAN 30.0 CM		$172.32	$172.32					
12011	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.5 CM OR LESS		$71.48	$71.48					
12013	SIMPLE REPAIR OF SUPERFICIAL WOUNDS OF FACE, EARS, EYELIDS, NOSE, LIPS		$86.50	$86.50					
12014	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 5.1-7.5 CM		$105.07	$105.07					
12015	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 7.6-12.5 CM		$138.99	$138.99					
12016	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 7.6-12.5 CM		$179.09	$179.09					
12017	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 20.1-30.0 CM		$234.40	$234.40					
12018	SIMPLE REPAIR OF SURFACE WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 30.0 CM		$310.60	$310.60					
12020	SIMPLE CLOSURE OF SURFACE WOUND REOPENING		$111.70	$111.70					
12021	REPAIR OF SEPARATION OF WOUND CLOSURE WITH INSERTION OF PACKING		$63.51	$71.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
12031	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, 2.5 CM OR LESS		$72.98	$82.63					
12032	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, 2.6-7.5 CM		$87.52	$101.60					
12034	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, 7.6-12.5 CM		$127.29	$127.29					
12035	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, 12.6-20.0 CM		$156.27	$156.27					
12036	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, 20.1-30.0 CM		$188.59	$188.59					
12037	INTERMEDIATE REPAIR OF WOUND OF SCALP, UNDERARMS, TRUNK, ARMS, OR LEGS, MORE THAN 30.0 CM		$230.11	$230.11					
12041	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, 2.5 CM OR LESS		$81.29	$92.55					
12042	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, 2.6-7.5 CM		$97.54	$113.23					
12044	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, 7.6-12.5 CM		$138.25	$138.25					
12045	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, 12.6-20.0 CM		$168.06	$168.06					
12046	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, 20.1-30.0 CM		$207.87	$207.87					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
12047	INTERMEDIATE REPAIR OF WOUND OF NECK, HANDS, FEET, OR GENITALS, MORE THAN 30.0 CM		$256.41	$256.41					
12051	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.5 CM OR LESS		$86.99	$100.53					
12052	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.6-5.0 CM		$102.93	$122.64					
12053	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 5.1-7.5 CM		$141.42	$141.42					
12054	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 7.6-12.5		$175.87	$175.87					
12055	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 12.6-20.0 CM		$224.42	$224.42					
12056	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 20.1-30.0 CM		$292.06	$292.06					
12057	INTERMEDIATE REPAIR OF WOUND OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 30.0 CM		$334.48	$334.48					
13100	COMPLICATED REPAIR OF WOUND OF TRUNK, 1.1-2.5 CM		$108.53	$123.82					
13101	COMPLICATED REPAIR OF WOUND OF TRUNK, 2.6-7.5 CM		$146.56	$174.45					
13102	COMPLICATED REPAIR OF WOUND OF TRUNK, EACH ADDITIONAL 5.0 CM OR LESS		$56.01	$56.01					
13120	COMPLICATED REPAIR OF WOUND OF SCALP, ARMS, OR LEGS, 1.1-2.5 CM		$117.60	$135.71					
13121	COMPLICATED REPAIR OF WOUND OF SCALP, ARMS, OR LEGS, 2.6-7.5 CM		$169.15	$204.69					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
13122	COMPLICATED REPAIR OF WOUND OF SCALP, ARMS, OR LEGS, EACH ADDITIONAL 5.0 CM OR LESS		$65.12	$65.12					
13131	COMPLICATED REPAIR OF WOUND OF FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET, 1.1-2.5 CM		$141.89	$168.44					
13132	COMPLICATED REPAIR OF WOUND OF FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET, 2.6-7.5 CM		$195.52	$256.80					
13133	COMPLICATED REPAIR OF WOUND OF FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET, EACH ADDITIONAL 5.0 CM OR LESS		$96.50	$96.50					
13151	COMPLICATED REPAIR OF WOUND OF EYELIDS, NOSE, EARS, OR LIP, 1.1-2.5 CM		$170.47	$203.33					
13152	COMPLICATED REPAIR OF WOUND OF EYELIDS, NOSE, EARS, OR LIP, 2.6-7.5 CM		$269.60	$338.40					
13153	COMPLICATED REPAIR OF WOUND OF EYELIDS, NOSE, EARS, OR LIP, EACH ADDITIONAL 5.0 CM OR LESS		$106.06	$106.06					
13160	EXTENSIVE OR COMPLICATED REPAIR OF SURFACE WOUND REOPENING		$383.05	$383.05					
14000	REPAIR OF WOUND OF TRUNK BY TRANSFERRING SKIN, 10.0 SQ CM OR LESS		$214.30	$260.03					
14001	REPAIR OF WOUND OF TRUNK BY TRANSFERRING SKIN, 10.1-30.0 SQ CM		$374.16	$374.16					
14020	REPAIR OF WOUND OF SCALP, ARMS, OR LEGS BY TRANSFERRING SKIN, 10.0 SQ CM OR LESS		$321.74	$321.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
14021	REPAIR OF WOUND OF SCALP, ARMS, OR LEGS BY TRANSFERRING SKIN, 10.1-30.0 SQ CM		$464.35	$464.35					
14040	REPAIR OF WOUND OF FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET BY TRANSFERRING SKIN, 10.0 SQ CM OR LESS		$317.27	$408.06					
14041	REPAIR OF WOUND OF FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET BY TRANSFERRING SKIN, 10.1-30.0 SQ CM		$445.61	$551.29					
14060	REPAIR OF WOUND OF EYELIDS, NOSE, EARS, OR LIPS BY TRANSFERRING SKIN, 10.0 SQ CM OR LESS		$469.36	$469.36					
14061	REPAIR OF WOUND OF EYELIDS, NOSE, EARS, OR LIPS BY TRANSFERRING SKIN, 10.1-30.0 SQ CM		$506.64	$647.32					
14301	REPAIR OF WOUND BY TRANSFERRING SKIN, 30.1-60.0 SQ CM	Yes	$647.04	$758.80					
14302	REPAIR OF WOUND BY TRANSFERRING SKIN, EACH ADDITIONAL 30.0 SQ CM	Yes	$169.02	$169.02					
14350	REPAIR OF TISSUE LOSS OF FINGER OR TOE		$453.88	$453.88					
15002	PREPARATION OF SKIN GRAFT SITE OF TRUNK, ARMS, OR LEGS, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$159.39	$222.05					
15003	PREPARATION OF SKIN GRAFT SITE OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$32.93	$49.17					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15004	PREPARATION OF SKIN GRAFT SITE OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$197.59	$268.62					
15005	SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$65.86	$84.13					
15011	HARVEST OF SKIN FOR SKIN CELL SUSPENSION SELF SKIN GRAFT, FIRST 25 SQ CM OR LESS		$0.00	$0.00					
15012	HARVEST OF SKIN FOR SKIN CELL SUSPENSION SELF SKIN GRAFT, EACH ADDITIONAL 25 SQ CM		$0.00	$0.00					
15013	PREPARATION OF SKIN CELL SUSPENSION SELF SKIN GRAFT, FIRST 25 SQ CM OR LESS OF HARVESTED SKIN		$0.00	$0.00					
15014	PREPARATION OF SKIN CELL SUSPENSION SELF SKIN GRAFT, EACH ADDITIONAL 25 SQ CM OR LESS OF HARVESTED SKIN		$0.00	$0.00					
15015	APPLICATION OF SKIN CELL SUSPENSION SELF SKIN GRAFT TO WOUND AND DONOR SITES TO TRUNK, ARMS, LEGS, FIRST 480 SQ CM OR LESS		$0.00	$0.00					
15016	APPLICATION OF SKIN CELL SUSPENSION SELF SKIN GRAFT TO WOUND AND DONOR SITES TO TRUNK, ARMS, LEGS, EACH ADDITIONAL 480 SQ CM		$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15017	SKIN GRAFT TO WOUND AND DONOR SITES TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, EYE SOCKETS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE FINGERS/TOES, FIRST 480 SQ CM OR LESS		$0.00	$0.00					
15018	SKIN GRAFT TO WOUND AND DONOR SITES TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, EYE SOCKETS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE FINGERS/TOES, EACH ADDITIONAL 480 SQ CM		$0.00	$0.00					
15040	RELOCATION OF SKIN FOR SELF SKIN GRAFT, 100.0 SQ CM OR LESS		$94.39	$182.17					
15050	SKIN GRAFT TO TIP OF FINGER OR TOE, 2.0 CM OR LESS		$169.74	$169.74					
15100	PARTIAL THICKNESS SELF SKIN GRAFT TO TRUNK, ARMS, OR LEGS, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$379.61	$379.61					
15101	PARTIAL THICKNESS SELF SKIN GRAFT OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$101.14	$101.14					
15110	OUTER LAYER SELF SKIN GRAFT OF TRUNK, ARMS, OR LEGS, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$494.92	$588.82					
15111	OUTER LAYER SELF SKIN GRAFT TO TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$81.78	$94.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15115	OUTER LAYER SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$508.90	$556.87					
15116	OUTER LAYER SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$111.30	$123.04					
15120	PARTIAL THICKNESS SELF SKIN GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$453.31	$453.31					
15121	PARTIAL THICKNESS SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$169.28	$169.28					
15130	DEEP LAYER SELF SKIN GRAFT OF TRUNK, ARMS, OR LEGS, 100.0 SQ CM OR 1% BODY AREA OF INFANTS AND CHILDREN, OR LESS		$485.17	$295.10					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15131	DEEP LAYER SELF SKIN GRAFT OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA OF INFANTS AND CHILDREN, OR LESS		$66.27	$77.25					
15135	DEEP LAYER SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 100.0 SQ CM OR 1% BODY AREA OF INFANTS AND CHILDREN, OR LESS		$551.35	$596.00					
15136	DEEP LAYER SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA OF INFANTS AND CHILDREN, OR LESS		$66.78	$72.39					
15150	TISSUE SKIN GRAFT FROM SELF OF TRUNK, ARMS, OR LEGS, 25.0 SQ CM OR LESS		$439.14	$490.68					
15151	TISSUE SKIN GRAFT FROM SELF OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 1.0-75.0 SQ CM		$88.28	$100.02					
15152	TISSUE SKIN GRAFT FROM SELF OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% OF BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$110.29	$123.05					
15155	TISSUE SELF SKIN GRAFT OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 25.0 SQ CM OR LESS		$472.33	$494.27					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15156	TISSUE SKIN GRAFT FROM SELF OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 75.0 SQ CM		$122.56	$130.72					
15157	TISSUE SKIN GRAFT FROM SELF OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% OF BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$133.56	$144.53					
15200	FULL THICKNESS SKIN GRAFT TO TRUNK, 20.0 SQ CM OR LESS		$346.44	$346.44					
15201	FULL THICKNESS SKIN GRAFT TO TRUNK, EACH ADDITIONAL 20.0 SQ CM		$95.94	$95.94					
15220	FULL THICKNESS SKIN GRAFT TO SCALP, ARMS, OR LEGS, 20.0 SQ CM OR LESS		$368.20	$368.20					
15221	FULL THICKNESS SKIN GRAFT TO SCALP, ARMS, OR LEGS, EACH ADDITIONAL 20.0 SQ CM		$89.72	$89.72					
15240	FULL THICKNESS SKIN GRAFT TO FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET, 20.0 SQ CM OR LESS		$432.19	$432.19					
15241	FULL THICKNESS SKIN GRAFT TO FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET, EACH ADDITIONAL 20.0 SQ CM		$132.51	$132.51					
15260	FULL THICKNESS SKIN GRAFT TO NOSE, EARS, EYELIDS, OR LIPS, 20.0 SQ CM OR LESS		$504.67	$504.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15261	FULL THICKNESS SKIN GRAFT TO NOSE, EARS, EYELIDS, OR LIPS, EACH ADDITIONAL 20.0 SQ CM		$156.46	$156.46					
15271	APPLICATION OF SKIN SUBSTITUTE GRAFT TO WOUND OF TRUNK, ARMS, OR LEGS, 25.0 SQ CM OR LESS OF WOUND 100.0 SQ CM OR LESS		$70.24	$113.14					
15272	APPLICATION OF SKIN SUBSTITUTE GRAFT TO WOUND OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 25.0 SQ CM OF WOUND 100.0 SQ CM OR LESS		$14.02	$21.51					
15273	SKIN SUBSTITUTE GRAFT TO WOUND 100.0 SQ CM OR MORE OF TRUNK, ARMS, OR LEGS, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$167.13	$233.28					
15274	SKIN SUBSTITUTE GRAFT TO WOUND 100.0 SQ CM OR MORE OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$35.62	$55.00					
15275	APPLICATION OF SKIN SUBSTITUTE GRAFT TO WOUND OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 25.0 SQ CM OR LESS OF WOUND 100.0 SQ CM OR LESS		$81.60	$121.92					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15276	APPLICATION OF SKIN SUBSTITUTE GRAFT TO WOUND OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 25.0 SQ CM OF WOUND 100.0 SQ CM OR LESS		$20.14	$26.86					
15277	SKIN SUBSTITUTE GRAFT TO WOUND 100.0 SQ CM OR MORE OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$173.89	$236.17					
15278	SKIN SUBSTITUTE GRAFT TO WOUND 100.0 SQ CM OR MORE OF FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, FEET, FINGERS, OR TOES, EACH ADDITIONAL 100.0 SQ CM OR 1% BODY AREA FOR INFANTS AND CHILDREN, OR LESS		$44.11	$65.05					
15570	CREATION OF FLAP GRAFT TO TRUNK		$308.10	$308.10					
15572	CREATION OF FLAP GRAFT TO SCALP, ARMS, OR LEGS		$301.00	$301.00					
15574	CREATION OF FLAP GRAFT TO FOREHEAD, CHEEKS, CHIN, MOUTH, NECK, UNDERARMS, GENITALS, HANDS, OR FEET		$298.15	$298.15					
15576	CREATION OF FLAP GRAFT TO EYELIDS, NOSE, EARS, LIPS, OR MOUTH		$223.56	$223.56					
15600	TRANSFER OF SKIN FLAP TO TRUNK		$138.59	$138.59					
15610	TRANSFER OF SKIN FLAP TO SCALP, ARMS, OR LEGS		$159.93	$159.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15620	TRANSFER OF SKIN FLAP TO FOREHEAD, CHEEKS, CHIN, NECK, UNDERARMS, GENITALS, HANDS, OR FEET		$192.10	$192.10					
15630	TRANSFER OF SKIN FLAP TO EYELIDS, NOSE, EARS, OR LIPS		$214.02	$214.02					
15650	TRANSFER OF SKIN FLAP		$252.45	$252.45					
15730	CREATION OF FLAP GRAFT TO MIDFACE		$724.17	$1,189.45					Added Effective 1/1/2018
15731	CREATION OF FLAP GRAFT TO NOSE, FOREHEAD, TEMPLE, OR SCALP		$681.51	$746.71					
15733	CREATION OF FLAP GRAFT TO HEAD AND/OR NECK		$827.58	$827.58					Added Effective 1/1/2018
15734	CREATION OF MUSCLE GRAFT TO TRUNK		$1,073.37	$1,073.37					
15736	CREATION OF MUSCLE GRAFT TO ARM		$955.95	$955.95					
15738	CREATION OF MUSCLE GRAFT TO LEG		$721.17	$721.17					
15740	CREATION OF SKIN AND TISSUE GRAFT		$595.34	$595.34					
15750	CREATION OF NERVE AND BLOOD VESSEL SKIN GRAFT		$681.45	$681.45					
15756	MUSCLE GRAFT WITH REPAIR OF SMALL BLOOD VESSEL		$1,862.68	$1,862.68					
15757	SKIN GRAFT WITH REPAIR OF SMALL BLOOD VESSEL		$1,862.68	$1,862.68					
15758	TISSUE GRAFT WITH REPAIR OF SMALL BLOOD VESSEL		$1,862.68	$1,862.68					
15760	GRAFT WITH CLOSURE OF WOUND		$465.47	$465.47					
15769	SELF SOFT TISSUE GRAFT		$379.72	$379.72					Added Effective 01/01/2020
15770	CREATION OF SKIN, FAT AND MUSCLE GRAFT		$424.18	$424.18					
15771	GRAFT USING PATIENT'S FAT REMOVED BY LIPOSUCTION AND INSERTED INTO TRUNK, BREASTS, SCALP, ARMS, OR LEGS, 50.0 CC OR LESS		$377.28	$449.66					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15772	GRAFT USING PATIENT'S FAT REMOVED BY LIPOSUCTION AND INSERTED INTO TRUNK, BREASTS, SCALP, ARMS, OR LEGS, EACH ADDITIONAL 50.0 CC		$113.13	$142.96					Added Effective 01/01/2020
15773	GRAFT USING PATIENT'S FAT REMOVED BY LIPOSUCTION AND INSERTED INTO FACE, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, OR FEET, 25.0 CC OR LESS		$381.50	$453.88					Added Effective 01/01/2020
15774	GRAFT USING PATIENT'S FAT REMOVED BY LIPOSUCTION AND INSERTED INTO FACE, EYELIDS, MOUTH, NECK, EARS, AROUND EYES, GENITALS, HANDS, OR FEET, EACH ADDITIONAL 25.0 CC		$108.73	$138.56					Added Effective 01/01/2020
15777	IMPLANTATION OF BIOLOGIC IMPLANT TO SOFT TISSUE		$170.66	$170.66					
15778	IMPLANTATION OF ARTIFICIAL MATERIAL FOR DELAYED CLOSURE OF DEFECTS DUE TO SOFT TISSUE INFECTION OR TRAUMA		$322.74	$322.74					
15780	DERMABRASION OF SKIN OF TOTAL FACE	Yes	$221.16	$241.68					
15781	DERMABRASION OF SKIN OF PART OF FACE	Yes	$197.07	$247.63					
15782	DERMABRASION OF SKIN OTHER THAN FACE	Yes	$142.07	$158.03					
15783	DERMABRASION OF SUPERFICIAL SCARS OR TATTOOS FROM SKIN	Yes	$151.50	$176.31					
15786	SCRAPING OF SKIN GROWTH, FIRST GROWTH		$67.87	$76.19					
15787	SCRAPING OF SKIN GROWTH, EACH ADDITIONAL 1-4 GROWTHS		$13.50	$16.58					
15788	CHEMICAL PEEL OF OUTER LAYER OF SKIN OF FACE		$100.13	$100.13					
15789	CHEMICAL PEEL OF DEEP LAYER OF SKIN OF FACE		$180.23	$180.23					
15792	CHEMICAL PEEL OF OUTER LAYER OF NONFACIAL SKIN		$65.39	$65.39					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15793	CHEMICAL PEEL OF DEEP LAYER OF NONFACIAL SKIN		$117.62	$117.62					
15820	REPAIR OF LOWER EYELID DEFECT	Yes	$321.09	$321.09					
15821	REMOVAL OF EXCESSIVE SKIN OF LOWER EYELID AND FAT AROUND EYE	Yes	$358.36	$358.36					
15822	REMOVAL OF EXCESSIVE SKIN OF UPPER EYELID	Yes	$285.62	$285.62					
15823	REMOVAL OF EXCESSIVE SKIN AND FAT OF UPPER EYELID	Yes	$416.75	$416.75					
15824	REMOVAL OF EXCESSIVE SKIN AND FAT OF UPPER EYELID	Yes	$504.16	$504.16					
15825	REMOVAL OF WRINKLES AND EXTRA SKIN OF NECK	Yes	$735.05	$735.05					
15826	RHYTIDECTOMY; GLABELLAR FROWN LINES	Yes	$448.87	$448.87					
15828	REMOVAL OF WRINKLES AND EXTRA SKIN OF CHEEKS, CHIN, AND NECK	Yes	$821.68	$821.68					
15829	REMOVAL OF WRINKLES AND EXTRA SKIN WITH GRAFTING OF CHEEKS, CHIN, AND NECK	Yes	$895.01	$895.01					
15830	REMOVAL OF EXTRA SKIN AND TISSUE OF ABDOMEN	Yes	$818.54	$818.54					
15832	REMOVAL OF EXTRA SKIN AND TISSUE OF THIGH	Yes	$576.57	$576.57					
15833	REMOVAL OF EXTRA SKIN AND TISSUE OF LEG	Yes	$488.07	$488.07					
15834	REMOVAL OF EXTRA SKIN AND TISSUE OF HIP	Yes	$520.36	$520.36					
15835	REMOVAL OF EXTRA SKIN AND TISSUE OF BUTTOCK	Yes	$539.59	$539.59					
15836	REMOVAL OF EXTRA SKIN AND TISSUE OF ARM	Yes	$441.40	$441.40					
15837	REMOVAL OF EXTRA SKIN AND TISSUE OF FOREARM OR HAND	Yes	$417.88	$417.88					
15838	REMOVAL OF EXTRA SKIN AND TISSUE OF CHIN	Yes	$374.40	$374.40					
15839	REMOVAL OF EXTRA SKIN AND TISSUE OF OTHER AREA	Yes	$338.37	$338.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15840	TISSUE GRAFT TO TREAT FACIAL PARALYSIS		$831.97	$831.97					
15841	MUSCLE GRAFT TO TREAT FACIAL PARALYSIS		$1,151.32	$1,151.32					
15842	MICROSURGICAL MUSCLE GRAFT TO TREAT FACIAL PARALYSIS		$1,898.74	$1,898.74					
15845	MUSCLE TRANSFER TO TREAT FACIAL PARALYSIS		$812.98	$812.98					
15851	REMOVAL OF SUTURES OR STAPLES UNDER ANESTHESIA		$29.99	$34.01					
15852	DRESSING CHANGE UNDER ANESTHESIA		$32.84	$38.74					
15853	REMOVAL OF SUTURES OR STAPLES		$8.81	$8.81					
15854	REMOVAL OF SUTURES AND STAPLES		$12.43	$12.43					
15860	INJECTION OF AGENT INTO VEIN TO ASSESS BLOOD FLOW OF SKIN GRAFT OR FLAP		$99.50	$99.50					
15876	SUCTION ASSISTED REMOVAL OF FAT OF HEAD AND NECK	Yes	$144.85	$144.85					
15877	SUCTION ASSISTED REMOVAL OF FAT OF BODY	Yes	$144.85	$144.85					
15878	SUCTION ASSISTED REMOVAL OF FAT OF ARM	Yes	$144.85	$144.85					
15879	SUCTION ASSISTED REMOVAL OF FAT OF LEG	Yes	$144.85	$144.85					
15920	REMOVAL OF PRESSURE SORE TISSUE AND TAILBONE WITH CLOSURE		$310.70	$310.70					
15922	REMOVAL OF PRESSURE SORE AND BONE AT TAILBONE WITH SKIN GRAFT		$458.39	$458.39					
15931	REMOVAL OF PRESSURE SORE TISSUE OF SACRUM WITH CLOSURE		$330.52	$330.52					
15933	REMOVAL OF PRESSURE SORE TISSUE AND SACRUM BONE WITH CLOSURE		$503.23	$503.23					
15934	REMOVAL OF PRESSURE SORE TISSUE OF SACRUM WITH SKIN GRAFT		$571.06	$571.06					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15935	REMOVAL OF PRESSURE SORE AND BONE AT SACRUM WITH SKIN GRAFT		$739.57	$739.57					
15936	REMOVAL OF PRESSURE SORE TISSUE OF SACRUM IN PREPARATION OF MUSCLE FLAP OR SKIN GRAFT		$657.15	$657.15					
15937	REMOVAL OF PRESSURE SORE AND BONE AT SACRUM IN PREPARATION OF MUSCLE FLAP OR SKIN GRAFT		$807.05	$807.05					
15940	REMOVAL OF PRESSURE SORE TISSUE OF LOWER PELVIC BONE WITH CLOSURE		$353.28	$353.28					
15941	REMOVAL OF PRESSURE SORE TISSUE AND LOWER PELVIC BONE WITH CLOSURE		$520.71	$520.71					
15944	REMOVAL OF PRESSURE SORE TISSUE OF LOWER PELVIC BONE WITH SKIN GRAFT		$591.31	$591.31					
15945	REMOVAL OF PRESSURE SORE AND LOWER PELVIC BONE WITH SKIN GRAFT		$681.75	$681.75					
15946	REMOVAL OF PRESSURE SORE AND LOWER PELVIC BONE IN PREPARATION OF MUSCLE FLAP OR SKIN GRAFT CLOSURE		$1,105.54	$1,105.54					
15950	REMOVAL OF PRESSURE SORE TISSUE OF HEAD OF THIGH BONE WITH CLOSURE		$294.07	$294.07					
15951	REMOVAL OF PRESSURE SORE TISSUE AND HEAD OF THIGH BONE WITH CLOSURE		$524.40	$524.40					
15952	REMOVAL OF PRESSURE SORE TISSUE OF HEAD OF THIGH BONE WITH SKIN GRAFT		$523.25	$523.25					
15953	REMOVAL OF PRESSURE SORE AND BONE AT HIP BONE WITH SKIN GRAFT		$623.21	$623.21					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
15956	REMOVAL OF PRESSURE SORE TISSUE OF HEAD OF THIGH BONE IN PREPARATION OF MUSCLE FLAP OR SKIN GRAFT		$951.66	$951.66					
15958	REMOVAL OF PRESSURE SORE AND BONE AT HIP BONE IN PREPARATION OF MUSCLE FLAP OR SKIN GRAFT		$975.57	$975.57					
15999	OTHER REMOVAL OF PRESSURE ULCER	Yes	$0.00	$0.00					
16000	FIRST DEGREE BURN TREATMENT		$31.54	$36.23					
16020	DRESSING CHANGE OR REMOVAL OF BURN TISSUE, LESS THAN 5% OF TOTAL BODY SURFACE		$28.76	$33.32					
16025	DRESSING CHANGE OR REMOVAL OF BURN TISSUE, 5-10% OF TOTAL BODY SURFACE		$61.54	$67.57					
16030	DRESSING CHANGE OR REMOVAL OF BURN TISSUE, MORE THAN 10% OF TOTAL BODY SURFACE		$76.93	$76.93					
16035	INITIAL INCISION OF DEAD BURN TISSUE		$191.61	$191.61					
16036	ADDITIONAL INCISION OF BURN TISSUE		$64.19	$64.19					
17000	DESTRUCTION OF PRECANCER SKIN GROWTH, 1 GROWTH		$43.54	$43.54					
17003	DESTRUCTION OF PRECANCER SKIN GROWTH, 2-14 GROWTHS		$7.92	$7.92					
17004	DESTRUCTION OF PRECANCER SKIN GROWTH, 15 OR MORE GROWTHS		$143.35	$143.35					
17106	DESTRUCTION OF BIRTHMARK, LESS THAN 10.0 SQ CM		$163.48	$189.36					
17107	DESTRUCTION OF BIRTHMARK, 10.0-50.0 SQ CM		$324.95	$374.57					
17108	DESTRUCTION OF BIRTHMARK, MORE THAN 50.0 SQ CM		$651.15	$651.15					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
17110	DESTRUCTION OF SKIN GROWTH, 1-14 GROWTHS		$22.23	$27.60					
17111	DESTRUCTION OF SKIN GROWTH, 15 OR MORE GROWTHS		$43.22	$43.22					
17250	APPLICATION OF CHEMICAL TO STOP TISSUE REGROWTH IN WOUND		$20.20	$24.76					
17260	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, 0.5 CM OR LESS		$42.82	$57.97					
17261	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, 0.6-1.0 CM		$54.42	$73.06					
17262	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, 1.1-2.0 CM		$73.19	$97.60					
17263	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, 2.1-3.0 CM		$86.34	$116.51					
17264	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, 3.1-4.0 CM		$96.51	$131.25					
17266	DESTRUCTION OF CANCER SKIN GROWTH OF TRUNK, ARMS, OR LEGS, MORE THAN 4.0 CM		$120.81	$162.52					
17270	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.5 CM OR LESS		$58.15	$76.12					
17271	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 0.6-1.0 CM		$69.61	$93.08					
17272	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 1.1-2.0 CM		$84.59	$114.10					
17273	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 2.1-3.0 CM		$99.36	$133.96					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
17274	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, 3.1-4.0 CM		$125.36	$168.41					
17276	DESTRUCTION OF CANCER SKIN GROWTH OF SCALP, NECK, HANDS, FEET, OR GENITALS, MORE THAN 4.0 CM		$150.56	$196.29					
17280	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.5 CM OR LESS		$58.64	$80.77					
17281	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 0.6-1.0 CM		$81.41	$109.44					
17282	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 1.1-2.0 CM		$98.45	$132.91					
17283	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 2.1-3.0 CM		$123.17	$163.54					
17284	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, 3.1-4.0 CM		$147.82	$194.89					
17286	DESTRUCTION OF CANCER SKIN GROWTH OF FACE, EARS, EYELIDS, NOSE, LIPS, OR MOUTH, MORE THAN 4.0 CM		$201.33	$259.27					
17311	REMOVAL AND MICROSCOPIC EXAM OF GROWTH OF HEAD, NECK, HANDS, FEET, OR GENITALS, 1-5 TISSUE BLOCKS		$264.71	$458.27					
17312	REMOVAL AND MICROSCOPIC EXAM OF GROWTH OF HEAD, NECK, HANDS, FEET, OR GENITALS, EACH ADDITIONAL STAGE, 1-5 TISSUE BLOCKS		$140.90	$273.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
17313	REMOVAL AND MICROSCOPIC EXAM OF GROWTH OF TRUNK, ARMS, OR LEGS, 1-5 TISSUE BLOCKS		$237.41	$418.03					
17314	REMOVAL AND MICROSCOPIC EXAM OF GROWTH OF TRUNK, ARMS, OR LEGS, EACH ADDITIONAL STAGE, 1-5 TISSUE BLOCKS		$130.45	$253.73					
17315	REMOVAL AND MICROSCOPIC EXAM OF GROWTH, EACH ADDITIONAL BLOCK AFTER 5 TISSUE BLOCKS		$36.96	$54.98					
17340	COLD TREATMENT OF ACNE		$25.66	$29.42					
17360	CHEMICAL TREATMENT OF ACNE		$45.19	$48.81					
17999	OTHER PROCEDURE ON SKIN, MUCOUS MEMBRANE, AND TISSUE	Yes	$0.00	$0.00					
19000	ASPIRATION OF CYST OF BREAST, FIRST CYST		$31.45	$36.54					
19001	ASPIRATION OF CYST OF BREAST, EACH ADDITIONAL CYST		$16.76	$19.98					
19020	DRAINAGE OF ABSCESS OF BREAST		$143.24	$143.24					
19030	INJECTION FOR X-RAY IMAGING OF BREAST DUCT		$59.01	$59.01					
19081	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING X-RAY WITH NEEDLE, FIRST GROWTH		$145.68	$502.98					
19082	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING X-RAY WITH NEEDLE, EACH ADDITIONAL GROWTH		$69.99	$403.48					
19083	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING ULTRASOUND, FIRST GROWTH		$136.63	$499.10					
19084	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING ULTRASOUND, EACH ADDITIONAL GROWTH		$65.79	$397.73					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
19085	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING MRI, FIRST GROWTH		$159.63	$752.11					
19086	BIOPSY OF BREAST AND PLACEMENT OF LOCATING DEVICE USING MRI, EACH ADDITIONAL GROWTH		$72.71	$596.88					
19100	NEEDLE BIOPSY OF BREAST		$49.01	$57.59					
19101	BIOPSY OF BREAST THROUGH INCISION		$165.54	$165.54					
19105	REMOVAL OF GROWTH OF BREAST USING ULTRASOUND, EACH GROWTH		$139.21	$1,278.99					
19110	EXPLORATION OF BREAST NIPPLE		$200.15	$200.15					
19112	REMOVAL OF ABNORMAL DRAINAGE OF BREAST DUCT		$174.56	$174.56					
19120	REMOVAL OF GROWTH AND TISSUE OF BREAST, DUCT, OR NIPPLE		$263.73	$263.73					
19125	REMOVAL OF GROWTH OF BREAST IDENTIFIED BY X-RAY MARKER, FIRST GROWTH		$264.02	$264.02					
19126	REMOVAL OF GROWTH OF BREAST IDENTIFIED BY X-RAY MARKER, EACH ADDITIONAL GROWTH		$132.40	$132.40					
19281	PLACEMENT OF LOCATING DEVICE IN BREAST USING IMAGING GUIDANCE, FIRST GROWTH		$82.85	$184.53					
19282	PLACEMENT OF LOCATING DEVICE IN BREAST USING IMAGING GUIDANCE, EACH ADDITIONAL GROWTH		$39.93	$126.86					
19283	PLACEMENT OF LOCATING DEVICE IN BREAST USING X-RAY WITH NEEDLE GUIDANCE, FIRST GROWTH		$83.62	$208.59					
19284	CEMENT OF LOCATING DEVICE IN BREAST USING X-RAY WITH NEEDLE GUIDANCE, EACH ADDITIONAL GROWTH		$40.19	$151.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
19285	PLACEMENT OF LOCATING DEVICE IN BREAST USING ULTRASOUND GUIDANCE, FIRST GROWTH		$70.93	$346.99					
19286	PLACEMENT OF LOCATING DEVICE IN BREAST USING ULTRASOUND GUIDANCE, EACH ADDITIONAL GROWTH		$34.45	$289.03					
19287	PLACEMENT OF LOCATING DEVICE IN BREAST USING MRI GUIDANCE, FIRST GROWTH		$113.64	$639.89					
19288	PLACEMENT OF LOCATING DEVICE IN BREAST USING MRI GUIDANCE, EACH ADDITIONAL GROWTH		$51.57	$507.70					
19294	PLACEMENT OF RADIATION THERAPY DEVICE IN BREAST FOR RADIATION THERAPY DURING SURGERY WITH PARTIAL REMOVAL OF BREAST		$130.59	$130.59					Added Effective 1/1/2018
19300	REMOVAL OF EXTRA BREAST TISSUE IN MALE		$256.03	$353.44					
19301	PARTIAL REMOVAL OF BREAST		$281.70	$281.70					
19302	PARTIAL REMOVAL OF BREAST AND UNDERARM LYMPH NODES		$604.90	$604.90					
19303	SIMPLE COMPLETE REMOVAL OF BREAST		$621.09	$621.09					
19305	EXTENSIVE REMOVAL OF BREAST, CHEST MUSCLE, AND UNDERARM LYMPH NODES		$748.26	$748.26					
19306	EXTENSIVE REMOVAL OF BREAST, CHEST MUSCLE, UNDERARM LYMPH NODES, AND BREAST LYMPH NODES		$778.05	$778.05					
19307	REMOVAL OF BREAST AND UNDERARM LYMPH NODES		$782.45	$782.45					
19316	REPAIR FOR SAGGING OF THE BREAST	Yes	$698.93	$698.93					
19318	BREAST REDUCTION	Yes	$829.81	$829.81					
19325	INSERTION OF BREAST IMPLANT	Yes	$421.12	$421.12					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
19328	REMOVAL OF INTACT BREAST IMPLANT	Yes	$274.70	$274.70					
19330	REMOVAL OF RUPTURED BREAST IMPLANT AND IMPLANT MATERIAL		$332.98	$332.98					
19340	PLACEMENT OF IMPLANT ON SAME DAY OF BREAST RECONSTRUCTION	Yes	$453.06	$453.06					
19342	PLACEMENT OF IMPLANT ON SEPARATE DAY OF BREAST RECONSTRUCTION	Yes	$651.49	$651.49					
19350	RECONSTRUCTION OF NIPPLE OR AREA AROUND NIPPLE		$464.34	$464.34					
19357	RECONSTRUCTION OF BREAST USING TISSUE EXPANDER	Yes	$874.10	$874.10					
19361	RECONSTRUCTION OF BREAST WITH SHOULDER MUSCLE TISSUE GRAFT	Yes	$1,157.11	$1,157.11					
19364	RECONSTRUCTION OF BREAST WITH TISSUE GRAFT	Yes	$1,344.26	$1,344.26					
19367	RECONSTRUCTION OF BREAST WITH ABDOMINAL MUSCLE FLAP	Yes	$1,359.87	$1,359.87					
19368	RECONSTRUCTION OF BREAST WITH ABDOMINAL MUSCLE AND SKIN FLAP GRAFT	Yes	$1,548.26	$1,548.26					
19369	RECONSTRUCTION OF BREAST WITH ABDOMINAL MUSCLE AND 2 SKIN FLAP GRAFTS	Yes	$1,475.78	$1,475.78					
19370	ISION OF CAPSULE AROUND BREAST IMPLANT	Yes	$417.12	$417.12					
19371	REMOVAL OF CAPSULE AROUND BREAST IMPLANT	Yes	$508.98	$508.98					
19380	SURGICAL CHANGE TO RECONSTRUCTED BREAST		$508.91	$508.91					
19396	PREPARATION OF MOLD FOR CUSTOM BREAST IMPLANT	Yes	$113.32	$113.32					
19499	OTHER PROCEDURE ON BREAST	Yes	$250.00	$325.00					
20100	EXPLORATION OF WOUND OF NECK		$440.26	$440.26					
20101	EXPLORATION OF WOUND OF CHEST		$139.13	$139.13					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20102	EXPLORATION OF WOUND OF ABDOMEN, BACK, OR FLANK		$170.42	$170.42					
20103	EXPLORATION OF WOUND OF ARM OR LEG		$229.30	$229.30					
20150	REMOVAL OF GROWTH PLATE		$743.56	$743.56					
20200	BIOPSY OF MUSCLE		$77.26	$77.26					
20205	DEEP BIOPSY OF MUSCLE		$127.40	$127.40					
20206	NEEDLE BIOPSY OF MUSCLE		$58.20	$58.20					
20220	BIOPSY OF BONE USING NEEDLE OR TROCAR		$74.59	$74.59					
20225	BIOPSY OF BONE USING NEEDLE OR TROCAR		$125.78	$125.78					
20240	BIOPSY OF SURFACE BONE		$144.88	$144.88					
20245	BIOPSY OF DEEP BONE		$214.70	$214.70					
20250	BIOPSY OF MIDDLE SPINE BONE		$290.31	$290.31					
20251	BIOPSY OF UPPER OR LOWER SPINE BONE		$330.41	$330.41					
20500	INJECTION FOR REPAIR OF ABNORMAL MUSCLE DRAINAGE TRACT		$40.43	$45.25					
20501	INJECTION OF ABNORMAL MUSCLE DRAINAGE TRACT FOR X-RAY STUDY		$30.83	$30.83					
20520	REMOVAL OF FOREIGN BODY IN MUSCLE OR TENDON		$64.28	$73.81					
20525	COMPLICATED REMOVAL OF FOREIGN BODY IN DEEP MUSCLE OR TENDON		$162.61	$162.61					
20526	INJECTION OF CARPAL TUNNEL		$36.32	$46.38					
20527	INJECTION OF MEDICATION INTO PALM		$47.66	$60.07					
20550	INJECTION INTO TENDON OR LIGAMENT		$31.93	$53.93					
20551	INJECTION INTO TENDON AT ATTACHMENT TO BONE OR MUSCLE		$36.32	$46.38					
20552	INJECTION OF TRIGGER POINTS, 1-2 MUSCLES		$36.32	$46.38					
20553	INJECTION OF TRIGGER POINTS, 3 OR MORE MUSCLES		$36.32	$46.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20555	INSERTION OF NEEDLES OR TUBES INTO MUSCLE OR TISSUE FOR RADIATION TREATMENT		$255.46	$255.46					
20560	INSERTION OF NEEDLE, 1-2 MUSCLES		$13.20	$20.20					Added Effective 01/01/2020
20561	INSERTION OF NEEDLE, 3 MUSCLES OR MORE		$19.92	$30.03					Added Effective 01/01/2020
20600	ASPIRATION AND/OR INJECTION OF FLUID FROM SMALL JOINT		$26.88	$33.19					
20604	ASPIRATION AND/OR INJECTION OF FLUID FROM SMALL JOINT USING ULTRASOUND GUIDANCE		$37.30	$56.19					Added Effective 1/1/2015
20605	ASPIRATION AND/OR INJECTION OF FLUID FROM MEDIUM JOINT		$27.20	$33.24					
20606	ASPIRATION AND/OR INJECTION OF FLUID FROM MEDIUM JOINT USING ULTRASOUND GUIDANCE		$42.59	$62.25					Added effective 1/1/2015
20610	ASPIRATION AND/OR INJECTION OF FLUID FROM LARGE JOINT		$50.81	$50.81					
20611	ASPIRATION AND/OR INJECTION OF FLUID LARGE JOINT USING ULTRASOUND GUIDANCE		$49.84	$71.57					Added effective 1/1/2015
20612	ASPIRATION AND/OR INJECTION OF CYST OF TENDON		$28.90	$41.49					
20615	ASPIRATION AND INJECTION OF CYST OF BONE		$73.47	$80.04					
20650	INSERTION OF WIRE OR PIN TO BONE FOR TRACTION		$93.11	$93.11					
20660	PLACEMENT OF DEVICE TO SKULL		$120.60	$120.60					
20661	PLACEMENT OF STABILIZING DEVICE TO SKULL		$243.55	$243.55					
20662	APPLICATION OF PELVIC HALO DEVICE (STABILIZATION DEVICE FOR PELVIS)		$362.42	$362.42					
20663	PLACEMENT OF STABILIZING DEVICE TO THIGH		$286.12	$286.12					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20664	APPLICATION OF CRANIAL HALO (STABILIZATION DEVICE FOR SKULL)		$346.60	$346.60					
20665	REMOVAL OF STABILIZING DEVICE FROM HEAD ORIGINALLY APPLIED BY OTHER PROVIDER		$52.08	$52.08					
20670	REMOVAL OF SURFACE IMPLANT FROM BONE		$62.19	$72.11					
20680	REMOVAL OF DEEP IMPLANT FROM BONE		$197.08	$197.08					
20690	PLACEMENT OF SINGLE DIRECTION EXTERNAL BONE STABILIZING DEVICE TO ARM OR LEG		$215.55	$215.55					
20692	PLACEMENT OF MULTIPLE DIRECTION EXTERNAL BONE STABILIZING DEVICE TO ARM OR LEG		$357.51	$357.51					
20693	REVISION OF EXTERNAL BONE STABILIZING DEVICE UNDER ANESTHESIA		$236.03	$236.03					
20694	REMOVAL OF EXTERNAL BONE STABILIZING DEVICE UNDER ANESTHESIA		$191.50	$191.50					
20696	PLACEMENT OF MULTIPLE DIRECTION EXTERNAL BONE STABILIZING DEVICE TO ARM OR LEG USING IMAGING		$834.91	$834.91					
20697	PLACEMENT OF MULTIPLE DIRECTION EXTERNAL BONE STABILIZING DEVICE TO ARM OR LEG USING IMAGING GUIDANCE		$981.78	$981.78					
20700	INSERTION OF DRUG-DELIVERY DEVICE IN DEEP TISSUE		$67.81	$67.81					Added Effective 01/01/2020
20701	REMOVAL OF DRUG-DELIVERY DEVICES FROM BENEATH FIBROUS COVERING OF MUSCLE		$50.63	$50.63					Added Effective 01/01/2020
20702	INSERTION OF DRUG-DELIVERY DEVICE IN BONE		$112.82	$112.82					Added Effective 01/01/2020
20703	REMOVAL OF DRUG-DELIVERY DEVICES FROM MARROW CAVITY OF BONE		$80.92	$80.92					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20704	INSERTION OF DRUG-DELIVERY DEVICE IN JOINT		$117.53	$117.53					Added Effective 01/01/2020
20705	REMOVAL OF DRUG-DELIVERY DEVICES INTO JOINT		$96.75	$96.75					Added Effective 01/01/2020
20802	REATTACHMENT OF CUTOFF ARM		$2,322.48	$2,322.48					
20805	REATTACHMENT OF CUTOFF FOREARM		$2,842.59	$2,842.59					
20808	REATTACHMENT OF CUTOFF HAND		$3,534.17	$3,534.17					
20816	REATTACHMENT OF CUTOFF FINGER		$1,742.19	$1,742.19					
20822	REATTACHMENT OF PART OF CUTOFF FINGER		$1,440.23	$1,440.23					
20824	REATTACHMENT OF CUTOFF THUMB		$1,742.19	$1,742.19					
20827	REATTACHMENT OF PART OF CUTOFF THUMB		$1,480.85	$1,480.85					
20838	REATTACHMENT OF CUTOFF FOOT		$2,322.48	$2,322.48					
20900	HARVEST OF GRAFT FROM SMALL BONE		$233.63	$233.63					
20902	HARVEST OF GRAFT FROM LARGE BONE		$349.98	$349.98					
20910	RIB CARTILAGE GRAFT		$170.97	$170.97					
20912	GRAFT OF NOSE CARTILAGE		$316.70	$316.70					
20920	REMOVAL OF DEEP THIGH TISSUE FOR GRAFT		$260.46	$260.46					
20922	INCISION OF DEEP THIGH TISSUE FOR GRAFT		$312.24	$312.24					
20924	REMOVAL OF TENDON FOR GRAFT		$344.07	$344.07					
20930	PLACEMENT OF FRAGMENTED BONE GRAFT OR MATERIAL TO SPINE TO PROMOTE BONE GROWTH		$230.58	$230.58					
20931	GRAFT OF DONOR BONE TO SPINE		$106.32	$106.32					
20932	GRAFT OF DONOR BONE AND JOINT TISSUE		$578.90	$578.90					Effective 1/1/2019
20933	GRAFT OF DONOR BONE TO PART OF LONG BONE BETWEEN JOINTS		$531.03	$531.03					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20934	GRAFT OF DONOR BONE TO LONG BONE BETWEEN JOINTS		$578.61	$578.61					Effective 1/1/2019
20936	HARVEST OF BONE FROM SAME SPINE INCISION FOR GRAFT		$351.05	$351.05					
20937	HARVEST OF BONE FRAGMENT FOR SPINE BONE GRAFT		$163.91	$163.91					
20938	HARVEST OF BONE FOR SPINE SURGERY GRAFT		$177.29	$177.29					
20939	ASPIRATION OF BONE MARROW FOR SPINE BONE GRAFT		$53.54	$53.54					Added Effective 1/1/2018
20950	PLACEMENT OF DEVICE IN MUSCLE TO MONITOR FLUID PRESSURE		$70.34	$70.34					
20955	BONE GRAFT AT LOWER LEG WITH MICROVASCULAR CONNECTION		$2,206.66	$2,206.66					
20956	BONE GRAFT OF PELVIC BONE WITH MICROVASCULAR CONNECTION		$1,887.34	$1,887.34					
20957	BONE GRAFT OF FOOT BONE WITH MICROVASCULAR CONNECTION		$1,955.28	$1,955.28					
20962	BONE GRAFT WITH MICROVASCULAR CONNECTION		$2,163.55	$2,163.55					
20969	PLACEMENT OF SKIN AND BONE FLAP WITH MICROVASCULAR CONNECTION		$2,470.78	$2,470.78					
20970	PLACEMENT OF BONE AND SKIN FLAP FROM HIP BONE WITH CONNECTION OF SMALL BLOOD VESSELS		$2,420.39	$2,420.39					
20972	PLACEMENT OF BONE AND SKIN FLAP FROM FOOT BONE WITH CONNECTION OF SMALL BLOOD VESSELS		$2,439.05	$2,439.05					
20973	PLACEMENT OF BONE AND SKIN FLAP FROM BIG TOE WITH CONNECTION OF SMALL BLOOD VESSELS		$2,601.34	$2,601.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
20974	PLACEMENT OF ELECTRICAL STIMULATION DEVICE FOR BONE HEALING		$76.94	$122.80					
20975	PLACEMENT OF ELECTRICAL STIMULATION DEVICE AT BROKEN BONE FOR HEALING		$179.22	$179.22					
20979	LOW INTENSITY ULTRASOUND STIMULATION TO AID BONE HEALING, NONINVASIVE (NONOPERATIVE)		$11.61	$11.61					
20982	DESTRUCTION OF GROWTHS AND ADJACENT SOFT TISSUE		$303.62	$2,957.32					
20983	FREEZING OF GROWTH OF BONE AND ADJACENT SOFT TISSUE		$320.13	$5,101.83					Added effective 1/1/2015
20985	COMPUTER-ASSISTED SURGERY FOR MUSCLE AND BONE PROCEDURE		$117.79	$117.79					
20999	OTHER PROCEDURE ON MUSCLE OR BONE	Yes	$0.00	$0.00					
21010	INCISION OF JAW JOINT		$563.11	$563.11					
21011	REMOVAL OF GROWTH UNDER SKIN OF FACE OR SCALP, LESS THAN 2.0 CM		$177.12	$224.33					
21012	REMOVAL OF GROWTH UNDER SKIN OF FACE OR SCALP, 2.0 CM OR MORE		$243.12	$243.12					
21013	REMOVAL OF GROWTH OF MUSCLE OF FACE OR SCALP, LESS THAN 2.0 CM		$286.72	$350.25					
21014	REMOVAL OF GROWTH OF MUSCLE OF FACE OR SCALP, 2.0 CM OR MORE		$376.05	$376.05					
21015	EXTENSIVE REMOVAL OF GROWTH OF FACE OR SCALP, LESS THAN 2.0 CM		$341.93	$341.93					
21016	EXTENSIVE REMOVAL OF GROWTH OF FACE OR SCALP, 2.0 CM OR MORE		$756.32	$756.32					
21025	REMOVAL OF LOWER JAW BONE		$212.35	$267.87					
21026	REMOVAL OF FACE BONE		$181.84	$223.95					
21029	REMOVAL OF GROWTH OF FACE BONE		$354.30	$478.09					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21030	REMOVAL OF GROWTH OR CYST OF JAW OR UPPER CHEEK		$310.90	$310.90					
21031	REMOVAL OF BONY GROWTH OF JAW BONE INSIDE MOUTH		$116.11	$165.46					
21032	REMOVAL OF BONY GROWTH OF UPPER JAW BONE INSIDE MOUTH		$185.84	$237.87					
21034	REMOVAL OF GROWTH OF UPPER JAW OR UPPER CHEEK BONE		$652.22	$652.22					
21040	REMOVAL OF GROWTH OR CYST OF LOWER JAW BONE		$101.83	$138.84					
21044	REMOVAL OF GROWTH OF LOWER JAW BONE		$608.25	$608.25					
21045	EXTENSIVE REMOVAL OF GROWTH OF LOWER JAW BONE		$852.72	$852.72					
21046	REMOVAL OF GROWTH OR CYST OF LOWER JAW BONE THROUGH MOUTH		$668.15	$668.15					
21047	REMOVAL OF GROWTH OR CYST OF PART OF LOWER JAW BONE		$833.04	$833.04					
21048	REMOVAL OF GROWTH OR CYST OF UPPER JAW BONE THROUGH MOUTH		$687.94	$687.94					
21049	REMOVAL OF GROWTH OR CYST OF PART OF UPPER JAW BONE		$789.70	$789.70					
21050	REMOVAL OF ROUNDED ENDS OF LOWER JAW JOINT BONE		$652.45	$652.45					
21060	REMOVAL OF LOWER JAW JOINT BONE TISSUE		$616.66	$616.66					
21070	PARTIAL REMOVAL OF LOWER JAW BONE		$427.35	$427.35					
21073	MANIPULATION OF HINGED JOINTS OF UPPER AND LOWER JAW BONES UNDER ANESTHESIA		$180.10	$274.74					
21079	IMPRESSION AND CUSTOM PREPARATION OF TEMPORARY ORAL PROSTHESIS		$1,041.93	$1,416.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21080	PREPARATION OF PERMANENT PROSTHESIS TO CLOSE MOUTH OPENING		$1,170.47	$1,591.30					
21081	IMPRESSION AND CUSTOM PREPARATION OF LOWER JAW BONE PROSTHESIS		$1,066.67	$1,450.09					
21082	IMPRESSION AND CUSTOM PREPARATION OF PROSTHESIS FOR ROOF OF MOUTH ENLARGEMENT		$972.98	$1,322.74					
21083	PREPARATION OF PROSTHESIS TO LIFT ROOF OF MOUTH		$900.10	$1,223.71					
21084	IMPRESSION AND CUSTOM PREPARATION OF SPEECH AID PROSTHESIS		$1,050.17	$1,427.56					
21085	IMPRESSION AND CUSTOM PREPARATION OF ORAL SURGICAL SPLINT		$419.52	$570.39					
21086	IMPRESSION AND CUSTOM PREPARATION OF OUTER EAR PROSTHESIS		$1,162.15	$1,579.90					
21087	IMPRESSION AND CUSTOM PREPARATION OF NASAL PROSTHESIS		$1,162.15	$1,579.90					
21088	IMPRESSION AND CUSTOM PREPARATION OF FACIAL PROSTHESIS	Yes	$1,162.15	$1,579.90					
21089	OTHER PROSTHETIC PROCEDURE FOR UPPER JAW AND FACE	Yes	$0.00	$0.00					
21100	PLACEMENT OF STABILIZING DEVICE TO UPPER JAW AND FACE		$149.65	$149.65					
21110	APPLICATION AND REMOVAL OF DENTAL FIXATION DEVICE		$232.94	$307.10					
21116	INJECTION FOR X-RAY OF HINGED JOINT OF UPPER AND LOWER JAW BONES		$44.81	$44.81					
21120	IMPLANTATION OF GRAFT TO ENLARGE CHIN BONE		$245.88	$245.88					
21121	ENLARGEMENT OF CHIN BY MOVEMENT OF BONE		$386.48	$386.48					
21122	ENLARGEMENT OF CHIN BY MOVEMENT OF MULTIPLE BONES		$425.75	$425.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21123	INSERTION OF SLIDING BONE GRAFT TO ENLARGE CHIN BONE, ADDITIONAL BONE GRAFT		$556.56	$556.56					
21125	ENLARGEMENT OF LOWER JAW WITH IMPLANT		$322.24	$322.24					
21127	INSERTION OF BONE GRAFTS BETWEEN PORTIONS OF BONE TO ENLARGE LOWER JAW BONE		$540.57	$540.57					
21137	REPAIR OF BONY DEFECT OF FOREHEAD	Yes	$523.00	$523.00					
21138	REPAIR OF BONY DEFECT OF FOREHEAD WITH INSERTION OF PROSTHETIC MATERIAL	Yes	$650.09	$650.09					
21139	REPAIR OF FRONTAL SINUS THROUGH FOREHEAD	Yes	$746.42	$746.42					
21141	RECONSTRUCTION OF UPPER JAW AND MIDFACE BONES	Yes	$921.94	$921.94					
21142	REPAIR OF MIDFACE BONES, 2 BONES	Yes	$956.18	$956.18					
21143	REPAIR OF MIDFACE BONES, 3 OR MORE BONES	Yes	$994.02	$994.02					
21145	RECONSTRUCTION OF MIDFACE BONES WITH BONE GRAFT, SINGLE PIECE (LEFORT I)	Yes	$980.63	$980.63					
21146	REPAIR OF MIDFACE BONES WITH BONE GRAFT, 2 BONES	Yes	$1,014.86	$1,014.86					
21147	REPAIR OF MIDFACE BONES WITH BONE GRAFT, 3 OR MORE BONES	Yes	$1,052.71	$1,052.71					
21150	RECONSTRUCTION OF MIDFACE BONES (LEFORT II)	Yes	$1,264.14	$1,264.14					
21151	RECONSTRUCTION OF MIDFACE BONES WITH BONE GRAFT (LEFORT II)	Yes	$1,415.73	$1,415.73					
21154	RECONSTRUCTION OF NOSE, CHEEK, AND MOUTH BONES WITH BONE GRAFTS	Yes	$1,516.22	$1,516.22					
21155	RECONSTRUCTION OF MIDFACE BONES WITH BONE GRAFT WITH LEFORT I (LEFORT III)	Yes	$1,718.85	$1,718.85					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21159	RECONSTRUCTION OF NOSE, CHEEK, MOUTH, AND FOREHEAD BONES WITH BONE GRAFTS	Yes	$2,123.01	$2,123.01					
21160	RECONSTRUCTION OF NOSE, CHEEK, MOUTH, AND FOREHEAD BONES WITH BONE GRAFTS AND REPAIR OF MIDFACE BONE	Yes	$2,325.11	$2,325.11					
21172	RECONSTRUCTION OF OUTER SIDE OF EYE AND LOWER FOREHEAD BONES		$1,389.65	$1,389.65					
21175	REPAIR OF BONY DEFECT OF LOWER FOREHEAD AND BOTH OUTER PORTIONS OF EYE BONES		$1,668.06	$1,668.06					
21179	RECONSTRUCTION OF FOREHEAD AND/OR UPPER EYE BONES WITH BONE GRAFT OR IMPLANT		$1,111.76	$1,111.76					
21180	RECONSTRUCTION OF FOREHEAD AND/OR UPPER EYE BONES WITH BONE GRAFT		$1,264.14	$1,264.14					
21181	RECONSTRUCTION OF SKULL BONES WITH REMOVAL OF BONE GROWTH		$528.05	$528.05					
21182	RECONSTRUCTION OF EYE, FOREHEAD, AND NOSE BONES WITH REMOVAL OF GROWTH WITH BONE GRAFTS, LESS THAN 40.0 SQ CM		$1,590.04	$1,590.04					
21183	RECONSTRUCTION OF EYE, FOREHEAD, AND NOSE BONES WITH REMOVAL OF GROWTH WITH BONE GRAFTS, 40.0-80.0 SQ CM		$1,725.08	$1,725.80					
21184	RECONSTRUCTION OF EYE, FOREHEAD, AND NOSE BONES WITH REMOVAL OF GROWTH WITH BONE GRAFTS, MORE THAN 80.0 SQ CM		$1,920.97	$1,920.97					
21188	RECONSTRUCTION OF MIDFACE BONES WITH BONE GRAFT		$1,111.76	$1,111.76					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21193	RECONSTRUCTION OF JAW BONE	Yes	$841.41	$841.41					
21194	RECONSTRUCTION OF LOWER JAW BONE WITH BONE GRAFT	Yes	$975.01	$975.01					
21195	RECONSTRUCTION OF LOWER JAW BONES	Yes	$843.39	$843.39					
21196	RECONSTRUCTION OF JAW BONES WITH INSERTION OF HARDWARE	Yes	$929.86	$929.86					
21198	INCISION OR PARTIAL REMOVAL OF LOWER JAW BONE	Yes	$831.81	$831.81					
21199	INCISION OR PARTIAL REMOVAL OF LOWER JAW BONE AND MOVEMENT OF TONGUE MUSCLE		$757.27	$757.27					
21206	INCISION OR PARTIAL REMOVAL OF UPPER JAW BONE	Yes	$692.92	$692.92					
21208	INCISION AND REPAIR OF BONY DEFECT OF CHEEK BONE WITH REPOSITIONING OF BONY SEGMENT	Yes	$608.54	$608.54					
21209	INCISION AND REPAIR OF BONY DEFECT OF CHEEK BONE INCLUDING BONY SEGMENT REDUCTION	Yes	$325.86	$325.86					
21210	REPAIR OF NASAL OR CHEEK BONE WITH BONE GRAFT		$476.02	$640.17					
21215	REPAIR OF LOWER JAW BONE WITH BONE GRAFT		$502.86	$675.73					
21230	HARVEST OF RIB CARTILAGE FOR GRAFTING		$614.70	$614.70					
21235	OBTAINING EAR CARTILAGE FOR GRAFTING		$426.41	$426.41					
21240	REPAIR OF HINGED JOINT OF UPPER AND LOWER JAW BONES		$884.99	$884.99					
21242	REPAIR OF HINGED JOINT OF UPPER AND LOWER JAW BONES WITH DONOR GRAFT		$826.81	$826.81					
21243	REPAIR OF HINGED JOINT OF UPPER AND LOWER JAW BONES WITH PROSTHESIS		$984.00	$984.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21244	RECONSTRUCTION OF LOWER JAW BONE WITH INSERTION OF BONE PLATE		$752.36	$752.36					
21245	PARTIAL REPAIR OF LOWER JAW OR CHEEK BONE WITH IMPLANT		$664.60	$664.60					
21246	COMPLETE RECONSTRUCTION OF LOWER OR UPPER JAW BONE WITH JAW BONE IMPLANT (SUBPERIOSTEAL)		$603.96	$603.96					
21247	RECONSTRUCTION OF HINGED JOINT OF JAW BONES WITH INSERTION OF RIB CARTILAGE		$1,402.11	$1,402.11					
21248	RECONSTRUCTION OF PART OF LOWER OR UPPER JAW BONE WITH IMPLANT		$557.82	$747.98					
21249	COMPLETE RECONSTRUCTION OF LOWER OR UPPER JAW BONE WITH JAW BONE IMPLANT (ENDOSTEAL)		$892.10	$1,201.89					
21255	RECONSTRUCTION OF CHEEK BONE WITH BONE GRAFT		$1,035.90	$1,035.90					
21256	RECONSTRUCTION OF EYE SOCKET BONE WITH BONE GRAFT		$1,002.85	$1,002.85					
21260	REPOSITIONING OF EYE BONE FROM OUTSIDE SKULL WITH BONE GRAFT		$1,023.40	$1,023.40					
21261	REPOSITIONING OF EYE SOCKET BONE FROM INSIDE AND OUTSIDE SKULL WITH BONE GRAFT		$1,380.57	$1,380.57					
21263	REPOSITIONING OF CHEEK BONE PROMINENCE WITH FOREHEAD ADVANCEMENT		$1,760.80	$1,760.80					
21267	RECONSTRUCTION OF EYE BONE FROM OUTSIDE SKULL WITH BONE GRAFT		$961.83	$961.83					
21268	REPOSITIONING OF EYE BONE FROM INSIDE AND OUTSIDE SKULL WITH BONE GRAFT		$1,159.15	$1,159.15					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21270	INSERTION OF PROSTHETIC MATERIAL TO ENLARGE CHEEK BONE		$646.81	$646.81					
21275	SECONDARY REVISION OF RECONSTRUCTION OF EYE, SKULL, AND FACE BONES		$578.78	$578.78					
21280	TIGHTENING OF TENDON OF INNER PORT OF LOWER EYELID		$373.17	$373.17					
21282	TIGHTENING OF TENDON OF OUTER EDGE OF LOWER EYELID		$236.09	$236.09					
21295	REDUCTION OF MUSCLE USED FOR CHEWING AND LOWER JAW BONE FROM OUTSIDE MOUTH		$70.87	$70.87					
21296	REDUCTION OF MUSCLE USED FOR CHEWING AND LOWER JAW BONE FROM INSIDE MOUTH		$218.93	$218.93					
21299	OTHER PROCEDURE ON SKULL, FACE, AND UPPER JAW BONES	Yes	$0.00	$0.00					
21315	CLOSED TREATMENT OF BROKEN NOSE BONE WITH MANIPULATION		$95.02	$95.02					
21320	CLOSED TREATMENT OF BROKEN NOSE BONE WITH PLACEMENT OF STABILIZING DEVICE		$124.16	$124.16					
21325	TREATMENT OF BROKEN NOSE BONE		$225.63	$225.63					
21330	TREATMENT OF BROKEN NOSE BONE WITH PLACEMENT OF STABILIZING DEVICE		$341.50	$341.50					
21335	TREATMENT OF BROKEN NOSE BONE AND TISSUE SEPARATING NOSE AIRWAYS		$550.66	$550.66					
21336	TREATMENT OF BROKEN BONE AND TISSUE SEPARATING NOSE AIRWAYS		$279.32	$279.32					
21337	CLOSED TREATMENT OF BROKEN BONE SEPARATING NOSE AIRWAYS		$158.82	$158.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21338	TREATMENT OF BROKEN BONE SEPARATING NOSE AIRWAYS		$327.65	$327.65					
21339	TREATMENT OF BROKEN NOSE AND EYE BONES WITH PLACEMENT OF OUTSIDE STABILIZING DEVICE		$429.01	$429.01					
21340	TREATMENT OF BROKEN NOSE BONES WITH PLACEMENT OF STABILIZING DEVICE		$559.74	$559.74					
21343	TREATMENT OF DEPRESSED BROKEN FRONT SINUS BONE		$627.26	$627.26					
21344	TREATMENT OF COMPLICATED BROKEN FRONT SINUS BONE		$813.00	$813.00					
21345	CLOSED TREATMENT OF BROKEN NOSE AND UPPER JAW BONES WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$455.47	$455.47					
21346	TREATMENT OF BROKEN NOSE AND UPPER JAW BONES WITH PLACEMENT OF STABILIZING DEVICE		$568.48	$568.48					
21347	TREATMENT OF COMPLEX BROKEN NOSE AND UPPER JAW BONES THROUGH MULTIPLE OPENINGS		$658.94	$658.94					
21348	TREATMENT OF BROKEN NOSE AND UPPER JAW BONES WITH BONE GRAFT		$815.86	$815.86					
21355	TREATMENT OF BROKEN CHEEK BONE ACCESSED THROUGH THE SKIN WITH MANIPULATION		$149.26	$149.26					
21356	TREATMENT OF DEPRESSED BROKEN UPPER PORTION OF CHEEK BONE		$268.52	$268.52					
21360	TREATMENT OF DEPRESSED BROKEN CHEEK BONE		$394.12	$394.12					
21365	TREATMENT OF COMPLICATED BROKEN CHEEK BONE WITH PLACEMENT OF INTERNAL STABILIZING DEVICE		$780.79	$780.79					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21366	TREATMENT OF COMPLICATED BROKEN CHEEK BONE WITH BONE GRAFT		$868.75	$868.75					
21385	TREATMENT OF BROKEN FLOOR OF EYE BONE THROUGH CHEEK		$535.86	$535.86					
21386	TREATMENT OF BROKEN FLOOR OF EYE BONE THROUGH EYE AREA		$524.83	$524.83					
21387	TREATMENT OF BROKEN FLOOR OF EYE BONE THROUGH CHEEK AND EYE AREA		$489.30	$489.30					
21390	TREATMENT OF BROKEN FLOOR OF EYE BONE THROUGH EYE AREA WITH IMPLANT		$630.08	$630.08					
21395	TREATMENT OF BROKEN FLOOR OF EYE BONE THROUGH EYE AREA WITH BONE GRAFT		$639.31	$639.31					
21400	CLOSED TREATMENT OF BROKEN EYE BONE		$87.36	$87.36					
21401	CLOSED TREATMENT OF BROKEN EYE BONE WITH MANIPULATION		$166.47	$166.47					
21406	TREATMENT OF BROKEN EYE BONE		$349.92	$349.92					
21407	TREATMENT OF BROKEN EYE BONE WITH IMPLANT		$445.34	$445.34					
21408	TREATMENT OF BROKEN EYE BONE WITH BONE GRAFT		$591.28	$591.28					
21421	CLOSED TREATMENT OF BROKEN ROOF OF MOUTH OR UPPER JAW BONE WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$320.60	$320.60					
21422	TREATMENT OF BROKEN ROOF OF MOUTH OR UPPER JAW BONE		$520.06	$520.06					
21423	COMPLICATED TREATMENT OF BROKEN ROOF OF MOUTH OR UPPER JAW BONE		$576.99	$576.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21431	CLOSED TREATMENT OF BROKEN BONES OF CHEEK, NOSE, AND FACE WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$372.09	$372.09					
21432	TREATMENT OF BROKEN FACE AND SKULL BONES WITH PLACEMENT OF STABILIZING DEVICE		$437.94	$437.94					
21433	COMPLICATED REPAIR OF BROKEN FACE AND SKULL BONES		$1,227.90	$1,227.90					
21435	COMPLICATED REPAIR OF BROKEN FACE AND SKULL BONES WITH PLACEMENT OF STABILIZING DEVICE		$874.09	$874.09					
21436	COMPLICATED REPAIR OF BROKEN FACE AND SKULL BONES WITH PLACEMENT OF STABILIZING DEVICE AND BONE GRAFT		$1,212.58	$1,212.58					
21440	CLOSED TREATMENT OF BROKEN UPPER OR LOWER JAW BONE		$163.09	$163.09					
21445	TREATMENT OF BROKEN UPPER OR LOWER JAW BONE		$325.09	$325.09					
21450	CLOSED TREATMENT OF BROKEN LOWER JAW BONE		$164.07	$164.07					
21451	CLOSED TREATMENT OF BROKEN LOWER JAW BONE WITH MANIPULATION		$307.87	$307.87					
21452	TREATMENT OF BROKEN LOWER JAW BONE WITH PLACEMENT OF STABILIZING DEVICE		$95.70	$95.70					
21453	CLOSED TREATMENT OF BROKEN LOWER JAW BONE WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$343.46	$343.46					
21454	TREATMENT OF BROKEN LOWER JAW BONE WITH PLACEMENT OF EXTERNAL STABILIZING DEVICE		$431.41	$431.41					
21461	TREATMENT OF BROKEN LOWER JAW BONE		$512.79	$512.79					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21462	TREATMENT OF BROKEN LOWER JAW BONE WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$615.14	$615.14					
21465	TREATMENT OF BROKEN HINGED END OF LOWER JAW BONE		$577.03	$577.03					
21470	COMPLICATED TREATMENT OF BROKEN LOWER JAW BONE WITH PLACEMENT OF STABILIZING DEVICE TO TEETH		$918.12	$918.12					
21480	CLOSED TREATMENT OF DISLOCATED JAW JOINT		$41.01	$41.01					
21485	COMPLICATED REPAIR OF DISLOCATED JAW JOINT WITH PLACEMENT OF STABILIZING DEVICE		$143.68	$173.05					
21490	TREATMENT OF DISLOCATED JAW JOINT		$507.01	$507.01					
21497	WIRING OF JAW OR ORAL SPLINT TO TEETH		$221.65	$221.65					
21499	OTHER PROCEDURE ON HEAD MUSCLE OR HEAD BONE	Yes	$132.50	$172.25					
21501	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION IN SOFT TISSUE OF NECK OR CHEST		$158.42	$158.42					
21502	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION IN SOFT TISSUE OF NECK OR CHEST WITH PARTIAL REMOVAL OF RIB		$320.39	$320.39					
21510	DEEP INCISION OF CHEST BONE		$262.21	$262.21					
21550	BIOPSY OF SOFT TISSUE OF NECK OR CHEST		$73.30	$84.70					
21552	REMOVAL OF GROWTH OF SOFT TISSUE UNDER SKIN OF NECK OR FRONT OF CHEST, 3.0 CM OR MORE		$325.14	$325.14					
21554	REMOVAL OF GROWTH OF MUSCLE OF NECK OR FRONT OF CHEST, 5.0 CM OR MORE		$535.14	$535.14					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21555	REMOVAL OF GROWTH UNDER SKIN OF NECK OR FRONT OF CHEST, LESS THAN 3.0 CM		$169.01	$169.01					
21556	REMOVAL OF GROWTH OF MUSCLE OF NECK OR FRONT OF CHEST, LESS THAN 5.0 CM		$272.41	$272.41					
21557	EXTENSIVE REMOVAL OF GROWTH OF NECK OR FRONT OF CHEST, LESS THAN 5.0 CM		$513.43	$513.43					
21558	EXTENSIVE REMOVAL OF GROWTH OF NECK OR FRONT OF CHEST, 5.0 CM OR MORE		$1,006.20	$1,006.20					
21600	PARTIAL REMOVAL OF RIB		$326.07	$326.07					
21601	REMOVAL OF GROWTH OF CHEST WALL AND RIB		$938.43	$938.43					Added Effective 01/01/2020
21602	MOVAL OF GROWTH OF CHEST WALL AND RIB WITH RECONSTRUCTION		$1,254.02	$1,254.02					Added Effective 01/01/2020
21603	REMOVAL OF GROWTH OF CHEST WALL AND RIB WITH RECONSTRUCTION AND REMOVAL OF LYMPH NODES FROM CHEST CAVITY		$1,389.43	$1,389.43					Added Effective 01/01/2020
21610	PARTIAL REMOVAL OF RIB AND SPINE BONE AT JOINT		$407.73	$407.73					
21615	REMOVAL OF FIRST AND/OR EXTRA RIB AT NECK		$584.30	$584.30					
21616	REMOVAL OF FIRST AND/OR EXTRA RIB AT NECK WITH REMOVAL OF SYMPATHETIC NERVES		$557.18	$557.18					
21620	PARTIAL REMOVAL OF CHEST BONE		$390.85	$390.85					
21627	REMOVAL OF CHEST BONE TISSUE		$334.61	$334.61					
21630	EXTENSIVE REMOVAL OF CHEST BONE		$866.80	$866.80					
21685	REPOSITIONING OF BONE AND MUSCLES IN NECK		$673.66	$673.66					
21700	REMOVAL OF NECK MUSCLE WITH RELEASE OF NERVES		$295.09	$295.09					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21705	REMOVAL OF NECK MUSCLE AND EXTRA RIB AT NECK WITH RELEASE OF NERVES		$418.39	$418.39					
21720	RELEASE OF TENDONS OF NECK MUSCLE, OPEN PROCEDURE		$275.26	$275.26					
21725	RELEASE OF NECK MUSCLE AND PLACEMENT OF A CAST TO TREAT TILTING HEAD		$340.00	$340.00					
21740	REPAIR OF ABNORMAL POSITION OF CHEST BONE		$733.46	$733.46					
21742	MINIMALLY INVASIVE REPAIR OF ABNORMAL POSITION OF CHEST BONE		$653.30	$653.30					
21743	REPAIR OF BREAST BONE DEPRESSION USING AN ENDOSCOPE		$0.00	$859.84					
21750	TREATMENT OF BROKEN CHEST BONE FOLLOWING SURGERY		$526.84	$526.84					
21811	TREATMENT OF BROKEN RIBS ON SIDE WITH PLACEMENT OF STABILIZING DEVICE, 1-3 RIBS		$488.16	$488.16					Added effective 1/1/2015
21812	TREATMENT OF BROKEN RIBS ON SIDE WITH PLACEMENT OF STABILIZING DEVICE, 4-6 RIBS		$585.49	$585.49					Added effective 1/1/2015
21813	TREATMENT OF BROKEN RIBS ON SIDE WITH PLACEMENT OF STABILIZING DEVICE, 7 OR MORE RIBS		$796.59	$796.59					Added effective 1/1/2015
21820	CLOSED TREATMENT OF BROKEN CHEST BONE		$75.82	$75.82					
21825	TREATMENT OF BROKEN CHEST BONE		$412.41	$412.41					
21899	OTHER PROCEDURE ON NECK OR CHEST	Yes	$0.00	$0.00					
21920	BIOPSY OF SURFACE SOFT TISSUE TO BACK OR LOWER SIDES		$72.25	$82.84					
21925	DEEP BIOPSY OF SOFT TISSUE OF BACK OR LOWER SIDES		$184.20	$184.20					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
21930	REMOVAL OF GROWTH UNDER SKIN OF BACK OR LOWER SIDES, LESS THAN 3.0 CM		$277.06	$277.06					
21931	REMOVAL OF GROWTH UNDER SKIN OF BACK OR LOWER SIDES, 3.0 CM OR MORE		$340.33	$340.33					
21932	REMOVAL OF GROWTH OF MUSCLE OF BACK OR LOWER SIDES, LESS THAN 5.0 CM		$488.30	$488.30					
21933	REMOVAL OF GROWTH OF MUSCLE OF BACK OR LOWER SIDES, 5.0 CM OR MORE		$539.01	$539.01					
21935	EXTENSIVE REMOVAL OF GROWTH OF BACK OR LOWER SIDE, LESS THAN 5.0 CM		$710.71	$710.71					
21936	EXTENSIVE REMOVAL OF GROWTH OF BACK OR LOWER SIDE, 5.0 CM OR MORE		$1,046.66	$1,046.66					
22010	DRAINAGE OF ABSCESS OF DEEP TISSUE OF UPPER OR MIDDLE SPINE		$600.01	$600.01					
22015	DRAINAGE OF ABSCESS OF DEEP TISSUE OF LOWER SPINE OR SACRUM		$594.70	$594.70					
22100	REMOVAL OF REAR PIECE OF UPPER SPINE BONE		$496.96	$496.96					
22101	REMOVAL OF REAR PIECE OF MIDDLE SPINE BONE		$512.47	$512.47					
22102	REMOVAL OF REAR PIECE OF LOWER SPINE BONE		$401.07	$401.07					
22103	PARTIAL REMOVAL OF BONE AT BACK OF SPINE, EACH ADDITIONAL SEGMENT		$137.47	$137.47					
22110	PARTIAL REMOVAL OF UPPER SPINE BONE		$640.65	$640.65					
22112	PARTIAL REMOVAL OF MIDDLE SPINE BONE		$645.24	$645.24					
22114	PARTIAL REMOVAL OF LOWER SPINE BONE		$562.98	$562.98					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22116	PARTIAL REMOVAL OF SPINE BONE, EACH ADDITIONAL SEGMENT		$136.10	$136.10					
22206	INCISION OR REMOVAL OF SEGMENT OF MIDDLE SPINE BONE TO CORRECT DEFORMITY		$1,808.68	$1,808.68					
22207	INCISION OR REMOVAL OF LOWER SPINE BONE SEGMENT TO CORRECT DEFORMITY		$1,785.54	$1,785.54					
22208	INCISION OR REMOVAL OF SPINE BONE SEGMENT TO CORRECT DEFORMITY, EACH ADDITIONAL SEGMENT		$458.70	$458.70					
22210	INCISION OR REMOVAL OF UPPER SPINE BONE SEGMENT		$1,090.52	$1,090.52					
22212	INCISION OR REMOVAL OF MIDDLE SPINE BONE SEGMENT		$1,064.81	$1,064.81					
22214	INCISION OR REMOVAL OF LOWER SPINE BONE SEGMENT		$1,002.69	$1,002.69					
22216	INCISION OR REMOVAL OF SPINE BONE SEGMENT, EACH ADDITIONAL SEGMENT		$334.85	$334.85					
22220	INCISION OR REMOVAL OF UPPER SPINE BONE SEGMENT AND REMOVAL OF DISC		$1,101.50	$1,101.50					
22222	INCISION OR REMOVAL OF MIDDLE SPINE BONE AND REMOVAL OF DISC		$994.71	$994.71					
22224	INCISION OR REMOVAL OF LOWER SPINE BONE SEGMENT AND REMOVAL OF DISC		$1,049.65	$1,049.65					
22226	INCISION OR REMOVAL OF SPINE BONE SEGMENT AND REMOVAL OF DISC, EACH ADDITIONAL SEGMENT		$334.85	$334.85					
22310	CLOSED TREATMENT OF BROKEN SPINE BONE WITH CAST OR BRACE		$138.94	$138.94					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22315	CLOSED TREATMENT OF BROKEN OR DISLOCATED SPINE BONE WITH CAST OR BRACE AND TRACTION		$414.00	$414.00					
22318	TREATMENT OF BROKEN OR DISLOCATED UPPERMOST SPINE BONE WITH PLACEMENT OF STABILIZING DEVICE		$1,087.92	$1,087.92					
22319	TREATMENT OF BROKEN OR DISLOCATED UPPERMOST SPINE BONE WITH PLACEMENT OF STABILIZING DEVICE AND BONE GRAFT		$1,228.21	$1,228.21					
22325	TREATMENT OF BROKEN OR DISLOCATED LOWER SPINE BONE		$760.14	$760.14					
22326	TREATMENT OF BROKEN OR DISLOCATED UPPER SPINE BONE		$1,034.65	$1,034.65					
22327	TREATMENT OF BROKEN OR DISLOCATED MIDDLE SPINE BONE		$1,000.18	$1,000.18					
22328	TREATMENT OF BROKEN OR DISLOCATED SPINE BONE, EACH ADDITIONAL SEGMENT		$270.79	$270.79					
22505	MANIPULATION OF SPINE UNDER ANESTHESIA		$91.21	$91.21					
22510	STABILIZATION OF UPPER SPINE BONE		$368.00	$1,325.01					Added effective 1/1/2015
22511	STABILIZATION OF LOWER SPINE BONE		$345.25	$1,311.06					Added effective 1/1/2015
22512	STABILIZATION OF SPINE BONE, EACH ADDITIONAL BONE		$172.11	$734.83					Added effective 1/1/2015
22513	TREATMENT OF BROKEN MIDDLE SPINE BONE WITH PLACEMENT OF STABILIZING DEVICE USING IMAGING GUIDANCE		$435.13	$5,426.92					Added effective 1/1/2015
22514	TREATMENT OF BROKEN LOWER SPINE BONE WITH PLACEMENT OF STABILIZING DEVICE		$405.26	$5,396.27					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22515	TREATMENT OF BROKEN SPINE BONE WITH STABILIZING DEVICE, EACH ADDITIONAL SEGMENT		$184.24	$3,270.54					Added effective 1/1/2015
22526	TREATMENT OF SPINE DISC USING FLUOROSCOPIC GUIDANCE, SINGLE LEVEL		$257.02	$1,384.12					
22527	TREATMENT OF SPINE DISC USING FLUOROSCOPIC GUIDANCE, EACH ADDITIONAL BONE LEVEL		$119.74	$1,113.91					
22532	FUSION OF MIDDLE SPINE BONE THROUGH SIDE WITH PARTIAL REMOVAL OF DISC, 1 BONE		$1,187.65	$1,187.65					
22533	FUSION OF LOWER SPINE BONE THROUGH SIDE WITH PARTIAL REMOVAL OF DISC, 1 BONE		$1,110.00	$1,110.00					
22534	FUSION OF MIDDLE OR LOWER SPINE BONE THROUGH SIDE WITH PARTIAL REMOVAL OF DISC, EACH ADDITIONAL BONE		$281.33	$281.33					
22548	FUSION OF SPINE BONES AT BASE OF NECK, ORAL APPROACH		$1,409.34	$1,409.34					
22551	FUSION OF SPINE BONES AT BASE OF NECK, ORAL APPROACH		$1,517.32	$1,517.32					
22552	FUSION OF UPPER SPINE BONE WITH REMOVAL OF DISC AND RELEASE OF SPINAL CORD OR NERVE, EACH ADDITIONAL DISC		$353.67	$353.67					
22554	FUSION OF UPPER SPINE BONES THROUGH FRONT OF NECK WITH PARTIAL REMOVAL OF DISC		$1,122.76	$1,122.76					
22556	FUSION OF MIDDLE SPINE BONE THROUGH SIDE OF CHEST WITH PARTIAL REMOVAL OF DISC		$1,321.97	$1,321.97					
22558	FUSION OF LOWER SPINE BONE THROUGH ABDOMEN WITH PARTIAL REMOVAL OF DISC		$1,245.80	$1,245.80					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22585	ARTHRODFUSION OF SPINE BONES THROUGH FRONT OF BODY WITH PARTIAL REMOVAL OF DISC, EACH ADDITIONAL DISCESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISKECTOM		$329.71	$329.71					
22586	FUSION OF LOWER SPINE OR SACRAL BONE WITH REMOVAL OF DISC USING IMAGE GUIDANCE		$1,228.42	$1,228.42					
22590	FUSION OF SKULL AND FIRST 2 UPPER SPINE BONES THROUGH BACK		$1,234.34	$1,234.34					
22595	FUSION OF FIRST 2 SPINE BONES THROUGH BACK OF NECK		$1,230.22	$1,230.22					
22600	FUSION OF SPINE IN NECK BY POSTERIOR APPROACH		$1,032.47	$1,032.47					
22610	FUSION OF SPINE IN UPPER BACK		$975.13	$975.13					
22612	FUSION OF SPINE IN LOWER BACK		$1,225.89	$1,225.89					
22614	FUSION OF ADDITIONAL SEGMENT OF SPINE		$362.87	$362.87					
22630	FUSION OF LOWER SPINE BONE AND PARTIAL REMOVAL OF SPINE BONE OR DISC THROUGH BACK, 1 DISC		$1,158.89	$1,158.89					
22632	FUSION OF LOWER BACK SPINE BONE AND PARTIAL REMOVAL OF SPINE BONE OR DISC THROUGH BACK, EACH ADDITIONAL DISC		$307.23	$307.23					
22633	FUSION OF SPINE IN LOWER BACK WITH PARTIAL REMOVAL OF SPINE BONE AND DISC		$1,471.52	$1,471.52					
22634	FUSION OF ADDITIONAL SEGMENT OF SPINE WITH PARTIAL REMOVAL OF SPINE BONE AND DISC		$397.96	$397.96					
22800	FUSION TO REPAIR SPINE DEFORMITY THROUGH BACK, UP TO 6 BONES		$1,164.44	$1,164.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22802	FUSION OF SPINE BONES FOR CORRECTION OF DEFORMITY, POSTERIOR APPROACH, 7 TO 12 VERTEBRAL SEGMENTS		$1,744.29	$1,744.29					
22804	FUSION TO REPAIR SPINE DEFORMITY THROUGH BACK, 13 OR MORE BONES		$1,898.64	$1,898.64					
22808	FUSION OF SPINE BONES FOR CORRECTION OF DEFORMITY, ANTERIOR APPROACH, 2 TO 3 VERTEBRAL SEGMENTS		$1,303.92	$1,303.92					
22810	FUSION OF SPINE BONES FOR CORRECTION OF DEFORMITY, ANTERIOR APPROACH, 4 TO 7 VERTEBRAL SEGMENTS		$1,421.30	$1,421.30					
22812	FUSION OF SPINE BONES FOR CORRECTION OF DEFORMITY, ANTERIOR APPROACH, 8 OR MORE VERTEBRAL SEGMENTS		$1,708.17	$1,708.17					
22818	REMOVAL OF 1-2 SPINE BONES TO CORRECT OUTWARD CURVING SPINE DEFORMITY		$1,764.05	$1,764.05					
22819	REMOVAL OF PARTS OF 3 OR MORE SPINE BONES TO CORRECT OUTWARD CURVING SPINE DEFORMITY		$1,896.86	$1,896.66					
22830	EXPLORATION OF SPINAL FUSION		$703.42	$703.42					
22836	TETHERING OF 7 OR FEWER MIDDLE SPINE BONES		$1,456.71	$1,456.71					
22837	TETHERING OF 8 OR MORE MIDDLE SPINE BONES		$1,605.43	$1,605.43					
22838	REVISION, REPLACEMENT, OR REMOVAL OF MIDDLE SPINE TETHERING		$1,626.83	$1,626.83					
22840	PLACEMENT OF STABILIZING DEVICE TO BACK OF 1 SPINE BONE IN NECK		$368.19	$368.19					
22841	INSERTION OF WIRE TO STABILIZE SPINE BONES		$218.05	$218.05					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22842	PLACEMENT OF STABILIZING DEVICE TO BACK, 3-6 SPINE BONE SEGMENTS		$422.19	$422.19					
22843	PLACEMENT OF STABILIZING DEVICE TO BACK, 7-12 SPINE BONE SEGMENTS		$526.56	$526.56					
22844	PLACEMENT OF STABILIZING DEVICE TO BACK, 13 OR MORE SPINE BONE SEGMENTS		$643.45	$643.45					
22845	PLACEMENT OF STABILIZING DEVICE TO FRONT, 2-3 SPINE BONE SEGMENTS		$350.96	$350.96					
22846	PLACEMENT OF STABILIZING DEVICE TO FRONT, 4-7 SPINE BONE SEGMENTS		$486.20	$486.20					
22847	PLACEMENT OF STABILIZING DEVICE TO FRONT, 8 OR MORE SPINE BONE SEGMENTS		$540.18	$540.18					
22848	INSERTION OF INSTRUMENTATION TO PELVIC BONES		$352.32	$352.32					
22849	REINSERTION OF SPINAL FIXATION DEVICE		$740.65	$740.65					
22850	REMOVAL OF STABILIZING DEVICE FROM BACK OF SPINE		$545.91	$545.91					
22852	REMOVAL OF SEGMENTAL STABILIZING DEVICE FROM BACK OF SPINE		$547.49	$547.49					
22853	INSERTION OF CAGE OR MESH DEVICE TO SPINE BONE AND DISC SPACE DURING SPINE FUSION		$211.42	$211.42					Added Effective 1/1/2017
22854	INSERTION OF CAGE OR MESH DEVICE IN DISC SPACE DURING SPINE FUSION		$273.68	$273.68					Added Effective 1/1/2017
22855	REMOVAL OF STABILIZING DEVICE FROM FRONT OF SPINE		$497.49	$497.49					
22856	INSERTION OF ARTIFICIAL UPPER SPINE DISC, ANTERIOR APPROACH		$1,280.26	$1,280.26					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22857	INSERTION OF ARTIFICIAL DISC BETWEEN BONES OF LOWER SPINE, SINGLE SPACE		$1,089.01	$1,089.01					
22858	INSERTION OF ARTIFICIAL UPPER SPINE DISC ANTERIOR APPROACH		$401.85	$401.85					Added effective 1/1/2015
22859	PLACEMENT OF MESH OR CAGE DEVICE INTO SPINE DISC SPACE		$273.68	$273.68					Added Effective 1/1/2017
22860	INSERTION OF ARTIFICIAL DISC BETWEEN BONES OF LOWER SPINE, ADDITIONAL SPACE		$0.00	$0.00					
22861	REVISION OF TOTAL DISC REPLACEMENT IN UPPER BACK		$1,549.96	$1,549.96					
22862	REVISION OF TOTAL DISC REPLACEMENT IN LOWER BACK		$1,325.39	$1,325.39					
22864	REVISION OF ARTIFICIAL UPPER SPINE DISC, CERVICAL		$1,439.29	$1,439.29					
22865	REVISION OF ARTIFICIAL LOWER SPINE DISC, LUMBAR		$1,290.41	$1,290.41					
22867	PLACEMENT OF DEVICE TO STABILIZE OR REDUCE PRESSURE IN LOWER SPINE IN 1 DISC SPACE		$782.97	$782.97					Added Effective 1/1/2017
22868	PLACEMENT OF DEVICE TO STABILIZE OR REDUCE PRESSURE IN LOWER SPINE IN SECOND DISC SPACE		$197.79	$197.79					Added Effective 1/1/2017
22869	PLACEMENT OF STABILIZING DEVICE TO LOWER SPINE LEVEL		$429.91	$429.91					Added Effective 1/1/2017
22870	PLACEMENT OF STABILIZING DEVICE TO SECOND LOWER SPINE LEVEL		$115.32	$115.32					Added Effective 1/1/2017
22899	OTHER PROCEDURE ON SPINE	Yes	$500.00	$650.00					
22900	REMOVAL OF GROWTH OF MUSCLE OF ABDOMEN, LESS THAN 5.0 CM		$288.34	$288.34					
22901	REMOVAL OF GROWTH OF MUSCLE OF ABDOMEN, 5.0 CM OR MORE		$481.77	$481.77					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
22902	REMOVAL OF GROWTH OF SOFT TISSUE OF ABDOMINAL WALL, LESS THAN 3.0 CM		$242.39	$300.31					
22903	REMOVAL OF GROWTH OF SOFT TISSUE OF ABDOMINAL WALL, 3.0 CM OR MORE		$318.49	$318.49					
22904	EXTENSIVE REMOVAL OF GROWTH OF SOFT TISSUE OF ABDOMINAL WALL, LESS THAN 5.0 CM		$755.94	$755.94					
22905	EXTENSIVE REMOVAL OF GROWTH OF SOFT TISSUE OF ABDOMINAL WALL, 5.0 CM OR MORE		$980.19	$980.19					
22999	OTHER PROCEDURE ON ABDOMINAL MUSCLE OR BONE	Yes	$800.00	$1,040.00					
23000	REMOVAL OF CALCIUM DEPOSITS AT ROTATOR CUFF TENDONS, OPEN PROCEDURE		$219.22	$219.22					
23020	RELEASE OF TENDON OF SHOULDER JOINT		$463.57	$463.57					
23030	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF SHOULDER		$159.17	$159.17					
23031	DRAINAGE OF INFECTED FLUID-FILLED SAC (BURSA) OF SHOULDER JOINT		$86.85	$93.56					
23035	INCISION OF SHOULDER BONE FOR REMOVAL OF INFECTED TISSUE		$420.98	$420.98					
23040	INCISION OF SHOULDER JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$530.55	$530.55					
23044	INCISION OF COLLAR BONE JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$401.81	$401.81					
23065	BIOPSY OF SURFACE TISSUE OF SHOULDER		$85.62	$85.62					
23066	BIOPSY OF DEEP TISSUE OF SHOULDER		$151.75	$151.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23071	REMOVAL OF GROWTH UNDER SKIN OF SHOULDER AREA, 3.0 CM OR MORE		$301.88	$301.88					
23073	REMOVAL OF GROWTH OF MUSCLE OF SHOULDER, 5.0 CM OR MORE		$500.90	$500.90					
23075	REMOVAL OF GROWTH UNDER SKIN OF SHOULDER AREA, LESS THAN 3.0 CM		$120.77	$120.77					
23076	REMOVAL OF GROWTH OF MUSCLE OF SHOULDER, LESS THAN 5.0 CM		$319.67	$319.67					
23077	EXTENSIVE REMOVAL OF GROWTH OF SHOULDER, LESS THAN 5.0 CM		$661.36	$661.36					
23078	EXTENSIVE REMOVAL OF GROWTH OF SHOULDER, 5.0 CM OR MORE		$1,020.16	$1,020.16					
23100	INCISION AND BIOPSY OF SHOULDER JOINT		$388.45	$388.45					
23101	INCISION TO REPAIR JOINTS BETWEEN SHOULDER, CHEST AND COLLAR BONES		$361.45	$361.45					
23105	REMOVAL OF SHOULDER JOINT LINING		$534.96	$534.96					
23106	REMOVAL OF LINING OF JOINT BETWEEN COLLAR AND CHEST BONES		$309.99	$309.99					
23107	INCISION OF SHOULDER JOINT FOR EXAM		$534.66	$534.66					
23120	PARTIAL REMOVAL OF COLLAR BONE		$336.76	$336.76					
23125	REMOVAL OF COLLAR BONE		$519.74	$519.74					
23130	PARTIAL REMOVAL OR REPAIR OF SHOULDER BONE NEAR COLLAR BONE		$425.13	$425.13					
23140	REMOVAL OF CYST OR GROWTH OF COLLAR BONE OR SHOULDER BLADE		$318.00	$318.00					
23145	REMOVAL OF CYST OR GROWTH OF COLLAR BONE OR SHOULDER BLADE WITH SELF BONE GRAFT		$500.97	$500.97					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23146	REMOVAL OF CYST OR GROWTH OF COLLAR BONE OR SHOULDER BLADE WITH DONOR BONE GRAFT		$380.20	$380.20					
23150	REMOVAL OF CYST OR GROWTH OF TOP PART OF UPPER ARM BONE		$431.52	$431.52					
23155	REMOVAL OF CYST OR GROWTH OF TOP PART OF UPPER ARM BONE WITH SELF BONE GRAFT		$550.43	$550.43					
23156	REMOVAL OF CYST OR GROWTH OF TOP OF UPPER ARM BONE WITH DONOR BONE GRAFT		$470.04	$470.04					
23170	REMOVAL OF DEAD BONE FRAGMENT FROM COLLAR BONE		$331.95	$331.95					
23172	REMOVAL OF DEAD BONE FRAGMENT FROM SHOULDER BLADE		$339.24	$339.24					
23174	REMOVAL OF DEAD BONE FRAGMENT FROM TOP OF UPPER ARM BONE		$514.31	$514.31					
23180	PARTIAL REMOVAL OF INFECTED COLLAR BONE		$361.08	$361.08					
23182	PARTIAL REMOVAL OF INFECTED SHOULDER BLADE		$421.99	$421.99					
23184	PARTIAL REMOVAL OF INFECTED TOP OF UPPER ARM BONE		$525.45	$525.45					
23190	PARTIAL REMOVAL OF SHOULDER BLADE		$385.57	$385.57					
23195	REMOVAL OF SHOULDER BLADE		$538.31	$538.31					
23200	EXTENSIVE REMOVAL OF GROWTH OF COLLAR BONE		$600.82	$600.82					
23210	EXTENSIVE REMOVAL OF GROWTH OF SHOULDER BLADE		$610.15	$610.15					
23220	EXTENSIVE REMOVAL OF GROWTH OF UPPER END OF UPPER ARM		$763.09	$763.09					
23330	REMOVAL OF FOREIGN BODY OF SHOULDER JOINT, ACCESSED BENEATH THE SKIN		$61.90	$69.27					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23333	REMOVAL OF FOREIGN BODY OF SHOULDER JOINT, ACCESSED BENEATH THE TISSUE OR MUSCLE		$356.13	$356.13					
23334	REMOVAL OF BALL OR SOCKET PROSTHESIS FROM SHOULDER		$844.97	$844.97					
23335	REMOVAL OF BALL AND SOCKET PROSTHESIS FROM SHOULDER		$1,009.28	$1,009.28					
23350	INJECTION OF CONTRAST FOR IMAGING OF SHOULDER JOINT		$44.51	$44.51					Effective 1/1/2014
23397	RELOCATION OF MULTIPLE MUSCLES OF SHOULDER OR UPPER ARM		$878.46	$878.46					
23400	RESHAPING AND RELOCATION OF SHOULDER BLADE BONE		$685.04	$685.04					
23405	INCISION OF SHOULDER TENDON		$458.82	$458.82					
23406	INCISION OF SHOULDER MULTIPLE TENDONS THROUGH SAME INCISION		$593.91	$593.91					
23410	REPAIR OF ACUTE TORN SHOULDER ROTATOR CUFF		$685.14	$685.14					
23412	REPAIR OF CHRONIC TORN SHOULDER ROTATOR CUFF		$783.46	$783.46					
23415	RELEASE OF COLLAR BONE AND SHOULDER LIGAMENT		$438.16	$438.16					
23420	REPAIR OF COMPLETE TEAR OF SHOULDER ROTATOR CUFF WITH RELEASE OF PRESSURE ON COLLAR BONE		$820.33	$820.33					
23430	ANCHORING OF BICEPS TENDON		$506.31	$506.31					
23440	REMOVAL OR RELOCATION OF BICEPS TENDON		$516.53	$516.53					
23450	REATTACHMENT OF SHOULDER JOINT CAPSULE WITHOUT BONE TRANSFER		$768.61	$768.61					
23455	REATTACHMENT OF SHOULDER JOINT CAPSULE AND CARTILAGE WITHOUT BONE TRANSFER WITH REPAIR OF SHOULDER RIM		$883.62	$883.62					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23460	REPAIR OF SHOULDER JOINT CAPSULE AND SHOULDER BLADE WITH BONE BLOCK		$861.99	$861.99					
23462	REATTACHMENT OF SHOULDER JOINT CAPSULE WITH BONE TRANSFER (CORACOID BONE)		$895.08	$895.08					
23465	REPAIR OF SHOULDER JOINT CAPSULE IN THE BACK OF THE JOINT		$878.95	$878.95					
23466	REPAIR AND TIGHTENING OF SHOULDER JOINT CAPSULE		$908.78	$908.78					
23470	PARTIAL REPLACEMENT OF SHOULDER JOINT		$986.94	$986.94					
23472	PROSTHETIC REPAIR OF SHOULDER JOINT, TOTAL SHOULDER		$1,143.49	$1,143.49					
23473	REVISION OF TOTAL SHOULDER REPAIR		$1,303.07	$1,303.07					
23474	REVISION OF TOTAL SHOULDER REPAIR, TOTAL SHOULDER		$1,407.95	$1,407.95					
23480	INCISION OR PARTIAL REMOVAL OF COLLAR BONE		$511.41	$511.41					
23485	INCISION OR PARTIAL REMOVAL OF COLLAR BONE WITH BONE GRAFT		$721.94	$721.94					
23490	STABILIZATION OF COLLAR BONE WITH DEVICE		$619.00	$619.00					
23491	STABILIZATION OF TOP OF UPPER ARM BONE WITH DEVICE		$791.86	$791.86					
23500	CLOSED TREATMENT OF BROKEN COLLAR BONE		$106.58	$106.58					
23505	CLOSED TREATMENT OF BROKEN COLLAR BONE WITH MANIPULATION		$182.04	$182.04					
23515	TREATMENT OF BROKEN COLLAR BONE		$418.79	$418.79					
23520	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR AND CHEST BONE		$101.20	$101.20					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23525	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR AND CHEST BONE WITH MANIPULATION		$159.44	$159.44					
23530	TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR AND CHEST BONES		$404.59	$404.59					
23532	TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR AND CHEST BONES WITH TISSUE GRAFT		$445.56	$445.56					
23540	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR BONE AND SHOULDER		$107.81	$107.81					
23545	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR BONE AND SHOULDER WITH MANIPULATION		$150.24	$150.24					
23550	TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR BONE AND SHOULDER		$458.87	$458.87					
23552	TREATMENT OF DISLOCATED JOINT BETWEEN COLLAR BONE AND SHOULDER WITH TISSUE GRAFT		$453.72	$453.72					
23570	CLOSED TREATMENT OF BROKEN SHOULDER BLADE		$113.29	$113.29					
23575	CLOSED TREATMENT OF BROKEN SHOULDER BLADE WITH MANIPULATION		$198.06	$198.06					
23585	TREATMENT OF BROKEN SHOULDER BLADE		$484.65	$484.65					
23600	CLOSED TREATMENT OF BROKEN TOP OF UPPER ARM BONE		$168.93	$168.93					
23605	CLOSED TREATMENT OF BROKEN TOP OF UPPER ARM BONE WITH MANIPULATION		$279.95	$279.95					
23615	TREATMENT OF BROKEN TOP OF UPPER ARM BONE		$576.68	$576.68					
23616	TREATMENT OF BROKEN UPPER ARM BONE WITH REPLACEMENT		$1,268.03	$1,268.03					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23620	CLOSED TREATMENT OF UPPER ARM BONE BROKEN AT SHOULDER JOINT		$115.82	$154.45					
23625	CLOSED TREATMENT OF UPPER ARM BONE BROKEN AT SHOULDER JOINT WITH MANIPULATION		$223.85	$223.85					
23630	TREATMENT OF UPPER ARM BONE, BROKEN AT SHOULDER JOINT		$472.76	$472.76					
23650	CLOSED TREATMENT OF DISLOCATED SHOULDER WITH MANIPULATION		$157.23	$157.23					
23655	CLOSED TREATMENT OF DISLOCATED SHOULDER WITH MANIPULATION UNDER ANESTHESIA		$214.28	$214.28					
23660	TREATMENT OF DISLOCATED SHOULDER		$485.34	$485.34					
23665	CLOSED TREATMENT OF DISLOCATED SHOULDER AND BROKEN UPPER ARM BONE AT SHOULDER JOINT WITH MANIPULATION		$224.31	$224.31					
23670	TREATMENT OF DISLOCATED SHOULDER AND UPPER ARM BONE, BROKEN AT SHOULDER JOINT		$518.61	$518.61					
23675	CLOSED TREATMENT OF DISLOCATED SHOULDER AND BROKEN NECK OF UPPER ARM BONE WITH MANIPULATION		$284.56	$284.56					
23680	TREATMENT OF DISLOCATED SHOULDER AND BROKEN NECK OF UPPER ARM BONE		$653.04	$653.04					
23700	MANIPULATION OF SHOULDER JOINT UNDER ANESTHESIA		$136.80	$136.80					
23800	FUSION OF BONES OF SHOULDER JOINT		$893.30	$893.30					
23802	FUSION OF SHOULDER JOINT BONE WITH SELF BONE GRAFT		$862.28	$862.28					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
23900	AMPUTATION OF ENTIRE ARM WITH REMOVAL SHOULDER BLADE AND A PORTION OF COLLAR BONE		$935.39	$935.39					
23920	REMOVAL OF ARM AND SHOULDER BLADE AT SHOULDER JOINT		$832.27	$832.27					
23921	REVISION OF SCAR OR WOUND CLOSURE FOLLOWING REMOVAL OF ARM AND SHOULDER BLADE AT SHOULDER JOINT		$280.11	$280.11					
23929	OTHER PROCEDURE ON SHOULDER	Yes	$0.00	$0.00					
23930	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF UPPER ARM OR ELBOW		$130.59	$130.59					
23931	DRAINAGE OF FLUID FILLED SAC IN ELBOW JOINT		$60.56	$70.62					
23935	INCISION OF UPPER ARM OR ELBOW BONE		$307.90	$307.90					
24000	INCISION OF ELBOW JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$373.76	$373.76					
24006	INCISION OF ELBOW WITH RELEASE OF JOINT CAPSULE		$475.23	$475.23					
24065	BIOPSY OF SURFACE TISSUE OF UPPER ARM OR ELBOW		$72.59	$83.19					
24066	BIOPSY OF DEEP TISSUE OF UPPER ARM OR ELBOW		$227.90	$227.90					
24071	REMOVAL OF GROWTH UNDER SKIN OF UPPER ARM OR ELBOW, 3.0 CM OR MORE		$292.84	$292.84					
24073	REMOVAL OF GROWTH OF MUSCLE OF UPPER ARM OR ELBOW, 5.0 CM OR MORE		$503.58	$503.58					
24075	REMOVAL OF GROWTH UNDER SKIN OF UPPER ARM OR ELBOW, LESS THAN 3.0 CM		$172.82	$172.82					
24076	REMOVAL OF GROWTH OF MUSCLE OF UPPER ARM OR ELBOW, LESS THAN 5.0 CM		$291.34	$291.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24077	EXTENSIVE REMOVAL OF GROWTH OF UPPER ARM OR ELBOW, LESS THAN 5.0 CM		$636.09	$636.09					
24079	EXTENSIVE REMOVAL OF GROWTH OF UPPER ARM OR ELBOW, 5.0 CM OR MORE		$940.21	$940.21					
24100	INCISION OF ELBOW WITH BIOPSY OF JOINT LINING		$267.26	$267.26					
24101	INCISION AND EXPLORATION OF ELBOW JOINT		$405.99	$405.99					
24102	REMOVAL OF ELBOW JOINT LINING		$525.75	$525.75					
24105	REMOVAL OF FLUID-FILLED SAC OF ELBOW		$217.08	$217.08					
24110	REMOVAL OF CYST OR GROWTH OF UPPER ARM BONE		$443.66	$443.66					
24115	REMOVAL OF CYST OR GROWTH OF UPPER ARM BONE AND SELF BONE GRAFT		$498.88	$498.88					
24116	REMOVAL OF CYST OR GROWTH OF UPPER ARM BONE AND DONOR BONE GRAFT		$623.02	$623.02					
24120	REMOVAL OF CYST OR GROWTH OF ELBOW OR UPPER FOREARM BONE		$371.91	$371.91					
24125	REMOVAL OF CYST OR GROWTH OF ELBOW OR UPPER FOREARM BONE AND SELF BONE GRAFT		$387.26	$387.26					
24126	REMOVAL OF CYST OR GROWTH OF ELBOW OR UPPER FOREARM BONE WITH BONE GRAFT		$455.59	$455.59					
24130	REMOVAL OF FOREARM BONE AT ELBOW JOINT		$381.37	$381.37					
24134	REMOVAL OF DEAD UPPER ARM BONE FOR BONE INFECTION IN THE MAIN PORTION AND LOWER PORTION OR THE		$526.72	$526.72					
24136	REMOVAL OF DEAD FOREARM BONE AT ELBOW JOINT		$472.94	$472.94					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24138	REMOVAL OF DEAD ELBOW BONE		$413.12	$413.12					
24140	PARTIAL REMOVAL OF INFECTED UPPER ARM BONE		$521.64	$521.64					
24145	PARTIAL REMOVAL OF INFECTED FOREARM BONE AT ELBOW		$405.08	$405.08					
24147	PARTIAL REMOVAL OF INFECTED ELBOW BONE		$408.94	$408.94					
24149	EXTENSIVE REMOVAL OF BONY GROWTH AND TISSUE FROM ELBOW TO INCREASE ELBOW MOTION		$757.93	$757.93					
24150	EXTENSIVE REMOVAL OF GROWTH OF UPPER ARM BONE		$796.82	$796.82					
24152	EXTENSIVE REMOVAL OF GROWTH OF INNER FOREARM BONE		$489.63	$489.63					
24155	REMOVAL OF ELBOW JOINT BONES		$656.14	$656.14					
24160	REMOVAL OF ELBOW JOINT PROSTHESIS		$367.28	$367.28					
24164	REMOVAL OF FOREARM BONE PROSTHESIS AT ELBOW JOINT		$340.09	$340.09					
24200	REMOVAL OF FOREIGN BODY OF UPPER ARM OR ELBOW AREA, ACCESSED BENEATH THE SKIN		$59.15	$66.66					
24201	REMOVAL OF FOREIGN BODY, UPPER ARM OR ELBOW AREA		$220.16	$220.16					
24220	INJECTION OF CONTRAST FOR IMAGING OF ELBOW JOINT		$53.33	$53.33					
24300	MANIPULATION, ELBOW, UNDER ANESTHESIA		$261.85	$261.85					
24301	RELOCATION OF MUSCLE OR TENDON OF UPPER ARM OR ELBOW		$528.76	$528.76					
24305	LENGTHENING OF TENDON OF UPPER ARM OR ELBOW		$299.76	$299.76					
24310	INCISION OF TENDON LOCATED FROM ELBOW TO SHOULDER, OPEN PROCEDURE		$258.63	$258.63					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24320	RELOCATION OF TENDON FROM ELBOW TO SHOULDER WITH MUSCLE TRANSFER		$571.84	$571.84					
24330	RELOCATION OF FOREARM TENDONS		$538.54	$538.54					
24331	RELOCATION OF FOREARM TENDONS WITH ADVANCEMENT OF THE EXTENSOR TENDONS		$592.55	$592.55					
24332	RELEASE OF UPPER ARM TENDON		$368.65	$368.65					
24340	ANCHORING OF BICEPS TENDON AT ELBOW		$437.64	$437.64					
24341	REPAIR OF TENDON OR MUSCLE OF UPPER ARM OR ELBOW		$419.10	$419.10					
24342	REINSERTION OF TORN UPPER ARM TENDON		$618.43	$618.43					
24343	REPAIR OF LIGAMENT OF THUMB SIDE OF ELBOW		$483.35	$483.35					
24344	REPAIR OF LIGAMENT OF THUMB SIDE OF ELBOW WITH TENDON GRAFT		$732.22	$732.22					
24345	REPAIR OF LIGAMENT OF SMALL FINGER SIDE OF ELBOW		$483.35	$483.35					
24346	REPAIR OF LIGAMENT OF SMALL FINGER SIDE OF ELBOW WITH TENDON GRAFT		$732.22	$732.22					
24357	INCISION OF ELBOW TENDON		$323.70	$323.70					
24358	INCISION OF ELBOW TENDON WITH REMOVAL OF TISSUE		$382.45	$382.45					
24359	INCISION AND REPAIR OF ELBOW TENDON WITH REMOVAL OF TISSUE OR BONE		$488.66	$488.66					
24360	REPAIR OF ELBOW JOINT WITH TISSUE GRAFT		$808.77	$808.77					
24361	REPAIR OF ELBOW JOINT WITH REPLACEMENT OF LOWER PORTION OF UPPER ARM BONE		$796.91	$796.91					
24362	REPAIR OF ELBOW JOINT WITH IMPLANT WITH AND REPAIR OF LIGAMENT		$618.50	$794.72					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24363	OSTHETIC REPAIR OF ELBOW JOINT		$1,225.00	$1,225.00					
24365	JOINT REPAIR (ARTHROPLASTY) FOREARM BONE ON THE THUMB SIDE (RADIUS) AT THE ELBOW WITHOUT AN IMPLANT		$463.31	$463.31					
24366	JOINT REPAIR (ARTHROPLASTY) FOREARM BONE ON THE THUMB SIDE (RADIUS) AT THE ELBOW WITH AND IMPLANT		$594.53	$594.53					
24370	REVISION OF TOTAL ELBOW REPAIR (ARTHROPLASTY), UPPER ARM OR FOREARM COMPONENTS		$1,232.05	$1,232.05					
24371	REVISION OF TOTAL ELBOW REPAIR (ARTHROPLASTY), UPPER ARM AND FOREARM COMPONENTS		$1,420.54	$1,420.54					
24400	INCISION OR PARTIAL REMOVAL OF UPPER ARM BONE		$568.97	$568.97					
24410	INCISION OR PARTIAL REMOVAL OF UPPER ARM BONE WITH INSERTION OF ROD		$845.66	$845.66					
24420	RECONSTRUCTION OF UPPER ARM BONE		$757.28	$757.28					
24430	REPAIR OF NONHEALED BROKEN UPPER ARM BONE		$809.82	$809.82					
24435	REPAIR OF NONHEALED BROKEN UPPER ARM BONE WITH SELF BONE GRAFT		$845.40	$845.40					
24470	REPAIR OF GROWTH PLATE OF UPPER ARM BONE		$488.16	$488.16					
24495	INCISION OF TISSUE OF FOREARM MUSCLE WITH EXPLORATION OF ARTERY		$403.67	$403.67					
24498	STABILIZATION OF UPPER ARM BONE WITH DEVICE		$649.09	$649.09					
24500	CLOSED TREATMENT OF BROKEN MIDDLE PART OF UPPER ARM BONE		$165.20	$165.20					
24505	CLOSED TREATMENT OF BROKEN MIDDLE PART OF UPPER ARM BONE		$279.68	$279.68					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24515	TREATMENT OF BROKEN MIDDLE PART OF UPPER ARM BONE WITH PLACEMENT OF STABILIZING DEVICE (PLATE/SCREWS)		$616.68	$616.68					
24516	TREATMENT OF BROKEN MIDDLE PART OF UPPER ARM BONE WITH PLACEMENT OF STABILIZING DEVICE (IMPLANT)		$616.68	$616.68					
24530	CLOSED TREATMENT OF UPPER ARM BONE BROKEN AT ELBOW		$180.26	$180.26					
24535	CLOSED TREATMENT OF UPPER ARM BONE BROKEN AT ELBOW WITH MANIPULATION		$340.07	$340.07					
24538	PLACEMENT OF STABILIZING DEVICE TO UPPER ARM BROKEN AT ELBOW		$504.35	$504.35					
24545	TREATMENT OF UPPER ARM BONE BROKEN AT ELBOW		$589.21	$589.21					
24546	TREATMENT OF BROKEN UPPER ARM BONE AT ELBOW WITH EXTENSION		$736.23	$736.23					
24560	CLOSED TREATMENT OF BROKEN OUTER PART OF UPPER ARM BONE AT ELBOW		$142.11	$142.11					
24565	CLOSED TREATMENT OF BROKEN OUTER PART OF UPPER ARM BONE AT ELBOW WITH MANIPULATION		$258.83	$258.83					
24566	PLACEMENT OF STABILIZING DEVICE FOR BROKEN OUTER PART OF UPPER ARM AT ELBOW		$396.26	$396.26					
24575	TREATMENT OF BROKEN OUTER PART OF UPPER ARM BONE AT ELBOW		$529.87	$529.87					
24576	CLOSED TREATMENT OF BROKEN ELBOW		$144.01	$144.01					
24577	CLOSED TREATMENT OF BROKEN ELBOW WITH MANIPULATION		$282.03	$282.03					
24579	TREATMENT OF BROKEN ELBOW		$575.68	$575.68					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24582	PLACEMENT OF STABILIZING DEVICE FOR BROKEN ELBOW WITH MANIPULATION		$433.08	$433.08					
24586	TREATMENT OF BROKEN OR DISLOCATED UPPER OR FOREARM BONES AT ELBOW		$873.83	$873.83					
24587	TREATMENT OF BROKEN OR DISLOCATED UPPER OR FOREARM BONES AT ELBOW WITH IMPLANT		$839.16	$839.16					
24600	REPAIR OF DISLOCATED ELBOW		$178.34	$178.34					
24605	REPAIR OF DISLOCATED ELBOW UNDER ANESTHESIA		$219.48	$219.48					
24615	TREATMENT OF DISLOCATED ELBOW		$542.19	$542.19					
24620	CLOSED TREATMENT OF BROKEN AND DISLOCATED FOREARM BONES AT ELBOW WITH MANIPULATION		$309.49	$309.49					
24635	TREATMENT OF BROKEN AND DISLOCATED FOREARM BONES AT ELBOW		$704.35	$704.35					
24640	CLOSED TREATMENT OF DISLOCATED FOREARM BONE ON THUMB SIDE AT ELBOW WITH MANIPULATION, CHILD		$62.78	$62.78					
24650	CLOSED TREATMENT OF BROKEN FOREARM BONE ON THUMB SIDE AT ELBOW		$97.17	$127.35					
24655	CLOSED TREATMENT OF BROKEN FOREARM BONE ON THUMB SIDE AT ELBOW WITH MANIPULATION		$214.03	$214.03					
24665	TREATMENT OF BROKEN FOREARM BONE ON THUMB SIDE AT ELBOW		$444.59	$444.59					
24666	TREATMENT OF BROKEN FOREARM BONE ON THUMB SIDE AT ELBOW WITH PROSTHESIS		$574.62	$574.62					
24670	CLOSED TREATMENT OF BROKEN FOREARM BONE ON SMALL FINGER SIDE AT ELBOW		$128.99	$128.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
24675	CLOSED TREATMENT OF BROKEN FOREARM BONE ON SMALL FINGER SIDE AT ELBOW WITH MANIPULATION		$239.90	$239.90					
24685	TREATMENT OF BROKEN FOREARM BONE ON SMALL FINGER SIDE AT ELBOW		$502.59	$502.59					
24800	FUSION OF ELBOW JOINT WITHOUT BONE GRAFT FROM THE PATIENT		$637.15	$637.15					
24802	FUSION OF ELBOW JOINT WITH BONE GRAFT FROM THE PATIENT		$750.35	$750.35					
24900	AMPUTATION OF ARM THROUGH UPPER ARM BONE WITH CLOSURE		$496.82	$496.82					
24920	AMPUTATION OF ARM THROUGH UPPER ARM BONE LEAVING WOUND		$465.76	$465.76					
24925	SECONDARY CLOSURE OR REVISION OF SCAR OF PREVIOUS UPPER ARM BONE AMPUTATION		$380.36	$380.36					
24930	RE-AMPUTATION OF REMAINING ARM AT UPPER ARM BONE		$523.13	$523.13					
24931	AMPUTATION OF ARM THROUGH UPPER ARM BONE WITH IMPLANT		$687.92	$687.92					
24935	LENGTHENING OF REMAINING AMPUTATED ARM BONE		$843.56	$843.56					
24940	INSERTION OF LEVER INTO MUSCLE OF AMPUTATION STUMP OF ARM		$1,079.77	$1,079.77					
24999	OTHER PROCEDURE ON UPPER ARM OR ELBOW	Yes	$0.00	$0.00					
25000	INCISION OR THE TENDON COVERING ON THE TOP SIDE OF THE WRIST		$214.64	$214.64					
25001	INCISION OR THE TENDON COVERING ON THE PALM SIDE OF THE WRIST		$219.51	$219.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25020	INCISION OF TISSUE OF FOREARM AND/OR WRIST MUSCLE COMPARTMENT ON ONE SIDE OF THE FOREARM TO RELIEVE PRESSURE, WITHOUT REMOVAL OF TISSUE		$298.24	$298.24					
25023	INCISION TO RELIEVE PRESSURE IN TOP OR PALM SIDE OF WRIST COMPARTMENT WITH REMOVAL OF DAMAGED TISSUE		$515.01	$515.01					
25024	INCISION OF TISSUE OF FOREARM AND/OR WRIST MUSCLE COMPARTMENT ON BOTH SIDES OF THE FOREARM TO RELIEVE PRESSURE, WITHOUT REMOVAL OF TISSUE		$514.28	$514.28					
25025	INCISION TO RELIEVE PRESSURE IN TOP AND PALM SIDE OF WRIST COMPARTMENT WITH REMOVAL OF DAMAGED TISSUE		$834.78	$834.78					
25028	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF FOREARM OR WRIST		$207.20	$207.20					
25031	DRAINAGE OF FLUID FILLED SAC IN WRIST JOINT		$134.33	$134.33					
25035	INCISION OF FOREARM OR WRIST BONE		$393.94	$393.94					
25040	INCISION OF WRIST JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$368.45	$368.45					
25065	BIOPSY OF SURFACE TISSUE OF FOREARM OR WRIST		$82.38	$92.43					
25066	BIOPSY OF DEEP TISSUE OF FOREARM AND/OR WRIST		$160.21	$160.21					
25071	REMOVAL OF GROWTH UNDER SKIN OF FOREARM OR WRIST, 3.0 CM OR MORE		$306.72	$306.72					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25073	REMOVAL OF GROWTH OF MUSCLE OF FOREARM OR WRIST, 3.0 CM OR MORE		$381.76	$381.76					
25075	REMOVAL OF GROWTH UNDER SKIN OF FOREARM OR WRIST, LESS THAN 3.0 CM		$173.66	$173.66					
25076	REMOVAL OF GROWTH OF MUSCLE OF FOREARM OR WRIST, LESS THAN 3.0 CM		$257.37	$257.37					
25077	EXTENSIVE REMOVAL OF GROWTH OF FOREARM OR WRIST, LESS THAN 3.0 CM		$539.46	$539.46					
25078	EXTENSIVE REMOVAL OF GROWTH OF FOREARM OR WRIST, 3.0 CM OR MORE		$820.00	$820.00					
25085	INCISION TO REPAIR OR RELEASE CAPSULE OF WRIST JOINT		$291.70	$291.70					
25100	INCISION OF JOINT CAPSULE OF WRIST		$252.39	$252.39					
25101	INCISION AND EXPLORATION OF WRIST JOINT		$304.28	$304.28					
25105	INCISION INTO WRIST JOINT WITH REMOVAL OF JOINT LINING TISSUE		$382.77	$382.77					
25107	ION TO REPAIR WRIST JOINT WITH REPAIR OF CARTILAGE		$336.08	$336.08					
25109	REMOVAL OF TENDON OF FOREARM AND/OR WRIST		$355.42	$355.42					
25110	REMOVAL OF GROWTH OF TENDON COVERING OF FOREARM OR WRIST		$197.49	$197.49					
25111	REMOVAL OF FIRST CYST OF WRIST		$194.80	$194.80					
25112	REMOVAL OF RECURRENT CYST OF WRIST		$244.34	$244.34					
25115	EXTENSIVE REMOVAL OF GROWTH OF SOFT TISSUE STRUCTURES IN PALM SIDE OF WRIST		$405.09	$405.09					
25116	EXTENSIVE REMOVAL OF GROWTH OF SOFT TISSUE STRUCTURES IN TOP SIDE OF WRIST		$441.64	$441.64					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25118	REMOVAL OF LINING OF TENDON COVERING OF WRIST		$286.47	$286.47					
25119	REMOVAL OF TENDON LINING ON TOP SIDE OF WRIST AND END OF FOREARM BONE AT WRIST		$391.23	$391.23					
25120	REMOVAL OF CYST OR GROWTH OF LOWER FOREARM BONE		$370.11	$370.11					
25125	REMOVAL OF CYST OR GROWTH OF LOWER FOREARM BONE WITH SELF BONE GRAFT		$415.90	$415.90					
25126	REMOVAL OF CYST OR GROWTH OF LOWER FOREARM BONE WITH BONE GRAFT		$418.82	$418.82					
25130	REMOVAL OF CYST OR GROWTH OF WRIST BONE		$278.27	$278.27					
25135	REMOVAL OF CYST OR GROWTH OF WRIST BONE WITH SELF BONE GRAFT		$363.10	$363.10					
25136	REMOVAL OF CYST OR GROWTH OF WRIST BONE WITH BONE GRAFT		$314.46	$314.46					
25145	REMOVAL OF FRAGMENT OF DEAD FOREARM OR WRIST BONE ON SMALL FINGER SIDE		$353.00	$353.00					
25150	REMOVAL OF DISEASED PART OF FOREARM BONE ON SMALL FINGER SIDE		$398.61	$398.61					
25151	REMOVAL OF DISEASED PART OF FOREARM BONE ON THUMB SIDE		$380.31	$380.31					
25170	EXTENSIVE REMOVAL OF GROWTH OF FOREARM BONE (RADIUS OR ULNA		$605.92	$605.92					
25210	REMOVAL OF WRIST BONE		$313.19	$313.19					
25215	REMOVAL OF MULTIPLE WRIST BONES		$484.46	$484.46					
25230	PARTIAL REMOVAL OF WRIST BONE NEAR THUMB		$312.66	$312.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25240	REMOVAL OR PARTIAL REMOVAL OF LOWER END OF FOREARM BONE ON SMALL FINGER SIDE AT WRIST		$307.13	$307.13					
25246	REMOVAL OR PARTIAL REMOVAL OF LOWER END OF FOREARM BONE ON SMALL FINGER SIDE AT WRIST		$57.17	$57.17					
25248	REMOVAL OF DEEP FOREIGN BODY IN FOREARM OR WRIST		$213.01	$213.01					
25250	REMOVAL OF WRIST PROSTHESIS		$358.28	$358.28					
25251	REMOVAL OF WRIST PROSTHESIS, COMPLICATED		$521.50	$521.50					
25259	MANIPULATION OF WRIST UNDER ANESTHESIA		$259.01	$259.01					
25260	PRIMARY REPAIR OF TENDON OR MUSCLE OF PALM SIDE OF FOREARM OR WRIST		$357.69	$357.69					
25263	SECONDARY REPAIR OF TENDON OR MUSCLE OF PALM SIDE OF FOREARM OR WRIST		$396.05	$396.05					
25265	REPAIR OF FOREARM AND/OR WRIST TENDON OR MUSCLE ON THE UNDERSIDE OF THE WRIST (FLEXOR) WITH GRAFT		$526.90	$526.90					
25270	PRIMARY REPAIR OF TENDON OR MUSCLE OF TOP SIDE OF FOREARM OR WRIST		$271.04	$271.04					
25272	REPAIR OF FOREARM AND/OR WRIST TENDON OR MUSCLE ON THE TOP OF THE WRIST (EXTENSOR), SECONDARY		$303.46	$303.46					
25274	REPAIR OF TENDON OR MUSCLE ON TOP SIDE OF FOREARM OR WRIST WITH GRAFT		$452.68	$452.68					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25275	REPAIR OF FOREARM AND/OR WRIST TENDON COVERING WITH GRAFT		$466.73	$466.73					
25280	LENGTHENING OR SHORTENING OF TENDON OF FOREARM AND/OR WRIST		$330.08	$330.08					
25290	INCISION OF TENDON OF FOREARM AND/OR WRIST, OPEN PROCEDURE		$223.81	$223.81					
25295	REMOVAL OF SCAR TISSUE TO RELEASE TENDON OF FOREARM OR WRIST		$278.13	$278.13					
25300	ANCHORING OF FLEXING TENDON OF FINGERS TO WRIST BONE		$474.57	$474.57					
25301	ANCHORING OF EXTENDING TENDON OF FINGERS TO WRIST BONE		$447.65	$447.65					
25310	RELOCATION OF TENDON OF FOREARM AND/OR WRIST		$445.30	$445.30					
25312	RELOCATION OF TENDON OF FOREARM AND/OR WRIST WITH GRAFTS		$502.92	$502.92					
25315	REPAIR OF TENDON OF FOREARM AND/OR WRIST		$526.04	$526.04					
25316	RELEASE AND RELOCATION OF TENDONS OF FOREARM OR WRIST		$664.19	$664.19					
25320	RECONSTRUCTION OF WRIST JOINT		$556.11	$556.11					
25332	REPAIR OF WRIST JOINT		$624.59	$624.59					
25335	ADVANCEMENT OF TENDONS OF OUTER FOREARM AT WRIST JOINT		$699.29	$699.29					
25337	REPAIR OF TENDONS OF OUTER FOREARM AT WRIST JOINT		$544.67	$544.67					
25350	INCISION OR PARTIAL REMOVAL OF FOREARM BONE ON THUMB SIDE NEAR HAND		$476.23	$476.23					
25355	INCISION OR PARTIAL REMOVAL OF FOREARM BONE ON THUMB SIDE NEAR ELBOW OR IN MIDDLE		$561.05	$561.05					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25360	INCISION OR PARTIAL REMOVAL OF FOREARM BONE ON SMALL FINGER SIDE		$427.21	$427.21					
25365	INCISION OR PARTIAL REMOVAL OF BOTH FOREARM BONES		$655.95	$655.95					
25370	MULTIPLE INCISIONS OR REMOVAL OF PARTS OF FOREARM BONE		$724.18	$724.18					
25375	MULTIPLE INCISIONS OR REMOVAL OF PARTS OF BOTH FOREARM BONES WITH INSERTION OF ROD IN BONE		$740.06	$740.06					
25390	SHORTENING OF ONE OF THE FOREARM BONES		$562.05	$562.05					
25391	LENGTHENING OF ONE OF THE FOREARM BONES WITH PATIENT-DERIVED BONE GRAFT		$722.77	$722.77					
25392	SHORTENING OF BOTH BONES OF FOREARM		$766.17	$766.17					
25393	LENGTHENING OF BOTH BONES OF FOREARM WITH PATIENT-DERIVED BONE GRAFT		$874.73	$874.73					
25394	SHORTENING OF WRIST BONE		$545.64	$545.64					
25400	REPAIR NON-HEALED FRACTURE OF FOREARM BONE		$633.90	$633.90					
25405	REPAIR NON-HEALED FRACTURE OF FOREARM BONE WITH PATIENT-DERIVED BONE GRAFT		$777.76	$777.76					
25415	TREATMENT OF BOTH NONHEALED BROKEN FOREARM BONES		$723.86	$723.86					
25420	TREATMENT OF BOTH NONHEALED BROKEN FOREARM BONES WITH SELF BONE GRAFT		$899.81	$899.81					
25425	REPAIR OF FOREARM BONE		$732.87	$732.87					
25426	REPAIR OF DEFECT OF BOTH FOREARM BONES WITH SELF BONES GRAFT		$803.92	$803.92					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25430	INSERTION OF VASCULAR BONE GRAFT INTO WRIST BONE		$482.06	$482.06					
25431	REPAIR OF NON-HEALED WRIST BONE OTHER THAN (SCAPHOID OR NAVICULAR)		$480.17	$480.17					
25440	REPAIR OF NON-HEALED WRIST BONE, SCAPHOID OR NAVICULAR AT THE BASE OF THE THUMB		$571.15	$571.15					
25441	ARTHROPLASTY OR REPLACEMENT OF THE END OF THE FOREARM BONE ON THE THUMB SIDE AT THE WRIST LEVEL		$710.37	$710.37					
25442	ARTHROPLASTY OR REPLACEMENT OF THE END OF THE FOREARM BONE ON THE SMALL FINGER SIDE AT THE WRIST LEVEL		$522.42	$522.42					
25443	ARTHROPLASTY OR REPLACEMENT OF THE END OF THE FOREARM BONE ON THE SMALL FINGER SIDE AT THE WRIST LEVEL		$578.44	$578.44					
25444	ARTHROPLASTY OR REPLACEMENT OF WRIST BONE, ONE WRIST BONE (LUNATE BONE)		$624.53	$624.53					
25445	ARTHROPLASTY OR REPLACEMENT OF WRIST BONE, ONE WRIST BONE (TRAPEZIUM BONE)		$591.68	$591.68					
25446	ARTHROPLASTY OR REPLACEMENT OF THE ENTIRE WRIST JOINT		$1,072.90	$1,072.90					
25447	REPLACEMENT OF JOINT BETWEEN WRIST AND FINGERS USING TISSUE		$586.06	$586.06					
25448	REPLACEMENT OF JOINT BETWEEN WRIST AND FINGERS USING TENDON OR STITCHES		$738.11	$738.11					
25449	REVISION OF WRIST JOINT REPLACEMENT WITH REMOVAL OF EXISTING PROSTHESIS		$642.82	$642.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25450	STAPLING OR REMOVAL OF GROWTH PLATE OF FOREARM BONE		$450.05	$450.05					
25455	STAPLING OR REMOVAL OF GROWTH PLATE OF BOTH FOREARM BONES		$536.62	$536.62					
25490	STABILIZATION OF FOREARM BONE ON THUMB SIDE WITH DEVICE		$535.20	$535.20					
25491	STABILIZATION OF FOREARM BONE ON SMALL FINGER SIDE WITH DEVICE		$560.22	$560.22					
25492	STABILIZATION OF BOTH FOREARM BONES WITH DEVICE		$689.90	$689.90					
25500	CLOSED TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE		$105.78	$137.03					
25505	CLOSED TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE WITH MANIPULATION		$253.69	$253.69					
25515	TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE		$487.53	$487.53					
25520	CLOSED TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE AND DISLOCATED WRIST JOINT		$353.15	$353.15					
25525	TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE AND CLOSED TREATMENT OF DISLOCATED WRIST JOINT		$686.56	$686.56					
25526	TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON THUMB SIDE AND DISLOCATED WRIST JOINT WITH REPAIR OF CARTILAGE		$729.72	$729.72					
25530	ARM BONE ON SMALL FINGER SIDE		$98.15	$130.88					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25535	CLOSED TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON SMALL FINGER SIDE WITH MANIPULATION		$252.95	$252.95					
25545	TREATMENT OF BROKEN MIDPART OF FOREARM BONE ON SMALL FINGER SIDE		$477.49	$477.49					
25560	CLOSED TREATMENT OF BROKEN MIDPART OF BOTH FOREARM BONES		$134.64	$134.64					
25565	CLOSED TREATMENT OF BROKEN MIDPART OF BOTH FOREARM BONES WITH MANIPULATION		$297.23	$297.23					
25574	TREATMENT OF BROKEN MIDPART OF BOTH FOREARM BONES WITH PLACEMENT OF STABILIZING DEVICE TO BONE		$426.04	$426.04					
25575	TREATMENT OF BROKEN MIDPART OF BOTH FOREARM BONES WITH PLACEMENT OF STABILIZING DEVICE ON BOTH BONES		$606.91	$606.91					
25600	CLOSED TREATMENT OF BROKEN FOREARM (RADIUS) BONE AT THE WRIST AREA ON THE THUMB SIDE OF THE WRIST WITHOUT MANIPULATION		$194.55	$194.55					
25605	CLOSED TREATMENT OF BROKEN OR GROWTH PLATE SEPARATE OF FOREARM BONE AT WRIST WITH MANIPULATION		$385.15	$385.15					
25606	PLACEMENT OF STABILIZING DEVICE FOR BROKEN FOREARM BONE ON THUMB SIDE AT WRIST		$478.57	$478.57					
25607	TREATMENT OF BROKEN FOREARM BONE ON THUMB SIDE OF WRIST, ABOVE WRIST, WITH PLACEMENT OF STABILIZING DEVICE		$487.92	$487.92					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25608	TREATMENT OF 2 BROKEN LOWER FOREARM BONE PIECES ON THUMB SIDE INSIDE WRIST JOINT WITH PLACEMENT OF STABILIZING DEVICE		$559.34	$559.34					
25609	TREATMENT OF 3 OR MORE BROKEN LOWER FOREARM BONE PIECES ON THUMB SIDE INSIDE WRIST JOINT WITH PLACEMENT OF STABILIZING DEVICE		$714.87	$714.87					
25622	CLOSED TREATMENT OF BROKEN WRIST BONE NEAR BASE OF THUMB		$109.90	$140.48					
25624	CLOSED TREATMENT OF BROKEN WRIST BONE NEAR BASE OF THUMB WITH MANIPULATION		$188.66	$237.88					
25628	TREATMENT OF BROKEN WRIST BONE LOCATED NEAR BASE OF THUMB		$448.60	$448.60					
25630	CLOSED TREATMENT OF OTHER BROKEN WRIST BONE		$116.77	$146.14					
25635	CLOSED TREATMENT OF OTHER BROKEN WRIST BONE WITH MANIPULATION		$179.28	$224.34					
25645	TREATMENT OF OTHER BROKEN WRIST BONES		$403.26	$403.26					
25650	CLOSED TREATMENT OF BROKEN BASE OF FOREARM BONE ON SMALL FINGER SIDE AT WRIST		$128.64	$164.31					
25651	PLACEMENT OF STABILIZING DEVICE FOR BROKEN BASE OF FOREARM BONE ON SMALL FINGER SIDE AT WRIST		$285.82	$285.82					
25652	TREATMENT OF BROKEN BASE OF FOREARM BONE ON SMALL FINGER SIDE AT WRIST		$421.07	$421.07					
25660	CLOSED TREATMENT OF DISLOCATED WRIST BONES WITH MANIPULATION		$188.06	$188.06					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25670	TREATMENT OF DISLOCATED WRIST BONES		$437.78	$437.78					
25671	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED FOREARM BONES AT WRIST		$346.81	$346.81					
25675	CLOSED TREATMENT OF DISLOCATED FOREARM BONE AT WRIST WITH MANIPULATION		$199.70	$199.70					
25676	TREATMENT OF DISLOCATED FOREARM BONES AT WRIST		$444.85	$444.85					
25680	CLOSED TREATMENT OF BROKEN AND DISLOCATED WRIST BONES WITH MANIPULATION		$239.40	$239.40					
25685	TREATMENT OF BROKEN AND DISLOCATED WRIST BONES		$541.60	$541.60					
25690	CLOSED TREATMENT OF DISLOCATED WRIST (LUNATE) BONE WITH MANIPULATION		$300.31	$300.31					
25695	TREATMENT OF BROKEN WRIST (LUNATE) BONE		$450.24	$450.24					
25800	COMPLETE FUSION OF WRIST JOINT		$607.42	$607.42					
25805	FUSION OF WRIST JOINT WITH BONE GRAFT		$705.61	$705.61					
25810	FUSION OF WRIST JOINT WITH GRAFT FROM HIP OR OTHER BONE		$673.41	$673.41					
25820	FUSION OF PART OF WRIST JOINT		$484.46	$484.46					
25825	FUSION OF PART OF WRIST JOINT WITH PATIENT-DERIVED BONE GRAFT		$596.29	$596.29					
25830	FUSION OF BOTH FOREARM BONES AT WRIST		$544.67	$544.67					
25900	AMPUTATION OF ARM THROUGH FOREARM BONES		$460.88	$460.88					
25905	AMPUTATION OF ARM THROUGH FOREARM BONES LEAVING WOUND		$465.13	$465.13					
25907	AMPUTATION OF ARM THROUGH FOREARM BONES LEAVING WOUND		$391.58	$391.58					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
25909	RE-AMPUTATION OF REMAINING ARM AT FOREARM BONE		$420.22	$420.22					
25915	CONVERSION OF WRIST AMPUTATION STUMP TO GRASPING FUNCTION		$974.92	$974.92					
25920	REMOVAL OF TENDONS, LIGAMENTS, AND MUSCLES OF WRIST		$454.30	$454.30					
25922	REVISION OF SCAR OR WOUND CLOSURE FOLLOWING REMOVAL OF HAND AT WRIST JOINT		$377.88	$377.88					
25924	RE-AMPUTATION FOLLOWING REMOVAL OF HAND AT WRIST JOINT		$461.74	$461.74					
25927	AMPUTATION OF FINGERS AND PART OF HAND AT MIDHAND BONES		$441.03	$441.03					
25929	REVISION OF SCAR OR WOUND CLOSURE OF PREVIOUS AMPUTATION AT MIDHAND BONES		$359.68	$359.68					
25931	RE-AMPUTATION OF REMAINING HAND AT MIDHAND BONES		$359.32	$359.32					
25999	OTHER PROCEDURE ON FOREARM OR WRIST	Yes	$0.00	$0.00					
26010	SIMPLE DRAINAGE OF ABSCESS OF FINGER		$51.37	$57.81					
26011	COMPLICATED DRAINAGE OF ABSCESS IN FINGER		$109.93	$109.93					
26020	DRAINAGE OF TENDON OF FINGER AND/OR PALM		$232.75	$232.75					
26025	DRAINAGE OF FLUID FILLED SAC IN PALM		$266.20	$266.20					
26030	DRAINAGE OF MULTIPLE FLUID FILLED SACS IN PALM		$334.78	$334.78					
26034	INCISION OF HAND OR FINGER BONE		$294.74	$294.74					
26035	RELEASE OF PRESSURE ON TISSUES OF FINGERS AND/OR HAND		$405.47	$405.47					
26037	INCISION OF TISSUE OF HAND TO RELEASE PRESSURE		$392.38	$392.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26040	RELEASE OF TISSUE OF PALM		$179.29	$179.29					
26045	PARTIAL RELEASE OF CONNECTIVE TISSUE OF PALM		$303.87	$303.87					
26055	INCISION OF TENDON COVERING OF FINGER		$176.70	$176.70					
26060	INCISION OF FINGER TENDON		$113.96	$113.96					
26070	INCISION OF WRIST JOINT AT FINGER FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$145.23	$182.24					
26075	INCISION OF LOWER FINGER JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$217.39	$217.39					
26080	INCISION OF FINGER JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$207.53	$207.53					
26100	INCISION OF WRIST JOINT AT FINGER WITH BIOPSY		$195.01	$195.01					
26105	INCISION OF JOINT AT BASE OF FINGER WITH BIOPSY		$233.18	$233.18					
26110	INCISION OF FINGER JOINT WITH BIOPSY		$190.51	$190.51					
26111	REMOVAL (1.5 CENTIMETERS OR GREATER) TISSUE BENEATH THE SKIN GROWTH OF HAND OR FINGER		$297.01	$297.01					
26113	REMOVAL OF GROWTH OF MUSCLE OF HAND OR FINGER, 1.5 CM OR MORE		$390.87	$390.87					
26115	REMOVAL (LESS THAN 1.5 CENTIMETERS) TISSUE BENEATH THE SKIN GROWTH OF HAND OR FINGER		$170.16	$170.16					
26116	REMOVAL OF GROWTH OF MUSCLE OF HAND OR FINGER, LESS THAN 1.5 CM		$266.87	$266.87					
26117	EXTENSIVE REMOVAL OF GROWTH OF HAND OR FINGER, LESS THAN 3.0 CM		$399.89	$399.89					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26118	EXTENSIVE REMOVAL OF GROWTH OF HAND OR FINGER, 3.0 CM OR MORE		$767.50	$767.50					
26121	REMOVAL OF CONNECTIVE TISSUE OF PALM		$506.63	$506.63					
26123	REMOVAL OF CONNECTIVE TISSUE OF PALM AND RELEASE OF FINGER, FIRST DIGIT		$534.78	$534.78					
26125	REMOVAL OF CONNECTIVE TISSUE OF PALM AND RELEASE OF FINGER, EACH ADDITIONAL DIGIT		$216.48	$216.48					
26130	REMOVAL OF WRIST JOINT LINING		$305.81	$305.81					
26135	REPAIR OF HAND JOINT		$346.00	$346.00					
26140	REMOVAL OF JOINT LINING AND REPAIR OF TENDON ON THE TOPSIDE OF FINGER		$308.78	$308.78					
26145	REPAIR OF TENDON, FINGER, AND/OR PALM OF HAND		$322.71	$322.71					
26160	REMOVAL OF GROWTH OF TENDON FINGER OR HAND		$159.98	$159.98					
26170	REMOVAL OF TENDON OF PALM		$222.41	$222.41					
26180	REMOVAL OF TENDON OF FINGER		$271.53	$271.53					
26185	REMOVAL OF BONE AT BASE OF THUMB OR FINGER		$263.33	$263.33					
26200	REMOVAL OF CYST OR GROWTH FROM HAND BONE		$291.71	$291.71					
26205	REMOVAL OF CYST OR GROWTH FROM HAND BONE WITH SELF BONE GRAFT		$409.14	$409.14					
26210	REMOVAL OF CYST OR GROWTH OF FINGER BONE		$265.99	$265.99					
26215	REMOVAL OF CYST OR GROWTH OF FINGER BONE WITH SELF BONE GRAFT		$371.53	$371.53					
26230	PARTIAL REMOVAL OF HAND BONE		$305.92	$305.92					
26235	PARTIAL REMOVAL OF FINGER BONE NEAREST HAND OR MIDDLE OF FINGER		$299.88	$299.88					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26236	PARTIAL REMOVAL OF FINGER BONE AT END OF FINGER		$264.82	$264.82					
26250	EXTENSIVE REMOVAL OF GROWTH OF HAND BONE		$399.97	$399.97					
26260	EXTENSIVE REMOVAL OF GROWTH OF FINGER		$375.04	$375.04					
26262	EXTENSIVE REMOVAL OF GROWTH AT END OF FINGER BONE		$304.62	$304.62					
26320	REMOVAL OF IMPLANT FROM FINGER OR HAND		$218.54	$218.54					
26340	MANIPULATION OF FINGER JOINT UNDER ANESTHESIA		$196.88	$196.88					
26341	MANIPULATION OF FINGER FOR CONNECTIVE TISSUE RELEASE FOLLOWING ENZYME INJECTION		$58.80	$77.15					
26350	REPAIR OF FINGER TENDON OF UNDER SIDE OF HAND OTHER THAN UPPER MOST PART OF PALM AND FINGERS		$347.03	$347.03					
26352	REPAIR OF FINGER TENDON ON UNDER SIDE OF HAND WITH A GRAFT NOT IN ZONE 2		$416.79	$416.79					
26356	PRIMARY REPAIR OF FINGER TENDON ON UNDERSIDE OF THE HAND WITHOUT A GRAFT IN ZONE 2		$430.39	$430.39					
26357	SECONDARY REPAIR OF FINGER TENDON ON UNDERSIDE OF HAND WITHOUT A GRAFT IN ZONE 2		$444.85	$444.85					
26358	SECONDARY REPAIR OF FINGER TENDON ON UNDERSIDE OF HAND WITH A GRAFT IN ZONE 2		$484.34	$484.34					
26370	REPAIR OF TENDON DEEP IN UNDERSIDE OF FINGER		$404.33	$404.33					
26372	SECONDARY REPAIR OF TENDON DEEP IN UNDERSIDE OF FINGER WITH A GRAFT		$442.01	$442.01					
26373	SECONDARY REPAIR OF TENDON DEEP IN UNDERSIDE OF FINGER		$435.77	$435.77					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26390	REPAIR OF TENDON ON UNDERSIDE OF FINGER OR HAND WITH IMPLANTED ROD		$499.29	$499.29					
26392	REMOVAL OF SYNTHETIC ROD AND INSERTION OF TENDON GRAFT IN HAND OR FINGER		$548.24	$548.24					
26410	REPAIR OF TENDON ON TOP OF HAND		$228.87	$228.87					
26412	REPAIR OF TENDON ON TOP OF HAND WITH GRAFT		$358.19	$358.19					
26415	REMOVAL OF TENDON FROM TOP OF HAND OR FINGER WITH ROD INSERTION		$439.13	$439.13					
26416	REMOVAL OF ROD WITH TENDON GRAFT AT TOP OF HAND OR FINGER		$531.86	$531.86					
26418	REPAIR OF TENDON ON TOP SIDE OF FINGER		$228.32	$228.32					
26420	REPAIR OF TENDON OF TOP SIDE OF FINGER WITH GRAFT		$362.59	$362.59					
26426	SECONDARY REPAIR OF TENDON OF TOP OF FINGER USING TISSUE		$367.20	$367.20					
26428	SECONDARY REPAIR OF TENDON OF UPPER SIDE OF FINGER WITH GRAFT		$374.29	$374.29					
26432	CLOSED TREATMENT OF TENDON OF UPPER SIDE OF FINGER		$168.20	$210.44					
26433	REPAIR OF TENDON ON UPPER SIDE OF END OF FINGER		$251.12	$251.12					
26434	REPAIR OF TENDON ON UPPER SIDE OF END OF FINGER WITH GRAFT		$323.37	$323.37					
26437	REPAIR OF TENDON ON UPPER SIDE OF HAND		$287.42	$287.42					
26440	RELEASE OF TENDON OF PALM OR FINGER		$249.77	$249.77					
26442	RELEASE OF TENDON OF PALM AND FINGER		$283.72	$283.72					
26445	RELEASE OF TENDON OF TOP OF HAND OR FINGER		$222.36	$222.36					
26449	RELEASE OF TENDON EXTENDING FROM FINGER TO FOREARM		$360.23	$360.23					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26450	INCISION OF TENDON OF PALM		$173.78	$173.78					
26455	INCISION OF TENDON OF FINGER		$161.71	$161.71					
26460	INCISION OF TENDON AT TOP OF HAND OR FINGER		$151.14	$151.14					
26471	SUTURE OF TENDON TO FIRST JOINT OF FINGER		$290.45	$290.45					
26474	SUTURE OF TENDON TO JOINT OF FINGER NEAR TOP OF FINGER		$292.70	$292.70					
26476	LENGTHENING OF TENDON ON UPPER SIDE OF HAND OR FINGER		$230.79	$230.79					
26477	SHORTENING OF TENDON OF UPPER SIDE OF HAND OR FINGER		$270.60	$270.60					
26478	LENGTHENING OF TENDON OF PALM SIDE OF FINGER OR HAND		$297.74	$297.74					
26479	SHORTENING OF TENDON OF PALM SIDE OF HAND OR FINGER		$325.94	$325.94					
26480	TRANSFER OF TENDON TO BACK OF HAND		$392.56	$392.56					
26483	TRANSFER OF TENDON TO BACK OF HAND WITH GRAFT		$492.94	$492.94					
26485	TRANSFER OF TENDON TO PALM		$414.21	$414.21					
26489	TRANSFER OF TENDON TO PALM WITH GRAFT		$367.68	$367.68					
26490	TRANSFER OF TENDON FROM RING FINGER TO THUMB		$474.77	$474.77					
26492	TRANSFER OF TENDON TO THUMB WITH GRAFT		$533.17	$533.17					
26494	TRANSFER OF TENDON IN PALM TO THUMB		$461.37	$461.37					
26496	TRANSFER OF TENDON TO THUMB, PALM, OR WRIST		$540.41	$540.41					
26497	TRANSFER OF TENDON TO RING AND SMALL FINGERS		$517.14	$517.14					
26498	TRANSFER OF TENDONS OF HAND, ALL 4 FINGERS		$763.14	$763.14					
26499	CORRECTION OF CLAW FINGER		$489.42	$489.42					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26500	REPAIR OF LIGAMENT SURROUNDING FINGER TENDON		$274.57	$274.57					
26502	REPAIR OF LIGAMENT SURROUNDING FINGER TENDON WITH GRAFT		$362.21	$362.21					
26508	RELEASE OF MUSCLES OF PALM NEAR THUMB		$293.42	$293.42					
26510	TRANSFER OF FINGER TENDON		$275.43	$275.43					
26516	REPAIR OF JOINT CAPSULE OF HAND AND PALM, 1 FINGER		$325.93	$325.93					
26517	REPAIR OF JOINT CAPSULE OF HAND AND PALM, 2 FINGERS		$464.24	$464.24					
26518	REPAIR OF JOINT CAPSULE OF HAND AND PALM, 3-4 FINGERS		$454.56	$454.56					
26520	INCISION OR REMOVAL OF JOINT CAPSULE BETWEEN HAND AND FINGER		$284.43	$284.43					
26525	REPAIR OF JOINT CAPSULE OF FINGER		$260.59	$260.59					
26530	REPAIR OF JOINT CONNECTING HAND AND FINGER BONES WITH IMPLANT		$346.27	$346.27					
26531	REPAIR OF JOINT BETWEEN HAND AND FINGER BONES WITH PROSTHESIS		$427.47	$427.47					
26535	REPLACEMENT OF FINGER JOINT		$289.16	$289.16					
26536	REPLACEMENT OF FINGER JOINT WITH PROSTHESIS		$400.12	$400.12					
26540	REPAIR OF LIGAMENT OF FINGER OR HAND AND FINGER JOINT		$382.25	$382.25					
26541	REPAIR OF LIGAMENT OF FINGER OR HAND TO FINGER JOINT WITH GRAFT		$516.12	$516.12					
26542	REPAIR OF LIGAMENT OF HAND TO FINGER JOINT WITH LOCAL TISSUE		$362.86	$362.86					
26545	REPAIR OF LIGAMENT OF FINGER JOINT WITH GRAFT		$354.93	$354.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26546	REPAIR OF NONHEALED HAND OR FINGER BONE		$486.30	$486.30					
26548	REPAIR OF JOINT BETWEEN FINGER AND PALM		$402.90	$402.90					
26550	SURGICAL CREATION OF THUMB		$1,219.54	$1,219.54					
26551	TRANSFER OF GREAT TOE TO HAND		$2,534.05	$2,534.05					
26553	TRANSFER OF TOE TO HAND		$2,516.42	$2,516.42					
26554	TRANSFER OF 2 TOES TO HAND		$3,002.47	$3,002.47					
26555	TRANSFER OF FINGER		$948.75	$948.75					
26556	TRANSFER OF TOE AND JOINT TO FINGER		$2,559.25	$2,559.25					
26560	REPAIR OF WEBBED FINGER WITH SKIN FLAPS		$294.23	$294.23					
26561	REPAIR OF WEBBED FINGER WITH SKIN FLAPS AND GRAFTS		$584.46	$584.46					
26562	COMPLEX REPAIR OF EACH WEBBED FINGER		$585.00	$585.00					
26565	INCISION OR REMOVAL OF HAND BONE		$366.02	$366.02					
26567	PARTIAL REMOVAL OF FINGER BONE		$322.69	$322.69					
26568	LENGTHENING OF HAND OR FINGER BONE		$506.52	$506.52					
26580	REPAIR OF DEFORMED HAND		$1,039.76	$1,039.76					
26587	REMOVAL OF EXTRA FINGER		$425.75	$425.75					
26590	REPAIR OF ENLARGED FINGER		$1,023.89	$1,023.89					
26591	REPAIR OF HAND MUSCLE		$156.00	$156.00					
26593	RELEASE OF HAND MUSCLE		$271.01	$271.01					
26596	REMOVAL OF CONSTRICTING RING OF SKIN OF FINGER		$507.34	$507.34					
26600	CLOSED TREATMENT OF BROKEN HAND BONE		$79.11	$99.76					
26605	CLOSED TREATMENT OF BROKEN HAND BONE WITH MANIPULATION		$117.81	$148.52					
26607	CLOSED TREATMENT OF BROKEN HAND BONE WITH MANIPULATION AND PLACEMENT OF EXTERNAL STABILIZING DEVICE		$259.31	$259.31					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26608	TREATMENT OF BROKEN FINGER BONE WITH STABILIZING DEVICE ACCESSED THROUGH SKIN		$259.31	$259.31					
26615	TREATMENT OF BROKEN MIDHAND BONE		$302.06	$302.06					
26641	CLOSED TREATMENT OF DISLOCATED THUMB AT WRIST WITH MANIPULATION		$142.92	$142.92					
26645	CLOSED TREATMENT OF BROKEN THUMB AT WRIST WITH MANIPULATION		$191.15	$191.15					
26650	PLACEMENT OF STABILIZING DEVICE FOR BROKEN THUMB AT WRIST WITH MANIPULATION		$284.20	$284.20					
26665	TREATMENT OF BROKEN THUMB AT WRIST		$407.39	$407.39					
26670	CLOSED TREATMENT OF DISLOCATED HAND BONE AT WRIST JOINT WITH MANIPULATION		$132.06	$132.06					
26675	CLOSED TREATMENT OF DISLOCATED HAND BONE AT WRIST JOINT WITH MANIPULATION UNDER ANESTHESIA		$261.27	$261.27					
26676	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED HAND BONE AT WRIST JOINT WITH MANIPULATION		$301.86	$301.86					
26685	TREATMENT OF BROKEN HAND BONE AT WRIST		$368.51	$368.51					
26686	COMPLICATED TREATMENT OF DISLOCATED MIDHAND BONE AT WRIST		$414.01	$414.01					
26700	CLOSED TREATMENT OF DISLOCATED HAND JOINT AT BASE OF FINGER WITH MANIPULATION		$129.91	$129.91					
26705	CLOSED TREATMENT OF DISLOCATED HAND JOINT AT BASE OF FINGER WITH MANIPULATION UNDER ANESTHESIA		$171.38	$171.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26706	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED HAND JOINT AT BASE OF FINGER WITH MANIPULATION		$288.12	$288.12					
26715	TREATMENT OF DISLOCATED HAND JOINT AT BASE OF FINGER		$287.61	$287.61					
26720	CLOSED TREATMENT OF BROKEN FINGER OR THUMB AT MIDPORTION OR PART NEAR HAND		$64.17	$78.92					
26725	CLOSED TREATMENT OF BROKEN FINGER OR THUMB AT MIDPORTION PART NEAR HAND WITH MANIPULATION		$119.55	$140.21					
26727	PLACEMENT OF STABILIZING DEVICE FOR BROKEN FINGER OR THUMB AT MIDPORTION OR PART NEAR HAND WITH MANIPULATION		$219.32	$219.32					
26735	TREATMENT OF BROKEN FINGER AT MIDPORTION OR PART NEAR HAND		$282.71	$282.71					
26740	CLOSED TREATMENT OF BROKEN FINGER OR HAND AT BASE OF FINGER		$72.56	$88.11					
26742	CLOSED TREATMENT OF BROKEN FINGER OR HAND AT BASE OF FINGER WITH MANIPULATION		$169.45	$169.45					
26746	TREATMENT OF BROKEN FINGER OR HAND AT BASE OF FINGER		$309.70	$309.70					
26750	CLOSED TREATMENT OF BROKEN END OF FINGER OR THUMB		$71.64	$71.64					
26755	CLOSED TREATMENT OF BROKEN END OF FINGER OR THUMB WITH MANIPULATION		$119.76	$119.76					
26756	PLACEMENT OF STABILIZING DEVICE FOR BROKEN END OF FINGER OR THUMB		$181.93	$181.93					
26765	TREATMENT OF BROKEN END OF FINGER OR THUMB		$200.83	$200.83					
26770	CLOSED TREATMENT OF DISLOCATED FINGER JOINT WITH MANIPULATION		$107.13	$107.13					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26775	CLOSED TREATMENT OF DISLOCATED FINGER JOINT WITH MANIPULATION UNDER ANESTHESIA		$137.44	$137.44					
26776	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED FINGER JOINT WITH MANIPULATION		$199.27	$199.27					
26785	TREATMENT OF DISLOCATED FINGER JOINT		$211.05	$211.05					
26820	FUSION OF THUMB		$433.93	$433.93					
26841	FUSION OF THUMB AT WRIST		$389.03	$389.03					
26842	FUSION OF THUMB AT WRIST WITH BONE GRAFT		$490.83	$490.83					
26843	FUSION OF HAND JOINT		$409.15	$409.15					
26844	FUSION OF FINGER AT HAND JOINT WITH SELF BONE GRAFT		$467.85	$467.85					
26850	FUSION OF JOINT BETWEEN FINGER AND HAND		$335.44	$335.44					
26852	FUSION OF FINGER JOINT AT HAND WITH SELF BONE GRAFT		$411.59	$411.59					
26860	FUSION OF FINGER JOINT AT HAND WITH SELF BONE GRAFT		$263.61	$263.61					
26861	FUSION OF FINGER JOINT, EACH ADDITIONAL JOINT		$121.32	$121.32					
26862	FUSION OF FINGER JOINT WITH SELF BONE GRAFT, INITIAL JOINT		$366.22	$366.22					
26863	FUSION OF FINGER JOINT WITH SELF BONE GRAFT, EACH ADDITIONAL JOINT		$218.68	$218.68					
26910	AMPUTATION OF FINGER OR THUMB		$371.69	$371.69					
26951	AMPUTATION OF FINGER OR THUMB WITH DIRECT CLOSURE		$218.29	$218.29					
26952	AMPUTATION OF FINGER OR THUMB WITH TISSUE FLAP		$300.70	$300.70					
26989	OTHER PROCEDURE ON HANDS OR FINGERS	Yes	$750.00	$975.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
26990	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF PELVIS OR HIP NEAR JOINT		$293.90	$293.90					
26991	DRAINAGE OF INFECTED FLUID-FILLED SAC NEAR PELVIS OR HIP JOINT		$233.12	$233.12					
26992	INCISION OF PELVIS AND/OR HIP JOINT BONE		$606.57	$606.57					
27000	INCISION OF HIP TENDON THROUGH SKIN		$210.09	$210.09					
27001	INCISION OF HIP TENDON		$297.94	$297.94					
27003	INCISION OF HIP TENDON WITH REMOVAL OF NERVE		$399.44	$399.44					
27005	INCISION OF TENDON OF HIP		$367.60	$367.60					
27006	INCISION OF TENDON OF HIP (ABDUCTOR AND/OR EXTENSOR)		$421.93	$421.93					
27025	INCISION OF CONNECTIVE TISSUE OF HIP OR THIGH		$487.07	$487.07					
27027	INCISION OF CONNECTIVE TISSUE ON SIDE OF PELVIS OR BUTTOCK		$663.42	$663.42					
27030	INCISION AND DRAINAGE OF HIP JOINT		$706.27	$706.27					
27033	INCISION OF HIP JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$717.21	$717.21					
27035	REMOVAL OF HIP OR PELVIC NERVE		$833.09	$833.09					
27036	REPAIR OF HIP JOINT CAPSULE		$686.12	$686.12					
27040	BIOPSY OF SURFACE TISSUE OF PELVIS AND HIP		$117.64	$117.64					
27041	BIOPSY OF SURFACE TISSUE OF PELVIS AND HIP		$356.96	$356.96					
27043	REMOVAL OF GROWTH UNDER SKIN OF PELVIS AND HIP, 3.0 CM OR MORE		$339.82	$339.82					
27045	REMOVAL OF GROWTH OF MUSCLE OF PELVIS AND HIP, 5.0 CM OR MORE		$540.47	$540.47					
27047	REMOVAL OF GROWTH UNDER SKIN OF PELVIS AND HIP, LESS THAN 3.0 CM		$268.57	$268.57					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27048	REMOVAL OF GROWTH OF SOFT TISSUE OF PELVIS AND HIP, LESS THAN 5.0 CM		$303.32	$303.32					
27049	REMOVAL OF GROWTH OF SOFT TISSUE OF PELVIS AND HIP, LESS THAN 5.0 CM		$684.79	$684.79					
27050	BIOPSY OF JOINT BETWEEN LOWER SPINE AND PELVIS		$259.53	$259.53					
27052	BIOPSY OF HIP JOINT		$385.51	$385.51					
27054	REMOVAL OF HIP JOINT LINING		$538.64	$538.64					
27057	INCISION OF TISSUE ON SIDE OF PELVIC MUSCLE COMPARTMENT WITH REMOVAL OF MUSCLE		$730.18	$730.18					
27059	EXTENSIVE REMOVAL OF GROWTH OF PELVIS AND HIP, 5.0 CM OR MORE		$1,330.50	$1,330.50					
27060	REMOVAL OF FLUID-FILLED SAC (BURSA) OF PELVIS		$260.73	$260.73					
27062	REMOVAL OF FLUID-FILLED SAC (BURSA) OR CALCIUM DEPOSIT OF PELVIS		$269.55	$269.55					
27065	REMOVAL OF CYST OR GROWTH OF HIP, PUBIC, OR HEAD OF THIGH BONE WITH SELF BONE GRAFT		$317.93	$317.93					
27066	REMOVAL OF DEEP CYST OR GROWTH OF HIP, PUBIC, OR HEAD OF THIGH BONE WITH SELF BONE GRAFT		$512.56	$512.56					
27067	REMOVAL OF CYST OR GROWTH OF HIP, PUBIC, OR HEAD OF THIGH BONE WITH SELF BONE GRAFT OBTAINED THROUGH DIFFERENT INCISION		$729.74	$729.74					
27070	PARTIAL REMOVAL OF SUPERFICIAL CYST OR GROWTH OF HIP, PUBIC, OR HEAD OF THIGH BONE WITH SELF BONE GRAFT		$509.26	$509.26					
27071	PARTIAL REMOVAL OF DEEP CYST OR GROWTH OF HIP, PUBIC, OR HEAD OF THIGH BONE WITH SELF BONE GRAFT		$563.40	$563.40					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27075	EXTENSIVE REMOVAL OF GROWTH OF HIP BONE		$884.64	$884.64					
27076	EXTENSIVE REMOVAL OF GROWTH OF UPPER PELVIC BONE INCLUDING HIP SOCKET, BASE OF PELVIC BONE, OR BOTH PUBIC BONES		$1,028.62	$1,028.62					
27077	EXTENSIVE REMOVAL OF GROWTH OF SIDE OF PELVIC BONE		$1,212.53	$1,212.53					
27078	EXTENSIVE REMOVAL OF GROWTH OF BASE OF PELVIS AND UPPER END OF THIGH BONE		$635.36	$635.36					
27080	REMOVAL OF TAILBONE		$314.55	$314.55					
27086	REMOVAL OF FOREIGN BODY IN TISSUE OF PELVIS OR HIP, ACCESSED BENEATH THE SKIN		$62.88	$70.66					
27087	REMOVAL OF FOREIGN BODY IN TISSUE OR MUSCLE OF PELVIS OR HIP		$346.72	$346.72					
27090	REMOVAL OF HIP PROSTHESIS		$631.41	$631.41					
27091	REMOVAL OF HIP PROSTHESIS, COMPLICATED		$1,209.08	$1,209.08					
27093	INJECTION OF CONTRAST FOR IMAGING OF HIP JOINT		$62.81	$62.81					
27095	INJECTION OF CONTRAST FOR IMAGING OF HIP UNDER ANESTHESIA		$72.12	$72.12					
27096	INJECTION OF ANESTHETIC OR STEROID INTO JOINT BETWEEN LOWER SPINE AND HIP BONE USING IMAGING GUIDANCE		$292.09	$292.09					
27097	RELEASE OF UPPER HAMSTRING MUSCLE		$474.51	$474.51					
27098	TRANSFER OF TENDON TO PELVIC BONE		$474.51	$474.51					
27100	TRANSFER OF ABDOMINAL MUSCLE TO THIGH BONE AT HIP JOINT		$550.66	$550.66					
27105	TRANSFER OF MUSCLE TO HIP		$521.44	$521.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27110	TRANSFER OF MUSCLE TO THIGH BONE AT HIP JOINT		$696.28	$696.28					
27111	TRANSFER OF MUSCLE TO UPPER THIGH BONE		$687.72	$687.72					
27120	REPAIR OF HIP SOCKET		$1,039.27	$1,039.27					
27122	REPAIR OF HIP SOCKET WITH REMOVAL OF HEAD OF THIGH BONE		$934.97	$934.97					
27125	PARTIAL REPLACEMENT OF THIGH BONE AT HIP JOINT WITH PROSTHESIS		$914.33	$914.33					
27130	REPLACEMENT OF THIGH BONE AND HIP JOINT WITH PROSTHESIS		$1,300.74	$1,300.74					
27132	TOTAL HIP REPLACEMENT AFTER PREVIOUS HIP SURGERY		$1,488.80	$1,488.80					
27134	REVISION OF THIGH BONE AND HIP JOINT PROSTHESIS		$1,707.39	$1,707.39					
27137	REVISION OF HIP SOCKET PART OF HIP PROSTHESIS		$1,306.01	$1,306.01					
27138	REVISION OF THIGH BONE PROSTHESIS		$1,316.66	$1,316.66					
27140	REPOSITIONING OF PART OF HEAD OF THIGH BONE		$673.33	$673.33					
27146	INCISION OR PARTIAL REMOVAL OF HIP BONE		$727.22	$727.22					
27147	INCISION OR PARTIAL REMOVAL OF HIP BONE AND REPAIR OF DISLOCATED HIP JOINT		$1,038.09	$1,038.09					
27151	RESHAPING OF PART OF HIP BONE		$1,090.69	$1,090.69					
27156	INCISION AND RESHAPING OF PART OF HIP AND THIGH BONES AND REPAIR OF DISLOCATED HIP JOINT		$1,157.78	$1,157.78					
27158	INCISION OR PARTIAL REMOVAL OF BOTH SIDES OF PELVIC BONES		$982.04	$982.04					
27161	INCISION OR PARTIAL REMOVAL OF NECK OF THIGH BONE		$885.97	$885.97					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27165	INCISION OR PARTIAL REMOVAL OF THIGH BONE BELOW NECK WITH PLACEMENT OF STABILIZING DEVICE OR CAST		$988.81	$988.81					
27170	BONE GRAFT TO UPPER THIGH BONE		$941.76	$941.76					
27175	TREATMENT OF SLIPPED GROWTH PLATE AT UPPER THIGH BONE		$248.47	$248.47					
27176	TREATMENT OF GROWTH PLATE AT TOP OF THIGH WITH PINS INSERTED THROUGH SKIN'		$639.54	$639.54					
27177	TREATMENT OF SLIPPED GROWTH PLATE AT UPPER END OF THIGH BONE WITH PINNING OR BONE GRAFT		$785.90	$785.90					
27178	TREATMENT OF SLIPPED GROWTH PLATE AT UPPER THIGH BONE WITH MANIPULATION AND PINNING		$633.96	$633.96					
27179	REPAIR OF GROWTH PLATE IN HEAD OF THIGH BONE		$686.56	$686.56					
27181	REPAIR OF GROWTH PLATE IN HEAD OF THIGH BONE WITH PLACEMENT OF STABILIZING DEVICE		$809.87	$809.87					
27185	REMOVAL OF GROWTH PLATE OF UPPER THIGH BONE		$338.99	$338.99					
27187	STABILIZATION OF UPPER THIGH BONE WITH DEVICE		$867.48	$867.48					
27197	CLOSED TREATMENT OF BROKEN AND/OR DISLOCATED PELVIS AND/OR SACRUM		$92.27	$92.27					Added Effective 1/1/2017
27198	CLOSED TREATMENT OF BROKEN AND/OR DISLOCATED PELVIS AND/OR SACRUM WITH MANIPULATION		$237.92	$237.92					Added Effective 1/1/2017
27200	CLOSED TREATMENT OF BROKEN TAILBONE		$95.74	$95.74					
27202	TREATMENT OF BROKEN TAILBONE		$377.90	$377.90					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27215	TREATMENT OF BROKEN BONES ON SIDE OF PELVIS		$654.55	$654.55					
27216	PLACEMENT OF STABILIZING DEVICE FOR BROKEN AND/OR DISLOCATED BONE ON SIDE OF PELVIS		$548.05	$548.05					
27217	TREATMENT OF BROKEN AND/OR DISLOCATED FRONT OF PELVIS		$833.92	$833.92					
27218	TREATMENT OF BROKEN AND/OR DISLOCATED BACK OF PELVIS		$999.41	$999.41					
27220	CLOSED TREATMENT OF BROKEN HIP SOCKET		$284.16	$284.16					
27222	CLOSED TREATMENT OF BROKEN HIP SOCKET WITH MANIPULATION		$517.20	$517.20					
27226	TREATMENT OF BROKEN HIP SOCKET WITH PLACEMENT OF STABILIZING DEVICE		$893.24	$893.24					
27227	TREATMENT OF BROKEN BONES OF FRONT OR BACK COLUMN OF HIP SOCKET OR ACROSS HIP SOCKET WITH PLACEMENT OF STABILIZING DEVICE		$1,057.74	$1,057.74					
27228	TREATMENT OF BROKEN BONES OF FRONT AND BACK COLUMN OR WALL OF HIP SOCKET WITH PLACEMENT OF STABILIZING DEVICE		$1,138.10	$1,138.10					
27230	CLOSED TREATMENT OF BROKEN UPPER THIGH BONE		$243.73	$243.73					
27232	CLOSED TREATMENT OF BROKEN UPPER THIGH BONE WITH MANIPULATION		$549.82	$549.82					
27235	PLACEMENT OF STABILIZING DEVICE FOR UPPER END OF BROKEN THIGH BONE		$764.73	$764.73					
27236	TREATMENT OF UPPER END OF BROKEN THIGH BONE WITH PLACEMENT OF STABILIZING DEVICE OR PROSTHETIC REPLACEMENT		$934.33	$934.33					
27238	CLOSED TREATMENT OF BROKEN BELOW NECK OF THIGH BONE		$297.43	$297.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27240	CLOSED TREATMENT OF BROKEN BELOW NECK OF THIGH BONE WITH MANIPULATION		$616.02	$616.02					
27244	TREATMENT OF BROKEN NECK OF THIGH BONE WITH PLATE/SCREW IMPLANT		$921.94	$921.94					
27245	TREATMENT OF BROKEN NECK OF THIGH BONE WITH BONE IMPLANT		$1,050.17	$1,050.17					
27246	CLOSED TREATMENT OF BROKEN BELOW HEAD OF THIGH BONE		$246.32	$246.32					
27248	TREATMENT OF BROKEN HEAD OF THIGH BONE WITH PLACEMENT OF STABILIZING DEVICE		$670.98	$670.98					
27250	CLOSED TREATMENT OF DISLOCATED HIP		$281.65	$281.65					
27252	CLOSED TREATMENT OF DISLOCATED HIP UNDER ANESTHESIA		$410.81	$410.81					
27253	TREATMENT OF DISLOCATED HIP		$755.25	$755.25					
27254	TREATMENT OF TRAUMATIC BROKEN THIGH AND HIP AND DISLOCATED HIP		$923.80	$923.80					
27256	CLOSED TREATMENT OF SPONTANEOUS DISLOCATED HIP		$167.12	$167.12					
27257	TREATMENT OF SPONTANEOUS DISLOCATED HIP UNDER ANESTHESIA		$283.09	$283.09					
27258	TREATMENT OF SPONTANEOUS DISLOCATED HIP		$845.48	$845.48					
27259	TREATMENT OF SPONTANEOUS DISLOCATED HIP WITH SHORTENING OF THIGH BONE		$1,058.92	$1,058.92					
27265	CLOSED TREATMENT OF DISLOCATED HIP PROSTHESIS		$269.66	$269.66					
27266	CLOSED TREATMENT OF DISLOCATED HIP PROSTHESIS UNDER ANESTHESIA		$363.44	$363.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27267	CLOSED TREATMENT OF BROKEN HEAD OF THIGH BONE		$316.58	$316.58					
27268	CLOSED TREATMENT OF BROKEN HEAD OF THIGH BONE WITH MANIPULATION		$391.05	$391.05					
27269	TREATMENT OF BROKEN HEAD OF THIGH BONE		$936.68	$936.68					
27275	MANIPULATION OF HIP JOINT UNDER GENERAL ANESTHESIA		$116.40	$116.40					
27278	FUSION OF PELVIC JOINT INCLUDING JOINT DEVICE USING IMAGING GUIDANCE		$372.74	$10,896.22					
27279	FUSION OF PELVIC JOINT, PIERCING TOP OF HIP BONE AND LOWER SPINE, INCLUDING JOINT DEVICE, USING IMAGING GUIDANCE		$639.99	$639.99					Added effective 1/1/2015
27280	FUSION OF SACROILIAC JOINT BETWEEN SPINE AND PELVIS WITH BONE GRAFT, OPEN PROCEDURE		$659.38	$659.38					
27282	FUSION OF JOINT BETWEEN PUBIC BONES		$592.89	$592.89					
27284	FUSION OF HIP JOINT		$905.58	$905.58					
27286	FUSION OF HIP JOINT WITH INCISION OR PARTIAL REMOVAL OF THIGH BONE BELOW NECK		$921.83	$921.83					
27290	AMPUTATION OF PELVIC STRUCTURES		$1,431.65	$1,431.65					
27295	REMOVAL OF HIP BONE AND LEG AT HIP JOINT		$1,023.55	$1,023.55					
27299	OTHER PROCEDURE ON PELVIS OR HIP JOINT	Yes	$800.00	$1,040.00					
27301	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF THIGH OR KNEE		$250.59	$250.59					
27303	INCISION OF BONE OF THIGH OR KNEE		$406.16	$406.16					
27305	INCISION OF CONNECTIVE TISSUE BETWEEN THIGH AND KNEE		$277.49	$277.49					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27306	INCISION OF TENDON OF THIGH OR HAMSTRING MUSCLE		$186.45	$186.45					
27307	INCISION OF MULTIPLE TENDONS OF THIGH OR HAMSTRING MUSCLE		$247.92	$247.92					
27310	INCISION OF KNEE JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$536.56	$536.56					
27323	BIOPSY OF SURFACE TISSUE OF THIGH OR KNEE		$93.71	$105.91					
27324	BIOPSY OF DEEP TISSUE OF THIGH OR KNEE		$214.40	$214.40					
27325	REMOVAL OF NERVE OF HAMSTRING MUSCLE		$360.70	$360.70					
27326	REMOVAL OF NERVE OF CALF MUSCLE		$339.94	$339.94					
27327	REMOVAL OF GROWTH UNDER SKIN OF THIGH OR KNEE, 3.0 CM OR MORE		$197.91	$197.91					
27328	REMOVAL OF GROWTH OF MUSCLE OF THIGH OR KNEE, 5.0 CM OR LESS		$282.72	$282.72					
27329	EXTENSIVE REMOVAL OF GROWTH OF THIGH OR KNEE, LESS THAN 5.0 CM		$710.04	$710.04					
27330	BIOPSY OF MEMBRANE COVERING KNEE JOINT		$328.59	$328.59					
27331	INCISION OF KNEE JOINT FOR EXPLORATION, BIOPSY, OR REMOVAL OF FOREIGN BODY		$386.98	$386.98					
27332	INCISION OF KNEE JOINT WITH REMOVAL OF CARTILAGE OF INNER OR OUTER SIDE OF KNEE		$541.94	$541.94					
27333	INCISION OF KNEE JOINT WITH REMOVAL OF CARTILAGE OF INNER AND OUTER SIDES OF KNEE		$502.73	$502.73					
27334	INCISION OF KNEE JOINT WITH REMOVAL OF CARTILAGE OF FRONT OR BACK OF KNEE		$549.34	$549.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27335	INCISION OF KNEE JOINT WITH REMOVAL OF CARTILAGE OF FRONT AND BACK OF KNEE		$634.91	$634.91					
27337	REMOVAL OF GROWTH UNDER SKIN OF THIGH OR KNEE, LESS THAN 3.0 CM		$302.46	$302.46					
27339	REMOVAL OF GROWTH OF MUSCLE OF THIGH OR KNEE, 5.0 CM OR MORE		$545.82	$545.82					
27340	REMOVAL OF FLUID-FILLED SAC FROM JOINT AT FRONT OF KNEE		$233.36	$233.36					
27345	REMOVAL OF CYST OF BACK OF KNEE		$339.30	$339.30					
27347	REMOVAL OF GROWTH OF KNEE CARTILAGE OR CAPSULE		$247.34	$247.34					
27350	REMOVAL OF KNEECAP		$509.69	$509.69					
27355	REMOVAL OF CYST OR GROWTH OF THIGH BONE		$440.36	$440.36					
27356	REMOVAL OF CYST OR GROWTH OF THIGH BONE WITH DONOR BONE GRAFT		$504.85	$504.85					
27357	REMOVAL OF CYST OR GROWTH OF THIGH BONE WITH SELF BONE GRAFT		$553.36	$553.36					
27358	REMOVAL OF CYST OR GROWTH OF THIGH BONE WITH PLACEMENT OF STABILIZING DEVICE		$278.62	$278.62					
27360	PARTIAL REMOVAL OF THIGH AND/OR LOWER LEG BONES		$534.45	$534.45					
27364	EXTENSIVE REMOVAL OF GROWTH OF THIGH OR KNEE, 5.0 CM OR MORE		$1,143.19	$1,143.19					
27365	EXTENSIVE REMOVAL OF GROWTH OF THIGH OR KNEE BONE		$839.06	$839.06					
27369	INJECTION OF CONTRAST FOR IMAGING OF KNEE JOINT		$33.13	$108.58					Effective 1/1/2019
27372	REMOVAL OF FOREIGN BODY DEEP IN TISSUE OF THIGH OR KNEE		$245.99	$245.99					
27380	PRIMARY SUTURE OF TENDON BELOW KNEE		$438.86	$438.86					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27381	REMOVAL OF FOREIGN BODY DEEP IN TISSUE OF THIGH OR KNEE		$629.97	$629.97					
27385	PRIMARY SUTURE OF RUPTURED MUSCLE OF THIGH		$482.00	$482.00					
27386	SECONDARY SUTURE OF RUPTURED MUSCLE OF THIGH		$667.97	$667.97					
27390	REPAIR OF HAMSTRING TENDON		$277.69	$277.69					
27391	REPAIR OF MULTIPLE HAMSTRING TENDONS IN LEG		$362.97	$362.97					
27392	REPAIR OF MULTIPLE HAMSTRING TENDONS OF BOTH LEGS		$486.83	$486.83					
27393	LENGTHENING OF HAMSTRING TENDON		$349.27	$349.27					
27394	LENGTHENING OF MULTIPLE HAMSTRING TENDONS IN LEG		$410.40	$410.40					
27395	LENGTHENING OF MULTIPLE HAMSTRING TENDONS IN BOTH LEGS		$642.79	$642.79					
27396	TRANSFER OF THIGH TENDON		$431.42	$431.42					
27397	TRANSFER OF THIGH TENDONS		$547.19	$547.19					
27400	TRANSFER OF TENDON OR MUSCLE IN HAMSTRING TO FEMUR		$490.30	$490.30					
27403	INCISION AND REPAIR OF KNEE CARTILAGE		$499.63	$499.63					
27405	PRIMARY REPAIR OF TORN LIGAMENT OR JOINT CAPSULE AT OUTSIDE PART OF KNEE		$547.23	$547.23					
27407	REPAIR OF TORN LIGAMENT AND/OR JOINT CAPSULE AT FRONT OF KNEE		$549.42	$549.42					
27409	REPAIR OF TORN LIGAMENTS OR JOINT CAPSULE AT FRONT AND SIDES OF KNEE		$811.53	$811.53					
27412	IMPLANTATION OF SELF CARTILAGE INTO KNEE JOINT		$1,179.03	$1,179.03					
27415	IMPLANTATION OF DONOR CARTILAGE CELLS INTO KNEE JOINT		$980.98	$980.98					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27416	IMPLANTATION OF SELF CARTILAGE CELLS INTO KNEE BONE		$733.15	$733.15					
27418	IMPLANTATION OF SELF CARTILAGE CELLS INTO KNEE BONE		$661.14	$661.14					
27420	REPAIR OF DISLOCATING KNEECAP		$605.55	$605.55					
27422	REPAIR OF DISLOCATING KNEECAP WITH REALIGNMENT		$618.60	$618.60					
27424	RECONSTRUCTION OF DISLOCATING KNEECAP WITH REMOVAL		$627.11	$627.11					
27425	RELEASE OF LIGAMENTS OF KNEE JOINT		$347.40	$347.40					
27427	RECONSTRUCTION OF LIGAMENTS OUTSIDE KNEE JOINT		$607.63	$607.63					
27428	RECONSTRUCTION LIGAMENTS INSIDE KNEE JOINT		$745.89	$745.89					
27429	RECONSTRUCTION OF LIGAMENTS INSIDE AND OUTSIDE KNEE JOINT		$694.76	$694.76					
27430	REPAIR OF MUSCLE GROUP ABOVE KNEE JOINT		$549.25	$549.25					
27435	INCISION OF BACK PORTION OF KNEE JOINT CAPSULE		$472.48	$472.48					
27437	REPAIR OF KNEECAP		$530.59	$530.59					
27438	REPAIR OF KNEECAP WITH PROSTHESIS		$706.12	$706.12					
27440	REPAIR OF LOWER PART OF KNEE JOINT		$646.80	$646.80					
27441	REPAIR OF LOWER PART OF KNEE JOINT WITH PROSTHESIS AND REMOVAL OF JOINT LINING		$569.70	$569.70					
27442	REPAIR OF END OF THIGH OR LOWER LEG BONE AT KNEE JOINT WITH PROSTHESIS		$783.21	$783.21					
27443	KNEE REPLACEMENT WITH REPAIR OF END OF THIGH OR LOWER LEG BONE AND REMOVAL OF KNEE JOINT LINING		$729.37	$729.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27445	KNEE JOINT REPLACEMENT USING HINGED PROSTHESIS		$1,145.96	$1,145.96					Termed 12/31/2025
27446	REPLACEMENT OF KNEE JOINT ON SIDE OF KNEE		$1,051.39	$1,051.39					
27447	REPLACEMENT OF KNEE JOINT, BOTH SIDES OF KNEE		$1,373.97	$1,373.97					
27448	INCISION OR PARTIAL REMOVAL OF MIDDLE PORTION OF THIGH BONE		$696.75	$696.75					
27450	INCISION OR PARTIAL REMOVAL OF MIDDLE PORTION OF THIGH BONE WITH STABILIZING DEVICE		$839.20	$839.20					
27454	MULTIPLE INCISIONS OR REMOVALS OF PARTS OF MIDDLE PORTION OF THIGH BONE WITH PLACEMENT OF ROD		$849.38	$849.38					
27455	INCISION OR PARTIAL REMOVAL OF UPPER PORTION OF LOWER LEG BONE TO REPAIR DEFORMITY, BEFORE BONE GROWTH COMPLETED		$721.93	$721.93					
27457	INCISION OR PARTIAL REMOVAL OF UPPER PORTION OF LOWER LEG BONE TO REPAIR DEFORMITY, AFTER BONE GROWTH COMPLETED		$778.46	$778.46					
27465	SHORTENING OF THIGH BONE		$753.67	$753.67					
27466	LENGTHENING OF THIGH BONE		$857.88	$857.88					
27468	LENGTHENING AND SHORTENING OF THIGH BONE		$1,036.42	$1,036.42					Termed 12/31/2025
27470	REPAIR OF NONHEALED BROKEN THIGH BONE		$945.17	$945.17					
27472	REPAIR OF NONHEALED BROKEN THIGH BONE WITH SELF BONE GRAFT		$1,090.97	$1,090.97					
27475	REMOVAL OF GROWTH PLATE AT LOWER END OF THIGH BONE		$476.44	$476.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27477	REMOVAL OF GROWTH PLATE OF BOTH LOWER LEG BONES		$655.92	$655.92					
27479	REMOVAL OF GROWTH PLATE OF LEG AND THIGH BONES		$715.27	$715.27					
27485	REMOVAL OF GROWTH PLATE OF LEG OR THIGH BONES		$487.59	$487.59					
27486	REVISION OF COMPONENT OF TOTAL KNEE JOINT PROSTHESIS		$1,162.27	$1,162.27					
27487	REVISION OF THIGH AND LOWER LEG BONE COMPONENTS OF TOTAL KNEE JOINT PROSTHESIS		$1,526.10	$1,526.10					
27488	REMOVAL OF TOTAL KNEE JOINT PROSTHESIS		$921.03	$921.03					
27495	STABILIZATION OF THIGH BONE WITH DEVICE		$959.83	$959.83					
27496	INCISION OF CONNECTIVE TISSUE OF THIGH AND/OR KNEE TO RELIEVE PRESSURE		$278.87	$278.87					
27497	INCISION OF TISSUE OF THIGH AND/OR KNEE WITH TISSUE REMOVAL TO RELIEVE PRESSURE		$341.46	$341.46					
27498	MULTIPLE INCISIONS OF CONNECTIVE TISSUE OF THIGH AND/OR KNEE TO RELIEVE PRESSURE		$389.33	$389.33					
27499	MULTIPLE INCISIONS OF CONNECTIVE TISSUE OF THIGH AND/OR KNEE WITH TISSUE REMOVAL TO RELIEVE PRESSURE		$448.36	$448.36					
27500	CLOSED TREATMENT OF BROKEN THIGH BONE		$320.26	$320.26					
27501	CLOSED TREATMENT OF BROKEN THIGH BONE AT LOWER END		$320.26	$320.26					
27502	CLOSED TREATMENT OF BROKEN THIGH BONE AT MIDPORTION WITH MANIPULATION		$514.18	$514.18					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27503	CLOSED TREATMENT OF BROKEN THIGH BONE AT FAR END WITH MANIPULATION		$514.18	$514.18					
27506	TREATMENT OF BROKEN SHAFT OF THIGH BONE WITH IMPLANT		$959.33	$959.33					
27507	TREATMENT OF BROKEN MIDDLE OF THIGH BONE WITH PLACEMENT OF STABILIZING DEVICE		$868.96	$868.96					
27508	CLOSED TREATMENT OF BROKEN INSIDE OR OUTSIDE PORTION OF LOWER END OF THIGH BONE		$281.86	$281.86					
27509	TREATMENT OF BROKEN THIGH BONE AT FAR END WITH PLACEMENT OF STABILIZING DEVICE		$327.64	$327.64					
27510	CLOSED TREATMENT OF BROKEN THIGH BONE AT KNEE AREA WITH MANIPULATION		$449.73	$449.73					
27511	TREATMENT OF BROKEN THIGH BONE AT FAR END		$858.15	$858.15					
27513	TREATMENT OF BROKEN THIGH BONE IN KNEE AREA		$984.28	$984.28					
27514	TREATMENT OF BROKEN SIDE OF LOWER END OF THIGH BONE		$953.10	$953.10					
27516	CLOSED TREATMENT OF THIGH BONE GROWTH PLATE BROKEN AT END OF THIGH BONE		$290.90	$290.90					
27517	CLOSED TREATMENT OF GROWTH PLATE BROKEN AT END OF THIGH BONE WITH MANIPULATION		$481.47	$481.47					
27519	TREATMENT OF BROKEN GROWTH PLATE AT END OF THIGH BONE		$795.44	$795.44					
27520	CLOSED TREATMENT OF BROKEN KNEECAP		$130.34	$171.11					
27524	TREATMENT OF BROKEN KNEECAP WITH PLACEMENT OF STABILIZING DEVICE AND/OR REMOVAL OF KNEECAP		$592.67	$592.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27530	CLOSED TREATMENT OF BROKEN SHIN BONE		$198.37	$198.37					
27532	CLOSED TREATMENT OF BROKEN SHIN BONE WITH TRACTION		$374.29	$374.29					
27535	TREATMENT OF BROKEN SIDE OF UPPER END OF SHIN BONE		$663.23	$663.23					
27536	TREATMENT OF BROKEN SHIN BONE ON BOTH SIDES OF UPPER END		$785.01	$785.01					
27538	CLOSED TREATMENT OF BROKEN TOP OF SHIN BONE AT KNEE		$238.94	$238.94					
27540	TREATMENT OF BROKEN SHIN BONE AT KNEE		$699.25	$699.25					
27550	CLOSED TREATMENT OF DISLOCATED KNEE		$239.95	$239.95					
27552	CLOSED TREATMENT OF DISLOCATED KNEE UNDER ANESTHESIA		$321.73	$321.73					
27556	TREATMENT OF DISLOCATED KNEE		$777.38	$777.38					
27557	TREATMENT OF DISLOCATED KNEE WITH LIGAMENT REPAIR		$914.27	$914.27					
27558	TREATMENT OF DISLOCATED KNEE WITH LIGAMENT REPAIR AND RECONSTRUCTION		$942.15	$942.15					
27560	CLOSED TREATMENT OF DISLOCATED KNEECAP		$149.05	$149.05					
27562	CLOSED TREATMENT OF DISLOCATED KNEECAP UNDER ANESTHESIA		$318.21	$318.21					
27566	TREATMENT OF DISLOCATED KNEECAP		$661.22	$661.22					
27570	MANIPULATION OF KNEE JOINT UNDER ANESTHESIA		$102.53	$102.53					
27580	FUSION OF KNEE JOINT		$843.06	$843.06					
27590	AMPUTATION OF THIGH THROUGH THIGH BONE		$588.56	$588.56					
27591	AMPUTATION OF THIGH THROUGH THIGH BONE WITH IMMEDIATE FITTING FOR PROSTHESIS		$692.38	$692.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27592	AMPUTATION OF THIGH THROUGH THIGH BONE LEAVING WOUND		$513.40	$513.40					
27594	SECONDARY CLOSURE OR REVISION OF SCAR AT PREVIOUS THIGH AMPUTATION		$299.29	$299.29					
27596	RE-AMPUTATION OF THIGH THROUGH THIGH BONE		$514.76	$514.76					
27598	REMOVAL OF LEG AT KNEE JOINT		$593.07	$593.07					
27599	OTHER PROCEDURE ON THIGH OR KNEE	Yes	$0.00	$0.00					
27600	INCISION OF CONNECTIVE TISSUE OF FRONT OR SIDE OF LOWER LEG TO RELIEVE PRESSURE		$253.78	$253.78					
27601	INCISION OF CONNECTIVE TISSUE OF BACK OF LOWER LEG TO RELIEVE PRESSURE		$253.07	$253.07					
27602	INCISION OF CONNECTIVE TISSUE OF FRONT AND/OR SIDE AND BACK OF LOWER LEG TO RELIEVE PRESSURE		$321.89	$321.89					
27603	DRAINAGE OF DEEP ABSCESS OR BLOOD ACCUMULATION OF LEG OR ANKLE		$203.20	$203.20					
27604	DRAINAGE OF INFECTED FLUID-FILLED SAC (BURSA) OF LEG OR ANKLE		$141.20	$154.88					
27605	INCISION OF ACHILLES TENDON USING LOCAL ANESTHETIC		$117.80	$117.80					
27606	INCISION OF ACHILLES TENDON UNDER ANESTHESIA		$178.93	$178.93					
27607	INCISION OF LEG OR ANKLE BONE		$391.88	$391.88					
27610	INCISION OF ANKLE JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$440.07	$440.07					
27612	INCISION OF ANKLE JOINT WITH RELEASE OF JOINT LINING		$428.17	$428.17					
27613	BIOPSY OF SURFACE TISSUE OF LEG OR ANKLE		$73.62	$82.61					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27614	BIOPSY OF DEEP TISSUE OF LEG OR ANKLE		$225.08	$225.08					
27615	EXTENSIVE REMOVAL OF GROWTH OF LEG OR ANKLE, LESS THAN 5.0 CM		$601.21	$601.21					
27616	EXTENSIVE REMOVAL OF GROWTH OF LEG OR ANKLE, 5.0 CM OR MORE		$932.31	$932.31					
27618	REMOVAL OF GROWTH UNDER SKIN OF LEG OR ANKLE, LESS THAN 3.0 CM		$209.06	$209.06					
27619	REMOVAL OF GROWTH OF MUSCLE OF LEG OR ANKLE, LESS THAN 5.0 CM		$361.22	$361.22					
27620	INCISION AND EXPLORATION OF ANKLE JOINT		$352.03	$352.03					
27625	REMOVAL OF MEMBRANE COVERING OF ANKLE JOINT		$495.71	$495.71					
27626	REMOVAL OF MEMBRANE COVERING ANKLE JOINT AND TENDON		$570.79	$570.79					
27630	REMOVAL OF GROWTH OF LEG AND/OR ANKLE TENDON LINING OR CAPSULE		$230.77	$230.77					
27632	REMOVAL OF GROWTH UNDER SKIN OF LEG OR ANKLE, 3.0 CM OR MORE		$299.06	$299.06					
27634	REMOVAL OF GROWTH OF MUSCLE OF LEG OR ANKLE, 5.0 CM OR MORE		$489.38	$489.38					
27635	REMOVAL OF CYST OR GROWTH OF LOWER LEG BONE		$460.42	$460.42					
27637	REMOVAL OF CYST OR GROWTH OF LOWER LEG BONE WITH SELF BONE GRAFT		$529.40	$529.40					
27638	REMOVAL OF CYST OR GROWTH OF LOWER LEG BONE WITH BONE GRAFT		$572.56	$572.56					
27640	PARTIAL REMOVAL OF SHIN BONE		$600.87	$600.87					
27641	PARTIAL REMOVAL OF OUTER LOWER LEG BONE		$465.23	$465.23					
27645	EXTENSIVE REMOVAL OF GROWTH OF SHIN BONE		$745.89	$745.89					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27646	EXTENSIVE REMOVAL OF GROWTH OF OUTER LEG BONE		$672.91	$672.91					
27647	EXTENSIVE REMOVAL OF GROWTH OF HEEL BONE		$628.62	$628.62					
27648	INJECTION FOR X-RAY IMAGING OF ANKLE		$43.33	$43.33					
27650	REPAIR OF RUPTURED ACHILLES TENDON		$541.27	$541.27					
27652	REPAIR OF RUPTURED ACHILLES TENDON WITH GRAFT		$599.41	$599.41					
27654	SECONDARY REPAIR OF RUPTURED ACHILLES TENDON		$607.33	$607.33					
27656	REPAIR OF CONNECTIVE TISSUE DEFECT OF LEG		$224.89	$224.89					
27658	PRIMARY REPAIR OF TENDON ON BACK OF LEG		$257.68	$257.68					
27659	SECONDARY REPAIR OF TENDON ON BACK OF LEG		$362.62	$362.62					
27664	PRIMARY REPAIR OF TENDON ON FRONT OF LEG		$231.16	$231.16					
27665	SECONDARY REPAIR OF TENDON ON FRONT OF LEG		$301.18	$301.18					
27675	REPAIR OF DISLOCATING LOWER LEG TENDONS WITHOUT A CUT THROUGH THE LOWER LEG BONE ON THE OUTSIDE OF THE LEG (FIBULA)		$393.45	$393.45					
27676	REPAIR OF DISLOCATED LOWER LEG TENDONS BY INCISION OR PARTIAL REMOVAL OF LOWER LEG BONE		$461.41	$461.41					
27680	RELEASE OF LEG AND/OR ANKLE TENDON		$282.90	$282.90					
27681	RELEASE OF MULTIPLE LEG AND/OR ANKLE TENDONS		$367.65	$367.65					
27685	LENGTHENING OR SHORTENING OF TENDON OF LEG OR ANKLE		$291.10	$291.10					
27686	LENGTHENING OR SHORTENING OF MULTIPLE TENDONS OF LEG OR ANKLE		$401.17	$401.17					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27687	LENGTHENING OF CALF MUSCLE		$336.01	$336.01					
27690	TRANSFER OF TENDON AND MUSCLE REROUTING AT LOWER LEG OR ANKLE		$439.55	$439.55					
27691	TRANSFER OF DEEP TENDON OF FOOT WITH MUSCLE REROUTING		$512.94	$512.94					
27692	TRANSFER OF TENDON WITH MUSCLE REROUTING AT FOOT, EACH ADDITIONAL TENDON		$116.37	$116.37					
27695	PRIMARY REPAIR OF DISRUPTED ANKLE LIGAMENT		$419.72	$419.72					
27696	PRIMARY REPAIR OF DISRUPTION OF BOTH ANKLE LIGAMENTS		$444.08	$444.08					
27698	SECONDARY REPAIR OF DISRUPTED COLLATERAL LIGAMENT OF ANKLE		$609.90	$609.90					
27700	RECONSTRUCTION OF ANKLE JOINT		$589.09	$589.09					
27702	RECONSTRUCTION OF ANKLE JOINT WITH PROSTHESIS		$901.83	$901.83					
27703	REPAIR OF ANKLE JOINT WITH REVISION OF PROSTHESIS		$850.54	$850.54					
27704	REMOVAL OF ANKLE IMPLANT		$391.73	$391.73					
27705	INCISION OR PARTIAL REMOVAL OF SHIN BONE		$613.41	$613.41					
27707	INCISION OR PARTIAL REMOVAL OF LOWER LEG BONE		$255.46	$255.46					
27709	INCISION OR PARTIAL REMOVAL OF SHIN AND OUTER LOWER LEG BONES		$634.02	$634.02					
27712	INSERTION OF ROD IN SHIN BONE		$680.93	$680.93					
27715	LENGTHENING OR SHORTENING OF LOWER LEG BONES		$764.49	$764.49					
27720	REPAIR OF NONHEALED BROKEN SHIN BONE		$750.69	$750.69					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27722	REPAIR OF NONHEALED BROKEN SHIN BONE WITH BONE GRAFT		$641.91	$641.91					
27724	REPAIR OF NONHEALED BROKEN SHIN BONE WITH SELF GRAFT FROM HIP OR OTHER BONE		$840.83	$840.83					
27725	FUSION OF NONHEALED BROKEN SHIN BONE WITH OUTER LOWER LEG BONE		$640.88	$640.88					
27726	REPAIR OF NONHEALED BROKEN OUTER LOWER LEG BONE WITH PLACEMENT OF STABILIZING DEVICE		$691.61	$691.61					
27727	REPAIR OF CONGENITAL NONHEALED BROKEN SHIN BONE		$674.54	$674.54					
27730	SCRAPING OR STAPLING OF SHIN BONE GROWTH PLATE OF LOWER LEG BONE AT ANKLE		$318.59	$318.59					
27732	FUSION OF LOWER OUTER LEG BONE GROWTH PLATE		$297.49	$297.49					
27734	FUSION OF LOWER END OF GROWTH PLATE OF LOWER LEG BONE		$463.65	$463.65					
27740	FUSION OF LOWER AND UPPER ENDS OF GROWTH PLATES OF LOWER LEG BONES		$514.03	$514.03					
27742	FUSION OF LOWER AND UPPER ENDS OF GROWTH PLATES OF LOWER LEG AND THIGH BONES		$571.33	$571.33					
27745	PLACEMENT OF STABILIZING DEVICE FOR SHIN BONE		$549.90	$549.90					
27750	CLOSED TREATMENT OF BROKEN MIDDLE PART OF SHIN BONE		$189.78	$189.78					
27752	CLOSED TREATMENT OF MIDDLE PART OF BROKEN SHIN BONE WITH MANIPULATION		$307.62	$307.62					
27756	PLACEMENT OF STABILIZING DEVICE FOR BROKEN MIDDLE PART OF SHIN BONE		$413.30	$413.30					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27758	TREATMENT BROKEN MIDDLE PART OF SHIN BONE WITH PLATE OR SCREWS		$723.37	$723.37					
27759	TREATMENT OF BROKEN PART OF SHIN BONE WITH ROD		$792.21	$792.21					
27760	CLOSED TREATMENT OF INSIDE PORTION OF SHIN BONE AT ANKLE		$126.05	$160.65					
27762	CLOSED TREATMENT OF INSIDE PORTION OF SHIN BONE AT ANKLE WITH MANIPULATION		$243.12	$243.12					
27766	TREATMENT OF INSIDE PORTION OF BROKEN SHIN BONE AT ANKLE		$465.01	$465.01					
27767	CLOSED TREATMENT OF BACK PORTION OF SHIN BONE AT ANKLE		$191.37	$190.48					
27768	CLOSED TREATMENT OF BACK PORTION OF SHIN BONE AT ANKLE WITH MANIPULATION		$299.37	$299.37					
27769	TREATMENT OF BROKEN BACK PORTION OF SHIN BONE AT ANKLE		$520.12	$520.12					
27780	CLOSED TREATMENT OF BROKEN MIDDLE OR UPPER END OF OUTSIDE LOWER LEG BONE		$105.22	$131.64					
27781	CLOSED TREATMENT OF BROKEN MIDDLE OR UPPER END OF OUTSIDE LOWER LEG BONE WITH MANIPULATION		$223.39	$223.39					
27784	TREATMENT OF BROKEN UPPER OR MIDDLE PART OF OUTER LOWER LEG BONE		$360.34	$360.34					
27786	CLOSED TREATMENT OF BROKEN OUTSIDE LOWER LEG BONE AT ANKLE		$121.08	$154.88					
27788	CLOSED TREATMENT OF BROKEN OUTSIDE LOWER LEG BONE AT ANKLE WITH MANIPULATION		$180.71	$224.57					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27792	TREATMENT OF BROKEN OUTER LOWER LEG BONE AT ANKLE		$432.95	$432.95					
27808	CLOSED TREATMENT OF 2 BROKEN LOWER LEG BONES AT ANKLE		$161.48	$161.48					
27810	CLOSED TREATMENT OF 2 BROKEN LOWER LEG BONES AT ANKLE WITH MANIPULATION		$296.33	$296.33					
27814	TREATMENT OF BOTH BROKEN LOWER LEG BONES AT ANKLE		$596.72	$596.72					
27816	CLOSED TREATMENT OF 3 BROKEN LOWER LEG BONES AT ANKLE		$185.96	$185.96					
27818	CLOSED TREATMENT OF 3 BROKEN LOWER LEG BONES AT ANKLE WITH MANIPULATION		$349.43	$349.43					
27822	TREATMENT OF 3 BROKEN LOWER LEG BONES AT ANKLE		$579.67	$579.67					
27823	TREATMENT OF 3 BROKEN LOWER LEG BONES AT ANKLE WITH FIXATION OF POSTERIOR LIP		$712.71	$712.71					
27824	CLOSED TREATMENT OF BROKEN SHIN BONE AT LOWER WEIGHT BEARING JOINT		$185.96	$185.96					
27825	CLOSED TREATMENT OF BROKEN SHIN BONE AT LOWER WEIGHT BEARING JOINT WITH MANIPULATION AND/OR TRACTION		$349.43	$349.43					
27826	TREATMENT OF BROKEN OUTER LOWER LEG BONE AT LOWER WEIGHT BEARING JOINT		$518.51	$518.51					
27827	TREATMENT OF BROKEN SHIN BONE AT LOWER WEIGHT BEARING JOINT		$650.27	$650.27					
27828	TREATMENT OF BROKEN LOWER WEIGHT BEARING JOINT OF BOTH LOWER LEG BONES		$754.67	$754.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27829	TREATMENT OF LIGAMENT TEAR AT ANKLE JOINT		$343.29	$343.29					
27830	CLOSED TREATMENT OF DISLOCATED KNEE JOINT		$201.05	$201.05					
27831	CLOSED TREATMENT OF DISLOCATED KNEE JOINT UNDER ANESTHESIA		$246.38	$246.38					
27832	TREATMENT OF DISLOCATED KNEE JOINT		$349.40	$349.40					
27840	CLOSED TREATMENT OF DISLOCATED ANKLE		$180.56	$180.56					
27842	CLOSED TREATMENT OF DISLOCATED ANKLE UNDER ANESTHESIA		$235.65	$235.65					
27846	TREATMENT OF DISLOCATED ANKLE		$528.96	$528.96					
27848	TREATMENT OF DISLOCATED ANKLE WITH REPAIR OR PLACEMENT OF STABILIZING DEVICE		$562.95	$562.95					
27860	MANIPULATION OF ANKLE UNDER GENERAL ANESTHESIA		$110.07	$110.07					
27870	FUSION OF ANKLE JOINT, OPEN PROCEDURE		$717.51	$717.51					
27871	FUSION OF LOWER LEG BONE AT KNEE OR ANKLE JOINT		$489.23	$489.23					
27880	AMPUTATION OF BOTH LOWER LEG BONES		$576.79	$576.79					
27881	AMPUTATION OF BOTH LOWER LEG BONES WITH IMMEDIATE FITTING		$655.20	$655.20					
27882	AMPUTATION OF BOTH LOWER LEG BONES LEAVING WOUND		$460.79	$460.79					
27884	SECONDARY CLOSURE OR REVISION OF SCAR OF LOWER LEG BONE AMPUTATION		$322.35	$322.35					
27886	RE-AMPUTATION OF LOWER LEG		$469.89	$469.89					
27888	AMPUTATION OF FOOT AT ANKLE WITH RECONSTRUCTION OF SKIN AND TISSUE		$549.92	$549.92					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
27889	REMOVAL OF FOOT AT ANKLE JOINT		$522.58	$522.58					
27892	INCISION OF CONNECTIVE TISSUE OF LOWER LEG TO RELIEVE PRESSURE WITH REMOVAL OF MUSCLE AND/OR NERVE		$283.42	$283.42					
27893	INCISION OF CONNECTIVE TISSUE AT BACK OF LOWER LEG TO RELIEVE PRESSURE WITH REMOVAL OF MUSCLE AND/OR NERVE		$282.71	$282.71					
27894	INCISION OF CONNECTIVE TISSUE AT FRONT AND/OR SIDE AND BACK OF LOWER LEG TO RELIEVE PRESSURE WITH REMOVAL OF MUSCLE AND/OR NERVE		$351.52	$351.52					
27899	OTHER PROCEDURE ON LEG OR ANKLE	Yes	$0.00	$0.00					
28001	DRAINAGE OF FLUID FILLED SAC IN FOOT		$86.83	$93.80					
28002	DRAINAGE OF FLUID FILLED SAC BELOW CONNECTIVE TISSUE IN FOOT JOINT		$178.70	$178.70					
28003	DRAINAGE OF FLUID FILLED SACS BENEATH CONNECTIVE TISSUE IN MULTIPLE FOOT JOINTS		$281.06	$328.00					
28005	INCISION OF FOOT BONE		$348.73	$348.73					
28008	FASCIOTOMY, FOOT AND/OR TOE		$201.88	$201.88					
28010	REPAIR OF TOE TENDON		$143.72	$192.26					
28011	REPAIR OF MULTIPLE TOE TENDONS		$145.44	$169.17					
28020	INCISION OF FOOT AT ANKLE JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$271.01	$271.01					
28022	INCISION OF MIDFOOT JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$173.68	$210.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28024	INCISION OF TOE JOINT FOR EXPLORATION, FLUID DRAINAGE, OR REMOVAL OF FOREIGN BODY		$158.78	$190.83					
28035	RELEASE OF NERVE BETWEEN TISSUE AND ANKLE BONE		$329.36	$329.36					
28039	REMOVAL (1.5 CENTIMETERS OR GREATER) TISSUE GROWTH BENEATH THE SKIN OF FOOT OR TOE		$249.62	$342.75					
28041	REMOVAL OF GROWTH OF MUSCLE OF FOOT OR TOE, 1.5 CM OR MORE		$328.28	$328.28					
28043	REMOVAL (LESS THAN 1.5 CENTIMETERS) TISSUE GROWTH BENEATH THE SKIN OF FOOT OR TOE		$151.32	$151.32					
28045	REMOVAL OF GROWTH OF MUSCLE OF FOOT OR TOE, LESS THAN 1.5 CM		$249.07	$249.07					
28046	EXTENSIVE REMOVAL OF GROWTH OF FOOT OR TOE, LESS THAN 3.0 CM		$438.82	$438.82					
28047	EXTENSIVE REMOVAL OF GROWTH OF FOOT OR TOE, 3.0 CM OR MORE		$700.21	$700.21					
28050	BIOPSY THROUGH A JOINT OPENING IN THE MIDFOOT		$232.96	$232.96					
28052	INCISION OF MIDFOOT JOINT WITH BIOPSY		$170.25	$221.48					
28054	INCISION OF TOE JOINT WITH BIOPSY		$161.08	$161.08					
28055	REMOVAL OF NERVE OF FOOT MUSCLE		$289.13	$289.13					
28060	PARTIAL REMOVAL OF CONNECTIVE TISSUE AT SOLE OF FOOT		$274.25	$274.25					
28062	REMOVAL OF CONNECTIVE TISSUE AT SOLE OF FOOT		$393.07	$393.07					
28070	REMOVAL OF FOOT BONE JOINT LINING AT ANKLE		$270.62	$270.62					
28072	REMOVAL OF JOINT LINING OF TOE JOINT AT FOOT		$223.07	$223.07					
28080	REMOVAL OF FIBROUS NERVE GROWTH FROM BETWEEN TOES		$213.41	$213.41					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28086	REMOVAL OF LINING OF TENDON ON UNDER SURFACE OF FOOT		$227.49	$227.49					
28088	REMOVAL OF LINING OF TENDON ON UPPER SURFACE OF FOOT		$213.04	$213.04					
28090	REMOVAL OF GROWTH OF TENDON COVERING OR JOINT CAPSULE OF FOOT		$213.05	$213.05					
28092	REMOVAL OF GROWTH OF TENDON COVERING OR JOINT CAPSULE OF TOES		$162.93	$162.93					
28100	REMOVAL OF CYST OR GROWTH OF HEEL OR ANKLE BONE		$294.03	$294.03					
28102	REMOVAL OF CYST OR GROWTH OF HEEL OR ANKLE BONE WITH SELF BONE GRAFT		$418.62	$418.62					
28103	REMOVAL OF CYST OR GROWTH OF HEEL OR ANKLE BONE WITH DONOR BONE GRAFT		$346.23	$346.23					
28104	REMOVAL OF CYST OR GROWTH OF FOOT BONE		$270.65	$270.65					
28106	REMOVAL OF CYST OR GROWTH OF FOOT BONE WITH SELF BONE GRAFT		$389.17	$389.17					
28107	REMOVAL OF CYST OR GROWTH OF FOOT BONE WITH BONE GRAFT		$293.43	$293.43					
28108	REMOVAL OF CYST OR GROWTH OF TOE BONE		$183.23	$239.55					
28110	REMOVAL OF BUNION AT FIFTH TOE JOINT		$214.91	$214.91					
28111	REMOVAL OF FOOT BONE AT GREAT TOE JOINT		$287.13	$287.13					
28112	REMOVAL OF TOE BONE AT SECOND, THIRD, OR FOURTH JOINTS		$241.27	$241.27					
28113	COMPLETE REMOVAL OF FOOT BONE AT FIFTH TOE JOINT		$250.77	$250.77					
28114	COMPLETE REMOVAL OF SECOND TO FIFTH FOOT BONES		$490.56	$490.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28116	REMOVAL OF ABNORMAL BONES AT ANKLE JOINT		$341.88	$341.88					
28118	REMOVAL OF HEEL BONE		$332.34	$332.34					
28119	REMOVAL OF HEEL BONE SPUR		$309.41	$309.41					
28120	PARTIAL REMOVAL OF INFECTED FOOT OR HEEL BONE		$292.60	$292.60					
28122	PARTIAL REMOVAL OF FOOT OR HEEL BONE		$327.54	$327.54					
28124	PARTIAL REMOVAL OF TOE BONE		$192.93	$248.05					
28126	REMOVAL OF TOE BONE AT FOOT		$161.60	$214.97					
28130	REMOVAL OF ANKLE JOINT BONE		$425.03	$425.03					
28140	REMOVAL OF FOOT BONE		$336.56	$336.56					
28150	REMOVAL OF TOE		$209.86	$209.86					
28153	REMOVAL OF END OF TOE AT JOINT		$162.03	$215.53					
28160	PARTIAL REMOVAL OF TOE AT JOINT		$169.83	$225.08					
28171	EXTENSIVE REMOVAL OF GROWTH OF MIDDLE PORTION OF FOOT BONE		$499.19	$499.19					
28173	EXTENSIVE REMOVAL OF GROWTH OF FOOT BONE		$411.97	$411.97					
28175	EXTENSIVE REMOVAL OF GROWTH OF TOE BONE		$322.43	$322.43					
28190	REMOVAL OF FOREIGN BODY OF FOOT TISSUE, ACCESSED BENEATH THE SKIN		$64.23	$71.21					
28192	REMOVAL OF FOREIGN BODY OF FOOT TISSUE, DEEP		$189.89	$189.89					
28193	COMPLICATED REMOVAL OF FOREIGN BODY IN FOOT		$230.75	$230.75					
28200	REPAIR OF TENDON ON SOLE OF FOOT		$278.45	$278.45					
28202	SECONDARY REPAIR OF TENDON ON SOLE OF FOOT WITH GRAFT		$362.03	$362.03					
28208	REPAIR OF TENDON OF TOP SIDE OF FOOT		$202.78	$202.78					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28210	REPAIR OF TENDON ON TOP SIDE OF FOOT WITH GRAFT		$339.38	$339.38					
28220	REMOVAL OF SCAR TISSUE OF TENDON ON BOTTOM SIDE OF FOOT		$187.65	$239.55					
28222	REMOVAL OF SCAR TISSUE OF MULTIPLE FOOT TENDONS		$258.42	$344.25					
28225	REMOVAL OF SCAR TISSUE OF TENDON ON TOP SIDE OF FOOT		$170.00	$170.00					
28226	REMOVAL OF SCAR TISSUE OF MULTIPLE TENDONS AT TOP OF FOOT		$225.67	$225.67					
28230	INCISION TO LENGTHEN FOOT TENDON		$155.31	$187.90					
28232	INCISION TO LENGTHEN TOE TENDON		$120.76	$142.22					
28234	INCISION TO RELEASE FOOT TENDON		$117.53	$138.05					
28238	RECONSTRUCTION OF ANKLE TENDON WITH REMOVAL OF EXTRA ANKLE JOINT BONE		$427.90	$427.90					
28240	RELEASE OR LENGTHENING OF TENDON IN FOOT		$183.61	$183.61					
28250	INCISION OF CONNECTIVE TISSUE AND MUSCLE OF SOLE OF FOOT		$297.86	$297.86					
28260	INCISION OF ANKLE JOINT CAPSULE TO CORRECT FOOT DEFORMITY		$350.56	$350.56					
28261	INCISION OF ANKLE JOINT CAPSULE AND LENGTHENING OF TENDON		$434.36	$434.36					
28262	EXTENSIVE REPAIR OF FOOT DEFECT WITH TENDON LENGTHENING AND RELIEF OF TENSION IN FOOT		$712.14	$712.14					
28264	RELEASE OF CAPSULE OF MIDFOOT		$572.41	$572.41					
28270	INCISION OF JOINT CAPSULE OF FOOT AND TOE		$175.25	$210.52					
28272	INCISION OF TOE JOINT CAPSULE		$139.42	$166.78					
28280	CREATION OF WEBBING BETWEEN TOES		$211.50	$211.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28285	CORRECTION OF TOE JOINT DEFORMITY		$256.09	$256.09					
28286	CORRECTION OF FIFTH TOE JOINT DEFORMITY		$234.66	$234.66					
28288	REMOVAL OF FOOT BONE SPUR		$220.48	$220.48					
28289	CORRECTION OF RIGID DEFORMITY OF FIRST JOINT OF BIG TOE		$284.76	$284.76					
28291	CORRECTION OF RIGID DEFORMITY OF FIRST JOINT OF BIG TOE USING IMPLANT		$387.61	$577.34					Added Effective 1/1/2017
28292	CORRECTION OF BUNION		$390.18	$390.18					
28295	CORRECTION OF BUNION WITH ALIGNMENT CORRECTION OF MIDFOOT BONE TOWARD ANKLE		$430.82	$734.39					Added Effective 1/1/2017
28296	CORRECTION OF BUNION WITH ALIGNMENT CORRECTION OF MIDFOOT BONE TOWARD TOE AREA		$515.11	$515.11					
28297	CORRECTION OF BUNION WITH FOREFOOT AND MIDFOOT BONE FUSION		$522.44	$522.44					
28298	CORRECTION OF BUNION WITH ALIGNMENT CORRECTION OF BIG TOE		$478.31	$478.31					
28299	CORRECTION OF BUNION WITH 2 AREAS OF REALIGNMENT		$546.46	$546.46					
28300	INCISION OR PARTIAL REMOVAL OF HEEL BONE		$461.69	$461.69					
28302	INCISION OR PARTIAL REMOVAL OF ANKLE BONE		$533.57	$533.57					
28304	INCISION OR PARTIAL REMOVAL OF FOOT BONE		$444.15	$444.15					
28305	INCISION OR PARTIAL REMOVAL OF FOOT BONE WITH BONE GRAFT		$582.37	$582.37					
28306	INCISION OR PARTIAL REMOVAL OF BIG TOE BONE TO STRAIGHTEN TOE		$301.55	$301.55					
28307	INCISION OR PARTIAL REMOVAL OF BIG TOE BONE WITH SELF BONE GRAFT TO STRAIGHTEN TOE		$353.15	$353.15					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28308	INCISION OR PARTIAL REMOVAL OF FOOT BONE (OTHER THAN BIG TOE) TO STRAIGHTEN TOE		$314.66	$314.66					
28309	INCISION OR PARTIAL REMOVAL OF MULTIPLE FOOT BONES TO STRAIGHTEN TOES		$467.67	$467.67					
28310	INCISION OR PARTIAL REMOVAL OF BIG TOE BONE AT FIRST TOE BONE LEVEL TO STRAIGHTEN TOE		$270.53	$270.53					
28312	INCISION OR PARTIAL REMOVAL OF TOE BONE TO STRAIGHTEN TOE		$259.13	$259.13					
28313	RECONSTRUCTION OF SOFT TISSUE ANGULAR DEFORMITY OF TOE		$181.38	$215.85					
28315	REMOVAL OF SMALL BONE UNDERLYING LONG BONE OF FOOT AT BIG TOE JOINT		$258.67	$258.67					
28320	REPAIR OF NONHEALED BROKEN MIDFOOT BONE		$515.16	$515.16					
28322	REPAIR OF NONHEALED BROKEN FOREFOOT BONE		$373.52	$373.52					
28340	RECONSTRUCTION OF ABNORMAL TOE		$385.24	$385.24					
28341	RECONSTRUCTION OF ABNORMAL TOE WITH BONE REMOVAL		$459.42	$459.42					
28344	REMOVAL OF EXTRA TOES WITH RECONSTRUCTION		$227.97	$227.97					
28345	REMOVAL OF CONGENITAL WEB SPACE DEFORMITY OF TOES		$322.94	$322.94					
28360	RECONSTRUCTION, CLEFT FOOT		$733.33	$733.33					
28400	CLOSED TREATMENT OF BROKEN HEEL BONE		$103.17	$137.63					
28405	CLOSED TREATMENT OF BROKEN HEEL BONE WITH MANIPULATION		$244.29	$244.29					
28406	PLACEMENT OF STABILIZING DEVICE FOR BROKEN HEEL BONE WITH MANIPULATION		$356.72	$356.72					
28415	TREATMENT OF BROKEN HEEL BONE		$665.39	$665.39					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28420	TREATMENT OF BROKEN HEEL BONE WITH GRAFT		$795.33	$795.33					
28430	CLOSED TREATMENT OF BROKEN ANKLE JOINT BONE		$98.87	$131.73					
28435	CLOSED TREATMENT OF BROKEN ANKLE JOINT BONE WITH MANIPULATION		$197.64	$197.64					
28436	PLACEMENT OF STABILIZING DEVICE FOR BROKEN ANKLE JOINT WITH MANIPULATION		$258.02	$258.02					
28445	TREATMENT OF BROKEN BONE BETWEEN FOOT AND ANKLE		$527.69	$527.69					
28446	IMPLANTATION OF SELF CARTILAGE CELLS INTO FOOT JOINT WITH GRAFT		$899.30	$899.30					
28450	TREATMENT OF BROKEN FOOT BONE AT ANKLE		$83.09	$108.17					
28455	TREATMENT OF BROKEN FOOT BONE AT ANKLE WITH MANIPULATION		$128.60	$162.66					
28456	PLACEMENT OF STABILIZING DEVICE FOR BROKEN FOOT JOINT WITH MANIPULATION		$140.25	$140.25					
28465	TREATMENT OF BROKEN HIND PORTION OF FOOT		$360.48	$360.48					
28470	CLOSED TREATMENT OF BROKEN BONE IN FOREFOOT OR MIDFOOT		$81.37	$105.51					
28475	CLOSED TREATMENT OF BROKEN FOOT WITH MANIPULATION		$119.07	$150.45					
28476	PLACEMENT OF STABILIZING DEVICE FOR BROKEN FOOT BONE WITH MANIPULATION		$193.76	$193.76					
28485	TREATMENT OF BROKEN MIDPORTION OF FOOT		$295.92	$295.92					
28490	CLOSED TREATMENT OF BROKEN GREAT TOE		$44.14	$56.21					
28495	CLOSED TREATMENT OF BROKEN GREAT TOE WITH MANIPULATION		$61.61	$76.63					
28496	PLACEMENT OF STABILIZING DEVICE FOR BROKEN BIG TOE WITH MANIPULATION		$127.02	$127.02					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28505	TREATMENT OF BROKEN GREAT TOE		$194.82	$194.82					
28510	CLOSED TREATMENT OF BROKEN TOE		$43.76	$55.70					
28515	CLOSED TREATMENT OF BROKEN TOE WITH MANIPULATION		$57.60	$72.62					
28525	TREATMENT OF BROKEN TOE		$152.68	$152.68					
28530	CLOSED TREATMENT OF BROKEN SMALL BONE IN TENDON ATTACHED TO GREAT TOE		$45.48	$58.89					
28531	TREATMENT OF BROKEN SMALL BONE IN TENDON ATTACHED TO GREAT TOE		$117.99	$117.99					
28540	CLOSED TREATMENT OF DISLOCATED ANKLE JOINT BONE		$64.96	$73.01					
28545	CLOSED TREATMENT OF DISLOCATED MIDFOOT JOINT BONE UNDER ANESTHESIA		$102.80	$102.80					
28546	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED MIDFOOT JOINT WITH MANIPULATION		$169.23	$169.23					
28555	TREATMENT OF DISLOCATED MIDFOOT OR HINDFOOT BONES		$338.77	$338.77					
28570	CLOSED TREATMENT OF DISLOCATED ANKLE JOINT		$71.23	$92.55					
28575	CLOSED TREATMENT OF DISLOCATED ANKLE JOINT UNDER ANESTHESIA		$169.89	$169.89					
28576	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED ANKLE JOINT WITH MANIPULATION		$194.54	$194.54					
28585	TREATMENT OF DISLOCATED ANKLE JOINT		$365.30	$365.30					
28600	CLOSED TREATMENT OF DISLOCATED MIDFOOT JOINT		$62.71	$71.83					
28605	CLOSED TREATMENT OF DISLOCATED MIDFOOT JOINT UNDER ANESTHESIA		$139.89	$139.89					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28606	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED MIDFOOT WITH MANIPULATION		$238.43	$238.43					
28615	TREATMENT OF DISLOCATED MIDFOOT BONE		$302.23	$302.23					
28630	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN TOE AND FOOT		$64.90	$78.72					
28635	CLOSED TREATMENT OF DISLOCATED JOINT BETWEEN TOE AND FOOT UNDER ANESTHESIA		$78.40	$97.84					
28636	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED JOINT BETWEEN TOE AND FOOT WITH MANIPULATION		$157.22	$157.22					
28645	TREATMENT OF DISLOCATED JOINT BETWEEN TOE AND FOOT		$212.34	$212.34					
28660	CLOSED TREATMENT OF DISLOCATED JOINT IN TOE		$52.98	$52.98					
28665	CLOSED TREATMENT OF DISLOCATED JOINT IN TOE UNDER ANESTHESIA		$70.69	$83.83					
28666	PLACEMENT OF STABILIZING DEVICE FOR DISLOCATED TOE JOINT		$150.28	$150.28					
28675	TREATMENT OF DISLOCATED TOE JOINT		$169.07	$169.07					
28705	FUSION OF ALL BONES OF ANKLE AND HINDFOOT		$879.94	$879.94					
28715	FUSION OF 3 BONES OF ANKLE		$734.04	$734.04					
28725	FUSION OF FOOT BELOW ANKLE		$606.86	$606.86					
28730	FUSION OF MULTIPLE FOOT JOINTS		$564.51	$564.51					
28735	FUSION OF MULTIPLE FOOT JOINTS WITH BONE INCISION TO CORRECT A FOOT DEFORMITY		$590.56	$590.56					
28737	FUSION OF UPPER PART OF FOOT AND LENGTHENING OF TENDON		$526.23	$526.23					
28740	FUSION OF FOOT IN MIDFOOT REGION		$337.29	$337.29					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
28750	FUSION OF BIG TOE AT JOINT WITH FOOT		$302.59	$302.59					
28755	FUSION OF BIG TOE BETWEEN TOE JOINTS		$241.37	$241.37					
28760	FUSION OF BIG TOE BETWEEN TOE JOINTS WITH TENDON TRANSFER		$321.14	$321.14					
28800	AMPUTATION OF MIDFOOT BONE		$423.54	$423.54					
28805	AMPUTATION OF FOOT ACROSS INSTEP		$420.46	$420.46					
28810	AMPUTATION OF TOE AND MIDFOOT BONE		$285.37	$285.37					
28820	AMPUTATION OF TOE AT JOINT BETWEEN FOREFOOT AND TOES		$184.84	$184.84					
28825	AMPUTATION OF TOE AT TOE JOINT		$166.18	$166.18					
28890	SHOCK WAVE THERAPY TO ARCH OF FOOT USING ULTRASOUND GUIDANCE UNDER ANESTHESIA		$161.86	$254.74					
28899	OTHER PROCEDURE ON FOOT OR TOES	Yes	$0.00	$0.00					
29000	APPLICATION OF HALO TYPE BODY CAST		$120.75	$120.75					
29010	APPLICATION OF JACKET TYPE BODY CAST		$131.20	$131.20					
29015	ATION OF JACKET TYPE BODY CAST INCLUDING HEAD		$109.98	$141.23					
29035	APPLICATION OF SHOULDER TO HIP BODY CAST		$85.87	$112.02					
29040	APPLICATION OF SHOULDER TO HIP BODY CAST INCLUDING HEAD		$126.61	$126.61					
29044	APPLICATION OF SHOULDER TO HIP BODY CAST AND THIGH		$126.53	$126.53					
29046	APPLICATION OF SHOULDER TO HIP BODY CAST AND BOTH THIGHS		$139.28	$139.28					
29049	APPLICATION OF FIGURE-OF-EIGHT CAST		$33.21	$38.84					
29055	APPLICATION, CAST; SHOULDER SPICA		$88.55	$88.55					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29058	APPLICATION, CAST; PLASTER VELPEAU		$58.06	$58.06					
29065	APPLICATION, CAST; SHOULDER TO HAND (LONG ARM)		$39.42	$50.15					
29075	APPLICATION, CAST; ELBOW TO FINGER (SHORT ARM)		$33.21	$41.39					
29085	APPLICATION, CAST; HAND AND LOWER FOREARM (GAUNTLET)		$34.18	$40.88					
29086	APPLICATION, CAST; FINGER (EG, CONTRACTURE)		$32.50	$40.50					
29105	APPLICATION OF LONG ARM SPLINT (SHOULDER TO HAND)		$34.18	$40.88					
29125	APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); STATIC		$23.49	$28.45					
29126	APPLICATION OF SHORT ARM SPLINT (FOREARM TO HAND); DYNAMIC		$29.42	$34.78					
29130	APPLICATION OF NONMOVEABLE FINGER SPLINT		$17.44	$19.72					
29131	APPLICATION OF HINGED FINGER SPLINT		$22.83	$28.06					
29200	PLACEMENT OF STRAPPING TO CHEST		$23.42	$27.04					
29240	PLACEMENT OF STRAPPING TO SHOULDER		$28.80	$28.80					
29260	PLACEMENT OF STRAPPING TO ELBOW OR WRIST		$19.95	$23.04					
29280	PLACEMENT OF STRAPPING TO HAND OR FINGER		$18.27	$21.08					
29305	APPLICATION OF HIP SPICA CAST ON LEG		$117.53	$117.53					
29325	APPLICATION OF HIP SPICA CAST ON BOTH LEGS, OR ON LEG AND PART OF OTHER LEG		$126.92	$126.92					
29345	APPLICATION OF LONG LEG CAST FROM THIGH TO TOE		$58.65	$72.33					
29355	APPLICATION OF WALKING CAST COVERING THIGH TO TOE		$63.78	$78.53					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29358	APPLICATION OF LONG LEG BRACE-TYPE CAST FROM THIGH TO TOE		$74.66	$99.33					
29365	APPLICATION OF THIGH TO LOWER LEG CYLINDER CAST		$49.56	$61.09					
29405	APPLICATION OF SHORT LEG CAST		$38.75	$49.34					
29425	APPLICATION OF WALKING CAST COVERING BELOW KNEE TO TOE		$46.05	$59.06					
29435	APPLICATION OF KNEECAP TENDON BEARING CAST		$54.82	$70.65					
29440	ADDITION OF WALKER TO PREVIOUSLY APPLIED CAST		$20.54	$23.62					
29445	APPLICATION OF WALKING CAST COVERING FOOT, ANKLE, AND LOWER LEG		$104.63	$104.63					
29450	APPLICATION OF LEG CAST AND MANIPULATION OF FOOT TO TREAT DEFORMITY		$36.13	$41.36					
29505	APPLICATION OF LONG LEG SPLINT FROM THIGH TO ANKLE OR TOE		$37.24	$37.24					
29515	APPLICATION OF SHORT LEG SPLINT FROM CALF TO FOOT		$29.18	$35.49					
29520	PLACEMENT OF STRAPPING TO HIP		$21.40	$26.23					
29530	PLACEMENT OF STRAPPING TO KNEE		$22.63	$27.33					
29540	PLACEMENT OF STRAPPING TO ANKLE OR FOOT		$19.72	$23.74					
29550	PLACEMENT OF STRAPPING TO TOES		$18.28	$22.03					
29580	STRAPPING; UNNA BOOT		$28.29	$38.89					
29581	APPLICATION OF VEIN WOUND COMPRESSION BANDAGES ON LOWER LEG, ANKLE, AND FOOT		$24.28	$62.81					
29584	APPLICATION OF VEIN WOUND COMPRESSION BANDAGES ON UPPER ARM, FOREARM, HAND, AND FINGERS		$12.63	$53.98					
29700	REMOVAL OR CUTTING OF GAUNTLET, BOOT, OR BODY CAST		$31.33	$35.62					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29705	REMOVAL OR BIVALVING; FULL ARM OR FULL LEG CAST		$38.77	$43.47					
29710	REMOVAL OR CUTTING OF SHOULDER, HIP SPICA, OR JACKET CAST		$47.06	$53.09					
29720	REPAIR OF SPICA, BODY CAST OR JACKET		$24.01	$27.09					
29730	EXAM OF SKIN SURFACE BY CREATION OF OPENING IN CAST		$26.47	$29.95					
29740	INSERTION OF WEDGE IN CAST		$39.42	$44.52					
29750	INSERTION OF WEDGE IN CLUBFOOT CAST		$45.38	$52.08					
29799	OTHER CASTING OR WRAPPING PROCEDURE	Yes	$43.50	$56.55					
29800	DIAGNOSTIC EXAM OF JAW JOINT USING AN ENDOSCOPE		$273.67	$273.67					
29804	EXAM OF JAW JOINT USING AN ENDOSCOPE		$544.32	$544.32					
29805	DIAGNOSTIC EXAM OF SHOULDER USING AN ENDOSCOPE		$273.62	$273.62					
29806	REPAIR OF SHOULDER JOINT CAPSULE USING AN ENDOSCOPE		$756.24	$756.24					
29807	REPAIR OF SHOULDER SOCKET USING AN ENDOSCOPE		$735.75	$735.75					
29819	REMOVAL OF LOOSE OR FOREIGN BODY IN SHOULDER JOINT USING AN ENDOSCOPE		$508.71	$508.71					
29820	PARTIAL REMOVAL OF SHOULDER JOINT LINING USING AN ENDOSCOPE		$475.75	$475.75					
29821	REMOVAL OF ENTIRE SHOULDER JOINT LINING USING AN ENDOSCOPE		$524.59	$524.59					
29822	LIMITED REMOVAL OF ABNORMAL SHOULDER JOINT TISSUE USING ENDOSCOPE		$496.95	$496.95					
29823	REMOVAL OF EXTENSIVE SHOULDER JOINT TISSUE USING AN ENDOSCOPE		$557.11	$557.11					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29824	PARTIAL REMOVAL OF COLLAR BONE AT SHOULDER USING AN ENDOSCOPE		$459.49	$459.49					
29825	REMOVAL OF SHOULDER SCAR TISSUE USING AN ENDOSCOPE		$516.49	$516.49					
29826	SHAVING OF PART OF SHOULDER BONE AND REPAIR OF LIGAMENT USING AN ENDOSCOPE		$610.22	$610.22					
29827	REPAIR OF SHOULDER ROTATOR CUFF USING AN ENDOSCOPE		$787.23	$787.23					
29828	RELEASE OF TENDON CONNECTING BICEPS MUSCLE AND SHOULDER USING AN ENDOSCOPE		$692.79	$692.79					
29830	DIAGNOSTIC EXAM OF ELBOW JOINT USING AN ENDOSCOPE		$328.06	$328.06					
29834	REMOVAL OF LOOSE OR FOREIGN BODY IN ELBOW JOINT USING AN ENDOSCOPE		$359.84	$359.84					
29835	PARTIAL REMOVAL OF ELBOW JOINT LINING USING AN ENDOSCOPE		$371.54	$371.54					
29836	REMOVAL OF ENTIRE ELBOW JOINT LINING USING AN ENDOSCOPE		$432.76	$432.76					
29837	REMOVAL OF ELBOW JOINT TISSUE USING AN ENDOSCOPE		$394.61	$394.61					
29838	REMOVAL OF EXTENSIVE DAMAGED TISSUE FROM ELBOW JOINT USING AN ENDOSCOPE		$434.52	$434.52					
29840	DIAGNOSTIC EXAM OF WRIST USING AN ENDOSCOPE		$259.53	$259.53					
29843	DIAGNOSTIC EXAM, WASHING, AND DRAINAGE OF INFECTED WRIST USING AN ENDOSCOPE		$344.27	$344.27					
29844	PARTIAL REMOVAL OF WRIST JOINT LINING USING AN ENDOSCOPE		$355.54	$355.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29845	REMOVAL OF ENTIRE WRIST JOINT LINING USING AN ENDOSCOPE		$431.08	$431.08					
29846	REMOVAL OR REPAIR OF WRIST CARTILAGE USING AN ENDOSCOPE		$473.77	$473.77					
29847	PLACEMENT OF INTERNAL STABILIZING DEVICE USING AN ENDOSCOPE TO TREAT BROKEN OR UNSTABLE WRIST		$408.77	$408.77					
29848	RELEASE OF WRIST LIGAMENT USING AN ENDOSCOPE		$236.88	$236.88					
29850	TREATMENT OF BROKEN KNEE JOINT USING AN ENDOSCOPE		$412.51	$549.17					
29851	TREATMENT OF BROKEN KNEE JOINT WITH PLACEMENT OF STABILIZING DEVICE USING AN ENDOSCOPE		$699.25	$699.25					
29855	TREATMENT OF BROKEN UPPER PORTION OF LOWER LEG BONE ON SIDE USING AN ENDOSCOPE		$637.41	$637.41					
29856	TREATMENT OF BROKEN UPPER PORTION OF LOWER LEG BONE ON BOTH SIDES USING AN ENDOSCOPE		$748.91	$748.91					
29860	DIAGNOSTIC EXAM OF HIP USING AN ENDOSCOPE		$375.33	$375.33					
29861	REMOVAL OF LOOSE OR FOREIGN BODY IN HIP JOINT USING AN ENDOSCOPE		$547.74	$547.74					
29862	REMOVAL OR SHAVING OF HIP JOINT SOCKET CARTILAGE USING AN ENDOSCOPE		$601.41	$601.41					
29863	REMOVAL OF HIP JOINT LINING USING AN ENDOSCOPE		$552.29	$552.29					
29866	REPAIR OF KNEE CARTILAGE AND BONE WITH PATIENT-DERIVED HEALTHY CARTILAGE TRANSPLANT USING AN ENDOSCOPE		$763.08	$763.08					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29867	REPAIR OF KNEE CARTILAGE AND BONE WITH DONOR CARTILAGE GRAFT USING AN ENDOSCOPE		$913.20	$913.20					
29868	REPAIR OF KNEE CARTILAGE WITH DONOR CARTILAGE GRAFT USING AN ENDOSCOPE		$1,240.49	$1,240.49					
29870	DIAGNOSTIC EXAM OF KNEE USING AN ENDOSCOPE		$268.33	$268.33					
29871	EXAM, WASHING, AND DRAINAGE OF INFECTED KNEE JOINT USING AN ENDOSCOPE		$389.48	$389.48					
29873	RELEASE OF LIGAMENTS AT OUTER SIDE OF KNEE JOINT USING AN ENDOSCOPE		$360.23	$360.23					
29874	REMOVAL OF LOOSE OR FOREIGN BODY IN KNEE JOINT USING AN ENDOSCOPE		$469.26	$469.26					
29875	PARTIAL REMOVAL OF KNEE JOINT LINING USING AN ENDOSCOPE		$431.23	$431.23					
29876	REMOVAL OF JOINT LINING FROM MULTIPLE KNEE JOINT COMPARTMENTS USING AN ENDOSCOPE		$525.51	$525.51					
29877	REMOVAL OR SHAVING OF KNEE JOINT CARTILAGE USING AN ENDOSCOPE		$493.05	$493.05					
29879	REPAIR OF KNEE JOINT WITH DRILLING AND OR SCRAPING OF JOINT USING AN ENDOSCOPE		$538.89	$538.89					
29880	REMOVAL OF BOTH KNEE CARTILAGES USING AN ENDOSCOPE		$568.94	$568.94					
29881	REMOVAL OF BOTH KNEE CARTILAGES USING AN ENDOSCOPE		$519.01	$519.01					
29882	REPAIR OF INSIDE OR OUTSIDE KNEE JOINT CARTILAGE USING AN ENDOSCOPE		$570.66	$570.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29883	REPAIR OF INSIDE AND OUTSIDE KNEE JOINT CARTILAGE USING AN ENDOSCOPE		$641.12	$641.12					
29884	REMOVAL OF SCAR TISSUE FROM KNEE USING AN ENDOSCOPE		$478.61	$478.61					
29885	REPAIR OF KNEE JOINT WITH BONE GRAFT USING AN ENDOSCOPE		$506.78	$506.78					
29886	REPAIR OF KNEE JOINT BY DRILLING CARTILAGE USING AN ENDOSCOPE		$418.82	$418.82					
29887	REPAIR OF KNEE JOINT WITH BONE GRAFT AND INTERNAL STABILIZING DEVICE USING AN ENDOSCOPE		$575.48	$575.48					
29888	REPAIR OF ANTERIOR CRUCIATE LIGAMENT OF KNEE USING AN ENDOSCOPE		$922.93	$922.93					
29889	REPAIR OF POSTERIOR CRUCIATE LIGAMENT OF KNEE USING AN ENDOSCOPE		$631.75	$631.75					
29891	REMOVAL OF SHIN AND/OR ANKLE BONE DEFECT USING AN ENDOSCOPE		$513.66	$513.66					
29892	REMOVAL OF LARGE SHIN OR ANKLE BONE DEFECT USING AN ENDOSCOPE		$530.95	$530.95					
29893	REPAIR OF FIBROUS TISSUE OF ARCH OF FOOT USING AN ENDOSCOPE		$295.86	$295.86					
29894	REMOVAL OF LOOSE OR FOREIGN BODY IN ANKLE USING AN ENDOSCOPE		$478.37	$478.37					
29895	PARTIAL REMOVAL OF ANKLE JOINT LINING USING AN ENDOSCOPE		$464.84	$464.84					
29897	REMOVAL OF LIMITED DEAD OR INFECTED TISSUE USING AN ENDOSCOPE		$483.71	$483.71					
29898	REMOVAL OF EXTENSIVE DEAD OR INFECTED TISSUE USING AN ENDOSCOPE		$557.77	$557.77					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
29899	FUSION OF ANKLE JOINT USING AN ENDOSCOPE		$722.91	$722.91					
29900	BIOPSY OF LINING OF JOINT OF FINGER USING AN ENDOSCOPE		$325.00	$325.00					
29901	REMOVAL OF DEAD OR INFECTED FINGER JOINT TISSUE USING AN ENDOSCOPE		$358.76	$358.76					
29902	TREATMENT OF DISPLACED FINGER JOINT LIGAMENT USING AN ENDOSCOPE		$385.42	$385.42					
29904	REMOVAL OF LOOSE OR FOREIGN BODY IN ANKLE JOINT AT HEEL BONES USING AN ENDOSCOPE		$464.04	$464.04					
29905	REMOVAL OF LINING OF ANKLE JOINT USING AN ENDOSCOPE		$499.64	$499.64					
29906	REMOVAL OF DEAD OR INFECTED ANKLE JOINT TISSUE USING AN ENDOSCOPE		$526.35	$526.35					
29907	FUSION OF FOOT JOINT USING AN ENDOSCOPE		$645.92	$645.92					
29914	RESHAPING OF THIGH BONE AT HIP JOINT USING AN ENDOSCOPE		$899.59	$899.59					
29915	RESHAPING OF HIP SOCKET USING AN ENDOSCOPE		$916.51	$916.51					
29916	REPAIR OF HIP JOINT SOCKET CARTILAGE USING AN ENDOSCOPE		$916.51	$916.51					
29999	OTHER PROCEDURE ON JOINT USING AN ENDOSCOPE	Yes	$0.00	$0.00					
30000	DRAINAGE OF ABSCESS OR BLOOD ACCUMULATION OF NOSE		$49.49	$57.27					
30020	DRAINAGE OF ABSCESS OR BLOOD ACCUMULATION OF NASAL CARTILAGE		$50.00	$58.05					
30100	BIOPSY OF LINING OF NOSE		$38.78	$48.03					
30110	SIMPLE REMOVAL OF NASAL POLYP		$67.06	$84.36					
30115	EXTENSIVE REMOVAL OF NASAL POLYP		$207.37	$207.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
30117	REMOVAL OR DESTRUCTION OF GROWTH OF NOSE THROUGH NOSE		$173.50	$173.50					
30118	REMOVAL OR DESTRUCTION OF GROWTH OF NOSE		$508.04	$508.04					
30120	REMOVAL OR SCRAPING OF SKIN ON NOSE	Yes	$351.88	$351.88					
30124	SIMPLE REMOVAL OF CYST AND SKIN GROWTH OF NOSE		$109.89	$127.86					
30125	REMOVAL OF GROWTH UNDER NASAL BONE OR CARTILAGE		$365.84	$365.84					
30130	REMOVAL OF NASAL AIR PASSAGE		$141.94	$141.94					
30140	REMOVAL OF NASAL AIR PASSAGE UNDER LINING TISSUE		$186.05	$186.05					
30150	PARTIAL REMOVAL OF NOSE		$487.26	$487.26					
30160	REMOVAL OF NOSE		$610.09	$610.09					
30200	INJECTION OF MEDICATION INTO NASAL AIR PASSAGE		$33.78	$33.78					
30210	IRRIGATION AND DRAINAGE OF SINUS		$34.44	$37.93					
30220	INSERTION OF IMPLANT TO CLOSE NASAL PASSAGE		$67.86	$88.11					
30300	REMOVAL OF FOREIGN BODY IN NOSE		$36.43	$42.60					
30310	REMOVAL OF FOREIGN BODY IN NOSE UNDER ANESTHESIA		$103.87	$103.87					
30320	REMOVAL OF FOREIGN BODY IN NOSE BY INCISION		$254.33	$254.33					
30400	RESHAPING OF TIP OF NOSE	Yes	$571.59	$571.59					
30410	RESHAPING OF BONE, CARTILAGE, AND/OR TIP OF NOSE	Yes	$802.40	$802.40					
30420	RESHAPING OF BONY CARTILAGE DIVIDING NASAL PASSAGES	Yes	$982.73	$982.73					
30430	REVISION TO RESHAPE NOSE OR SMALL AMOUNT OF TIP OF NOSE AFTER PREVIOUS REPAIR	Yes	$376.86	$376.86					
30435	REVISION TO RESHAPE NASAL BONES AFTER PREVIOUS REPAIR	Yes	$629.04	$629.04					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
30450	REVISION TO RESHAPE NASAL BONES AND TIP OF NOSE AFTER PREVIOUS REPAIR	Yes	$853.53	$853.53					
30460	REVISION OF CONGENITAL NASAL DEFECT TO LENGTHEN TIP OF NOSE		$530.91	$530.91					
30462	RHINOPLASTY FOR NASAL DEFORMITY SECONDARY TO CONGENITAL CLEFT LIP AND/	Yes	$1,062.64	$1,062.64					
30465	REPAIR OF NASAL PASSAGE		$590.90	$590.90					
30468	REPAIR OF COLLAPSED NOSTRIL USING IMPLANT IN SIDE OF NOSE		$136.05	$2,306.48					Added Effective 01/01/2021
30469	REPAIR OF COLLAPSED NASAL VALVE		$125.20	$1,965.79					
30520	RESHAPING OF NASAL CARTILAGE		$376.62	$376.62					
30540	REPAIR OF NASAL PASSAGE THROUGH NOSE		$413.74	$413.74					
30545	REPAIR OF NASAL PASSAGES THROUGH PALATE		$632.63	$632.63					
30560	RELEASE OF NASAL SCAR TISSUE		$44.34	$51.72					
30580	REPAIR OF ABNORMAL DRAINAGE TRACT BETWEEN NASAL SINUSES		$422.43	$422.43					
30600	REPAIR OF ABNORMAL DRAINAGE TRACT BETWEEN MOUTH AND NASAL CAVITY		$282.11	$282.11					
30620	RECONSTRUCTION OF LINING OF NASAL PASSAGE WITH GRAFT		$380.02	$380.02					
30630	REPAIR OF OPENINGS OF NASAL CARTILAGE		$385.04	$385.04					
30801	DESTRUCTION OF SOFT TISSUE OF NASAL PASSAGES		$37.45	$43.75					
30802	DESTRUCTION OF SURFACE SOFT TISSUE OF NASAL PASSAGES		$85.99	$85.99					
30901	SIMPLE CONTROL OF NOSE BLEED		$44.47	$51.98					
30903	COMPLEX CONTROL OF NOSE BLEED		$69.93	$69.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
30905	INITIAL CONTROL OF NOSE BLEED AND INSERTION OF PACKING		$109.95	$109.95					
30906	SUBSEQUENT CONTROL OF NOSEBLEED AND INSERTION OF PACKING		$103.53	$103.53					
30915	TYING OF ETHMOIDAL ARTERY ETHMOIDAL FOR CONTROL OF NOSE BLEED		$342.59	$342.59					
30920	TYING OF INTERNAL NASAL ARTERY FOR CONTROL OF NOSE BLEED		$506.86	$506.86					
30930	THERAPEUTIC FRACTURE OF NASAL PASSAGES		$56.49	$56.49					
30999	OTHER PROCEDURE ON NOSE	Yes	$112.50	$150.00					
31000	IRRIGATION OF NASAL SINUS		$39.26	$45.03					
31002	IRRIGATION OF SPHENOID NASAL SINUS		$61.96	$68.13					
31020	INCISION OF NASAL SINUS THROUGH NOSE		$160.85	$160.85					
31030	CREATION OF WINDOW INTO NASAL SINUS		$377.27	$377.27					
31032	REMOVAL OF NASAL SINUS POLYP		$420.07	$420.07					
31040	INCISION THROUGH SINUS AT CHEEK BONE TO REACH NERVE AND BLOOD VESSEL		$494.04	$494.04					
31050	INCISION OF SPHENOID NASAL SINUS		$324.18	$324.18					
31051	REMOVAL OF NASAL POLYPS		$439.45	$439.45					
31070	SIMPLE INCISION OF FRONTAL NASAL SINUS		$256.49	$256.49					
31075	INCISION OF NASAL SINUS OF SIDE OF FACE		$560.10	$560.10					
31080	INSERTION OF MATERIAL TO STOP GROWTH OF NASAL SINUS LINING THROUGH EYEBROW		$589.10	$589.10					
31081	INSERTION OF MATERIAL TO STOP GROWTH OF NASAL SINUS LINING THROUGH FOREHEAD		$658.46	$658.46					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31084	INSERTION OF MATERIAL TO STOP GROWTH OF NASAL SINUS LINING WITH BONE FLAP THROUGH EYEBROW		$808.43	$808.43					
31085	INSERTION OF MATERIAL TO STOP GROWTH OF NASAL SINUS LINING WITH BONE FLAP THROUGH FOREHEAD		$855.14	$855.14					
31086	INCISION OF EYEBROW AND PLACEMENT OF BONE FLAP TO DRAIN FRONTAL NASAL SINUS		$671.03	$671.03					
31087	INCISION OF FOREHEAD AND PLACEMENT OF BONE FLAP TO DRAIN FRONTAL NASAL SINUS		$667.23	$667.23					
31090	REMOVAL OF TISSUE OR GROWTHS IN 3 OR MORE NASAL SINUSES ON SIDE OF FACE		$608.96	$608.96					
31200	PARTIAL REMOVAL OF NASAL SINUS		$272.91	$272.91					
31201	REMOVAL OF NASAL SINUS FROM WITHIN NASAL PASSAGE		$438.35	$438.35					
31205	REMOVAL OF NASAL SINUS FROM OUTSIDE NASAL PASSAGE		$518.23	$518.23					
31225	REMOVAL OF NASAL SINUS		$1,024.73	$1,024.73					
31230	REMOVAL OF NASAL SINUS AND EYE BONE		$1,261.34	$1,261.34					
31231	DIAGNOSTIC EXAM OF NASAL PASSAGES USING AN ENDOSCOPE		$72.67	$72.67					
31233	EXAM OF NASAL PASSAGE AND SINUS USING AN ENDOSCOPE		$106.31	$199.96					Updated Effective 01/01/2020
31235	EXAM OF NASAL PASSAGE AND SPHENOID SINUS USING AN ENDOSCOPE		$125.95	$228.42					Updated Effective 01/01/2020
31237	BIOPSY OR REMOVAL OF NASAL POLYP OR TISSUE USING AN ENDOSCOPE		$144.86	$144.86					
31238	CONTROL OF BLEEDING OF NOSE USING AN ENDOSCOPE		$162.52	$218.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31239	INCISION OF TEAR DUCT USING AN ENDOSCOPE		$569.91	$569.91					
31240	REMOVAL OF NASAL BREATHING PASSAGES USING AN ENDOSCOPE		$175.16	$175.16					
31241	TYING OF SPHENOPALATINE ARTERY USING AN ENDOSCOPE		$355.09	$355.09					Added Effective 1/1/2018
31242	DESTRUCTION OF NASAL NERVE BY HEAT USING AN ENDOSCOPE		$133.10	$1,963.91					
31243	DESTRUCTION OF NASAL NERVE BY FREEZING USING AN ENDOSCOPE		$133.10	$1,906.66					
31253	COMPLETE EXAM OF NOSE AND SINUSES USING AN ENDOSCOPE		$398.20	$398.20					Added Effective 1/1/2018
31254	PARTIAL REMOVAL OF NASAL SINUS USING AN ENDOSCOPE		$312.80	$312.80					
31255	REMOVAL OF NASAL SINUS USING AN ENDOSCOPE		$470.91	$470.91					
31256	INCISION OF NASAL SINUS USING AN ENDOSCOPE		$207.62	$207.62					
31257	EXAM OF NOSE AND SINUS WITH REMOVAL OF NASAL SINUS USING AN ENDOSCOPE		$354.45	$354.45					Added Effective 1/1/2018
31259	REMOVAL OF TISSUE FROM SPHENOID SINUS USING AN ENDOSCOPE		$375.75	$375.75					Added Effective 1/1/2018
31267	REMOVAL OF NASAL SINUS TISSUE USING AN ENDOSCOPE		$320.18	$320.18					
31276	EXPLORATION OF NASAL SINUS USING AN ENDOSCOPE		$457.67	$457.67					
31287	INCISION OF SPHENOID NASAL SINUS USING AN ENDOSCOPE		$265.20	$265.20					
31288	REMOVAL OF SPHENOID NASAL SINUS TISSUE USING AN ENDOSCOPE		$310.52	$310.52					
31290	REPAIR OF LEAK OF BRAIN AND SPINAL FLUID FROM SINUS BEHIND BRIDGE OF NOSE USING ENDOSCOPE		$863.15	$863.15					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31291	REPAIR OF LEAK OF BRAIN AND SPINAL FLUID FROM SINUS BEHIND EYES USING ENDOSCOPE		$906.69	$906.69					
31292	DECOMPRESSION OF MEDIAL OR INFERIOR WALL OF EYE SOCKET USING AN ENDOSCOPE		$786.12	$786.12					Updated Effective 01/01/2020
31293	DECOMPRESSION OF MEDIAL AND INFERIOR WALL OF EYE SOCKET USING AN ENDOSCOPE		$850.35	$850.35					Updated Effective 01/01/2020
31294	DECOMPRESSION OF OPTIC NERVE USING AN ENDOSCOPE		$974.74	$974.74					Updated Effective 01/01/2020
31295	DILATION OF NASAL SINUS USING AN ENDOSCOPE		$125.55	$1,397.22					Updated Effective 01/01/2020
31296	DILATION OF NASAL SINUS USING AN ENDOSCOPE		$143.11	$1,417.38					Updated Effective 01/01/2020
31297	DILATION OF SPHENOID NASAL SINUS USING AN ENDOSCOPE		$114.36	$1,385.52					Updated Effective 01/01/2020
31298	DILATION OF SPHENOID AND FRONTAL NASAL SINUS USING AN ENDOSCOPE		$204.23	$2,662.75					Updated Effective 01/01/2020
31299	OTHER PROCEDURE ON ACCESSORY SINUSES	Yes	$0.00	$0.00					
31300	REMOVAL OF VOCAL CORD GROWTH OR CARTILAGE ATTACHMENT		$731.38	$731.38					
31360	COMPLETE REMOVAL OF VOICE BOX		$1,018.21	$1,018.21					
31365	COMPLETE REMOVAL OF VOICE BOX WITH EXTENSIVE DISSECTION OF NECK		$1,443.84	$1,443.84					
31367	REMOVAL OF VOICE BOX		$1,064.49	$1,064.49					
31368	REMOVAL OF VOICE BOX WITH EXTENSIVE DISSECTION OF NECK		$1,488.14	$1,488.14					
31370	PARTIAL REMOVAL OF VOICE BOX		$1,049.34	$1,049.34					
31375	PARTIAL REMOVAL OF VOICE BOX THROUGH FRONT AND SIDE OF NECK		$978.80	$978.80					
31380	PARTIAL REMOVAL OF VOICE BOX AND ADJOINING TISSUE		$1,051.75	$1,051.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31382	PARTIAL REMOVAL OF VOICE BOX AND CARTILAGE		$1,016.87	$1,016.87					
31390	REMOVAL OF VOICE BOX, THROAT, MUSCLE, LYMPH NODES, AND GLANDS		$1,445.36	$1,445.36					
31395	REMOVAL OF VOICE BOX AND THROAT, MUSCLE, LYMPH NODES, AND GLANDS WITH RECONSTRUCTION OF DEFECT		$1,774.98	$1,774.98					
31400	REMOVAL OR REPAIR OF VOICE BOX CARTILAGE		$497.44	$497.44					
31420	REMOVAL OF CARTILAGE ATTACHING TONGUE		$502.98	$502.98					
31500	EMERGENT INSERTION OF BREATHING TUBE INTO WINDPIPE USING AN ENDOSCOPE		$102.35	$102.35					
31502	CHANGE OF BREATHING TUBE IN WINDPIPE		$36.33	$36.33					
31505	DIAGNOSTIC EXAM OF VOICE BOX USING AN ENDOSCOPE WITH MIRROR		$24.88	$30.65					
31510	BIOPSY OF VOICE BOX USING AN ENDOSCOPE WITH MIRROR		$72.79	$72.79					
31511	REMOVAL OF FOREIGN BODY IN VOICE BOX USING AN ENDOSCOPE WITH MIRROR		$91.56	$91.56					
31512	REMOVAL OF GROWTH OF VOICE BOX USING AN ENDOSCOPE WITH MIRROR		$113.61	$113.61					
31513	INJECTION OF VOCAL CORD USING AN ENDOSCOPE WITH MIRROR		$142.74	$142.74					
31515	ASPIRATION OF VOICE BOX USING AN ENDOSCOPE		$86.53	$86.53					
31520	DIAGNOSTIC EXAM OF VOICE BOX USING AN ENDOSCOPE, NEWBORN		$123.48	$123.48					
31525	DIAGNOSTIC EXAM OF VOICE BOX USING AN ENDOSCOPE		$112.27	$141.77					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31526	DIAGNOSTIC EXAM OF VOICE BOX USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$172.89	$172.89					
31527	INSERTION OF DEVICE TO CLOSE OPENING OF VOICE BOX USING AN ENDOSCOPE		$183.44	$183.44					
31528	INITIAL DILATION OF VOICE BOX USING AN ENDOSCOPE		$148.18	$148.18					
31529	SUBSEQUENT DILATION OF VOICE BOX USING AN ENDOSCOPE		$150.70	$150.70					
31530	REMOVAL OF FOREIGN BODY IN VOICE BOX USING AN ENDOSCOPE		$206.31	$206.31					
31531	REMOVAL OF FOREIGN BODY IN VOICE BOX USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$252.24	$252.24					
31535	BIOPSY OF VOICE BOX USING AN ENDOSCOPE		$211.22	$211.22					
31536	BIOPSY OF VOICE BOX USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$216.25	$216.25					
31540	BIOPSY OF VOICE BOX USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$277.90	$277.90					
31541	REMOVAL OF GROWTH OF THROAT AND/OR STRIPPING OF VOCAL CORDS USING AN ENDOSCOPE		$244.99	$244.99					
31545	REMOVAL OF VOCAL CORD GROWTHS AND RECONSTRUCTION WITH LOCAL TISSUE FLAP USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$285.05	$285.05					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31546	REMOVAL OF VOCAL CORD GROWTHS AND RECONSTRUCTION WITH GRAFT USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$435.71	$435.71					
31551	REPAIR OF NARROWED VOICE BOX WITH GRAFT (YOUNGER THAN 12 YEARS)		$1,132.05	$1,132.05					Added Effective 1/1/2017
31552	REPAIR OF NARROWED VOICE BOX WITH GRAFT (12 YEARS OR OLDER)		$1,140.36	$1,140.36					Added Effective 1/1/2017
31553	REPAIR OF NARROWED VOICE BOX WITH GRAFT AND PLACEMENT OF INDWELLING STENT (YOUNGER THAN 12 YEARS)		$1,242.13	$1,242.13					Added Effective 1/1/2017
31554	REPAIR OF NARROWED VOICE BOX WITH GRAFT AND PLACEMENT OF INDWELLING STENT (12 YEARS OR OLDER)		$1,303.99	$1,303.99					Added Effective 1/1/2017
31560	REMOVAL OF VOICE BOX CARTILAGE USING AN ENDOSCOPE		$306.45	$306.45					
31561	REMOVAL OF VOICE BOX CARTILAGE USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$338.20	$338.20					
31570	INJECTION INTO VOCAL CORDS USING AN ENDOSCOPE		$194.52	$260.91					
31571	INJECTION INTO VOCAL CORDS USING AN ENDOSCOPE WITH OPERATING MICROSCOPE OR TELESCOPE		$241.02	$241.02					
31572	REMOVAL OR DESTRUCTION OF GROWTH OF SIDE OF VOICE BOX USING AN ENDOSCOPE		$145.61	$377.97					Added Effective 1/1/2017
31573	INJECTION OF DRUG INTO SIDE OF VOICE BOX USING AN ENDOSCOPE		$119.98	$203.94					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31574	INJECTION OF SUBSTANCE TO AUGMENT VOICE BOX USING AN ENDOSCOPE		$119.98	$766.12					Added Effective 1/1/2017
31575	DIAGNOSTIC EXAM OF VOICE BOX USING A FLEXIBLE ENDOSCOPE		$58.04	$58.04					
31576	BIOPSY OF VOICE BOX USING A FLEXIBLE ENDOSCOPE		$133.42	$133.42					
31577	REMOVAL OF FOREIGN BODY IN VOICE BOX USING A FLEXIBLE ENDOSCOPE		$166.23	$166.23					
31578	REMOVAL OF FOREIGN BODY IN VOICE BOX USING A FLEXIBLE ENDOSCOPE		$192.36	$192.36					
31579	EXAM TO ASSESS MOVEMENT OF VOCAL CORD FLAPS USING AN ENDOSCOPE		$103.88	$135.13					
31580	REPAIR OF CONGENITAL VOCAL CORD DEFECT WITH INSERTION OF INDWELLING STENT		$740.60	$740.60					
31584	INCISION OF VOICE BOX TO REPAIR FRACTURE		$916.59	$916.59					
31587	REPAIR OF SPLIT OF VOICE BOX		$446.74	$446.74					
31590	RELOCATION OF NERVE AND MUSCLE TO RESTORE VOICE BOX FUNCTION		$356.18	$356.18					
31591	REPAIR OF SIDE OF VOICE BOX BY MOVING VOCAL CORD TO MIDDLE		$821.93	$821.93					Added Effective 1/1/2017
31592	PARTIAL REMOVAL OF WINDPIPE AND CARTILAGE		$1,340.46	$1,340.46					Added Effective 1/1/2017
31599	OTHER PROCEDURE ON VOICE BOX	Yes	$354.50	$460.85					
31600	INCISION OF WINDPIPE FOR INSERTION OF BREATHING TUBE (OLDER THAN 2 YEARS)		$230.38	$230.38					
31601	INCISION OF WINDPIPE FOR INSERTION OF BREATHING TUBE (2 YEARS OR YOUNGER)		$281.53	$281.53					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31603	EMERGENT INCISION OF WINDPIPE THROUGH NECK FOR INSERTION OF BREATHING TUBE		$251.27	$251.27					
31605	EMERGENT INCISION OF WINDPIPE FOR INSERTION OF BREATHING TUBE		$229.58	$229.58					
31610	CREATION OF PERMANENT OPENING OF WINDPIPE FOR BREATHING		$432.19	$432.19					
31611	CREATION OF OPENING OF WINDPIPE AND INSERTION OF SPEECH PROSTHESIS		$345.87	$345.87					
31612	PUNCTURE OF WINDPIPE FOR ASPIRATION AND/OR INJECTION		$61.00	$61.00					
31613	SIMPLE REVISION OF PERMANENT OPENING OF WINDPIPE FOR BREATHING		$190.50	$190.50					
31614	REVISION OF PERMANENT OPENING OF WINDPIPE FOR BREATHING WITH FLAP ROTATION		$377.81	$377.81					
31615	EXAM OF WINDPIPE AND LUNG AIRWAYS THROUGH PERMANENT WINDPIPE OPENING USING AN ENDOSCOPE		$118.98	$118.98					
31622	DIAGNOSTIC EXAM OF LUNG AIRWAY USING AN ENDOSCOPE		$186.18	$186.18					
31623	EXAM OF LUNG AIRWAYS USING AN ENDOSCOPE		$127.23	$181.17					
31624	IRRIGATION AND SUCTION OF LUNG AIRWAYS TO OBTAIN CELLS USING AN ENDOSCOPE		$128.64	$182.84					
31625	BIOPSY OF LUNG AIRWAY USING AN ENDOSCOPE		$210.12	$210.12					
31626	PLACEMENT OF RADIATION THERAPY MARKERS INTO LUNG AIRWAYS USING AN ENDOSCOPE		$161.11	$310.89					
31627	COMPUTER-ASSISTED IMAGE-GUIDED NAVIGATION OF LUNG AIRWAYS USING AN ENDOSCOPE		$78.26	$829.71					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31628	BIOPSY OF LOBE OF LUNG USING AN ENDOSCOPE, 1 LOBE		$251.92	$251.92					
31629	NEEDLE BIOPSY OF WINDPIPE CARTILAGE, AIRWAY, AND/OR LUNG USING AN ENDOSCOPE		$222.75	$222.75					
31630	DILATION OF WINDPIPE CARTILAGE OR TREATMENT OF BROKEN WINDPIPE CARTILAGE USING AN ENDOSCOPE		$224.02	$224.02					
31631	PLACEMENT OF STENT INTO WINDPIPE USING AN ENDOSCOPE		$245.57	$245.57					
31632	BIOPSY OF LOBE OF LUNG USING AN ENDOSCOPE, EACH ADDITIONAL LOBE		$41.99	$53.30					
31633	NEEDLE BIOPSY OF LOBE OF LUNG USING AN ENDOSCOPE, EACH ADDITIONAL LOBE		$52.65	$65.75					
31634	EXAM OF LUNG AIRWAYS WITH REPAIR OF AIR LEAK USING AN ENDOSCOPE		$180.39	$1,575.18					
31635	REMOVAL OF FOREIGN BODY IN LUNG AIRWAYS USING AN ENDOSCOPE		$242.37	$242.37					
31636	PLACEMENT OF STENT IN LUNG AIRWAY USING AN ENDOSCOPE, FIRST STENT		$180.52	$180.52					
31637	PLACEMENT OF STENT IN LUNG AIRWAY USING AN ENDOSCOPE, EACH ADDITIONAL STENT		$64.53	$64.53					
31638	REVISION OF PREVIOUSLY INSERTED LUNG AIRWAY STENT USING AN ENDOSCOPE		$200.75	$200.75					
31640	REMOVAL OF GROWTH OF LUNG AIRWAYS USING AN ENDOSCOPE		$295.88	$295.88					
31641	DESTRUCTION OF GROWTH OR NARROWING OF LUNG AIRWAY USING AN ENDOSCOPE		$341.25	$341.25					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31643	PLACEMENT OF TUBE FOR RADIATION DELIVERY IN LUNG AIRWAY USING AN ENDOSCOPE		$148.43	$161.39					
31645	ASPIRATION OF INITIAL SECRETION OF LUNG AIRWAY USING AN ENDOSCOPE		$197.11	$197.11					
31646	ASPIRATION OF SUBSEQUENT SECRETIONS OF LUNG AIRWAY USING AN ENDOSCOPE DURING SAME HOSPITAL STAY		$168.45	$168.45					
31652	EXAM OF LUNG AIRWAYS AND SAMPLING OF LYMPH NODES USING AN ENDOSCOPE AND ULTRASOUND GUIDANCE, 1-2 LYMPH NODES		$191.54	$681.82					Added Effective 1/1/2016
31653	EXAM OF LUNG AIRWAYS AND SAMPLING OF LYMPH NODES USING AN ENDOSCOPE AND ULTRASOUND GUIDANCE, 3 OR MORE LYMPH NODES		$211.44	$725.26					Added Effective 1/1/2016
31654	EXAM OF LUNG AIRWAYS WITH DIAGNOSTIC OR THERAPEUTIC PROCEDURE ON GROWTHS USING AN ENDOSCOPE AND ULTRASOUND		$55.47	$84.97					Added Effective 1/1/2016
31717	INSERTION OF TUBE INTO AIRWAY OF LUNG FOR BIOPSY		$83.25	$83.25					
31720	INSERTION OF TUBE INTO AIRWAY FOR ASPIRATION OF SECRETIONS		$53.14	$53.14					
31725	INSERTION OF TUBE INTO WINDPIPE AND AIRWAYS OF LUNG FOR ASPIRATION OF SECRETIONS USING AN ENDOSCOPE AT BEDSIDE		$98.98	$98.98					
31730	INSERTION OF NEEDLE WIRE DILATOR OR INDWELLING TUBE FOR OXYGEN THERAPY		$155.47	$155.47					
31750	REPAIR OF WINDPIPE CARTILAGE THROUGH NECK		$530.22	$530.22					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
31755	CREATION OF DRAINAGE TRACT FROM THROAT TO WINDPIPE		$822.78	$822.78					
31760	REPAIR OF WINDPIPE CARTILAGE THROUGH CHEST		$967.85	$967.85					
31766	RECONSTRUCTION OF UPPER BREAST BONE THROUGH CHEST		$1,366.42	$1,366.42					
31770	REPAIR OF LUNG AIRWAY WITH GRAFT		$1,075.36	$1,075.36					
31775	REPAIR OF NARROWED AREA OF LUNG AIRWAY		$1,135.69	$1,135.69					
31780	REMOVAL OF NARROWED AREA OF WINDPIPE IN NECK WITH SUTURE REPAIR		$988.97	$988.97					
31781	REMOVAL OF NARROWED AREA OF WINDPIPE IN NECK AND CHEST WITH SUTURE REPAIR		$1,151.86	$1,151.86					
31785	REMOVAL OF GROWTH OF WINDPIPE CARTILAGE		$741.29	$741.29					
31786	REMOVAL OF GROWTH OF WINDPIPE CARTILAGE THROUGH CHEST		$1,072.57	$1,072.57					
31800	SUTURE OF INJURY OF WINDPIPE IN NECK		$348.55	$348.55					
31805	SUTURE OF INJURY OF WINDPIPE IN CHEST		$667.09	$667.09					
31820	CLOSURE OF PERMANENT WINDPIPE OPENING OR ABNORMAL DRAINAGE TRACT		$227.51	$227.51					
31825	CLOSURE OF PERMANENT WINDPIPE OPENING OR ABNORMAL DRAINAGE TRACT WITH PLASTIC REPAIR		$333.36	$333.36					
31830	REVISION OF PERMANENT WINDPIPE OPENING SCAR		$233.38	$233.38					
31899	OTHER PROCEDURE ON WINDPIPE OR LUNG AIRWAY	Yes	$0.00	$0.00					
32035	REMOVAL OF RIB WITH CREATION OF TRACT FOR DRAINAGE OF INFECTED MATERIAL		$403.89	$403.89					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32036	CREATION OF OPEN FLAP TRACT FOR DRAINAGE OF INFECTED MATERIAL FROM LINING AROUND LUNG		$445.15	$445.15					
32096	BIOPSY OF FLUID COLLECTION OF LUNG		$656.11	$656.11					
32097	BIOPSY OF GROWTH OF LUNG		$656.11	$656.11					
32098	THORACOTOMY, WITH BIOPSY(IES) OF PLEURA		$616.63	$616.63					
32100	BIOPSY OF LUNG LINING		$648.00	$648.00					
32110	REPAIR OF TEAR OF LUNG AND/OR CONTROL OF TRAUMATIC BLEEDING THROUGH CHEST		$702.64	$702.64					
32120	INCISION OF CHEST CAVITY FOR COMPLICATIONS AFTER SURGERY		$577.55	$577.55					
32124	RELEASE OF LUNG LINING THROUGH CHEST		$667.86	$667.86					
32140	REMOVAL OF CYSTS OF LUNG THROUGH CHEST		$746.82	$746.82					
32141	REMOVAL OF AIR SAC OF LUNG THROUGH CHEST		$777.66	$777.66					
32150	REMOVAL OF FOREIGN BODY OR CLOT IN LINING OF LUNG THROUGH CHEST		$690.63	$690.63					
32151	REMOVAL OF FOREIGN BODY IN LUNG		$643.16	$643.16					
32160	MASSAGE OF HEART MUSCLE THROUGH CHEST		$491.04	$491.04					
32200	DRAINAGE OF ABSCESS OR CYST OF INFECTED LUNG		$591.80	$591.80					
32215	CREATION OF SCARRING ON SURFACE OF LUNG		$530.98	$530.98					
32220	REMOVAL OF LINING OF LUNG FOR LUNG EXPANSION		$1,014.23	$1,014.23					
32225	PARTIAL REMOVAL OF LINING OF LUNG FOR LUNG EXPANSION		$728.03	$728.03					
32310	REMOVAL OF LINING OF CHEST CAVITY		$716.82	$716.82					
32320	REMOVAL OF LINING OF CHEST CAVITY AND LINING OF LUNG		$1,130.02	$1,130.02					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32400	NEEDLE BIOPSY OF LINING OF LUNG		$94.26	$94.26					
32405	NEEDLE BIOPSY OF LUNG OR CHEST TISSUE, ACCESSED THROUGH THE SKIN		$117.87	$117.87					
32408	CORE NEEDLE BIOPSY OF LUNG OR CENTER CAVITY OF CHEST (MEDIASTINUM), ACCESSED THROUGH SKIN		$123.66	$738.33					Added Effective 01/01/2021
32440	REMOVAL OF LUNG		$1,146.00	$1,146.00					
32442	REMOVAL OF LUNG WITH PORTION OF WINDPIPE CARTILAGE		$1,290.43	$1,290.43					
32445	REMOVAL OF LUNG AND LINING OF CHEST CAVITY		$1,328.82	$1,328.82					
32480	REMOVAL OF LOBE OF LUNG		$1,110.19	$1,110.19					
32482	REMOVAL OF 2 LOBES OF LUNG		$1,082.51	$1,082.51					
32484	REMOVAL OF SEGMENT OF LUNG TISSUE		$1,111.27	$1,111.27					
32486	REMOVAL OF REMAINING LUNG AFTER PREVIOUS PARTIAL REMOVAL OF LUNG		$1,189.69	$1,189.69					
32488	REMOVAL OF REMAINING LUNG AFTER PREVIOUS PARTIAL REMOVAL OF LUNG		$1,276.17	$1,276.17					
32491	REMOVAL OF LUNG SEGMENT TO REDUCE LUNG VOLUME THROUGH CHEST		$1,083.94	$1,083.94					
32501	REPAIR OF LUNG AIRWAY AND REMOVAL OF SEGMENT OF LUNG		$270.23	$270.23					
32503	REMOVAL OF GROWTH OF LUNG		$1,388.84	$1,388.84					
32504	REMOVAL OF GROWTH OF LUNG AND RECONSTRUCTION OF CHEST WALL		$1,590.47	$1,590.47					
32505	INITIAL REMOVAL OF WEDGE OF LUNG TISSUE		$757.06	$757.06					
32506	REMOVAL OF LUNG TISSUE WEDGE THROUGH CHEST, EACH ADDITIONAL REMOVAL		$128.37	$128.37					
32507	REMOVAL OF LUNG TISSUE WEDGE FOR DIAGNOSIS		$128.37	$128.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32540	REMOVAL OF INFECTED MATERIAL BETWEEN LUNG AND CHEST WALL		$753.39	$753.39					
32550	INSERTION OF INDWELLING TUBE FOR DRAINAGE OF LUNG FLUID		$180.99	$580.35					
32551	REMOVAL OF FLUID FROM BETWEEN LUNG AND CHEST CAVITY		$139.15	$139.15					
32552	REMOVAL OF INDWELLING TUBE IN LINING OF LUNG		$118.88	$133.43					
32553	INSERTION OF DEVICE IN CHEST CAVITY FOR RADIATION THERAPY GUIDANCE		$154.55	$419.41					
32554	ASPIRATION OF FLUID FROM CHEST CAVITY		$73.02	$684.72					
32555	ASPIRATION OF FLUID FROM CHEST CAVITY USING IMAGING GUIDANCE		$91.46	$442.92					
32556	DRAINAGE OF FLUID FROM CHEST CAVITY WITH INSERTION OF INDWELLING TUBE		$100.34	$466.79					
32557	DRAINAGE OF FLUID FROM CHEST CAVITY WITH INSERTION OF INDWELLING TUBE USING IMAGING GUIDANCE		$132.93	$851.61					
32560	INSTILLATION OF AGENT ONTO LUNG SURFACE USING CHEST TUBE		$89.01	$221.93					
32561	INITIAL INSTILLATION OF AGENT ONTO LUNG LINING USING CHEST TUBE		$54.42	$69.98					
32562	SUBSEQUENT INSTILLATION OF AGENT ONTO LUNG LINING USING CHEST TUBE		$48.70	$62.22					
32601	DIAGNOSTIC EXAM OF LUNGS, HEART SAC, CHEST CAVITY, OR LUNG LINING USING AN ENDOSCOPE		$267.14	$267.14					
32604	BIOPSY OF HEART SAC USING AN ENDOSCOPE		$376.99	$376.99					
32606	BIOPSY OF TISSUE OF CHEST USING AN ENDOSCOPE		$365.84	$365.84					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32607	BIOPSY OF FLUID COLLECTION OF LUNG USING AN ENDOSCOPE		$251.88	$251.88					
32608	BIOPSY OF GROWTH OF LUNG USING AN ENDOSCOPE		$309.51	$309.51					
32609	BIOPSY OF LUNG LINING USING AN ENDOSCOPE		$213.57	$213.57					
32650	ADHESION OF LININGS OF LUNG USING AN ENDOSCOPE		$530.98	$530.98					
32651	PARTIAL REMOVAL OF CHEST CAVITY LINING AND LUNG LINING USING AN ENDOSCOPE		$728.03	$728.03					
32652	REMOVAL OF CHEST CAVITY LINING AND LUNG LINING USING AN ENDOSCOPE		$1,014.23	$1,014.23					
32653	REMOVAL OF FOREIGN BODY IN LINING OF CHEST CAVITY USING AN ENDOSCOPE		$690.63	$690.63					
32654	CONTROL OF TRAUMATIC BLEEDING IN CHEST USING AN ENDOSCOPE		$702.64	$702.64					
32655	REMOVAL OF AIR SAC OF LUNG USING AN ENDOSCOPE		$785.87	$785.87					
32656	REMOVAL OF LINING OF LUNG USING AN ENDOSCOPE		$770.74	$770.74					
32658	REMOVAL OF BLOOD CLOT OR FOREIGN BODY IN HEART SAC USING AN ENDOSCOPE		$742.02	$742.02					
32659	REMOVAL OF BLOOD CLOT OR FOREIGN BODY IN HEART SAC USING AN ENDOSCOPE		$757.99	$757.99					
32661	REMOVAL OF CYST OR GROWTH OF HEART SAC USING AN ENDOSCOPE		$656.49	$656.49					
32662	REMOVAL OF CYST OR GROWTH OF CHEST CAVITY USING AN ENDOSCOPE		$919.29	$919.29					
32663	EXAM OF LUNG WITH REMOVAL OF LUNG LOBE USING AN ENDOSCOPE		$1,049.94	$1,049.94					
32664	REMOVAL OF NERVES TO CHEST CAVITY USING AN ENDOSCOPE		$733.08	$733.08					
32665	REPAIR OF ESOPHAGUS USING AN ENDOSCOPE		$880.74	$880.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32666	INITIAL REMOVAL OF WEDGE OF LUNG TISSUE USING AN ENDOSCOPE		$707.35	$707.35					
32667	REMOVAL OF WEDGE OF TISSUE OF LUNG USING AN ENDOSCOPE, EACH ADDITIONAL REMOVAL		$128.37	$128.37					
32668	REMOVAL OF WEDGE OF TISSUE OF LUNG USING AN ENDOSCOPE, EACH ADDITIONAL REMOVAL		$129.08	$129.08					
32669	WITH REMOVAL OF A SINGLE LUNG SEGMENT (SEGMENTECTOMY)		$1,091.92	$1,091.92					
32670	REMOVAL OF 2 LOBES OF LUNG USING AN ENDOSCOPE		$1,304.16	$1,304.16					
32671	REMOVAL OF LUNG USING AN ENDOSCOPE		$1,448.08	$1,448.08					
32672	PARTIAL REMOVAL OF LUNG TO REDUCE LUNG VOLUME USING AN ENDOSCOPE		$1,237.88	$1,237.88					
32673	REMOVAL OF THYMUS GLAND USING AN ENDOSCOPE		$976.84	$976.84					
32674	REMOVAL OF LYMPH NODES OF CHEST CAVITY USING AN ENDOSCOPE		$176.04	$176.04					
32701	DELINEATION OF THORACIC TARGETS FOR RADIATION THERAPY		$177.96	$177.96					
32800	REPAIR LUNG HERNIA THROUGH CHEST WALL		$615.54	$615.54					
32810	CLOSURE OF CHEST WALL AFTER DRAINAGE OF INFECTED LUNG		$543.35	$543.35					
32815	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM CHEST CAVITY TO LUNG AIRWAY		$1,098.67	$1,098.67					
32820	RECONSTRUCTION OF CHEST WALL AFTER INJURY		$1,169.03	$1,169.03					
32851	TRANSPLANTATION OF LUNG		$1,837.68	$1,837.68					
32852	TRANSPLANTATION OF LUNG ON HEART-LUNG MACHINE		$1,992.98	$1,992.98					
32853	TRANSPLANTATION OF 2 LUNGS		$2,297.38	$2,297.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
32854	TRANSPLANTATION OF 2 LUNGS ON HEART-LUNG MACHINE		$2,452.91	$2,452.91					
32855	PREPARATION OF DONOR LUNG		$0.00	$0.00					
32856	PREPARATION OF 2 DONOR LUNGS		$0.00	$0.00					
32900	REMOVAL OF RIBS		$799.08	$799.08					
32905	REMOVAL OF INFECTED AREA OF CHEST CAVITY		$966.82	$966.82					
32906	REMOVAL OF INFECTED AREA OF CHEST CAVITY AND CLOSURE OF ABNORMAL DRAINAGE TRACT		$1,223.12	$1,223.12					
32940	RELEASE OF LINING COVERING LUNG FROM CHEST WALL		$879.78	$879.78					
32960	INJECTION OF AIR INTO CHEST CAVITY TO COLLAPSE LUNG		$82.10	$82.10					
32994	DESTRUCTION OF GROWTH OF LUNG USING EXTREME COLD		$389.03	$4,596.60					Added Effective 1/1/2018
32997	IRRIGATION AND DRAINAGE OF LUNG		$245.69	$245.69					
32998	DESTRUCTION OF GROWTH OF LUNG USING RADIOFREQUENCY		$217.55	$1,913.89					
32999	ER PROCEDURE ON LUNG AND LUNG LINING	Yes	$0.00	$0.00					
33016	OTHER PROCEDURE ON LUNG AND LUNG LINING		$190.73	$190.73					Added Effective 01/01/2020
33017	DRAINAGE OF HEART SAC USING IMAGING GUIDANCE		$197.97	$197.97					Added Effective 01/01/2020
33018	DRAINAGE OF HEART SAC USING TUBE AND IMAGING GUIDANCE (5 YEARS OR YOUNGER OR ANY AGE WITH CONGENITAL HEART DEFECT)		$226.18	$226.18					Added Effective 01/01/2020
33019	DRAINAGE OF HEART SAC USING TUBE AND CT IMAGING GUIDANCE		$183.27	$183.27					Added Effective 01/01/2020
33020	REMOVAL OF BLOOD CLOT OR FOREIGN BODY IN HEART SAC		$742.02	$742.02					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33025	SURGICAL REMOVAL OF PIECE OF SAC COVERING HEART FOR DRAINAGE		$757.99	$757.99					
33030	REMOVAL OF HEART SAC		$1,146.74	$1,146.74					
33031	REMOVAL OF HEART SAC ON HEART-LUNG MACHINE		$992.45	$992.45					
33050	REMOVAL OF GROWTH OR CYST OF FROM HEART SAC		$656.49	$656.49					
33120	EXCISION OF INTRACARDIAC TUMOR, RESECTION WITH CARDIOPULMONARY BYPASS		$1,562.79	$1,562.79					
33130	REMOVAL OF GROWTH ON OUTSIDE OF HEART		$989.12	$989.12					
33140	LASER TREATMENT OF HEART MUSCLE TO IMPROVE BLOOD FLOW		$962.45	$962.45					
33141	SER TREATMENT OF HEART MUSCLE TO IMPROVE BLOOD FLOW DURING PROCEDURE		$205.14	$205.14					
33202	INSERTION OF ELECTRODE TO OUTER LAYER OF HEART		$579.83	$579.83					
33203	INSERTION OF ELECTRODE TO OUTER LAYER OF HEART USING AN ENDOSCOPE		$595.61	$595.61					
33206	INSERTION OF PACEMAKER AND UPPER HEART CHAMBER ELECTRODE		$417.13	$417.13					
33207	INSERTION OF PACEMAKER AND LOWER HEART CHAMBER ELECTRODE		$487.60	$487.60					
33208	INSERTION OF PACEMAKER AND UPPER AND LOWER HEART CHAMBER ELECTRODE		$505.85	$505.85					
33210	INSERTION OF TEMPORARY PACEMAKER LEAD IN SINGLE HEART CHAMBER		$191.91	$191.91					
33211	INSERTION OF TEMPORARY PACEMAKER LEAD IN UPPER AND LOWER HEART CHAMBERS		$194.84	$194.84					
33212	INSERTION OF PACEMAKER PULSE GENERATOR WITH EXISTING SINGLE LEAD		$318.56	$318.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33213	INSERTION OF PACEMAKER PULSE GENERATOR WITH EXISTING DUAL LEADS		$346.15	$346.15					
33214	INSERTION OF 2 CHAMBER PACEMAKER SYSTEM		$388.62	$388.62					
33215	REPOSITIONING OF PACEMAKER OR DEFIBRILLATOR ELECTRODE		$227.30	$227.30					
33216	INSERTION OF 1 ELECTRODE FOR PERMANENT PACEMAKER OR DEFIBRILLATOR		$296.78	$296.78					
33217	INSERTION OF 2 ELECTRODES FOR PERMANENT PACEMAKER OR DEFIBRILLATOR		$307.35	$307.35					
33218	REPAIR OF ELECTRODE FOR PERMANENT PACEMAKER OR DEFIBRILLATOR		$285.48	$285.48					
33220	REPAIR OF 2 ELECTRODES FOR PERMANENT PACEMAKER OR DEFIBRILLATOR		$287.83	$287.83					
33221	INSERTION OF PACEMAKER PULSE GENERATOR WITH EXISTING MULTIPLE LEADS		$284.52	$284.52					
33222	RELOCATION OF PACEMAKER SKIN POCKET		$312.11	$312.11					
33223	RELOCATION OF DEFIBRILLATOR SKIN POCKET		$357.60	$357.60					
33224	INSERTION OF LEFT LOWER HEART ELECTRODE AND ATTACHMENT TO PACEMAKER OR DEFIBRILLATOR		$370.55	$370.55					
33225	INSERTION OF LEFT LOWER HEART ELECTRODE FOR PACEMAKER OR DEFIBRILLATOR		$329.30	$329.30					
33226	REPOSITIONING OF LEFT LOWER HEART ELECTRODE		$356.85	$356.85					
33227	REMOVAL AND REPLACEMENT OF SINGLE LEAD PERMANENT PACEMAKER		$271.44	$271.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33228	REMOVAL AND REPLACEMENT OF DUAL LEAD PERMANENT PACEMAKER		$283.14	$283.14					
33229	REMOVAL AND REPLACEMENT OF MULTIPLE LEAD PERMANENT PACEMAKER		$294.84	$294.84					
33230	VAL AND REPLACEMENT OF MULTIPLE LEAD PERMANENT PACEMAKER		$306.31	$306.31					
33231	INSERTION OF DEFIBRILLATOR WITH EXISTING MULTIPLE LEADS		$318.01	$318.01					
33233	REMOVAL OF PERMANENT PACEMAKER PULSE GENERATOR		$159.17	$159.17					
33234	REMOVAL OF SINGLE ELECTRODE FROM RIGHT HEART		$391.36	$391.36					
33235	REMOVAL OF DUAL ELECTRODES FROM RIGHT HEART		$444.49	$444.49					
33236	REMOVAL OF PERMANENT PACEMAKER AND ELECTRODES, SINGLE LEAD		$465.43	$465.43					
33237	REMOVAL OF PERMANENT PACEMAKER AND ELECTRODES, DUAL LEAD		$657.32	$657.32					
33238	REMOVAL OF PERMANENT PACEMAKER VENOUS ELECTRODES		$740.05	$740.05					
33240	INSERTION OF DEFIBRILLATOR WITH EXISTING SINGLE LEAD		$376.96	$376.96					
33241	REMOVAL OF DEFIBRILLATOR		$155.53	$155.53					
33243	REMOVAL OF DEFIBRILLATOR ELECTRODES THROUGH INCISION		$909.36	$909.36					
33244	REMOVAL OF DEFIBRILLATOR ELECTRODES THROUGH INCISION		$524.08	$524.08					
33249	INSERTION OF IMPLANTABLE DEFIBRILLATOR SYSTEM		$894.41	$894.41					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33250	DESTRUCTION OF ABNORMAL HEART BEAT PATHWAY		$904.33	$904.33					
33251	DESTRUCTION OF ABNORMAL HEART BEAT PATHWAY ON HEART-LUNG MACHINE		$1,180.43	$1,180.43					
33254	PARTIAL DESTRUCTION AND RECONSTRUCTION OF UPPER HEART CHAMBER		$1,016.17	$1,016.17					
33255	EXTENSIVE DESTRUCTION AND RECONSTRUCTION OF UPPER HEART CHAMBER		$1,225.95	$1,225.95					
33256	EXTENSIVE DESTRUCTION AND RECONSTRUCTION OF UPPER HEART CHAMBER ON HEART-LUNG MACHINE		$1,466.00	$1,466.00					
33257	PARTIAL DESTRUCTION AND RECONSTRUCTION OF RIGHT UPPER HEART CHAMBER		$474.42	$474.42					
33258	EXTENSIVE DESTRUCTION AND RECONSTRUCTION OF RIGHT UPPER HEART CHAMBER		$536.43	$536.43					
33259	EXTENSIVE DESTRUCTION AND RECONSTRUCTION OF RIGHT UPPER HEART CHAMBER ON HEART-LUNG MACHINE		$703.77	$703.77					
33261	DESTRUCTION OF TISSUE AND RECONSTRUCTION OF RIGHT LOWER HEART CHAMBER ON HEART-LUNG MACHINE		$1,103.05	$1,103.05					
33262	REMOVAL AND REPLACEMENT OF SINGLE LEAD DEFIBRILLATOR		$295.16	$295.16					
33263	REMOVAL AND REPLACEMENT OF DUAL LEAD DEFIBRILLATOR		$306.86	$306.86					
33264	REMOVAL AND REPLACEMENT OF MULTIPLE LEAD DEFIBRILLATOR		$318.56	$318.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33265	LIMITED RECONSTRUCTION OF UPPER HEART CHAMBER AND ALTERATION OF ELECTRICAL PATHWAY USING AN ENDOSCOPE		$1,016.17	$1,016.17					
33266	EXTENSIVE RECONSTRUCTION OF UPPER HEART CHAMBER AND ALTERATION OF ELECTRICAL PATHWAY USING AN ENDOSCOPE		$1,394.19	$1,394.19					
33267	EXCLUSION OF APPENDAGE OF LEFT UPPER		$859.95	$859.95					Added 1/1/2022
33268	EXCL LAA OPN OTH PX ANY METH		$108.01	$108.01					Added 1/1/2022
33269	EXCLUSION OF APPENDAGE OF LEFT UPPER		$679.06	$679.06					Added 1/1/2022
33270	INSERTION OR REPLACEMENT OF DEFIBRILLATOR WITH ELECTRODE		$471.19	$471.19					Added effective 1/1/2015
33271	INSERTION OF DEFIBRILLATOR ELECTRODE		$395.84	$395.84					Added effective 1/1/2015
33272	REMOVAL OF DEFIBRILLATOR ELECTRODE		$290.94	$290.94					Added effective 1/1/2015
33273	REPOSITIONING OF DEFIBRILLATOR ELECTRODE		$321.92	$321.92					Added effective 1/1/2015
33274	INSERTION OF PERMANENT LEADLESS PACEMAKER USING IMAGING GUIDANCE		$395.51	$395.51					Effective 1/1/2019
33275	REMOVAL OF PERMANENT LEADLESS PACEMAKER USING IMAGING GUIDANCE		$426.03	$426.03					Updated Effective 01/01/2020
33276	INSERTION OF PHRENIC NERVE STIMULATOR GENERATOR AND STIMULATING LEAD(S)		$480.63	$480.63					
33277	INSERTION OF PHRENIC NERVE STIMULATOR SENSING LEAD		$253.26	$253.26					
33278	REMOVAL OF PHRENIC NERVE STIMULATOR GENERATOR AND LEAD(S)		$478.78	$478.78					
33279	REMOVAL OF PHRENIC NERVE STIMULATOR STIMULATION OR SENSING LEAD(S)		$288.09	$288.09					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33280	REMOVAL OF PHRENIC NERVE STIMULATOR PULSE GENERATOR		$171.97	$171.97					
33281	REPOSITIONING OF PHRENIC NERVE STIMULATOR LEAD(S)		$311.94	$311.94					
33285	INSERTION OF HEART RHYTHM MONITOR UNDER SKIN		$72.42	$3,818.63					Effective 1/1/2019
33286	REMOVAL OF HEART RHYTHM MONITOR FROM UNDER THE SKIN		$71.03	$103.92					Effective 1/1/2019
33287	REMOVAL AND REPLACEMENT OF PHRENIC NERVE STIMULATOR PULSE GENERATOR		$321.24	$321.24					
33288	REMOVAL AND REPLACEMENT OF PHRENIC NERVE STIMULATOR STIMULATION OR SENSING LEADS		$425.54	$425.54					
33289	INSERTION OF WIRELESS PRESSURE SENSOR INTO LUNG ARTERY THROUGH TUBE WITH REVIEW BY RADIOLOGIST		$267.35	$267.35					Effective 1/1/2019
33300	REPAIR OF WOUND TO HEART		$923.41	$923.41					
33305	REPAIR OF WOUND TO HEART ON HEART-LUNG MACHINE		$1,105.28	$1,105.28					
33310	INCISION AND EXPLORATION OF HEART		$851.81	$851.81					
33315	INCISION OR EXPLORATION OF HEART ON HEART-LUNG MACHINE		$1,042.10	$1,042.10					
33320	REPAIR OF AORTA OR GREAT VESSELS WITH SUTURES		$891.85	$891.85					
33321	REPAIR OF AORTA OR GREAT VESSELS WITH SUTURES USING A SHUNT BYPASS		$1,220.99	$1,220.99					
33322	REPAIR OF AORTA OR GREAT VESSELS WITH SUTURES ON HEART-LUNG MACHINE		$1,211.02	$1,211.02					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33330	REPAIR OF AORTA OR GREAT VESSELS WITH GRAFT		$948.66	$948.66					
33335	REPAIR OF AORTA OR GREAT VESSELS WITH GRAFT ON HEART-LUNG MACHINE		$1,273.92	$1,273.92					
33340	REPAIR OF LEFT UPPER HEART CHAMBER WITH IMPLANT WITH REVIEW BY RADIOLOGIST		$648.71	$648.71					Added Effective 1/1/2017
33361	REPLACEMENT OF AORTIC VALVE THROUGH THE SKIN AND FEMORAL ARTERY		$1,081.48	$1,081.48					
33362	REPLACEMENT OF AORTIC VALVE BY THROUGH FEMORAL ARTERY		$1,183.09	$1,183.09					
33363	REPLACEMENT OF AORTIC VALVE THROUGH AXILLARY ARTERY		$1,225.02	$1,225.02					
33364	REPLACEMENT OF AORTIC VALVE THROUGH ILIAC ARTERY		$1,302.70	$1,302.70					
33365	REPLACEMENT OF AORTIC VALVE BY TUBE THROUGH AORTA		$1,427.26	$1,427.26					
33366	TRANSCATHETER AORTIC VALVE REPLACEMENT (TAVR/TAVI) WITH PROSTHETIC VALVE; TRANSAPICAL EXPOSURE (EG, LEFT THORACOTOMY)		$1,553.22	$1,553.22					
33367	INSERTION OF TUBE IN PERIPHERAL BLOOD VESSEL ACCESSED THROUGH SKIN FOR HEART-LUNG MACHINE SUPPORT		$501.76	$501.76					
33368	INSERTION OF TUBE IN PERIPHERAL BLOOD VESSEL FOR HEART-LUNG MACHINE SUPPORT		$608.10	$608.10					
33369	INSERTION OF TUBE IN CENTRAL BLOOD VESSEL FOR HEART-LUNG MACHINE SUPPORT		$802.92	$802.92					
33370	DEVICE TO PROTECT BRAIN FROM EMBOLIS		$109.65	$109.65					Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33390	SIMPLE REPAIR OF AORTIC VALVE ON HEART-LUNG MACHINE		$1,552.92	$1,552.92					Added Effective 1/1/2017
33391	COMPLEX REPAIR OF AORTIC VALVE ON HEART-LUNG MACHINE		$1,840.22	$1,840.22					Added Effective 1/1/2017
33404	CREATION OF BLOOD FLOW FROM LEFT LOWER HEART CHAMBER TO AORTA		$1,755.14	$1,755.14					
33405	REPLACEMENT OF AORTIC VALVE ON HEART-LUNG MACHINE		$1,782.46	$1,782.46					
33406	REPLACEMENT OF AORTIC VALVE USING HUMAN DONOR VALVE ON HEART-LUNG MACHINE		$2,134.09	$2,134.09					
33410	REPLACEMENT OF AORTIC VALVE USING TISSUE VALVE ON HEART-LUNG MACHINE		$1,638.43	$1,638.43					
33411	REPLACEMENT OF AORTIC VALVE WITH AORTA ENLARGEMENT		$2,108.86	$2,108.86					
33412	REPLACEMENT OF AORTIC VALVE WITH ENLARGEMENT AT BASE OF VALVE		$2,164.32	$2,164.32					
33413	REPAIR AND ENLARGEMENT OF BLOOD OUTFLOW TRACT TO GREAT VESSELS FROM LEFT OR RIGHT LOWER HEART CHAMBER		$2,280.46	$2,280.46					
33414	REPAIR AND ENLARGEMENT OF BLOOD OUTFLOW TRACT OF LEFT LOWER HEART CHAMBER		$2,076.87	$2,076.87					
33415	INCISION OR REMOVAL OF TISSUE BELOW AORTIC VALVE		$1,681.22	$1,681.22					
33416	REMOVAL OF THICKENED HEART MUSCLE AT LEFT LOWER HEART CHAMBER		$1,703.51	$1,703.51					
33417	REPAIR OF AORTA AT HEART		$1,883.41	$1,883.41					
33418	REPAIR OF MITRAL VALVE THROUGH THE SKIN, INITIAL PROSTHESIS		$1,503.43	$1,503.43					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33419	REPAIR OF MITRAL VALVE THROUGH THE SKIN, ADDITIONAL PROSTHESIS		$354.48	$354.48					Added effective 1/1/2015
33420	REMOVAL OF MITRAL VALVE SCAR TISSUE		$1,198.26	$1,198.26					
33422	REMOVAL OF MITRAL VALVE SCAR TISSUE ON HEART-LUNG MACHINE		$1,666.80	$1,666.80					
33425	REPAIR OF MITRAL VALVE ON HEART-LUNG MACHINE		$1,720.74	$1,720.74					
33426	REPAIR OF MITRAL VALVE WITH ARTIFICIAL VALVE ON HEART-LUNG MACHINE		$1,763.15	$1,763.15					
33427	RADICAL RECONSTRUCTION OF MITRAL VALVE ON HEART-LUNG MACHINE		$2,025.12	$2,025.12					
33430	REPLACEMENT OF MITRAL VALVE ON HEART-LUNG MACHINE		$1,946.50	$1,946.50					
33440	REPLACEMENT OF MITRAL VALVE ON HEART-LUNG MACHINE		$2,763.73	$2,763.73					Effective 1/1/2019
33460	REMOVAL OF TRICUSPID VALVE ON HEART-LUNG MACHINE		$1,448.00	$1,448.00					
33463	REPAIR OF TRICUSPID VALVE		$1,729.79	$1,729.79					
33464	REPAIR OF TRICUSPID VALVE WITH RING INSERTION		$1,779.97	$1,779.97					
33465	REPLACEMENT OF TRICUSPID VALVE ON HEART-LUNG MACHINE		$1,800.51	$1,800.51					
33468	REPOSITIONING OF TRICUSPID VALVE		$1,911.56	$1,911.56					
33474	INCISION OF PULMONARY VALVE ON HEART-LUNG MACHINE		$1,452.13	$1,452.13					
33475	REPLACEMENT OF PULMONARY VALVE		$1,885.46	$1,885.46					
33476	RELEASE OF RESTRICTIVE RIGHT VENTRICULAR MUSCLE BANDS OR VALVE LEAFLETS		$1,592.30	$1,592.30					
33477	INSERTION OF PULMONARY VALVE		$1,058.75	$1,058.75					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33478	ARGEMENT OF BLOOD OUTFLOW TRACT IN RIGHT LOWER HEART CHAMBER		$1,715.16	$1,715.16					
33500	REPAIR OF HEART ABNORMAL ARTERY-VEIN OR ARTERY-HEART CONNECTION ON HEART-LUNG MACHINE		$1,620.55	$1,620.55					Eff date 7/1/1996
33501	REPAIR OF HEART ABNORMAL ARTERY-VEIN OR ARTERY-HEART CONNECTION		$913.86	$913.86					Eff date 7/1/1996
33502	REPAIR OF ABNORMAL HEART ARTERY		$1,021.25	$1,021.25					Eff date 7/1/1996
33503	REPAIR OF ABNORMAL HEART ARTERY WITH GRAFT		$1,510.21	$1,510.21					Eff date 7/1/1996
33504	REPAIR OF ABNORMAL HEART ARTERY WITH GRAFT ON HEART-LUNG MACHINE		$1,598.54	$1,598.54					Eff date 7/1/1996
33505	REPAIR OF ABNORMAL HEART ARTERY WITH DIVERSION OF BLOOD FLOW		$1,809.64	$1,809.64					Eff date 7/1/1996
33506	REPAIR OF ABNORMAL HEART ARTERY WITH DIVERSION OF BLOOD FLOW TO AORTA		$1,809.64	$1,809.64					
33507	REPAIR OF ABNORMAL HEART ARTERY AT ITS AORTIC ORIGIN		$1,344.06	$1,344.06					
33508	HARVEST OF VEIN USING AN ENDOSCOPE		$12.53	$12.53					
33509	HARVEST OF ARTERY FROM ARM FOR HEAR		$142.73	$142.73					Added 1/1/2022
33510	CORONARY ARTERY BYPASS USING VEIN GRAFT, 1 GRAFT		$1,602.35	$1,602.35					
33511	CORONARY ARTERY BYPASS USING VEIN GRAFT, 2 GRAFTS		$1,759.16	$1,759.16					
33512	CORONARY ARTERY BYPASS USING VEIN GRAFT, 3 GRAFTS		$1,915.68	$1,915.68					
33513	CORONARY ARTERY BYPASS USING VEIN GRAFT, 4 GRAFTS		$2,072.22	$2,072.22					
33514	CORONARY ARTERY BYPASS USING VEIN GRAFT, 5 GRAFTS		$2,228.23	$2,228.23					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33516	CORONARY ARTERY BYPASS USING VEIN GRAFT, 6 OR MORE GRAFTS		$2,384.48	$2,384.48					
33517	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 1 GRAFT		$156.27	$156.27					
33518	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 2 GRAFTS		$313.06	$313.06					
33519	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 3 GRAFTS		$469.07	$469.07					
33521	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 4 GRAFTS		$625.88	$625.88					
33522	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 5 GRAFTS		$782.40	$782.40					
33523	CORONARY ARTERY BYPASS USING VEIN OR ARTERY GRAFT, 6 OR MORE GRAFTS		$939.21	$939.21					
33530	CORONARY ARTERY BYPASS OR VALVE PROCEDURE REOPERATION MORE THAN 1 MONTH AFTER ORIGINAL OPERATION		$309.50	$309.50					
33533	CORONARY ARTERY BYPASS USING ARTERY GRAFT, 1 GRAFT		$1,651.21	$1,651.21					
33534	CORONARY ARTERY BYPASS USING ARTERY GRAFT, 2 GRAFTS		$1,856.89	$1,856.89					
33535	CORONARY ARTERY BYPASS USING ARTERY GRAFT, 3 GRAFTS		$2,062.56	$2,062.56					
33536	CORONARY ARTERY BYPASS USING ARTERY GRAFT, 4 GRAFTS		$2,267.94	$2,267.94					
33542	PARTIAL REMOVAL OF HEART MUSCLE		$1,738.27	$1,738.27					
33545	REPAIR OF LOWER HEART CHAMBER FOLLOWING HEART ATTACK		$2,085.73	$2,085.73					
33548	RESTORATION AND RESHAPING OF LEFT LOWER HEART CHAMBER		$1,763.03	$1,763.03					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33572	REMOVAL OF PLAQUE FROM HEART ARTERY AT TIME OF CORONARY ARTERY BYPASS		$232.52	$232.52					
33600	CLOSURE OF MITRAL OR TRICUSPID VALVE		$1,913.93	$1,913.93					
33602	CLOSURE OF AORTIC OR PULMONARY VALVE		$1,749.30	$1,749.30					
33606	CONNECTION OF PULMONARY ARTERY TO AORTA		$2,076.87	$2,076.87					
33608	REPAIR OF CONGENITAL DEFECT IN RIGHT OR LEFT HEART CHAMBER		$2,098.59	$2,098.59					
33610	REPAIR OF CONGENITAL DEFECT IN WALL BETWEEN LOWER HEART CHAMBERS		$2,076.87	$2,076.87					
33611	REPAIR OF DOUBLE OUTLET DEFECT OF RIGHT LOWER HEART CHAMBER		$2,134.09	$2,134.09					
33612	REPAIR OF DOUBLE OUTLET DEFECT AND OUTFLOW TRACT OF RIGHT LOWER HEART CHAMBER		$2,158.45	$2,158.45					
33615	REPAIR OF CONGENITAL DEFECT IN WALL BETWEEN UPPER HEART CHAMBERS AND CONNECTION OF ATRIA TO PULMONARY ARTERY (SIMPLE FONTAN PROCEDURE)		$2,112.67	$2,112.67					
33617	REPAIR OF COMPLEX CONGENITAL DEFECT IN WALL BETWEEN UPPER HEART CHAMBERS AND CONNECTION OF ATRIA TO PULMONARY ARTERY (MODIFIED FONTAN PROCEDURE)		$2,162.85	$2,162.85					
33619	REPAIR TO IMPROVE CONGENITAL BLOOD FLOW DEFECT FROM LOWER HEART CHAMBER		$2,422.04	$2,422.04					
33620	APPLICATION OF RIGHT AND LEFT PULMONARY ARTERY BANDS		$1,510.20	$1,510.20					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33621	SERTION OF STENT IN DEFECT BETWEEN UPPER HEART CHAMBERS		$810.88	$810.88					
33622	RECONSTRUCTION OF COMPLEX CARDIAC DEFECTS		$3,180.03	$3,180.03					
33641	REPAIR OF CONGENITAL DEFECT BETWEEN UPPER HEART CHAMBERS ON HEART-LUNG MACHINE		$1,387.38	$1,387.38					
33645	REPAIR OF TISSUE BETWEEN UPPER HEART CHAMBERS		$1,527.33	$1,527.33					
33647	REPAIR OF CONGENITAL DEFECT IN WALL BETWEEN BOTH UPPER AND LOWER HEART CHAMBER		$1,894.40	$1,894.40					
33660	REPAIR OF PARTIAL CONGENITAL DEFECT BETWEEN BOTH UPPER AND LOWER HEART CHAMBERS		$1,686.70	$1,686.70					
33665	REPAIR OF INTERMEDIATE CONGENITAL DEFECT BETWEEN BOTH UPPER AND LOWER HEART CHAMBERS		$1,772.67	$1,772.67					
33670	REPAIR OF COMPLETE CONGENITAL DEFECT BETWEEN BOTH UPPER AND LOWER HEART CHAMBERS		$2,134.09	$2,134.09					
33675	CLOSURE OF MULTIPLE CONGENITAL DEFECTS BETWEEN LOWER HEART CHAMBERS		$1,610.55	$1,610.55					
33676	CLOSURE OF MULTIPLE CONGENITAL DEFECTS BETWEEN LOWER HEART CHAMBERS WITH VALVE TISSUE RELEASE		$1,660.70	$1,660.70					
33677	CLOSURE OF MULTIPLE CONGENITAL DEFECTS BETWEEN LOWER HEART CHAMBERS WITH REMOVAL OF BAND		$1,726.47	$1,726.47					
33681	CLOSURE OF CONGENITAL DEFECT BETWEEN LOWER HEART CHAMBERS		$1,862.71	$1,862.71					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33684	CLOSURE OF CONGENITAL DEFECT BETWEEN LOWER HEART CHAMBERS WITH VALVE TISSUE RELEASE		$1,919.93	$1,919.93					
33688	CLOSURE OF CONGENITAL DEFECT BETWEEN LOWER HEART CHAMBERS WITH REMOVAL OF BAND		$1,948.40	$1,948.40					
33690	BANDING OF PULMONARY ARTERY		$1,234.29	$1,234.29					
33692	REPAIR AND CORRECTION OF 4 CONGENITAL HEART DEFECTS		$2,076.87	$2,076.87					
33694	PAIR AND CORRECTION OF 4 CONGENITAL HEART DEFECTS WITH PATCH		$2,105.63	$2,105.63					
33697	REPAIR AND CORRECTION OF 4 CONGENITAL HEART DEFECTS INCLUDING CLOSURE BETWEEN LOWER HEART CHAMBERS		$2,162.85	$2,162.85					
33702	REPAIR TO IMPROVE BLOOD FLOW TO LUNG OR HEART ON HEART-LUNG MACHINE		$1,691.78	$1,691.78					
33710	REPAIR OF OPENING IN WALL BETWEEN LOWER HEART CHAMBERS ON HEART-LUNG MACHINE		$1,921.11	$1,921.11					
33720	REPAIR OF ANEURYSM ABOVE HEART VALVE TO LUNG ON HEART-LUNG MACHINE		$1,691.78	$1,691.78					
33724	REPAIR OF ABNORMAL PULMONARY VEIN RETURN TO LEFT UPPER HEART CHAMBER		$1,162.72	$1,162.72					
33726	REPAIR OF PULMONARY VEIN NARROWING		$1,535.66	$1,535.66					
33730	COMPLETE REPAIR OF ABNORMAL PULMONARY VEIN RETURN TO LEFT UPPER HEART CHAMBER		$2,094.77	$2,094.77					
33732	REMOVAL OF MEMBRANE OF LEFT UPPER HEART CHAMBER		$1,765.34	$1,765.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33735	ENLARGEMENT OF HOLE IN WALL BETWEEN UPPER HEART CHAMBERS USING BALLOON		$1,393.38	$1,393.38					
33736	ENLARGEMENT OF HOLE IN WALL BETWEEN UPPER HEART CHAMBERS ON HEART-LUNG MACHINE		$1,466.15	$1,466.15					
33741	INCISION OF PARTITION BETWEEN UPPER CHAMBERS OF HEART TO ALLOW BLOOD FLOW FOR CONGENITAL HEART DEFECTS, VIA CATHETER USING IMAGING GUIDANCE		$615.85	$615.85					Added Effective 01/01/2021
33745	CREATION OF SHUNT FOR BLOOD FLOW WITHIN HEART FOR CONGENITAL HEART DEFECTS, VIA CATHETER USING IMAGING GUIDANCE		$867.67	$867.67					Added Effective 01/01/2021
33746	CREATION OF ADDITIONAL SHUNT FOR BLOOD FLOW WITHIN HEART FOR CONGENITAL HEART DEFECTS, VIA CATHETER USING IMAGING GUIDANCE		$342.05	$342.05					Added Effective 01/01/2021
33750	CREATION OF ADDITIONAL SHUNT FOR BLOOD FLOW WITHIN HEART FOR CONGENITAL HEART DEFECTS, VIA CATHETER USING IMAGING GUIDANCE		$1,288.28	$1,288.28					
33755	INSERTION OF SHUNT FROM ASCENDING AORTA TO PULMONARY ARTERY		$1,298.55	$1,298.55					
33762	INSERTION OF SHUNT FROM DESCENDING AORTA TO PULMONARY ARTERY		$1,298.55	$1,298.55					
33764	INSERTION OF SHUNT WITH ARTIFICIAL GRAFT FROM AORTA TO PULMONARY ARTERY		$1,298.55	$1,298.55					
33766	INSERTION OF SHUNT FROM VENA CAVA TO PULMONARY ARTERY TO IMPROVE BLOOD FLOW, 1 LUNG		$1,327.01	$1,327.01					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33767	INSERTION OF SHUNT FROM VENA CAVA TO PULMONARY ARTERY TO IMPROVE BLOOD FLOW, BOTH LUNGS		$1,494.91	$1,494.91					
33768	REMOVAL OF CONGENITAL EXTRA VENA CAVA		$336.31	$336.31					
33770	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REVERSAL OF BLOOD FLOW		$2,155.51	$2,155.51					
33771	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REVERSAL OF BLOOD FLOW AND ENLARGEMENT OF HOLE IN WALL BETWEEN LOWER HEART CHAMBERS		$2,191.61	$2,191.61					
33774	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REVERSAL OF BLOOD FLOW ON HEART-LUNG MACHINE		$1,829.60	$1,829.60					
33775	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REVERSAL OF BLOOD FLOW AND BAND REMOVAL ON HEART-LUNG MACHINE		$1,865.40	$1,865.40					
33776	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REVERSAL OF BLOOD FLOW AND CLOSURE OF HOLE IN WALL BETWEEN LOWER HEART CHAMBERS ON HEART-LUNG MACHINE		$2,034.37	$2,034.37					Updated Effective 01/01/2020
33777	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS AND OBSTRUCTION WITH REVERSAL OF BLOOD FLOW ON HEART-LUNG MACHINE		$1,901.49	$1,901.49					
33778	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REDIRECTION OF BLOOD FLOW		$2,303.44	$2,303.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33779	REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REDIRECTION OF BLOOD FLOW AND BAND REMOVAL		$2,310.49	$2,310.49					
33780	REPAIR OF A GROUP OF CONGENITAL HEART DEFECTS WITH REDIRECTION OF BLOOD FLOW AND CLOSURE OF HOLE IN WALL BETWEEN LOWER HEART CHAMBERS		$2,331.91	$2,331.91					
33781	REPAIR OF A GROUP OF CONGENITAL HEART DEFECTS AND OBSTRUCTION WITH REDIRECTION OF BLOOD FLOW		$2,317.53	$2,317.53					
33782	RELOCATION OF AORTA AND REPAIR OF WALL BETWEEN LOWER HEART CHAMBERS		$2,255.38	$2,255.38					
33783	RELOCATION OF AORTA AND REPAIR OF WALL BETWEEN LOWER HEART CHAMBERS WITH REIMPLANTATION		$2,453.91	$2,453.91					
33786	TOTAL REPAIR OF GROUP OF CONGENITAL HEART DEFECTS WITH REDIRECTION OF BLOOD FLOW		$2,191.61	$2,191.61					
33788	REIMPLANTATION OF ABNORMAL PULMONARY ARTERY TO HEART		$1,663.68	$1,663.68					
33800	SUTURE OF AORTA TO CHEST BONE		$885.69	$885.69					
33802	DIVISION OF EXTRA ARCH OF AORTA		$1,184.11	$1,184.11					
33803	DIVISION AND RECONNECTION OF EXTRA ARCH OF AORTA		$1,241.04	$1,241.04					
33814	REPAIR OF DEFECT OF WALL BETWEEN AORTA AND PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,663.32	$1,663.32					
33820	TYING OF CONGENITAL HEART DEFECT FROM PULMONARY ARTERY TO AORTA		$1,155.35	$1,155.35					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33822	REPAIR OF CONGENITAL HEART DEFECT FROM PULMONARY ARTERY TO AORTA, YOUNGER THAN 18 YEARS		$1,184.11	$1,184.11					
33824	REPAIR OF CONGENITAL HEART DEFECT FROM PULMONARY ARTERY TO AORTA, 18 YEARS OR OLDER		$1,241.04	$1,241.04					
33840	REPAIR OF CONGENITAL HEART DEFECT FROM PULMONARY ARTERY TO AORTA, 18 YEARS OR OLDER		$1,546.80	$1,546.80					
33845	REPAIR OF CONGENITAL NARROWED AORTA WITH GRAFT		$1,589.94	$1,589.94					
33851	REPAIR OF CONGENITAL NARROWED AORTA USING LEFT CHEST ARTERY OR ARTIFICIAL MATERIAL		$1,561.18	$1,561.18					
33852	REPAIR OF ABNORMAL AORTIC ARCH		$1,632.78	$1,632.78					
33853	REPAIR OF ABNORMAL AORTIC ARCH ON HEART-LUNG MACHINE		$2,105.63	$2,105.63					
33858	REPAIR OF ASCENDING AORTA WITH GRAFT ON HEART-LUNG MACHINE WITH VALVE SUSPENSION FOR AORTIC WALL SEPARATION		$2,742.19	$2,742.19					Added Effective 01/01/2020
33859	REPAIR OF ASCENDING AORTA WITH GRAFT ON HEART-LUNG MACHINE WITH VALVE SUSPENSION FOR AORTIC DISEASE		$1,967.51	$1,967.51					Added Effective 01/01/2020
33863	REPAIR OF ASCENDING AORTA WITH GRAFT ON HEART-LUNG MACHINE WITH AORTIC ROOT REPLACEMENT AND HEART RECONSTRUCTION		$2,112.29	$2,112.29					
33864	REPAIR OF ASCENDING AORTA WITH GRAFT ON HEART-LUNG MACHINE WITH AORTIC ROOT REMODELING AND HEART RECONSTRUCTION		$2,576.54	$2,576.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33866	REPAIR OF AORTIC ARCH WITH GRAFT		$842.31	$842.31					Effective 1/1/2019
33871	REPAIR OF AORTIC ARCH WITH GRAFT ON HEART-LUNG MACHINE		$2,636.00	$2,636.00					Added Effective 01/01/2020
33875	REPAIR OF DESCENDING AORTA WITH GRAFT		$1,764.53	$1,764.53					
33877	REPAIR OF AORTIC ANEURYSM WITH GRAFT		$2,568.99	$2,568.99					
33880	REPAIR OF CHEST AORTA WITH INSERTION OF STENT-GRAFT COVERING LEFT CHEST ARTERY AND ALL STENT-GRAFT EXTENSIONS		$1,108.35	$1,108.35					
33881	REPAIR OF CHEST AORTA WITH INSERTION OF STENT-GRAFT		$930.41	$930.41					
33882	REPAIR OF CHEST AORTA WITH INSERTION OF STENT-GRAFT WITH FENESTRATION FOR LEFT CHEST VEIN		$1,513.65	$1,513.65					Added effective 1/1/2026, Adding 33882 as a detailed description of aorta repair to codes 33880, 33881, 33883, 33886.
33883	DELAYED PLACEMENT OF STENT-GRAFT EXTENSION CLOSER TO THE HEART AFTER REPAIR OF CHEST AORTA		$826.99	$826.99					
33884	REPAIR OF DESCENDING AORTA, EACH ADDITIONAL EXTENSION		$331.40	$331.40					Termed 12/31/2025
33886	DELAYED PLACEMENT OF STENT-GRAFT EXTENSION FURTHER FROM THE HEART AFTER REPAIR OF CHEST AORTA		$826.25	$826.25					
33889	TRANSFER OF CHEST ARTERY TO NECK ARTERY AND REPAIR OF DESCENDING AORTA		$660.98	$660.98					Termed 12/31/2025
33891	BYPASS GRAFT OF NECK ARTERY AND REPAIR OF DESCENDING AORTA		$841.96	$841.96					Termed 12/31/2025
33894	REPAIR OF AORTA BY INSERTION OF STENT ACROSS MAJOR SIDE BRANCHES		$800.79	$800.79					Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33895	REPAIR OF AORTA BY INSERTION OF STENT NOT CROSSING MAJOR SIDE BRANCHES		$637.16	$637.16					Added 1/1/2022
33897	BALLOON DILATION OF NATIVE OR RECURRENT NARROWING OF HEART BLOOD VESSEL		$474.27	$474.27					Added 1/1/2022
33900	PLACEMENT OF STENT IN PULMONARY ARTERY WITH NORMAL ANATOMICAL CONNECTIONS, ON ONE SIDE OF BODY		$484.81	$484.81					
33901	PLACEMENT OF STENT IN PULMONARY ARTERIES WITH NORMAL ANATOMICAL CONNECTIONS, ON BOTH SIDES OF BODY		$637.17	$637.17					
33902	PLACEMENT OF STENT IN PULMONARY ARTERY WITH ABNORMAL ANATOMICAL CONNECTIONS, ON ONE SIDE OF BODY		$615.61	$615.61					
33903	PLACEMENT OF STENT IN PULMONARY ARTERIES WITH ABNORMAL ANATOMICAL CONNECTIONS, ON BOTH SIDES OF BODY		$725.49	$725.49					
33904	PLACEMENT OF ADDITIONAL STENT IN PULMONARY ARTERY		$243.50	$243.50					
33910	REMOVAL OF BLOOD CLOT IN PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,101.70	$1,101.70					
33915	REMOVAL OF BLOOD CLOT IN PULMONARY ARTERY		$929.18	$929.18					
33916	REMOVAL OF PLAQUE FROM PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,263.84	$1,263.84					
33917	REMOVAL OF PLAQUE FROM PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,771.59	$1,771.59					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33920	REPAIR OF RIGHT LOWER HEART CHAMBER OBSTRUCTION WITH CREATION OF CHANNEL FROM LOWER HEART CHAMBER TO PULMONARY ARTERY		$2,120.01	$2,120.01					
33922	INCISION OF PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,430.53	$1,430.53					
33924	DISCONNECTION OF PULMONARY ARTERY SHUNT		$287.63	$287.63					
33925	REPAIR OF DEFECT OF PULMONARY ARTERY		$1,377.37	$1,377.37					Rate updated 1/1/2018
33926	REPAIR OF DEFECT OF PULMONARY ARTERY ON HEART-LUNG MACHINE		$1,859.13	$1,859.13					
33927	IMPLANTATION OF ARTIFICIAL HEART		$2,043.74	$2,043.74					Added Effective 1/1/2018
33928	REPLACEMENT OF ARTIFICIAL HEART		$0.00	$0.00					Added Effective 1/1/2018
33929	REMOVAL OF ARTIFICIAL HEART		$0.00	$0.00					Added Effective 1/1/2018
33930	HARVEST OF DONOR HEART AND LUNG		$1,440.00	$1,920.00					
33933	PREPARATION OF DONOR HEART AND LUNG FOR TRANSPLANTATION		$0.00	$0.00					
33935	TRANSPLANTATION OF DONOR HEART AND LUNG		$2,776.05	$2,776.05					
33940	REMOVAL OF DONOR HEART FOR TRANSPLANTATION		$2,250.00	$3,000.00					
33944	PREPARATION OF DONOR HEART FOR TRANSPLANTATION		$0.00	$0.00					
33945	TRANSPLANTATION OF DONOR HEART		$3,167.39	$3,167.39					
33946	INITIATION OF ECMO EXTERNAL VEIN TO VEIN BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$252.80	$252.80					Added effective 1/1/2015
33947	INITIATION OF ECMO EXTERNAL VEIN TO ARTERY BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$279.23	$279.23					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33948	DAILY MANAGEMENT OF ECMO EXTERNAL VEIN TO VEIN BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$199.74	$199.74					Added effective 1/1/2015
33949	DAILY MANAGEMENT OF ECMO EXTERNAL VEIN TO ARTERY BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$194.37	$194.37					Added effective 1/1/2015
33951	INSERTION OF TUBE THROUGH THE SKIN FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$360.23	$360.23					Added effective 1/1/2015
33952	INSERTION OF TUBE THROUGH THE SKIN FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER)		$351.07	$351.07					Added effective 1/1/2015
33953	INSERTION OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$401.94	$401.94					Added effective 1/1/2015
33954	INSERTION OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER)		$392.22	$392.22					Added effective 1/1/2015
33955	INSERTION OF TUBE THROUGH THE CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$724.24	$724.24					Added effective 1/1/2015
33956	INSERTION OF TUBE THROUGH THE CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER)		$688.02	$688.02					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33957	REPOSITIONING OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$160.72	$160.72					Added effective 1/1/2015
33958	REPOSITIONING OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER)		$155.80	$155.80					Added effective 1/1/2015
33959	REPOSITIONING OF TUBE OPEN PROCEDURE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$204.20	$204.20					Added effective 1/1/2015
33962	REPOSITIONING OF TUBE OPEN PROCEDURE FOR EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP PATIENT 6 YEARS AND OLDER		$192.56	$192.56					Added effective 1/1/2015
33963	REPOSITIONING OF TUBE THROUGH THE CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER		$408.08	$408.08					Added effective 1/1/2015
33964	REPOSITIONING OF TUBE ACCESSED THROUGH THE CHEST FOR EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP PATIENT 6 YEARS AND OLDER		$418.72	$418.72					Added effective 1/1/2015
33965	REMOVAL OF TUBE THROUGH SKIN FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$160.72	$160.72					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33966	REMOVAL OF TUBE ACCESSED THROUGH THE SKIN FOR EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP PATIENT 6 YEARS AND OLDER		$193.94	$193.94					Added effective 1/1/2015
33967	INSERTION OF BLOOD FLOW ASSIST DEVICE IN AORTA THROUGH SKIN		$196.92	$198.21					
33968	REMOVAL OF BLOOD FLOW ASSIST DEVICE IN AORTA		$31.37	$31.37					
33969	REMOVAL OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER)		$237.02	$237.02					Added effective 1/1/2015
33970	INSERTION OF BLOOD FLOW ASSIST DEVICE IN AORTA THROUGH UPPER LEG ARTERY		$462.75	$462.75					
33971	REMOVAL OF BLOOD FLOW ASSIST DEVICE IN AORTA WITH REPAIR OF UPPER LEG ARTERY		$279.06	$279.06					
33973	INSERTION OF BLOOD FLOW ASSIST DEVICE IN AORTA THROUGH ASCENDING AORTA		$512.93	$512.93					
33974	REMOVAL OF BLOOD FLOW ASSIST DEVICE IN AORTA WITH REPAIR OF ASCENDING AORTA		$543.61	$543.61					
33975	INSERTION OF EXTERNAL BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$1,020.70	$1,020.70					
33976	INSERTION OF EXTERNAL BLOOD FLOW ASSIST DEVICE IN BOTH LOWER HEART CHAMBERS		$1,390.86	$1,390.86					
33977	REMOVAL OF EXTERNAL BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$893.09	$893.09					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33978	REMOVAL OF EXTERNAL BLOOD FLOW ASSIST DEVICE IN BOTH LOWER HEART CHAMBERS		$1,020.70	$1,020.70					
33979	INSERTION OF IMPLANTED BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$955.07	$955.07					
33980	REMOVAL OF IMPLANTED BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$837.56	$837.56					
33981	REPLACEMENT OF EXTERNAL BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$689.75	$689.75					
33982	REPLACEMENT OF IMPLANTED BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER		$1,615.61	$1,615.61					
33983	REPLACEMENT OF IMPLANTED BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER ON HEART-LUNG MACHINE		$1,897.00	$1,897.00					
33984	REMOVAL OF TUBE FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER		$233.65	$233.65					Added effective 1/1/2015
33985	REMOVAL OF TUBE THROUGH THE CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (5 YEARS OR YOUNGER		$446.57	$446.57					Added effective 1/1/2015
33986	REMOVAL OF TUBE THROUGH THE CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP (6 YEARS OR OLDER)		$426.22	$426.22					Added effective 1/1/2015
33987	INCISION OF ARTERY FOR CREATION OF CHANNEL FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$171.04	$171.04					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
33988	INSERTION OF LEFT HEART VENT THROUGH CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$635.96	$635.96					Added effective 1/1/2015
33989	REMOVAL OF LEFT HEART VENT THROUGH CHEST FOR ECMO EXTERNAL BLOOD CIRCULATION IN HEART AND LUNGS USING A PUMP		$404.22	$404.22					Added effective 1/1/2015
33990	INSERTION OF BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER THROUGH SKIN WITH REVIEW BY RADIOLOGIST USING ARTERY ACCESS		$351.64	$351.64					
33991	INSERTION OF BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER THROUGH SKIN WITH REVIEW BY RADIOLOGIST USING ARTERY AND VEIN ACCESS		$512.51	$512.51					
33992	REMOVAL OF BLOOD FLOW ASSIST DEVICE IN LEFT LOWER HEART CHAMBER THROUGH THE SKIN		$167.66	$167.66					
33993	REPOSITIONING OF BLOOD FLOW ASSIST DEVICE IN LOWER HEART CHAMBER USING IMAGING GUIDANCE		$147.21	$147.21					
33995	INSERTION OF RIGHT LOWER HEART CHAMBER BLOOD FLOW ASSIST DEVICE VIA VEIN ACCESSED THROUGH SKIN, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION		$294.52	$294.52					Added Effective 01/01/2021
33997	REMOVAL OF RIGHT LOWER HEART CHAMBER BLOOD FLOW ASSIST DEVICE, ACCESSED THROUGH SKIN		$130.91	$130.91					Added Effective 01/01/2021
33999	OTHER HEART SURGERY PROCEDURE	Yes	$0.00	$0.00					
34001	REMOVAL OF BLOOD CLOT IN NECK TO CHEST ARTERY		$645.42	$645.42					
34051	REMOVAL OF BLOOD CLOT IN CHEST ARTERY		$674.60	$674.60					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
34101	REMOVAL OF BLOOD CLOT IN ARTERY OF UPPER ARM		$521.42	$521.42					
34111	REMOVAL OF BLOOD CLOT IN ARTERY OF LOWER ARM		$452.90	$452.90					
34151	REMOVAL OF BLOOD CLOT IN ARTERY OF ABDOMINAL ORGANS		$825.77	$825.77					
34201	REMOVAL OF BLOOD CLOT IN ARTERY OF GROIN AND LEG		$517.89	$517.89					
34203	REMOVAL OF BLOOD CLOT IN ARTERY OF LOWER LEG		$597.81	$597.81					
34401	REMOVAL OF BLOOD CLOT IN VENA CAVA		$591.79	$591.79					
34421	REMOVAL OF BLOOD CLOT IN VENA CAVA, PELVIC, OR THIGH VEIN		$497.38	$497.38					
34451	REMOVAL OF BLOOD CLOT IN VENA CAVA, PELVIC, OR THIGH VEIN BY ABDOMINAL AND LEG INCISION		$724.01	$724.01					
34471	REMOVAL OF BLOOD CLOT IN UPPER CHEST VEIN		$375.12	$375.12					
34490	REMOVAL OF BLOOD CLOT IN UNDERARM OR UPPER CHEST VEIN		$423.44	$423.44					
34501	REPAIR OF UPPER LEG VEIN VALVE		$502.96	$502.96					
34502	RECONSTRUCTION OF VENA CAVA		$1,341.34	$1,341.34					
34510	TRANSFER OF VEIN VALVE TO ANOTHER VEIN		$608.50	$608.50					
34520	REMOVAL OF VEIN SEGMENT		$638.54	$638.54					
34530	CONNECTION OF LEG VEINS AT BACK OF KNEE		$845.42	$845.42					
34701	REPAIR OF AORTA WITH GRAFT FOR OTHER THAN RUPTURE WITH REVIEW BY RADIOLOGIST		$989.88	$989.88					Added Effective 1/1/2018
34702	REPAIR OF RUPTURED AORTA WITH GRAFT WITH REVIEW BY RADIOLOGIST		$1,480.49	$1,480.49					Added Effective 1/1/2018
34703	REPAIR OF INFRARENAL AORTA AND GROIN ARTERY WITH GRAFT FOR OTHER THAN RUPTURE WITH REVIEW BY RADIOLOGIST		$1,114.11	$1,114.11					Added Effective 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
34704	REPAIR OF INFRARENAL AORTA AND GROIN ARTERY WITH GRAFT FOR RUPTURE WITH REVIEW BY RADIOLOGIST		$1,855.95	$1,855.95					Added Effective 1/1/2018
34705	REPAIR OF INFRARENAL AORTA AND GROIN ARTERY WITH GRAFT FOR OTHER THAN RUPTURE ON BOTH SIDES WITH REVIEW BY RADIOLOGIST		$1,228.98	$1,228.98					Added Effective 1/1/2018
34706	REPAIR OF INFRARENAL AORTA AND GROIN ARTERY WITH GRAFT FOR RUPTURE ON BOTH SIDES WITH REVIEW BY RADIOLOGIST		$1,851.05	$1,851.05					Added Effective 1/1/2018
34707	REPAIR OF GROIN ARTERY WITH GRAFT FOR OTHER THAN RUPTURE WITH REVIEW BY RADIOLOGIST		$923.51	$923.51					Added Effective 1/1/2018
34708	REPAIR OF GROIN ARTERY WITH GRAFT FOR RUPTURE WITH REVIEW BY RADIOLOGIST		$1,488.10	$1,488.10					Added Effective 1/1/2018
34709	REPAIR OF ABDOMINAL OR GROIN ARTERY WITH PROSTHESIS WITH REVIEW BY RADIOLOGIST		$260.52	$260.52					Added Effective 1/1/2018
34710	DELAYED INSERTION OF PROSTHESIS FOR REPAIR OF ABDOMINAL OR GROIN ARTERY WITH REVIEW BY RADIOLOGIST, INITIAL VESSEL TREATED		$643.15	$643.15					Added Effective 1/1/2018
34711	DELAYED INSERTION OF PROSTHESIS FOR REPAIR OF ABDOMINAL OR GROIN ARTERY WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL VESSEL TREATED		$240.51	$240.51					Added Effective 1/1/2018
34712	DELIVERY OF FIXATION DEVICE TO GRAFT WITH REVIEW BY RADIOLOGIST		$547.96	$547.96					Added Effective 1/1/2018
34713	EXPOSURE OF GROIN ARTERY FOR DELIVERY OF GRAFT		$103.70	$103.70					Added Effective 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
34714	EXPOSURE OF MAJOR GROIN ARTERY WITH CREATION OF CONDUIT		$217.74	$217.74					Added Effective 1/1/2018
34715	EXPOSURE OF UNDERARM OR UPPER CHEST ARTERY FOR DELIVERY OF PROSTHESIS		$243.69	$243.69					Added Effective 1/1/2018
34716	EXPOSURE OF UNDERARM OR UPPER CHEST ARTERY WITH CREATION OF CONDUIT		$301.85	$301.85					Added Effective 1/1/2018
34717	REPAIR OF GROIN ARTERY WITH GRAFT INSERT THROUGH ARTERY AND REPAIR OF AORTA		$362.04	$362.04					Added Effective 01/01/2020
34718	REPAIR OF GROIN ARTERY WITH GRAFT INSERT THROUGH ARTERY		$1,006.21	$1,006.21					Added Effective 01/01/2020
34808	INSERTION OF DEVICE TO BLOCK GROIN ARTERY		$168.70	$168.70					
34812	EXPOSURE OF THIGH ARTERY FOR INSERTION OF PROSTHESIS		$276.20	$276.20					
34813	INSERTION OF GRAFT IN UPPER THIGH ARTERY		$196.20	$196.20					
34820	EXPOSURE OF GROIN ARTERY FOR INSERTION OF PROSTHESIS		$398.76	$398.76					
34830	REPAIR OF ANEURYSM OF AORTA WITH PROSTHESIS		$1,378.68	$1,378.68					
34831	REPAIR OF ANEURYSM OF AORTA OR GROIN ARTERY WITH PROSTHESIS		$1,490.71	$1,490.71					
34832	REPAIR OF ANEURYSM OF AORTA OR UPPER THIGH ARTERY WITH PROTHESIS		$1,490.71	$1,490.71					
34833	EXPOSURE OF GROIN ARTERY WITH CREATION OF CONDUIT		$491.53	$491.53					
34834	EXPOSURE OF ARM ARTERY FOR INSERTION OF PROSTHESIS		$230.44	$230.44					
34839	PHYSICIAN PLANNING OF A PATIENT-SPECIFIC GRAFT FOR REPAIR OF AORTA		$0.00	$0.00					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
34841	REPAIR OF AORTA IN ABDOMEN WITH GRAFT, INCLUDING GRAFT IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34842	REPAIR OF AORTA IN ABDOMEN BELOW KIDNEYS WITH GRAFT, INCLUDING 2 GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34843	REPAIR OF AORTA IN ABDOMEN BELOW KIDNEYS WITH GRAFT, INCLUDING 3 GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34844	REPAIR OF AORTA IN ABDOMEN BELOW KIDNEYS WITH GRAFT, INCLUDING 4 OR MORE GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34845	REPAIR OF AORTA IN ABDOMEN BETWEEN AND BELOW KIDNEYS WITH GRAFT, INCLUDING GRAFT IN ARTERY TO ABDOMINAL ORGANS WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34846	REPAIR OF AORTA IN ABDOMEN BETWEEN AND BELOW KIDNEYS WITH GRAFT, INCLUDING 2 GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
34847	REPAIR OF AORTA IN ABDOMEN BETWEEN AND BELOW KIDNEYS WITH GRAFT, INCLUDING 3 GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
34848	REPAIR OF AORTA IN ABDOMEN BETWEEN AND BELOW KIDNEYS WITH GRAFT, INCLUDING 4 OR MORE GRAFTS IN ABDOMINAL ORGAN ARTERIES WITH REVIEW BY RADIOLOGIST		$0.00	$0.00					
35001	REPAIR OF ANEURYSM OR NECK OR UPPER CHEST ARTERY WITH GRAFT		$1,036.03	$1,036.03					
35002	REPAIR OF RUPTURED ANEURYSM OF NECK OR UPPER CHEST ARTERY WITH GRAFT		$967.74	$967.74					
35005	REPAIR OF ANEURYSM OR HEAD ARTERY WITH GRAFT		$816.63	$816.63					
35011	REPAIR OF ANEURYSM OR ARM ARTERY WITH GRAFT		$731.19	$731.19					
35013	REPAIR OF RUPTURED ANEURYSM OF ARM ARTERY WITH GRAFT		$936.23	$936.23					
35021	REPAIR OF ANEURYSM OR UPPER CHEST OR NECK ARTERY WITH GRAFT		$1,077.67	$1,077.67					
35022	REPAIR OF RUPTURED ANEURYSM OF UPPER CHEST OR NECK ARTERY WITH GRAFT		$1,085.08	$1,085.08					
35045	REPAIR OF ANEURYSM OR FOREARM ARTERY WITH GRAFT		$684.85	$684.85					
35081	REPAIR OF ANEURYSM OR ABDOMINAL AORTA WITH GRAFT		$1,326.86	$1,326.86					
35082	REPAIR OF RUPTURED ANEURYSM OF ABDOMINAL AORTA WITH GRAFT		$1,571.70	$1,571.70					
35091	REPAIR OF ANEURYSM OR ABDOMINAL AORTA INVOLVING ARTERIES TO ABDOMINAL ORGANS WITH GRAFT		$1,535.88	$1,535.88					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35092	REPAIR OF RUPTURED ANEURYSM OF ABDOMINAL AORTA INVOLVING ARTERIES TO ABDOMINAL ORGANS WITH GRAFT		$1,889.34	$1,889.34					
35102	REPAIR OF ANEURYSM OR ABDOMINAL AORTA INVOLVING GROIN ARTERIES WITH GRAFT		$1,386.89	$1,386.89					
35103	REPAIR OF RUPTURED ANEURYSM OF ABDOMINAL AORTA INVOLVING GROIN ARTERIES WITH GRAFT		$1,747.01	$1,747.01					
35111	REPAIR OF ANEURYSM OR SPLEEN ARTERY WITH GRAFT		$1,005.65	$1,005.65					
35112	REPAIR OF RUPTURED ANEURYSM OF SPLEEN ARTERY WITH GRAFT		$844.22	$844.22					
35121	REPAIR OF ANEURYSM OR LIVER, KIDNEYS, STOMACH AND/OR INTESTINES ARTERY WITH GRAFT		$1,325.97	$1,325.97					
35122	REPAIR OF RUPTURED ANEURYSM OF LIVER, KIDNEYS, STOMACH, AND/OR INTESTINE ARTERY WITH GRAFT		$1,518.22	$1,518.22					
35131	REPAIR OF ANEURYSM OR GROIN ARTERY WITH GRAFT		$1,001.31	$1,001.31					
35132	REPAIR OF RUPTURED ANEURYSM OF GROIN ARTERY WITH GRAFT		$1,186.63	$1,186.63					
35141	REPAIR OF ANEURYSM OR UPPER THIGH ARTERY WITH GRAFT		$853.95	$853.95					
35142	REPAIR OF RUPTURED ANEURYSM OF UPPER THIGH ARTERY WITH GRAFT		$939.56	$939.56					
35151	REPAIR OF ANEURYSM OR LOWER LEG ARTERY WITH GRAFT		$945.88	$945.88					
35152	REPAIR OF RUPTURED ANEURYSM OF LOWER LEG ARTERY WITH GRAFT		$749.67	$749.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35180	REPAIR OF CONGENITAL ABNORMAL ARTERY-VEIN CONNECTION OF HEAD AND NECK		$590.46	$590.46					
35182	REPAIR OF CONGENITAL ABNORMAL ARTERY-VEIN CONNECTION IN CHEST AND ABDOMEN		$797.79	$797.79					
35184	REPAIR OF CONGENITAL ABNORMAL ARTERY-VEIN CONNECTION IN ARMS OR LEGS		$625.22	$625.22					
35188	REPAIR OF ABNORMAL ARTERY VEIN CONNECTION OF HEAD AND NECK		$640.56	$640.56					
35189	REPAIR OF ABNORMAL ARTERY VEIN CONNECTION IN CHEST AND ABDOMEN		$859.95	$859.95					
35190	REPAIR OF ABNORMAL ARTERY VEIN CONNECTION IN ARM OR LEG		$675.30	$675.30					
35201	REPAIR OF ABNORMAL ARTERY VEIN CONNECTION IN ARM OR LEG		$578.39	$578.39					
35206	REPAIR OF BLOOD VESSEL OF ARM		$570.70	$570.70					
35207	REPAIR OF BLOOD VESSEL OF HAND OR FINGER		$602.43	$602.43					
35211	REPAIR OF BLOOD VESSEL OF CHEST ON HEART-LUNG MACHINE		$1,013.08	$1,013.08					
35216	REPAIR OF BLOOD VESSEL OF CHEST		$839.36	$839.36					
35221	REPAIR OF BLOOD VESSEL OF ABDOMEN		$794.29	$794.29					
35226	REPAIR OF BLOOD VESSEL OF LEG		$562.85	$562.85					
35231	REPAIR OF BLOOD VESSEL OF NECK WITH VEIN GRAFT		$756.05	$756.05					
35236	REPAIR OF BLOOD VESSEL OF ARM WITH VEIN GRAFT		$660.14	$660.14					
35241	REPAIR OF BLOOD VESSEL OF CHEST WITH VEIN GRAFT ON HEART-LUNG MACHINE		$1,045.62	$1,045.62					
35246	REPAIR OF BLOOD VESSEL IN CHEST WITH VEIN GRAFT		$1,039.17	$1,039.17					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35251	REPAIR OF BLOOD VESSEL OF ABDOMEN WITH VEIN GRAFT		$775.92	$775.92					
35256	REPAIR OF BLOOD VESSEL OF LEG WITH VEIN GRAFT		$688.21	$688.21					
35261	REPAIR OF BLOOD VESSEL OF NECK WITH GRAFT		$722.49	$722.49					
35266	REPAIR OF BLOOD VESSEL OF ARM WITH GRAFT		$635.28	$635.28					
35271	REPAIR OF BLOOD VESSEL OF CHEST WITH GRAFT ON HEART-LUNG MACHINE		$989.56	$989.56					
35276	REPAIR OF BLOOD VESSEL OF CHEST WITH GRAFT		$848.30	$848.30					
35281	REPAIR OF BLOOD VESSEL OF ABDOMEN WITH GRAFT		$988.75	$988.75					
35286	REPAIR OF BLOOD VESSEL OF LEG WITH GRAFT		$687.02	$687.02					
35301	REMOVAL OF BLOOD CLOT AND PORTION OF CHEST, NECK, OR BRAIN ARTERY		$924.15	$924.15					
35302	REMOVAL OF BLOOD CLOT AND PORTION OF SUPERFICIAL FEMORAL ARTERY		$869.22	$869.22					
35303	REMOVAL OF BLOOD CLOT AND PORTION OF POPLITEAL ARTERY		$955.83	$955.83					
35304	REMOVAL OF BLOOD CLOT AND PORTION OF TIBIOPERONEAL TRUNK ARTERY		$994.77	$994.77					
35305	REMOVAL OF BLOOD CLOT AND PORTION OF TIBIAL OR PERONEAL ARTERY, INITIAL ARTERY		$955.83	$955.83					
35306	REMOVAL OF BLOOD CLOT AND PORTION OF TIBIAL OR PERONEAL ARTERY, EACH ADDITIONAL ARTERY		$360.74	$360.74					
35311	REMOVAL OF BLOOD CLOT AND PORTION OF CHEST OR NECK ARTERY		$1,367.17	$1,367.17					
35321	REMOVAL OF BLOOD CLOT AND PORTION OF ARTERY OF UPPER ARM		$738.10	$738.10					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35331	REMOVAL OF BLOOD CLOT AND PORTION OF ABDOMINAL AORTA		$1,072.40	$1,072.40					
35341	REMOVAL OF BLOOD CLOT AND PORTION OF ARTERY OF ABDOMINAL ORGAN		$1,246.23	$1,246.23					
35351	REMOVAL OF BLOOD CLOT AND PORTION OF ARTERY OF GROIN		$1,035.08	$1,035.08					
35355	REMOVAL OF BLOOD CLOT AND PORTION OF ARTERY OF UPPER THIGH		$929.63	$929.63					
35361	REMOVAL OF BLOOD CLOT AND PORTION OF ABDOMINAL AORTA AND GROIN ARTERY		$1,263.78	$1,263.78					
35363	REMOVAL OF BLOOD CLOT AND PORTION OF ABDOMINAL AORTA AND UPPER THIGH ARTERY		$1,397.25	$1,397.25					
35371	REMOVAL OF BLOOD CLOT AND PORTION OF UPPER THIGH ARTERY		$704.10	$704.10					
35372	REMOVAL OF BLOOD CLOT AND PORTION OF DEEP UPPER THIGH ARTERY		$716.15	$716.15					
35390	REMOVAL OF BLOOD CLOT AND PORTION OF NECK ARTERY FOLLOWING PREVIOUS SURGERY		$147.88	$147.88					
35400	EXAM OF BLOOD VESSEL OR GRAFT USING AN ENDOSCOPE		$151.60	$151.60					
35500	HARVEST OF UPPER ARM VEIN SEGMENT		$210.19	$210.19					
35501	BYPASS OF DISEASED OR BLOCKED NECK TO BRAIN ARTERY WITH VEIN		$1,138.74	$1,138.74					
35506	BYPASS OF DISEASED OR BLOCKED NECK TO CHEST ARTERY WITH VEIN		$1,137.56	$1,137.56					
35508	BYPASS OF DISEASED OR BLOCKED BACK OF NECK TO BRAIN ARTERY WITH VEIN		$1,074.09	$1,074.09					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35509	BYPASS OF DISEASED OR BLOCKED NECK TO OPPOSITE NECK ARTERY WITH VEIN		$1,092.22	$1,092.22					
35510	BYPASS OF DISEASED OR BLOCKED NECK TO ARM ARTERY WITH VEIN		$975.05	$975.05					
35511	BYPASS OF DISEASED OR BLOCKED CHEST TO OPPOSITE CHEST ARTERY WITH VEIN		$777.20	$777.20					
35512	BYPASS OF DISEASED OR BLOCKED CHEST TO ARM ARTERY WITH VEIN		$956.29	$956.29					
35515	BYPASS OF DISEASED OR BLOCKED CHEST TO BRAIN ARTERY WITH VEIN		$855.59	$855.59					
35516	BYPASS OF DISEASED OR BLOCKED CHEST TO UPPER ARM ARTERY WITH VEIN		$988.55	$988.55					
35518	BYPASS OF DISEASED OR BLOCKED UNDER ARM TO OPPOSITE ARM ARTERY WITH VEIN		$962.99	$962.99					
35521	BYPASS OF DISEASED OR BLOCKED ARM TO UPPER LEG ARTERY WITH VEIN		$985.63	$985.63					
35522	BYPASS OF DISEASED OR BLOCKED UNDER ARM TO ARM ARTERY WITH VEIN		$928.60	$928.60					
35523	BYPASS OF DISEASED OR BLOCKED UPPER ARM TO ARM ARTERY WITH VEIN		$1,049.13	$1,049.13					
35525	BYPASS OF DISEASED OR BLOCKED UPPER ARM TO OPPOSITE ARM ARTERY WITH VEIN		$886.32	$886.32					
35526	BYPASS OF DISEASED OR BLOCKED CHEST TO NECK ARTERY WITH VEIN		$953.30	$953.30					
35531	BYPASS OF DISEASED OR BLOCKED ABDOMINAL TO ABDOMINAL ARTERY WITH VEIN		$1,347.14	$1,347.14					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35533	BYPASS OF DISEASED OR BLOCKED ARM TO UPPER LEG AND OPPOSITE LEG ARTERY WITH VEIN		$1,233.91	$1,233.91					
35535	BYPASS OF DISEASED OR BLOCKED LIVER TO KIDNEY ARTERY WITH VEIN		$1,685.55	$1,685.55					
35536	BYPASS OF DISEASED OR BLOCKED ARTERY SPLEEN TO KIDNEY ARTERY WITH VEIN		$1,309.80	$1,309.80					
35537	BYPASS OF DISEASED OR BLOCKED ARTERY SPLEEN TO KIDNEY ARTERY WITH VEIN		$1,682.71	$1,682.71					
35538	BYPASS OF DISEASED OR BLOCKED AORTA TO GROIN AND OPPOSITE GROIN ARTERY WITH VEIN		$1,880.70	$1,880.70					
35539	BYPASS OF DISEASED OR BLOCKED AORTA TO UPPER LEG ARTERY WITH VEIN		$1,767.47	$1,767.47					
35540	BYPASS OF DISEASED OR BLOCKED AORTA TO UPPER LEG AND OPPOSITE UPPER LEG ARTERY WITH VEIN		$1,971.31	$1,971.31					
35556	BYPASS OF DISEASED OR BLOCKED UPPER TO LOWER LEG ARTERY WITH VEIN		$1,045.93	$1,045.93					
35558	BYPASS OF DISEASED OR BLOCKED UPPER LEG TO OPPOSITE UPPER LEG ARTERY WITH VEIN		$894.82	$894.82					
35560	BYPASS OF DISEASED OR BLOCKED AORTA TO KIDNEY ARTERY WITH VEIN		$1,286.91	$1,286.91					
35563	BYPASS OF DISEASED OR BLOCKED GROIN TO OPPOSITE GROIN ARTERY WITH VEIN		$670.29	$670.29					
35565	BYPASS OF DISEASED OR BLOCKED GROIN TO UPPER LEG ARTERY WITH VEIN		$965.59	$965.59					
35566	BYPASS OF DISEASED OR BLOCKED MAJOR UPPER TO LOWER LEG ARTERY WITH VEIN		$1,245.24	$1,245.24					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35570	BYPASS OF DISEASED OR BLOCKED LOWER LEG TO OPPOSITE LOWER LEG ARTERY WITH VEIN		$1,301.33	$1,301.33					
35571	BYPASS OF DISEASED OR BLOCKED LOWER LEG TO LOWER LEG ARTERY WITH VEIN		$1,102.17	$1,102.17					
35572	HARVEST OF UPPER LEG TO THIGH VEIN SEGMENT		$278.71	$278.71					
35583	BYPASS OF DISEASED OR BLOCKED THIGH TO KNEE ARTERY WITH VEIN GRAFT		$1,117.21	$1,117.21					
35585	BYPASS OF DISEASED OR BLOCKED UPPER LEG TO LOWER LEG ARTERY WITH VEIN GRAFT		$1,287.06	$1,287.06					
35587	BYPASS OF DISEASED OR BLOCKED LOWER LEG TO LOWER LEG ARTERY WITH VEIN GRAFT		$1,178.19	$1,178.19					
35600	HARVEST OF ARM ARTERY SEGMENT FOR HEART BYPLASS PROCEDURE		$207.06	$207.06					
35601	BYPASS OF DISEASED OR BLOCKED NECK TO BRAIN ARTERY WITH OTHER THAN VEIN		$1,061.04	$1,061.04					
35606	BYPASS OF DISEASED OR BLOCKED NECK TO CHEST ARTERY WITH OTHER THAN VEIN		$1,066.59	$1,066.59					
35612	BYPASS OF DISEASED OR BLOCKED CHEST TO OPPOSITE CHEST ARTERY WITH OTHER THAN VEIN		$951.71	$951.71					
35616	BYPASS OF DISEASED OR BLOCKED CHEST TO UPPER ARM ARTERY WITH OTHER THAN VEIN		$955.70	$955.70					
35621	BYPASS OF DISEASED OR BLOCKED ARM TO CHEST ARTERY WITH OTHER THAN VEIN		$934.91	$934.91					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35623	BYPASS OF DISEASED OR BLOCKED ARM TO LOWER LEG ARTERY WITH OTHER THAN VEIN		$714.35	$714.35					
35626	BYPASS OF DISEASED OR BLOCKED ARM TO LOWER THIGH OR LEG ARTERY WITH OTHER THAN VEIN		$1,302.44	$1,302.44					
35631	BYPASS OF DISEASED OR BLOCKED ARTERY AORTA TO ABDOMINAL OR KIDNEY ARTERY WITH OTHER THAN VEIN		$1,245.65	$1,245.65					
35632	BYPASS OF DISEASED OR BLOCKED GROIN TO STOMACH ARTERY WITH OTHER THAN VEIN		$1,600.40	$1,600.40					
35633	BYPASS OF DISEASED OR BLOCKED GROIN TO ABDOMINAL ARTERY WITH OTHER THAN VEIN		$1,728.58	$1,728.28					
35634	BYPASS OF DISEASED OR BLOCKED GROIN TO KIDNEY ARTERY WITH OTHER THAN VEIN		$1,566.28	$1,566.28					
35636	BYPASS OF DISEASED OR BLOCKED SPLEEN TO KIDNEY ARTERY WITH OTHER THAN VEIN		$1,042.24	$1,042.24					
35637	BYPASS OF DISEASED OR BLOCKED AORTA TO GROIN ARTERY WITH OTHER THAN VEIN		$1,337.61	$1,337.61					
35638	BYPASS OF DISEASED OR BLOCKED AORTA TO GROIN TO OPPOSITE GROIN ARTERY WITH OTHER THAN VEIN		$1,359.03	$1,359.03					
35642	BYPASS OF DISEASED OR BLOCKED BACK OF NECK TO BRAIN ARTERY WITH OTHER THAN VEIN		$820.57	$820.57					
35645	BYPASS OF DISEASED OR BLOCKED CHEST TO ARM ARTERY WITH OTHER THAN VEIN		$823.95	$823.95					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35646	BYPASS OF DISEASED OR BLOCKED ARTERY AORTA TO UPPER LEG AND OPPOSITE UPPER LEG ARTERY WITH OTHER THAN VEIN		$1,457.00	$1,457.00					
35647	BYPASS OF DISEASED OR BLOCKED AORTA TO UPPER LEG ARTERY WITH OTHER THAN VEIN		$1,189.26	$1,189.26					
35650	BYPASS OF DISEASED OR BLOCKED UNDER ARM TO OPPOSITE ARM ARTERY WITH OTHER THAN VEIN		$917.63	$917.63					
35654	BYPASS OF DISEASED OR BLOCKED ARM TO BOTH LOWER THIGH ARTERIES WITH OTHER THAN VEIN		$1,217.20	$1,217.20					
35656	BYPASS OF DISEASED OR BLOCKED UPPER LEG TO LOWER THIGH ARTERY WITH OTHER THAN VEIN		$969.73	$969.73					
35661	BYPASS OF DISEASED OR BLOCKED UPPER LEG TO OPPOSITE UPPER LEG ARTERY WITH OTHER THAN VEIN		$832.01	$832.01					
35663	BYPASS OF DISEASED OR BLOCKED GROIN TO OPPOSITE GROIN ARTERY WITH OTHER THAN VEIN		$908.67	$908.67					
35665	BYPASS OF DISEASED OR BLOCKED GROIN TO UPPER LEG ARTERY WITH OTHER THAN VEIN		$976.19	$976.19					
35666	BYPASS OF DISEASED OR BLOCKED UPPER LEG TO LOWER LEG ARTERY WITH OTHER THAN VEIN		$1,103.86	$1,103.86					
35671	BYPASS OF DISEASED OR BLOCKED KNEE TO LOWER LEG ARTERIES WITH OTHER THAN VEIN		$874.97	$874.97					
35681	BYPASS OF DISEASED OR BLOCKED KNEE TO LOWER LEG ARTERIES WITH OTHER THAN VEIN		$601.23	$601.23					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35682	BYPASS OF DISEASED OR BLOCKED ARTERY WITH 2 VEIN SEGMENTS FROM 2 LOCATIONS		$344.11	$345.93					
35683	BYPASS OF DISEASED OR BLOCKED ARTERY WITH 3 OR MORE SEGMENTS FROM 2 OR MORE LOCATIONS		$393.97	$396.57					
35685	INSERTION OF VEIN PATCH AT LOWEST PORTION OF BYPASS GRAFT		$165.52	$165.52					
35686	CREATION OF ARTERY-VEIN CONNECTION DURING PROCEDURE ON LEG		$136.91	$136.91					
35691	RELOCATION AND/OR REIMPLANTATION OF BRAIN ARTERY TO NECK ARTERY		$1,108.86	$1,108.86					
35693	RELOCATION AND/OR REIMPLANTATION OF BRAIN ARTERY TO CHEST ARTERY		$709.64	$709.64					
35694	RELOCATION AND/OR REIMPLANTATION OF CHEST ARTERY TO NECK ARTERY		$825.59	$825.59					
35695	RELOCATION AND/OR REIMPLANTATION OF NECK ARTERY TO CHEST ARTERY		$825.59	$825.59					
35697	REIMPLANTATION OF ORGAN ARTERY TO AORTA PROTHESIS BELOW KIDNEY		$122.87	$122.87					
35700	BYPASS OF UPPER OR LOWER LEG ARTERY REOPERATION MORE THAN 1 MONTH AFTER ORIGINAL OPERATION		$142.80	$142.80					
35701	EXPLORATION OF NECK ARTERY		$351.12	$351.12					Updated Effective 01/01/2020
35702	EXPLORATION OF ARM ARTERY		$329.70	$329.70					Added Effective 01/01/2020
35703	EXPLORATION OF LEG ARTERY		$335.39	$335.39					Added Effective 01/01/2020
35800	EXPLORATION OF NECK FOR BLEEDING, BLOOD CLOT, OR INFECTION AFTER SURGERY		$342.42	$342.42					
35820	EXPLORATION OF CHEST FOR BLEEDING, BLOOD CLOT, OR INFECTION AFTER SURGERY		$588.74	$588.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
35840	EXPLORATION OF ABDOMEN FOR BLEEDING, BLOOD CLOT, OR INFECTION AFTER SURGERY		$482.15	$482.15					
35860	EXPLORATION OF ARM OR LEG FOR BLEEDING, BLOOD CLOT, OR INFECTION AFTER SURGERY		$317.00	$317.00					
35870	REPAIR OF ABNORMAL DRAINAGE TRACT OF BLOOD VESSEL GRAFT AND BOWEL		$942.55	$942.55					
35875	REMOVAL OF BLOOD CLOT OF ARTERY OR VEIN GRAFT		$526.45	$526.45					
35876	REMOVAL OF BLOOD CLOT AND REVISION OF ARTERY OR VEIN GRAFT		$639.13	$639.13					
35879	REVISION OF LEG ARTERY BYPASS WITH VEIN PATCH		$727.03	$727.03					
35881	REVISION OF LEG ARTERY BYPASS WITH PLACEMENT OF RELOCATED VEIN		$798.37	$798.37					
35883	REVISION OF GROIN ARTERY BYPASS WITH PATCH GRAFT		$972.55	$972.55					
35884	REVISION OF GROIN ARTERY BYPASS WITH VEIN PATCH GRAFT		$1,033.25	$1,033.25					
35901	REMOVAL OF INFECTED NECK GRAFT		$440.80	$440.80					
35903	REMOVAL OF INFECTED GRAFT OF ARM OR LEG		$481.29	$481.29					
35905	REMOVAL OF INFECTED CHEST GRAFT		$723.67	$723.67					
35907	REMOVAL OF INFECTED ABDOMINAL GRAFT		$746.85	$746.85					
36000	INSERTION OF NEEDLE OR TUBE INTO VEIN		$9.47	$12.69					
36002	INJECTION TO CAUSE BLOOD CLOT IN DISEASED OR PSEUDOANEURYSM OF ARM OR LEG		$84.99	$134.56					
36005	INJECTION FOR X-RAY IMAGING PROCEDURE INTO VEIN OF ARM OR LEG		$41.45	$41.45					
36010	INSERTION OF TUBE INTO VENA CAVA		$135.43	$135.43					
36011	INSERTION OF TUBE INTO VEIN, FIRST ORDER BRANCH		$148.45	$148.45					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36012	INSERTION OF TUBE INTO VEIN, SECOND ORDER BRANCH		$182.68	$182.68					
36013	INTRODUCTION OF CATHETER, RIGHT HEART OR MAIN PULMONARY ARTERY		$138.07	$138.07					
36014	INSERTION OF TUBE INTO LEFT OR RIGHT PULMONARY ARTERY		$156.33	$156.33					
36015	INSERTION OF TUBE INTO ARTERY OF LOBE OF LUNG		$182.68	$182.68					
36100	INSERTION OF NEEDLE OR TUBE INTO ARTERY OF NECK OR BRAIN		$165.86	$165.86					
36140	INSERTION OF NEEDLE OR TUBE INTO ARTERY OF ARM OR LEG		$102.63	$102.63					
36160	INSERTION OF NEEDLE OR TUBE INTO AORTA		$144.68	$144.68					
36200	INSERTION OF TUBE INTO AORTA		$168.64	$168.64					
36215	INSERTION OF TUBE INTO CHEST OR ARM ARTERY, EACH FIRST ORDER BRANCH		$211.32	$211.32					
36216	INSERTION OF TUBE INTO CHEST OR ARM ARTERY, INITIAL SECOND ORDER BRANCH		$249.74	$249.74					
36217	INSERTION OF TUBE INTO CHEST OR ARM ARTERY, INITIAL THIRD ORDER BRANCH		$297.78	$297.78					
36218	INSERTION OF TUBE INTO CHEST OR ARM ARTERY, ADDITIONAL SECOND, THIRD ORDER AND BEYOND		$47.48	$47.48					
36221	INSERTION OF TUBE INTO CHEST AORTA FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$174.58	$888.61					
36222	INSERTION OF TUBE INTO EXTRACRANIAL ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$236.23	$1,113.58					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36223	INSERTION OF TUBE INTO INTRACRANIAL ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$255.43	$1,213.67					
36224	INSERTION OF TUBE INTO INTERNAL NECK ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$278.48	$1,318.90					
36225	INSERTION OF TUBE INTO CHEST ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$254.43	$1,204.15					
36226	INSERTION OF TUBE INTO BRAIN ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$279.00	$1,345.00					
36227	INSERTION OF TUBE INTO EXTERNAL NECK ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$88.25	$196.79					
36228	INSERTION OF TUBE INTO NECK OR BRAIN ARTERY FOR DIAGNOSIS OR TREATMENT WITH REVIEW BY RADIOLOGIST		$180.03	$925.33					
36245	INSERTION OF TUBE INTO ABDOMINAL, PELVIC, OR LEG ARTERY, EACH FIRST ORDER BRANCH		$239.58	$239.58					
36246	INSERTION OF TUBE INTO ABDOMINAL, PELVIC, OR LEG ARTERY, INITIAL SECOND ORDER BRANCH		$249.74	$249.74					
36247	INSERTION OF TUBE INTO ABDOMINAL, PELVIC, OR LEG ARTERY, INITIAL THIRD ORDER BRANCH		$297.78	$297.78					
36248	INSERTION OF TUBE INTO ABDOMINAL, PELVIC, OR LEG ARTERY, ADDITIONAL SECOND, THIRD, AND BEYOND		$47.48	$47.48					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36251	INSERTION OF TUBE INTO FIRST ORDER MAIN AND ACCESSORY ARTERIES OF KIDNEY FOR IMAGING WITH REVIEW BY RADIOLOGIST		$226.84	$1,128.74					
36252	INSERTION OF TUBE INTO FIRST ORDER MAIN AND ACCESSORY ARTERIES OF BOTH KIDNEYS FOR IMAGING WITH REVIEW BY RADIOLOGIST		$295.51	$1,241.60					
36253	INSERTION OF TUBE INTO SECOND OR THIRD ORDER BRANCHES OF ARTERIES OF KIDNEY FOR IMAGING WITH REVIEW BY RADIOLOGIST		$315.90	$1,725.36					
36254	INSERTION OF TUBE INTO SECOND OR THIRD ORDER BRANCHES OF ARTERIES OF BOTH KIDNEYS FOR IMAGING WITH REVIEW BY RADIOLOGIST		$340.81	$1,795.75					
36260	INSERTION OF IMPLANTABLE ARTERIAL INFUSION PUMP		$487.06	$487.06					
36261	INSERTION OF IMPLANTABLE ARTERIAL INFUSION PUMP		$217.91	$217.91					
36262	REMOVAL OF IMPLANTED ARTERIAL INFUSION PUMP		$170.06	$170.06					
36299	OTHER BLOOD VESSEL INJECTION PROCEDURE	Yes	$0.00	$0.00					
36400	INSERTION OF NEEDLE INTO UPPER LEG OR NECK VEIN (YOUNGER THAN 3 YEARS)		$6.73	$7.94					
36405	INSERTION OF NEEDLE INTO SCALP VEIN (YOUNGER THAN 3 YEARS)		$13.41	$18.08					
36406	INSERTION OF NEEDLE INTO VEIN (YOUNGER THAN 3 YEARS)		$7.15	$9.82					
36410	INSERTION OF NEEDLE INTO VEIN (3 YEARS OR OLDER		$7.66	$11.67					
36415	INSERTION OF NEEDLE INTO VEIN FOR COLLECTION OF BLOOD SAMPLE		$8.45	$8.45					
36416	PUNCTURE OF SKIN FOR COLLECTION OF BLOOD SAMPLE		$3.27	$3.27					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36420	INCISION OF VEIN FOR INSERTION OF NEEDLE OR TUBE (YOUNGER THAN 1 YEAR)		$44.53	$44.53					
36425	INCISION OF VEIN FOR INSERTION OF NEEDLE OR TUBE (1 YEAR OR OLDER)		$24.69	$24.69					
36430	TRANSFUSION OF BLOOD OR BLOOD PRODUCTS		$14.58	$27.45					
36440	PUSH BLOOD TRANSFUSION (2 YEARS OR YOUNGER)		$57.14	$57.14					
36450	EXCHANGE BLOOD TRANSFUSION, NEWBORN		$95.02	$120.24					
36455	EXCHANGE TRANSFUSION, BLOOD; OTHER THAN NEWBORN		$137.54	$137.54					
36456	PARTIAL EXCHANGE TRANSFUSION, NEWBORN		$87.14	$87.14					Added Effective 1/1/2017
36460	INTRAUTERINE FETAL TRANSFUSION		$346.19	$346.19					
36465	INJECTION OF CHEMICAL AGENT INTO SINGLE INCOMPETENT VEIN OF LEG USING ULTRASOUND GUIDANCE		$96.02	$1,183.75					Added Effective 1/1/2018
36466	INJECTION OF CHEMICAL AGENT INTO MULTIPLE INCOMPETENT VEINS OF SAME LEG USING ULTRASOUND GUIDANCE		$122.16	$1,238.09					Added Effective 1/1/2018
36470	INJECTION OF CHEMICAL AGENT INTO SINGLE INCOMPETENT VEIN		$65.80	$118.00					
36471	INJECTION OF CHEMICAL AGENT INTO MULTIPLE INCOMPETENT VEINS OF LEG		$50.17	$55.40					
36473	MECHANOCHEMICAL DESTRUCTION OF FIRST INCOMPETENT VEIN OF ARM OR LEG USING IMAGING GUIDANCE		$141.94	$1,114.27					Added Effective 1/1/2017
36474	SUBSEQUENT INCOMPETENT VEINS OF ARM OR LEG USING IMAGING GUIDANCE		$71.10	$207.81					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36475	DESTRUCTION OF FIRST INCOMPETENT VEIN OF ARM OR LEG USING RADIOFREQUENCY AND IMAGING GUIDANCE	Yes	$273.44	$1,379.06					
36476	DESTRUCTION OF SUBSEQUENT INCOMPETENT VEINS OF ARM OR LEG USING RADIOFREQUENCY AND IMAGING GUIDANCE	Yes	$134.04	$306.01					
36478	LASER DESTRUCTION OF INCOMPETENT VEIN OF ARM OR LEG USING IMAGING GUIDANCE	Yes	$271.71	$1,103.62					
36479	LASER DESTRUCTION OF INCOMPETENT VEINS OF ARM OR LEG USING IMAGING GUIDANCE, SUBSEQUENT	Yes	$134.04	$308.82					
36481	INSERTION OF TUBE INTO PORTAL VEIN OF LIVER		$362.09	$362.09					
36482	CHEMICAL DESTRUCTION OF FIRST INCOMPETENT VEIN OF ARM OR LEG USING IMAGING GUIDANCE		$142.44	$1,576.64					Added Effective 1/1/2018
36483	CHEMICAL DESTRUCTION OF SUBSEQUENT INCOMPETENT VEINS OF ARM OR LEG USING IMAGING GUIDANCE		$71.11	$110.79					Added Effective 1/1/2018
36500	INSERTION OF TUBE INTO VEIN WITH COLLECTION OF BLOOD SAMPLE		$105.68	$105.68					
36510	INSERTION OF TUBE INTO UMBILICAL VEIN, NEWBORN		$37.03	$41.59					
36511	MECHANICAL SEPARATION OF WHITE BLOOD CELLS FROM BLOOD		$69.62	$69.62					
36512	MECHANICAL SEPARATION OF RED BLOOD CELLS FROM BLOOD		$69.62	$69.62					
36513	MECHANICAL SEPARATION OF PLATELET CELLS FROM BLOOD		$69.62	$69.62					
36514	MECHANICAL SEPARATION OF PLASMA FROM BLOOD		$69.62	$69.62					
36516	MECHANICAL SEPARATION OF PLASMA AND ABNORMAL ANTIBODIES FROM BLOOD		$69.62	$69.62					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36522	MECHANICAL SEPARATION OF WHITE BLOOD CELLS AND PLATELETS FROM BLOOD		$124.51	$124.51					
36555	INSERTION OF NON-TUNNELED CENTRAL VENOUS TUBE FOR INFUSION (YOUNGER THAN 5 YEARS)		$102.82	$237.45					
36556	INSERTION OF NON-TUNNELED CENTRAL VENOUS TUBE FOR INFUSION (5 YEARS OR OLDER)		$98.73	$98.73					
36557	INSERTION OF TUNNELED CENTRAL VENOUS TUBE FOR INFUSION (YOUNGER THAN 5 YEARS)		$227.78	$511.70					
36558	INSERTION OF TUNNELED CENTRAL VENOUS TUBE FOR INFUSION (5 YEARS OR OLDER)		$223.76	$223.76					
36560	INSERTION OF CENTRAL VENOUS TUBE WITH PORT (YOUNGER THAN 5 YEARS)		$270.61	$948.94					
36561	INSERTION OF CENTRAL VENOUS TUBE WITH PORT (5 YEARS OR OLDER)		$269.91	$269.91					
36563	INSERTION OF CENTRAL VENOUS TUBE WITH PUMP		$271.50	$882.00					
36565	INSERTION OF 2 CENTRAL VENOUS TUBES IN 2 VEINS FOR INFUSION		$261.39	$760.11					
36566	INSERTION OF 2 CENTRAL VENOUS TUBES IN 2 VEINS WITH PORT		$279.86	$795.03					
36568	INSERTION OF TUBE FOR INFUSION (YOUNGER THAN 5 YEARS)		$75.58	$273.17					
36569	INSERTION OF TUBE FOR INFUSION (5 YEARS OR OLDER)		$71.15	$230.20					
36570	INSERTION OF CENTRAL VENOUS TUBE WITH PORT FOR INFUSION (YOUNGER THAN 5 YEARS)		$235.91	$1,208.95					
36571	INSERTION OF CENTRAL VENOUS TUBE WITH PORT FOR INFUSION (5 YEARS OR OLDER)		$235.08	$1,088.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36572	INSERTION OF TUBE FOR INFUSION WITH IMAGING GUIDANCE AND REVIEW BY RADIOLOGIST, PATIENT YOUNGER THAN 5 YEARS		$75.38	$316.89					Effective 1/1/2019
36573	INSERTION OF TUBE FOR INFUSION WITH IMAGING GUIDANCE AND REVIEW BY RADIOLOGIST, PATIENT 5 YEARS OR OLDER		$69.70	$298.15					Effective 1/1/2019
36575	REPAIR OF CENTRAL VENOUS TUBE FOR INFUSION		$41.28	$120.68					
36576	REPAIR OF CENTRAL VENOUS TUBE FOR INFUSION WITH PORT OR PUMP		$152.03	$305.17					
36578	REPLACEMENT OF CENTRAL VENOUS TUBE, TUBE ONLY		$172.26	$387.06					
36580	REPLACEMENT OF NONTUNNELED CENTRAL VENOUS TUBE		$52.36	$192.65					
36581	REPLACEMENT OF TUNNELED CENTRAL VENOUS TUBE		$161.28	$455.48					
36582	REPLACEMENT OF TUNNELED CENTRAL VENOUS TUBE WITH PORT		$235.54	$849.89					
36583	REPLACEMENT OF TUNNELED CENTRAL VENOUS TUBE WITH PUMP		$237.49	$503.94					
36584	REPLACEMENT OF PERIPHERALLY INSERTED CENTRAL VENOUS TUBE (PICC) WITH REVIEW BY RADIOLOGIST		$52.79	$201.05					
36585	REPLACEMENT OF PERIPHERALLY INSERTED CENTRAL VENOUS TUBE (PICC) WITH PORT		$220.69	$1,065.26					
36589	REMOVAL OF TUNNELED CENTRAL VENOUS TUBE		$108.02	$126.26					
36590	REMOVAL OF CENTRAL VENOUS TUBE WITH PORT OR PUMP		$152.70	$152.70					
36591	COLLECTION OF BLOOD SAMPLE FROM IMPLANTED DEVICE		$16.32	$16.32					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36592	COLLECTION OF BLOOD SAMPLE FROM CENTRAL VENOUS TUBE		$20.18	$20.18					
36593	DECLOTTING OF CENTRAL VENOUS TUBE		$35.31	$35.31					
36595	MECHANICAL REMOVAL OF OBSTRUCTIVE MATERIAL FROM CENTRAL VENOUS TUBE		$148.07	$596.95					
36596	MECHANICAL REMOVAL OF TISSUE OR OBSTRUCTIVE MATERIAL FROM CENTRAL VENOUS TUBE		$35.73	$136.71					
36597	REPOSITIONING OF CENTRAL VENOUS TUBE USING FLUOROSCOPIC GUIDANCE		$47.66	$118.06					
36598	CONTRAST INJECTION FOR IMAGING TO EVALUATE CENTRAL VENOUS ACCESS DEVICE		$90.87	$90.97					
36600	ARTERY PUNCTURE COLLECTION OF BLOOD SAMPLE		$17.39	$17.39					
36620	INSERTION OF ARTERY TUBE FOR BLOOD SAMPLING OR INFUSION THROUGH SKIN		$54.85	$54.85					
36625	INSERTION OF ARTERY TUBE FOR BLOOD SAMPLING OR INFUSION THROUGH ARTERY INCISION		$89.36	$89.36					
36640	INSERTION OF ARTERY TUBE FOR PROLONGED INFUSION		$133.57	$133.57					
36660	INSERTION OF UMBILICAL ARTERY TUBE, NEWBORN		$55.20	$55.20					
36680	INSERTION OF NEEDLE FOR INFUSION INTO BONE		$70.90	$70.90					
36800	INSERTION OF TUBE CONNECTING VEIN TO VEIN FOR HEMODIALYSIS		$137.65	$137.65					
36810	INSERTION OF TUBE CONNECTING ARTERY TO VEIN FOR HEMODIALYSIS		$264.56	$264.56					
36815	REVISION OR REMOVAL OF TUBE CONNECTING ARTERY TO VEIN FOR HEMODIALYSIS		$183.74	$183.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36818	RELOCATION OF MAJOR UPPER ARM VEIN WITH CONNECTION TO ARM ARTERY FOR HEMODIALYSIS		$544.36	$544.36					
36819	RELOCATION OF UPPER ARM SURFACE VEIN WITH CONNECTION TO ARM ARTERY FOR HEMODIALYSIS		$612.48	$612.48					
36820	RELOCATION OF FOREARM VEIN WITH CONNECTION TO ARM ARTERY FOR HEMODIALYSIS		$610.47	$610.47					
36821	RELOCATION OF ARM VEIN WITH CONNECTION TO ARM ARTERY FOR HEMODIALYSIS		$475.86	$475.86					
36823	INSERTION OF TUBE INTO ARM OR LEG FOR BLOOD CIRCULATION AND CHEMOTHERAPY		$936.63	$936.63					
36825	CREATION OF ARTERY-VEIN CONNECTION USING VEIN GRAFT FOR HEMODIALYSIS		$628.76	$628.76					
36830	CREATION OF ARTERY-VEIN CONNECTION USING TUBE GRAFT FOR HEMODIALYSIS		$552.78	$552.78					
36831	REMOVAL OF BLOOD CLOT FROM HEMODIALYSIS GRAFT		$322.84	$322.84					
36832	REVISION OF HEMODIALYSIS GRAFT		$429.83	$429.83					
36833	REVISION OF HEMODIALYSIS GRAFT WITH REMOVAL OF BLOOD CLOT		$492.02	$492.02					
36835	INSERTION OF HEMODIALYSIS SHUNT IN ARTERY OR VEIN		$302.83	$302.83					
36836	CREATION OF OPENING BETWEEN ARTERY		$295.39	$5,470.59					
36837	CREATION OF OPENING BETWEEN ARTERY		$385.37	$7,782.18					
36838	REPAIR OF HEMODIALYSIS ACCESS IN ARM		$909.16	$909.16					
36860	INJECTION FOR REMOVAL OF BLOOD CLOT FROM EXTERNAL DIALYSIS TUBE		$138.36	$138.36					
36861	INSERTION OF BALLOON TUBE FOR REMOVAL OF BLOOD CLOT FROM EXTERNAL DIALYSIS TUBE		$184.85	$184.85					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
36901	INSERTION OF NEEDLE AND/OR TUBE INTO HEMODIALYSIS CIRCUIT WITH REVIEW BY RADIOLOGIST		$118.83	$429.95					Added Effective 1/1/2017
36902	INSERTION OF NEEDLE AND/OR TUBE INTO HEMODIALYSIS CIRCUIT AND BALLOON DILATION OF DIALYSIS SEGMENT WITH REVIEW BY RADIOLOGIST		$177.13	$908.51					Added Effective 1/1/2017
36903	INSERTION OF NEEDLE AND/OR TUBE INTO HEMODIALYSIS CIRCUIT AND INSERTION OF STENT IN DIALYSIS SEGMENT WITH REVIEW BY RADIOLOGIST		$242.56	$4,120.92					Added Effective 1/1/2017
36904	REMOVAL AND/OR DISSOLVING OF BLOOD CLOT IN HEMODIALYSIS CIRCUIT AND BALLOON DILATION OF DIALYSIS SEGMENT WITH REVIEW BY RADIOLOGIST		$279.28	$1,326.45					Added Effective 1/1/2017
36905	REMOVAL AND/OR DISSOLVING OF BLOOD CLOT IN HEMODIALYSIS CIRCUIT AND BALLOON DILATION OF DIALYSIS SEGMENT WITH IMAGING REVIEW BY RADIOLOGIST, WITH BALLOON TUBE		$350.55	$1,696.88					Added Effective 1/1/2017
36906	REMOVAL AND/OR DISSOLVING OF BLOOD CLOT IN HEMODIALYSIS CIRCUIT AND BALLOON DILATION OF DIALYSIS SEGMENT AND PLACEMENT OF STENT WITH REVIEW BY RADIOLOGIST		$409.08	$5,006.35					Added Effective 1/1/2017
36907	BALLOON DILATION OF DIALYSIS SEGMENT WITH REVIEW BY RADIOLOGIST		$102.11	$543.44					Added Effective 1/1/2017
36908	INSERTION OF STENT IN DIALYSIS SEGMENT WITH REVIEW BY RADIOLOGIST		$153.06	$1,983.61					Added Effective 1/1/2017
36909	PERMANENT BLOCKAGE OF HEMODIALYSIS CIRCUIT WITH REVIEW BY RADIOLOGIST		$145.21	$1,449.43					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37140	CONNECTION OF VENA CAVA AND PORTAL VEIN OF LIVER		$1,168.05	$1,168.05					
37145	CONNECTION OF KIDNEY VEIN AND PORTAL VEIN OF LIVER		$1,180.85	$1,180.85					
37160	CONNECTION OF VENA CAVA AND ABDOMINAL VEIN		$1,159.19	$1,159.19					
37180	CONNECTION OF SPLEEN AND KIDNEY VEIN NEAR AORTA		$1,127.27	$1,127.27					
37181	CONNECTION OF SPLEEN AND KIDNEY VEIN		$1,264.26	$1,264.26					
37182	INSERTION OF SHUNTS TO BYPASS BLOOD FLOW TO LIVER WITH REVIEW BY RADIOLOGIST		$691.70	$691.70					
37183	REVISION OF SHUNTS TO BYPASS BLOOD FLOW TO LIVER WITH REVIEW BY RADIOLOGIST		$321.59	$321.59					
37184	PRIMARY REMOVAL AND DISSOLVING OF BLOOD CLOT FROM ARTERY OR ARTERY GRAFT USING FLUOROSCOPIC GUIDANCE, INITIAL VESSEL		$356.92	$2,105.80					
37185	PRIMARY REMOVAL AND DISSOLVING OF BLOOD CLOT FROM ARTERY OR ARTERY GRAFT USING FLUOROSCOPIC GUIDANCE, SUBSEQUENT VESSELS		$131.08	$688.35					
37187	REMOVAL AND DISSOLVING OF BLOOD CLOT FROM VEIN USING FLUOROSCOPIC GUIDANCE, INITIAL TREATMENT		$331.84	$2,047.29					
37188	REMOVAL AND DISSOLVING OF BLOOD CLOT FROM VEIN USING FLUOROSCOPIC GUIDANCE, REPEAT TREATMENT ON SUBSEQUENT DAY		$239.47	$1,764.83					
37191	INSERTION OF VENA CAVA FILTER WITH REVIEW BY RADIOLOGIST		$194.25	$2,040.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37192	REPOSITIONING OF VENA CAVA FILTER WITH REVIEW BY RADIOLOGIST		$301.23	$1,379.12					
37193	REMOVAL OF VENA CAVA FILTER WITH REVIEW BY RADIOLOGIST		$300.97	$1,316.84					
37195	INFUSION OF DRUG TO DISSOLVE BLOOD CLOT IN BRAIN		$211.50	$211.50					
37197	RETRIEVAL OF FOREIGN BODY IN BLOOD VESSEL WITH REVIEW BY RADIOLOGIST		$250.01	$1,303.87					
37200	BIOPSY OF BLOOD VESSEL USING TUBE		$179.61	$179.61					
37211	INSERTION OF TUBE INTO ARTERY FOR DRUG INFUSION FOR BLOOD CLOT WITH REVIEW BY RADIOLOGIST, INITIAL TREATMENT DAY		$327.91	$327.91					
37212	INSERTION OF TUBE INTO VEIN FOR DRUG INFUSION FOR BLOOD CLOT WITH REVIEW BY RADIOLOGIST, INITIAL TREATMENT DAY		$289.50	$289.50					
37213	INSERTION OF TUBE INTO ARTERY OR VEIN FOR DRUG INFUSION FOR BLOOD CLOT WITH REVIEW BY RADIOLOGIST		$202.48	$202.48					
37214	REMOVAL OF TUBE INTO ARTERY OR VEIN WITH REVIEW BY RADIOLOGIST		$118.33	$118.33					
37215	INSERTION OF STENT AND BLOOD CLOT PROTECTION DEVICE IN NECK ARTERY WITH REVIEW BY RADIOLOGIST		$815.30	$815.30					
37216	INSERTION OF STENT IN NECK ARTERY WITH REVIEW BY RADIOLOGIST		$785.20	$785.20					
37217	INSERTION OF STENT IN BLOOD VESSEL OF CHEST WITH REVIEW BY RADIOLOGIST		$906.18	$906.18					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37218	INSERTION OF STENT IN BLOOD VESSEL OF CHEST OPEN OR ACCESSED THROUGH SKIN WITH REVIEW BY RADIOLOGIST		$672.32	$672.32					Added effective 1/1/2015
37220	BALLOON DILATION OF GROIN ARTERY, INITIAL VESSEL		$380.96	$2,769.69					Termed 12/31/2025, See codes (37254-37299)
37221	INSERTION OF STENT IN GROIN ARTERY, INITIAL VESSEL		$463.45	$4,092.38					Termed 12/31/2025, See codes (37254-37299)
37222	BALLOON DILATION OF GROIN ARTERY, EACH ADDITIONAL VESSEL		$172.98	$798.72					Termed 12/31/2025, See codes (37254-37299)
37223	INSERTION OF STENT IN GROIN ARTERY, ADDITIONAL VESSEL		$196.42	$2,253.73					Termed 12/31/2025, See codes (37254-37299)
37224	BALLOON DILATION OF ARTERY OF LEG		$419.53	$3,327.49					Termed 12/31/2025, See codes (37254-37299)
37225	REMOVAL OF PLAQUE IN ARTERIES OF LEG		$565.21	$9,393.82					Termed 12/31/2025, See codes (37254-37299)
37226	INSERTION OF STENT IN ARTERIES OF LEG		$465.52	$7,862.85					Termed 12/31/2025, See codes (37254-37299)
37227	REMOVAL OF PLAQUE AND INSERTION OF STENTS IN ARTERIES OF LEG		$682.71	$12,699.65					Termed 12/31/2025, See codes (37254-37299)
37228	BALLOON DILATION OF ARTERY OF LEG, INITIAL VESSEL		$512.70	$4,736.52					Termed 12/31/2025, See codes (37254-37299)
37229	REMOVAL OF PLAQUE IN ARTERY OF LEG, INITIAL VESSEL		$661.94	$9,313.71					Termed 12/31/2025, See codes (37254-37299)
37230	INSERTION OF STENT IN ARTERY OF LEG, INITIAL VESSEL		$638.50	$7,317.51					Termed 12/31/2025, See codes (37254-37299)
37231	REMOVAL OF PLAQUE AND INSERTION OF STENTS IN ARTERY OF LEG, INITIAL VESSEL		$693.98	$11,741.01					Termed 12/31/2025, See codes (37254-37299)
37232	BALLOON DILATION OF ARTERY OF LEG, EACH ADDITIONAL VESSEL		$185.44	$1,063.97					Termed 12/31/2025, See codes (37254-37299)
37233	REMOVAL OF PLAQUE IN ARTERY OF LEG, EACH ADDITIONAL VESSEL		$304.71	$1,300.44					Termed 12/31/2025, See codes (37254-37299)

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37234	INSERTION OF STENT IN ARTERY OF LEG, EACH ADDITIONAL VESSEL		$253.98	$3,387.42					Termed 12/31/2025, See codes (37254-37299)
37235	REMOVAL OF PLAQUE AND INSERTION OF STENTS IN ARTERY OF LEG, EACH ADDITIONAL VESSEL		$360.49	$3,619.15					Termed 12/31/2025, See codes (37254-37299)
37236	INSERTION OF STENT IN ARTERY (EXCEPT LOWER EXTREMITY, CHEST, HEART, NECK AND BRAIN) WITH REVIEW BY RADIOLOGIST, INITIAL ARTERY		$377.71	$2,096.92					
37237	INSERTION OF STENT IN ARTERY (EXCEPT LOWER EXTREMITY, CHEST, HEART, NECK AND BRAIN) WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL ARTERY		$176.55	$911.84					
37238	INSERTION OF STENT IN VEIN WITH REVIEW BY RADIOLOGIST, INITIAL VEIN		$264.58	$3,043.77					
37239	INSERTION OF STENT IN VEIN WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL VEIN		$123.23	$1,512.31					
37241	OCCLUSION OF VEIN WITH REVIEW BY RADIOLOGIST		$366.17	$3,377.96					
37242	OCCLUSION OF ARTERY WITH REVIEW BY RADIOLOGIST		$408.85	$5,672.04					
37243	OCCLUSION OF GROWTHS OR OBSTRUCTED VESSELS WITH REVIEW BY RADIOLOGIST		$487.47	$7,157.85					
37244	OCCLUSION OF ARTERY OR VEIN BLEEDING WITH REVIEW BY RADIOLOGIST		$568.69	$5,031.13					
37246	BALLOON DILATION OF ARTERY WITH REVIEW BY RADIOLOGIST, INITIAL ARTERY		$290.74	$1,598.35					Added Effective 1/1/2017
37247	BALLOON DILATION OF ARTERY WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL ARTERY		$144.20	$648.95					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37248	BALLOON DILATION OF VEIN WITH REVIEW BY RADIOLOGIST, INITIAL VEIN		$249.99	$1,111.06					Added Effective 1/1/2017
37249	BALLOON DILATION OF VEIN WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL VEIN		$122.68	$477.46					Added Effective 1/1/2017
37252	ULTRASOUND EVALUATION OF BLOOD VESSEL WITH REVIEW BY RADIOLOGIST, INITIAL VESSEL	Yes	$75.78	$1,033.05					Added Effective 1/1/2016
37253	ULTRASOUND EVALUATION OF BLOOD VESSEL WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL VESSEL	Yes	$60.60	$164.35					Added Effective 1/1/2016
37254	BALLOON DILATION OF ARTERY OF ABDOMEN/PELVIS, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$290.45	$1,663.09					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37255	BALLOON DILATION OF ARTERY IN ABDOMEN/PELVIS, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$117.78	$413.46					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37256	BALLOON DILATION OF ARTERY IN ABDOMEN/PELVIS, COMPLEX LESION IN INITIAL VESSEL		$425.87	$1,957.82					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37257	BALLOON DILATION OF ARTERY IN ABDOMEN/PELVIS, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$152.25	$471.15					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37258	INSERTION OF STENT OF ARTERY IN ABDOMEN/PELVIS, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$347.21	$2,845.61					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37259	INSERTION OF STENT IN ARTERY OF ABDOMEN/PELVIS STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$157.15	$966.92					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37260	INSERTION OF STENT ARTERY OF ABDOMEN/PELVIS, COMPLEX LESION IN INITIAL VESSEL		$502.02	$6,709.76					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37261	INSERTION OF STENT ARTERY OF ABDOMEN/PELVIS, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$166.99	$2,671.72					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37262	INTRAVASCULAR SHOCKWAVE TREATMENT ARTERY IN ABDOMEN/PELVIS		$117.70	$2,704.98					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37263	BALLOON DILATION OF ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$308.11	$4,318.41					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37264	BALLOON DILATION OF ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$118.04	$1,735.98					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37265	BALLOON DILATION OF ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN INITIAL VESSEL		$416.58	$5,433.15					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37266	BALLOON DILATION OF ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$157.12	$1,943.08					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37267	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$347.48	$4,147.03					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37268	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$146.96	$2,668.57					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37269	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN INITIAL VESSEL		$583.84	$9,182.09					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37270	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$197.28	$2,780.34					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37271	REMOVAL OF PLAQUE WITH BALLOON DILATION ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$356.14	$8,379.91					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37272	REMOVAL OF PLAQUE WITH BALLOON DILATION ARTERY IN THIGH/BEHIND KNEE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$157.09	$1,861.02					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37273	REMOVAL OF PLAQUE WITH BALLOON DILATION ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN INITIAL VESSEL		$498.49	$10,499.19					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37274	REMOVAL OF PLAQUE WITH BALLOON DILATION ARTERY IN THIGH/BEHIND KNEE, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$216.10	$1,984.39					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37275	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE WITH REMOVAL OF PLAQUE, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$434.08	$8,159.53					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37276	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE WITH REMOVAL OF PLAQUE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$166.68	$2,748.16					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37277	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE WITH REMOVAL OF PLAQUE, COMPLEX LESION IN INITIAL VESSEL		$590.38	$12,240.14					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37278	STENT PLACEMENT IN ARTERY IN THIGH/BEHIND KNEE WITH REMOVAL OF PLAQUE, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$234.72	$3,082.86					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37279	INTRAVASCULAR SHOCKWAVE TREATMENT ARTERY IN THIGH/BACK OF KNEE		$157.29	$3,678.04					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37280	BALLOON DILATION OF ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$387.50	$2,165.55					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37281	BALLOON DILATION OF ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$116.69	$592.26					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37282	BALLOON DILATION OF ARTERY IN LOWER LEG, COMPLEX LESION IN INITIAL VESSEL		$485.63	$4,862.04					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37283	BALLOON DILATION OF ARTERY IN LOWER LEG, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$165.89	$696.59					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37284	STENT PLACEMENT IN ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$398.96	$4,484.97					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37285	STENT PLACEMENT IN ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$131.84	$2,215.33					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37286	STENT PLACEMENT IN ARTERY IN LOWER LEG, COMPLEX LESION IN INITIAL VESSEL		$535.46	$8,239.81					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37287	STENT PLACEMENT IN ARTERY IN LOWER LEG, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$198.27	$3,921.86					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37288	REMOVAL OF PLAQUE WITH BALLOON DILATION IN ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$527.75	$6,207.70					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37289	REMOVAL OF PLAQUE WITH BALLOON DILATION IN ARTERY IN LOWER LEG, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$186.02	$744.68					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37290	REMOVAL OF PLAQUE WITH BALLOON DILATION IN ARTERY IN LOWER LEG, COMPLEX LESION IN INITIAL VESSEL		$664.36	$8,473.16					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37291	REMOVAL OF PLAQUE WITH BALLOON DILATION IN ARTERY IN LOWER LEG, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$253.51	$872.30					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37292	STENT PLACEMENT IN ARTERY IN LOWER LEG WITH REMOVAL OF PLAQUE, STRAIGHTFORWARD LESION IN INITIAL VESSEL		$587.98	$8,138.29					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37293	STENT PLACEMENT IN ARTERY IN LOWER LEG WITH REMOVAL OF PLAQUE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL VESSEL		$258.25	$2,795.68					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37294	STENT PLACEMENT IN ARTERY IN LOWER LEG WITH REMOVAL OF PLAQUE, COMPLEX LESION IN INITIAL VESSEL		$704.89	$12,074.28					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37295	STENT PLACEMENT IN ARTERY IN LOWER LEG WITH REMOVAL OF PLAQUE, COMPLEX LESION IN EACH ADDITIONAL VESSEL		$325.47	$4,771.25					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37296	BALLOON DILATION OF ARTERY IN ANKLE, STRAIGHTFORWARD LESION IN INITIAL ARTERY		$434.12	$2,435.32					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37297	BALLOON DILATION OF ARTERY IN ANKLE, STRAIGHTFORWARD LESION IN EACH ADDITIONAL ARTERY		$155.76	$668.52					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37298	BALLOON DILATION OF ARTERY IN ANKLE, COMPLEX LESION IN INITIAL ARTERY		$535.97	$2,742.64					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37299	BALLOON DILATION OF ARTERY IN ANKLE, COMPLEX LESION IN EACH ADDITIONAL ARTERY		$193.74	$726.82					Added effective 1/1/2026,Codes 37254-37299 replacing termed codes 37220 - 37235.
37500	TYING OF VEINS IN LEG MUSCLES USING AN ENDOSCOPE		$550.53	$550.53					Eff date 1/1/2003 Termed 12/31/2025
37605	TYING OF INTERNAL NECK ARTERY		$310.26	$310.26					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37606	TYING AND GRADUAL CLAMPING OF NECK ARTERY		$312.14	$312.14					
37607	TYING OR BANDING OF SURGICALLY CREATED ARTERY-VEIN CONNECTION		$270.69	$270.69					
37609	TYING OR BIOPSY OF ARTERY ON SIDE OF SKULL		$135.39	$135.39					
37615	TYING OF MAJOR NECK ARTERY		$306.53	$306.53					
37616	TYING OF MAJOR CHEST ARTERY		$564.15	$564.15					
37617	TYING OF MAJOR ARTERY OF THE ABDOMEN		$668.38	$668.38					
37618	TYING OF MAJOR ARM OR LEG ARTERY		$273.77	$273.77					
37619	TYING OF INFERIOR VENA CAVA		$1,325.28	$1,325.28					
37650	TYING OF UPPER LEG VEIN		$249.28	$249.28					
37660	TYING OF GROIN VEIN		$463.39	$463.39					
37700	TYING AND DIVISION OF LONG LEG VEIN		$218.66	$218.66					
37718	TYING, INCISION, AND STRIPPING OF SHORT LEG VEIN		$308.05	$308.05					
37722	TYING, INCISION, AND STRIPPING OF LONG LEG VEIN		$366.19	$366.19					
37735	LIGATION AND DIVISION AND COMPLETE STRIPPING OF LONG OR SHORT SAPHENOU		$555.02	$555.02					
37760	TYING, INCISION, AND STRIPPING OF LEG VEINS WITH REMOVAL OF ULCER AND SKIN GRAFT AND/OR INTERRUPTION OF LOWER LEG VEINS		$528.06	$528.06					
37761	TYING OF VARICOSE VEINS, SIMPLE PROCEDURE USING ULTRASOUND		$426.59	$426.59					
37765	REMOVAL OF VARICOSE VEINS OF ARM OR LEG, 10-20 INCISIONS		$340.01	$340.01					
37766	REMOVAL OF VARICOSE VEINS OF ARM OR LEG, MORE THAN 20 INCISIONS		$414.34	$414.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
37780	REMOVAL OF VARICOSE VEINS OF ARM OR LEG, MORE THAN 20 INCISIONS		$162.49	$162.49					
37785	TYING AND DIVISION OF SHORT LEG VEIN		$135.12	$135.12					
37788	RESTORATION OF BLOOD FLOW IN ARTERY OF PENIS		$1,067.94	$1,067.94					
37790	BLOCKAGE OF PENIS VEIN		$401.58	$401.58					
37799	OTHER PROCEDURE ON BLOOD VESSEL	Yes	$0.00	$0.00					
38100	REMOVAL OF SPLEEN		$625.14	$625.14					
38101	PARTIAL REMOVAL OF SPLEEN		$593.61	$593.61					
38102	REMOVAL OF SPLEEN DURING OTHER SURGICAL PROCEDURE		$222.27	$222.27					
38115	REPAIR OF RUPTURED SPLEEN		$610.56	$610.56					
38120	EXAM OF SPLEEN USING AN ENDOSCOPE		$683.05	$683.05					
38200	INJECTION PROCEDURE FOR IMAGING OF SPLEEN		$126.98	$126.98					
38204	MANAGEMENT OF STEM CELL DONOR SEARCH		$81.93	$81.93					
38205	COLLECTION OF DONOR STEM CELLS FOR TRANSPLANTATION		$60.14	$60.14					
38206	COLLECTION OF STEM CELLS FOR TRANSPLANTATION		$60.14	$60.14					
38207	PRESERVATION AND STORAGE OF STEM CELLS FOR TRANSPLANTATION		$47.87	$47.87					
38208	THAWING OF FROZEN STEM CELLS FOR TRANSPLANTATION		$52.26	$52.26					
38209	THAWING AND WASHING OF FROZEN STEM CELLS FOR TRANSPLANTATION		$46.23	$46.23					
38210	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH REMOVAL OF T CELLS		$50.08	$50.08					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
38211	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH REMOVAL OF GROWTH CELLS		$50.08	$50.08					
38212	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH RED BLOOD CELL REMOVAL		$50.08	$50.08					
38213	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH REMOVAL OF PLATELETS		$50.08	$50.08					
38214	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH REDUCTION OF BLOOD FLUID (PLASMA) VOLUME		$41.58	$41.58					
38215	PREPARATION OF STEM CELLS FOR TRANSPLANTATION WITH CELL CONCENTRATION IN BLOOD FLUID (PLASMA)		$50.08	$50.08					
38220	ASPIRATION OF BONE MARROW SAMPLE FOR DIAGNOSIS		$43.19	$151.60					
38221	BIOPSY OF BONE MARROW		$54.88	$162.78					
38222	BIOPSY AND ASPIRATION OF BONE MARROW SAMPLE FOR DIAGNOSIS		$62.32	$130.21					Added Effective 1/1/2018
38225	HARVESTING OF BLOOD-DERIVED T WHITE BLOOD CELLS (T LYMPHOCYTES) FOR CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY, PER DAY		$80.51	$80.51					
38226	PREPARATION OF BLOOD-DERIVED T WHITE BLOOD CELLS (T LYMPHOCYTES) FOR TRANSPORTATION FOR CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY		$32.49	$32.49					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
38227	RECEIPT AND PREPARATION OF BLOOD-DERIVED T WHITE BLOOD CELLS (T LYMPHOCYTES) FOR CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY		$32.77	$32.77					
38228	ADMINISTRATION OF BLOOD-DERIVED T WHITE BLOOD CELLS (T LYMPHOCYTES) FOR CHIMERIC ANTIGEN RECEPTOR T-CELL (CAR-T) THERAPY		$144.82	$233.03					
38230	HARVEST OF DONOR BONE MARROW FOR TRANSPLANTATION		$172.39	$172.39					
38232	HARVEST OF PATIENT BONE MARROW FOR TRANSPLANTATION		$147.54	$147.54					
38240	TRANSPLANTATION OF DONOR STEM CELLS PER DONOR		$124.92	$124.92					
38241	TRANSPLANTATION OF PATIENT-DERIVED STEM CELLS		$123.60	$123.60					
38242	TRANSPLANTATION OF DONOR WHITE BLOOD CELLS		$68.50	$68.50					
38243	TRANSPLANTATION OF DONOR STEM CELLS		$94.02	$94.02					
38300	SIMPLE DRAINAGE OF ABSCESS OR SWELLING OF LYMPH NODE		$53.64	$61.42					
38305	DRAINAGE OF EXTENSIVE ABSCESS OR SWELLING OF LYMPH NODE		$185.74	$185.74					
38308	INCISION OR OTHER OPERATION ON LYMPHATIC CHANNELS		$234.84	$234.84					
38380	SUTURE AND/OR TYING OF CHEST LYMPH DUCT THROUGH NECK		$329.17	$329.17					
38381	SUTURE AND/OR TYING OF CHEST LYMPH DUCT THROUGH NECK		$594.28	$594.28					
38382	SUTURE AND/OR TYING OF CHEST LYMPH DUCT THROUGH ABDOMEN		$428.41	$428.41					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
38500	BIOPSY OR REMOVAL OF LYMPH NODES		$133.22	$133.22					
38505	NEEDLE BIOPSY OR REMOVAL OF SURFACE LYMPH NODES		$52.60	$67.62					
38510	BIOPSY OR REMOVAL OF DEEP LYMPH NODES OF NECK		$193.50	$193.50					
38520	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, DEEP CERVICAL NODE(S) WITH		$236.41	$236.41					
38525	BIOPSY OR REMOVAL OF DEEP LYMPH NODES OF UNDERARM		$210.58	$210.58					
38530	BIOPSY OR REMOVAL OF LYMPH NODES OF BREAST		$271.60	$271.60					
38531	BIOPSY OR REMOVAL OF LYMPH NODES OF GROIN		$350.70	$350.70					Effective 1/1/2019
38542	REMOVAL OF DEEP LYMPH NODES OF NECK		$287.35	$287.35					
38550	REMOVAL OF CONGENITAL DEFECT OF LYMPH NODES AT UNDERARM OR NECK		$290.33	$290.33					
38555	REMOVAL OF CONGENITAL DEFECT OF LYMPH NODES AT UNDERARM OR NECK WITH DEEP NEUROVASCULAR DISSECTION		$611.46	$611.46					
38562	PARTIAL REMOVAL OF PELVIC AND AORTIC LYMPH NODES		$496.86	$496.86					
38564	REMOVAL OF LYMPH NODES BEHIND ABDOMINAL CAVITY		$528.34	$528.34					
38570	BIOPSY AND REMOVAL OF LYMPH NODES OF ABDOMINAL CAVITY USING AN ENDOSCOPE		$434.46	$434.46					
38571	REMOVAL OF LYMPH NODES OF BOTH SIDES OF PELVIS USING AN ENDOSCOPE		$565.05	$565.05					
38572	REMOVAL OF LYMPH NODES OF BOTH SIDES OF PELVIS AND ABDOMINAL LYMPH NODE BIOPSY USING AN ENDOSCOPE		$736.91	$736.91					Rate updated 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
38573	REMOVAL OF LYMPH NODES OF BOTH SIDES OF PELVIS WITH BIOPSY AND WASHING OF ABDOMEN USING AN ENDOSCOPE		$926.52	$926.52					Added Effective 1/1/2018
38589	OTHER PROCEDURE ON LYMPHATIC SYSTEM USING AN ENDOSCOPE	Yes	$0.00	$0.00					
38700	REMOVAL OF LYMPH NODES FROM CHIN TO THYROID CARTILAGE		$512.23	$512.23					
38720	REMOVAL OF LYMPH NODES OF NECK		$832.11	$832.11					
38724	REMOVAL OF LYMPH NODES, MUSCLE, AND TISSUE OF NECK		$821.68	$821.68					
38740	PARTIAL REMOVAL OF LYMPH NODES OF UNDERARM		$335.18	$335.18					
38745	REMOVAL OF LYMPH NODES OF UNDERARM		$501.95	$501.95					
38746	REMOVAL OF LYMPH NODES OF CHEST CAVITY AND BREAST BONE		$203.12	$203.12					
38747	REMOVAL OF LYMPH NODES OF ABDOMINAL ORGAN		$226.49	$226.49					
38760	REMOVAL OF LYMPH NODES OF GROIN		$450.96	$450.96					
38765	PARTIAL REMOVAL OF LYMPH NODES OF GROIN AND PELVIS		$838.20	$838.20					
38770	REMOVAL OF LYMPH NODES OF GROIN AND PELVIS		$810.15	$810.15					
38780	REMOVAL OF LYMPH NODES OF ABDOMINAL CAVITY		$951.96	$951.96					
38790	INJECTION PROCEDURE FOR IMAGING OF LYMPHATIC SYSTEM		$86.46	$86.46					
38792	INJECTION OF RADIOACTIVE MATERIAL FOR X-RAY IDENTIFICATION OF LYMPH NODE		$113.93	$113.93					
38794	EXPOSURE OF LYMPH DUCT OF CHEST CAVITY		$204.25	$204.25					
38900	IMAGING OF LYMPH NODES DURING SURGERY		$119.87	$119.87					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
38999	OTHER PROCEDURE ON LYMPHATIC SYSTEM	Yes	$0.00	$0.00					
39000	EXPLORATION, DRAINAGE, BIOPSY, OR REMOVAL OF FOREIGN BODY IN CHEST CAVITY THROUGH NECK		$336.11	$336.11					
39010	EXPLORATION, DRAINAGE, BIOPSY, OR REMOVAL OF FOREIGN BODY IN CHEST CAVITY		$674.24	$674.24					
39200	REMOVAL OF CYST BELOW BREAST BONE		$726.46	$726.46					
39220	REMOVAL OF GROWTH BELOW BREAST BONE		$943.68	$943.68					
39401	EXAM OF CHEST USING AN ENDOSCOPE		$253.10	$253.10					Added Effective 1/1/2016
39402	EXAM OF CHEST WITH BIOPSY OF LYMPH NODE USING AN ENDOSCOPE		$330.66	$330.66					Added Effective 1/1/2016
39499	OTHER PROCEDURE ON CHEST CAVITY BELOW BREAST BONE	Yes	$0.00	$0.00					
39501	REPAIR OF MUSCLE TISSUE SEPARATING CHEST AND ABDOMINAL CAVITIES		$692.01	$692.01					
39503	REPAIR OF CONGENITAL DEFECT OF MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES, NEONATE		$1,721.61	$1,721.61					
39540	REPAIR OF ACUTE INJURY TO MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES		$737.37	$737.37					
39541	REPAIR OF CHRONIC INJURY TO MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES		$768.14	$768.14					
39545	SUTURE OF MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES TO RESTORE FUNCTION		$598.78	$598.78					
39560	SIMPLE REPAIR OF MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES		$602.51	$602.51					
39561	COMPLEX REPAIR OF MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES		$827.49	$827.49					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
39599	OTHER PROCEDURE ON MUSCLE SEPARATING CHEST AND ABDOMINAL CAVITIES	Yes	$0.00	$0.00					
40490	BIOPSY OF LIP		$47.42	$57.35					
40500	REMOVAL OF BORDER OF LIP		$282.84	$282.84					
40510	REMOVAL OF WEDGE OF LIP TISSUE WITH CLOSURE		$310.91	$310.91					
40520	V-SHAPED REMOVAL OF LIP TISSUE		$270.44	$270.44					
40525	REMOVAL OF LIP WITH REPAIR USING LOCAL TISSUE GRAFT		$497.22	$497.22					
40527	REMOVAL OF LIP WITH REPAIR USING TISSUE GRAFT		$595.01	$595.01					
40530	PARTIAL REMOVAL OF LIP		$305.60	$305.60					
40650	REPAIR OF LIP AND BORDER		$238.10	$238.10					
40652	REPAIR OF VERTICAL LIP WOUND EXTENDING TO HALF OF LIP		$279.20	$279.20					
40654	REPAIR OF VERTICAL LIP WOUND EXTENDING TO OVER HALF OF LIP		$351.05	$351.05					
40700	PRIMARY PLASTIC REPAIR OF DEFORMITY PRESENT AT BIRTH ON 1 SIDE OF NOSE AND/OR LIP		$611.31	$611.31					
40701	PRIMARY PLASTIC REPAIR OF DEFORMITY PRESENT AT BIRTH ON 1 SIDE OF NOSE AND/OR LIP		$1,000.92	$1,000.92					
40702	PRIMARY PLASTIC REPAIR OF DEFORMITY PRESENT AT BIRTH ON 1 SIDE OF NOSE AND/OR LIP		$640.15	$640.15					
40720	SECONDARY PLASTIC REPAIR OF NOSE AND LIP DEFORMITY PRESENT AT BIRTH		$679.54	$679.54					
40761	PLASTIC REPAIR OF NOSE AND/OR LIP DEFORMITY PRESENT AT BIRTH USING A TISSUE GRAFT		$743.84	$743.84					
40799	OTHER PROCEDURE ON LIP	Yes	$175.00	$227.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
40800	SIMPLE DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION OF MOUTH		$44.49	$54.41					
40801	COMPLICATED DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION OF MOUTH		$99.46	$122.26					
40804	REMOVAL OF EMBEDDED FOREIGN BODY, VESTIBULE OF MOUTH; SIMPLE		$44.16	$51.93					
40805	COMPLICATED REMOVAL OF EMBEDDED FOREIGN BODY IN MOUTH		$151.81	$151.81					
40806	INCISION OF TISSUE JOINING LIP AND GUM		$19.48	$19.48					
40808	BIOPSY OF MOUTH		$38.84	$49.03					
40810	REMOVAL OF GROWTH OF TISSUE OF MOUTH		$55.47	$71.30					
40812	REMOVAL OF GROWTH OF MOUTH WITH SIMPLE REPAIR		$89.83	$109.95					
40814	REMOVAL OF GROWTH OF MOUTH WITH COMPLICATED REPAIR		$147.05	$190.36					
40816	COMPLEX REMOVAL OF TISSUE AND MUSCLE GROWTH OF MOUTH		$154.49	$197.67					
40818	REMOVAL OF MOUTH TISSUE FOR GRAFTING		$131.53	$131.53					
40819	REMOVAL OF TISSUE AT DENTAL EDGE AND CHEEK		$86.21	$102.71					
40820	DESTRUCTION OF GROWTH OR SCAR OF MOUTH		$44.66	$51.77					
40830	REPAIR OF LACERATED MOUTH, 2.5 CM OR LESS		$69.85	$69.85					
40831	REPAIR OF LACERATED MOUTH, MORE THAN 2.5 CM		$127.86	$127.86					
40840	REPAIR TO INCREASE DEPTH OF FRONT PORTION OF MOUTH		$430.02	$430.02					
40842	REPAIR TO INCREASE DEPTH ON SIDE OF MOUTH		$430.02	$430.02					
40843	REPAIR TO INCREASE DEPTH ON BOTH SIDES OF MOUTH		$602.33	$602.33					
40844	REPAIR TO INCREASE DEPTH OF ENTIRE ARCH OF MOUTH		$796.00	$796.00					
40845	COMPLEX REPAIR TO INCREASE DEPTH OF MOUTH		$1,216.78	$1,216.78					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
40899	OTHER PROCEDURE ON INNER MOUTH	Yes	$75.00	$97.50					
41000	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION OF SIDE OF TONGUE FROM INSIDE MOUTH		$48.82	$59.01					
41005	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER TONGUE FROM INSIDE MOUTH		$53.84	$53.84					
41006	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION OF TONGUE OR FLOOR OF MOUTH FROM INSIDE MOUTH		$118.67	$118.67					
41007	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION BENEATH CHIN FROM INSIDE MOUTH		$169.88	$169.88					
41008	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER JAW BONE FROM INSIDE MOUTH		$109.61	$123.83					
41009	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER LOWER TEETH FROM INSIDE MOUTH		$195.34	$195.34					
41010	INCISION OF TISSUE CONNECTING TONGUE AND FLOOR OF MOUTH		$45.81	$45.81					
41015	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER TONGUE FROM OUTSIDE MOUTH		$134.92	$134.92					
41016	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION BENEATH CHIN FROM OUTSIDE MOUTH		$217.36	$217.36					
41017	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER JAW BONE FROM OUTSIDE MOUTH		$150.11	$150.11					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
41018	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION UNDER LOWER TEETH FROM OUTSIDE MOUTH		$254.03	$254.03					
41019	INSERTION OF NEEDLES, TUBES, OR DEVICES INTO HEAD AND/OR NECK FOR RADIATION THERAPY		$377.11	$377.11					
41100	BIOPSY OF FRONT 2/3 OF TONGUE		$59.04	$69.76					
41105	BIOPSY OF BACK 1/3 OF TONGUE		$56.93	$70.74					
41108	BIOPSY OF FLOOR OF MOUTH		$42.93	$54.33					
41110	REMOVAL OF GROWTH OF TONGUE WITHOUT CLOSURE		$63.92	$81.35					
41112	REMOVAL OF GROWTH OF FRONT 2/3 OF TONGUE WITH SWITCHES		$114.81	$146.87					
41113	REMOVAL OF GROWTH OF BACK 1/3 OF TONGUE WITH SUTURING		$145.39	$191.12					
41114	REMOVAL OF GROWTH OF TONGUE WITH LOCAL TISSUE GRAFT		$420.36	$420.36					
41115	REMOVAL OF TISSUE CONNECTING TONGUE AND FLOOR OF MOUTH		$101.46	$101.46					
41116	REMOVAL OF GROWTH OF FLOOR OF MOUTH		$142.60	$142.60					
41120	REMOVAL OF LESS THAN HALF OF TONGUE		$475.75	$475.75					
41130	PARTIAL REMOVAL OF TONGUE		$572.07	$572.07					
41135	PARTIAL REMOVAL OF TONGUE AND SURROUNDING LYMPH NODES ON SIDE OF NECK		$974.31	$974.31					
41140	COMPLETE REMOVAL OF TONGUE		$1,254.60	$1,254.60					
41145	COMPLETE REMOVAL OF TONGUE AND SURROUNDING LYMPH NODES ON SIDE OF NECK		$1,492.25	$1,492.25					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
41150	REMOVAL OF TONGUE, FLOOR OF MOUTH, AND JAW BONE		$1,136.41	$1,136.41					
41153	REMOVAL OF TONGUE, FLOOR OF MOUTH, SOFT TISSUE, AND LYMPH NODES		$1,365.67	$1,365.67					
41155	REMOVAL OF TONGUE, FLOOR OF MOUTH, JAW BONE, TISSUE, AND LYMPH NODES		$1,581.07	$1,581.07					
41250	REPAIR OF LACERATED FLOOR OF MOUTH AND/OR TONGUE, 2.5 CM OR LESS		$85.95	$85.95					
41251	REPAIR OF LACERATED BACK 1/3 OF TONGUE, 2.5 CM OR LESS		$125.77	$125.77					
41252	REPAIR OF LACERATED TONGUE OR FLOOR OF MOUTH, MORE THAN 2.6 CM		$155.03	$155.03					
41510	SUTURE OF TONGUE TO LIP TO ENLARGE MOUTH		$176.21	$176.21					
41512	PERMANENT SUSPENSION OF TONGUE BASE USING SUTURES		$464.63	$464.63					
41520	REPAIR OF TISSUE CONNECTING TONGUE TO FLOOR OF MOUTH		$161.22	$161.22					
41599	OTHER PROCEDURE ON TONGUE OR FLOOR OF MOUTH	Yes	$0.00	$0.00					
41800	DRAINAGE OF ABSCESS, CYST, OR BLOOD ACCUMULATION OF DENTAL BONE		$43.82	$53.07					
41805	REMOVAL OF EMBEDDED FOREIGN BODY IN SOFT TISSUE OF TOOTH BEARING BONE		$59.39	$59.39					
41806	REMOVAL OF FOREIGN BODY IN DENTAL BONE		$103.11	$125.10					
41820	REMOVAL OF OVERGROWN GUM TISSUE		$56.25	$75.00					
41821	REMOVAL OF GUM TISSUE AROUND TOOTH		$56.25	$75.00					
41822	REMOVAL OF TISSUE FIBER AT DENTAL BONE		$153.66	$153.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
41823	REMOVAL OF DENTAL BONE		$213.35	$213.35					
41825	REMOVAL OF DENTAL BONE GROWTH		$60.36	$80.34					
41826	REMOVAL OF DENTAL BONE GROWTH WITH SIMPLE REPAIR		$98.45	$126.21					
41827	REMOVAL OF DENTAL BONE GROWTH WITH SIMPLE REPAIR		$155.88	$206.57					
41828	REMOVAL OF ENLARGED MEMBRANE COVERING OF TEETH OR TOOTH SOCKET		$206.39	$206.39					
41830	REMOVAL OF TISSUE OVERGROWTH AT TEETH OR TOOTH SOCKET		$223.87	$223.87					
41850	DESTRUCTION OF GROWTH OF STRUCTURE SUPPORTING TEETH		$112.50	$150.00					
41870	GRAFT OF MOUTH TISSUE LINING TO GUM SURFACE		$187.50	$250.00					
41872	RESHAPING OF GUM		$165.60	$165.60					
41874	RESHAPING OF TOOTH SOCKET		$199.46	$199.46					
41899	OTHER PROCEDURE ON TEETH AND GUMS		$70.00	$0.00					
42000	DRAINAGE OF ABSCESS OF ROOF OF MOUTH		$44.40	$52.71					
42100	BIOPSY OF ROOF OF MOUTH		$49.51	$60.11					
42104	REMOVAL OF GROWTH OF ROOF OF MOUTH		$72.51	$94.24					
42106	REMOVAL OF GROWTH OF ROOF OF MOUTH WITH SIMPLE CLOSURE		$112.05	$141.82					
42107	REMOVAL OF GROWTH OF ROOF OF MOUTH WITH LOCAL TISSUE GRAFT		$201.24	$267.09					
42120	PARTIAL REMOVAL OF ROOF OF MOUTH		$367.77	$367.77					
42140	REMOVAL OF SOFT TISSUE OF ROOF OF MOUTH		$85.04	$85.04					
42145	COMPLEX REMOVAL OF SOFT TISSUE OF ROOF OF MOUTH		$483.48	$483.48					
42160	DESTRUCTION OF GROWTH OR SOFT TISSUE OF ROOF OF MOUTH		$75.76	$96.28					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42180	REPAIR OF LACERATED ROOF OF MOUTH, 2.0 CM OR LESS		$138.29	$138.29					
42182	REPAIR OF LACERATED ROOF OF MOUTH, 2.0 CM OR LESS		$213.22	$213.22					
42200	REPAIR OF DEFECT OF SOFT AND/OR HARD TISSUE OF ROOF OF MOUTH FOR CLEFT PALATE		$491.68	$491.68					
42205	REPAIR OF DEFECT OF SOFT TISSUE OF ROOF OF MOUTH FOR CLEFT PALATE		$572.33	$572.33					
42210	REPAIR OF CLEFT PALATE WITH BONE GRAFT		$652.65	$652.65					
42215	REVISION OF PRIOR CLEFT PALATE REPAIR		$473.96	$473.96					
42220	REPAIR OF CLEFT PALATE WITH PALATE LENGTHENING		$359.65	$359.65					
42225	REPAIR OF CLEFT PALATE WITH LOCAL TISSUE GRAFT FROM THROAT		$477.75	$477.75					
42226	LENGTHENING OF ROOF OF MOUTH WITH THROAT TISSUE GRAFT		$508.94	$508.94					
42227	LENGTHENING OF ROOF OF MOUTH USING MUCOUS MEMBRANE TISSUE GRAFT		$468.85	$468.85					
42235	LENGTHENING OF ROOF OF MOUTH WITH TISSUE GRAFT FROM TISSUE SEPARATING NOSE AIRWAYS		$380.84	$380.84					
42260	REPAIR OF ABNORMAL CONNECTION FROM NASAL SINUS TO SKIN		$239.81	$239.81					
42280	IMPRESSION OF CHEEK BONE FOR PROSTHESIS AT ROOF OF MOUTH		$101.23	$101.23					
42281	INSERTION OF ROOF OF MOUTH PROSTHESIS		$95.01	$95.01					
42299	OTHER PROCEDURE ON ROOF OF MOUTH	Yes	$0.00	$0.00					
42300	SIMPLE DRAINAGE OF ABSCESS OF SALIVA GLAND		$70.96	$83.83					
42305	COMPLICATED DRAINAGE OF ABSCESS OF SALIVA GLAND		$229.06	$229.06					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42310	DRAINAGE OF ABSCESS OF LOWER JAW FROM INSIDE OF MOUTH		$61.04	$74.85					
42320	DRAINAGE OF ABSCESS OF LOWER JAW FROM OUTSIDE OF MOUTH		$121.92	$121.92					
42330	UNCOMPLICATED REMOVAL OF SALIVA GLAND STONE FROM INSIDE MOUTH		$81.05	$95.80					
42335	COMPLICATED REMOVAL OF SALIVA GLAND STONE FROM INSIDE MOUTH		$133.88	$167.00					
42340	COMPLICATED REMOVAL OF SALIVA GLAND STONE		$199.10	$256.09					
42400	NEEDLE BIOPSY OF SALIVA GLAND		$35.91	$46.51					
42405	BIOPSY OF SALIVA GLAND		$120.34	$141.00					
42408	REMOVAL OF SALIVARY CYST UNDER TONGUE		$225.54	$225.54					
42409	CREATION OF TRACT TO DRAIN CYST OF SALIVA GLAND		$162.18	$162.18					
42410	MOVAL OF GROWTH OF SALIVA GLAND OR SALIVA GLAND, LATERAL LOBE		$442.25	$442.25					
42415	REMOVAL OF GROWTH OF SALIVA GLAND WITH RELEASE OF FACIAL NERVE		$853.94	$853.94					
42420	REMOVAL OF GROWTH OF SALIVA GLAND OR SALIVA GLAND WITH RELEASE OF FACIAL NERVE		$989.61	$989.61					
42425	REMOVAL OF GROWTH OF SALIVA GLAND OR SALIVA GLAND, AND FACIAL NERVE		$695.16	$695.16					
42426	REMOVAL OF GROWTH OF SALIVA GLAND OR SALIVA GLAND, AND SURROUNDING LYMPH NODES ON SIDE OF NECK		$1,308.29	$1,308.29					
42440	REMOVAL OF SALIVA GLAND UNDER FLOOR OF MOUTH		$432.06	$432.06					
42450	REMOVAL OF SALIVA GLAND UNDER TONGUE		$228.76	$228.76					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42500	PLASTISIMPLE REPAIR OF SALIVARY DUCTC REPAIR OF SALIVARY DUCT, SIALODOCHOPLASTY; PRIMARY OR SIMPLE		$254.93	$254.93					
42505	COMPLICATED PLASTIC REPAIR OF SALIVARY DUCT		$391.48	$391.48					
42507	CREATION OF NEW DRAINAGE TRACTS OF MAJOR SALIVA GLAND DUCTS ON BOTH SIDES OF MOUTH		$315.89	$315.89					
42509	CREATION OF NEW DRAINAGE TRACTS OF MAJOR SALIVA GLAND DUCTS ON BOTH SIDES OF MOUTH WITH REMOVAL OF SALIVARY GLANDS BELOW BOTH SIDES OF JAW		$551.08	$551.08					
42510	CREATION OF NEW DRAINAGE TRACTS OF MAJOR SALIVA GLAND DUCTS ON BOTH SIDES OF MOUTH WITH TYING OF SALIVA GLAND DUCTS BELOW BOTH SIDES OF JAW		$451.84	$451.84					
42550	INJECTION OF CONTRAST FOR IMAGING OF SALIVA GLANDS		$49.45	$49.45					
42600	INJECTION OF CONTRAST FOR IMAGING OF SALIVA GLANDS		$249.91	$249.91					
42650	INSERTION OF PROBE TO WIDEN SALIVA GLAND DUCT		$28.80	$34.03					
42660	DILATION OF SALIVA GLAND DUCT AND INSERTION OF TUBE		$41.32	$48.03					
42665	TYING OF SALIVA GLAND DUCT		$132.10	$132.10					
42699	OTHER PROCEDURE ON SALIVA GLAND OR DUCT	Yes	$0.00	$0.00					
42700	DRAINAGE OF ABSCESS NEAR TONSIL		$59.90	$71.30					
42720	DRAINAGE OF ABSCESS OF THROAT FROM INSIDE MOUTH		$132.63	$132.63					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42725	DRAINAGE OF ABSCESS OF THROAT FROM OUTSIDE MOUTH		$355.25	$355.25					
42800	BIOPSY OF BACK OF THROAT		$51.19	$61.11					
42804	SIMPLE BIOPSY OF GROWTH OF THROAT BEHIND NOSE		$67.31	$67.31					
42806	COMPLEX BIOPSY OF GROWTH OF THROAT BEHIND NOSE		$86.33	$86.33					
42808	REMOVAL OR DESTRUCTION OF GROWTH OF THROAT		$140.66	$140.66					
42809	REMOVAL OR DESTRUCTION OF GROWTH OF THROAT		$75.58	$75.58					
42810	REMOVAL OF CONGENITAL SKIN AND TISSUE CYST OF NECK		$189.54	$189.54					
42815	REMOVAL OF CONGENITAL CYST OR ABNORMAL DRAINAGE TRACT OF NECK AND/OR THROAT		$452.46	$452.46					
42820	REMOVAL OF TONSILS AND ADENOID GLANDS (YOUNGER THAN 12 YEARS)		$209.24	$209.24					
42821	REMOVAL OF TONSILS AND ADENOID GLANDS (12 YEARS OR OLDER)		$236.90	$236.90					
42825	REMOVAL OF TONSILS (YOUNGER THAN 12 YEARS)		$173.02	$173.02					
42826	REMOVAL OF TONSILS (12 YEARS OR OLDER)		$207.59	$207.59					
42830	PRIMARY REMOVAL OF ADENOIDS (YOUNGER THAN 12 YEARS)		$147.88	$147.88					
42831	PRIMARY REMOVAL OF ADENOIDS (12 YEARS OR OLDER)		$145.96	$145.96					
42835	SECONDARY REMOVAL OF ADENOIDS (YOUNGER THAN 12 YEARS)		$117.46	$117.46					
42836	SECONDARY REMOVAL OF ADENOIDS (12 YEARS OR OLDER)		$173.33	$173.33					
42842	EXTENSIVE REMOVAL OF TONSILS, TISSUE, MUSCLE, AND BONE		$435.74	$435.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42844	EXTENSIVE REMOVAL OF TONSILS, TISSUE, MUSCLE, AND BONE WITH LOCAL TISSUE GRAFT		$695.42	$695.42					
42845	XTENSIVE REMOVAL OF TONSILS, TISSUE, MUSCLE, AND BONE WITH OTHER TISSUE GRAFT		$1,195.40	$1,195.40					
42860	REMOVAL OF REMAINING TONSIL TISSUE		$118.59	$118.59					
42870	REMOVAL OR DESTRUCTION OF GROWTH OF TONGUE LYMPH NODE		$219.96	$219.96					
42890	PARTIAL REMOVAL OF THROAT		$608.60	$608.60					
42892	PARTIAL REMOVAL OF WALL OF THROAT WITH SUTURE REPAIR		$732.80	$732.80					
42894	REMOVAL OF THROAT TISSUE WITH TISSUE GRAFT		$1,082.05	$1,082.05					
42900	SUTURE OF WOUND OR INJURY IN THROAT		$272.06	$272.06					
42950	PLASTIC OR RECONSTRUCTIVE REPAIR OF THROAT		$517.14	$517.14					
42953	REPAIR OF THROAT AT ESOPHAGUS		$433.56	$433.56					
42955	CREATION OF OPENING TO THROAT FOR FEEDING		$290.23	$290.23					
42960	SIMPLE CONTROL OF BLEEDING OF THROAT		$98.79	$98.79					
42961	SIMPLE CONTROL OF BLEEDING OF THROAT		$203.55	$203.55					
42962	CONTROL OF BLEEDING OF THROAT REQUIRING HOSPITALIZATION		$371.76	$371.76					
42970	SIMPLE CONTROL OF BLEEDING OF THROAT WITH INSERTION OF PACKING		$170.32	$170.32					
42971	CONTROL OF BLEEDING OF THROAT WITH INSERTION OF PACKING REQUIRING HOSPITALIZATION		$249.20	$249.20					
42972	COMPLICATED CONTROL OF BLEEDING OF THROAT WITH INSERTION OF PACKING		$331.98	$331.98					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
42975	EVALUATION OF SLEEP-DISORDERED BREAT		$92.67	$92.67					Added 1/1/2022
42999	OTHER PROCEDURE ON THROAT, ADENOIDS, OR TONSILS	Yes	$150.00	$195.00					
43020	REMOVAL OF FOREIGN BODY IN ESOPHAGUS THROUGH NECK		$420.27	$420.27					
43030	INCISION OF MUSCLE AT UPPER ESOPHAGUS		$484.63	$484.63					
43045	REMOVAL OF FOREIGN BODY IN ESOPHAGUS THROUGH CHEST		$943.82	$943.82					
43100	REMOVAL OF GROWTH OF ESOPHAGUS THROUGH NECK		$437.65	$437.65					
43101	REMOVAL OF GROWTH OF ESOPHAGUS THROUGH CHEST OR ABDOMEN		$743.34	$743.34					
43107	REMOVAL OF GROWTH OF ESOPHAGUS THROUGH CHEST OR ABDOMEN		$1,509.04	$1,509.04					
43108	REMOVAL OF ESOPHAGUS AND RECONSTRUCTION USING BOWEL GRAFT		$1,751.47	$1,751.47					
43112	REMOVAL OF ESOPHAGUS THROUGH CHEST		$1,553.86	$1,553.86					
43113	REMOVAL OF ESOPHAGUS THROUGH CHEST AND RECONSTRUCTION USING BOWEL GRAFT		$1,780.52	$1,780.52					
43116	PARTIAL REMOVAL OF UPPER ESOPHAGUS WITH RECONSTRUCTION USING BOWEL GRAFT		$1,664.32	$1,664.32					
43117	PARTIAL REMOVAL OF LOWER ESOPHAGUS		$1,629.11	$1,629.11					
43118	PARTIAL REMOVAL OF LOWER ESOPHAGUS THROUGH CHEST AND ABDOMEN WITH BOWEL GRAFT		$1,722.42	$1,722.42					
43121	PARTIAL REMOVAL OF LOWER ESOPHAGUS THROUGH CHEST		$1,487.25	$1,487.25					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43122	PARTIAL REMOVAL OF LOWER ESOPHAGUS THROUGH ABDOMEN AND/OR CHEST		$1,487.25	$1,487.25					
43123	PARTIAL REMOVAL OF ESOPHAGUS WITH REPAIR USING BOWEL GRAFT		$1,722.42	$1,722.42					
43124	PARTIAL REMOVAL OF ESOPHAGUS WITH REPAIR USING BOWEL GRAFT		$1,436.56	$1,436.56					
43130	REMOVAL OF DEFECT IN WALL OF ESOPHAGUS THROUGH NECK		$634.17	$634.17					
43135	REMOVAL OF DEFECT IN WALL OF ESOPHAGUS THROUGH CHEST		$810.46	$810.46					
43180	REMOVAL OF DEFECT IN WALL OF ESOPHAGUS USING A RIGID ENDOSCOPE		$449.34	$449.34					Added effective 1/1/2015
43191	DIAGNOSTIC EXAM OF ESOPHAGUS USING AN ENDOSCOPE		$101.16	$101.16					
43192	INJECTION INTO ESOPHAGUS USING AN ENDOSCOPE		$120.83	$120.83					
43193	BIOPSY OF ESOPHAGUS USING A RIGID ENDOSCOPE		$144.22	$144.22					
43194	REMOVAL OF FOREIGN BODIES FROM ESOPHAGUS USING A RIGID ENDOSCOPE		$131.80	$131.80					
43195	BALLOON DILATION OF ESOPHAGUS USING A RIGID ENDOSCOPE, LESS THAN 3.0 CM		$144.48	$144.48					
43196	INSERTION OF WIRE AND DILATION OF ESOPHAGUS USING AN ENDOSCOPE		$158.27	$158.27					
43197	DIAGNOSTIC EXAM OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE THROUGH NOSE		$64.95	$140.76					
43198	BIOPSY OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE THROUGH NOSE		$77.39	$157.59					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43200	DIAGNOSTIC EXAM OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE THROUGH MOUTH		$107.69	$107.69					
43201	INJECTION INTO ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$95.90	$177.35					
43202	BIOPSY OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE THROUGH MOUTH		$127.63	$127.63					
43204	INJECTION OF SWOLLEN VEIN OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$248.92	$248.92					
43205	TYING OF DILATED VEINS OF ESOPHAGUS WITH BANDS USING A FLEXIBLE ENDOSCOPE		$188.00	$188.00					
43206	MICROSCOPIC EXAM OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$114.89	$251.50					Added Effective 1/1/2016
43210	REPAIR OF MUSCLE AT ESOPHAGUS AND STOMACH USING A FLEXIBLE ENDOSCOPE		$348.72	$348.72					Added Effective 1/1/2016
43211	REMOVAL OF TISSUE LINING OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$196.99	$196.99					Added Effective 1/1/2016
43212	PLACEMENT OF STENT IN ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$155.35	$155.35					Added Effective 1/1/2016
43213	DILATION OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$219.11	$920.77					Added Effective 1/1/2016
43214	BALLOON DILATION OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE, 3.0 CM OR MORE		$158.40	$158.40					Added Effective 1/1/2016
43215	REMOVAL OF FOREIGN BODIES IN ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$176.79	$176.79					Added Effective 1/1/2016
43216	REMOVAL OF POLYPS OR GROWTHS OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE WITH ELECTRICAL CAUTERY		$175.44	$175.44					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43217	REMOVAL OF POLYPS OR GROWTHS OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE WITH MECHANICAL SNARE		$190.11	$190.11					
43220	BALLOON DILATION OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE, LESS THAN 3.0 CM		$140.06	$140.06					
43226	DILATION OF ESOPHAGUS WITH INSERTION OF GUIDE WIRE USING A FLEXIBLE ENDOSCOPE		$155.45	$155.45					
43227	CONTROL OF BLEEDING IN ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$237.55	$237.55					
43229	DESTRUCTION OF POLYP OR GROWTH OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$167.11	$545.36					
43231	ULTRASOUND EXAM OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$171.20	$171.20					
43232	ULTRASOUND GUIDED FINE NEEDLE ASPIRATION OR BIOPSY OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$198.82	$198.82					
43233	BALLOON DILATION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE, 3.0 CM OR MORE		$188.10	$188.10					
43235	DIAGNOSTIC EXAM OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$159.52	$159.52					
43236	INJECTION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$120.05	$208.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43237	ULTRASOUND EXAM OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE THROUGH MOUTH		$162.89	$162.89					
43238	ULTRASOUND GUIDED NEEDLE ASPIRATION OR BIOPSY OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$201.78	$201.78					
43239	BIOPSY OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$179.22	$179.22					
43240	DRAINAGE OF FLUID COLLECTION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$302.65	$302.65					
43241	INSERTION OF TUBE OR TUBE IN ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$174.01	$174.01					
43242	ULTRASOUND GUIDED NEEDLE ASPIRATION OR BIOPSY OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$218.18	$218.18					
43243	INJECTION OF DILATED VEIN OF STOMACH AND/OR ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$294.58	$294.58					
43244	TYING OF DILATED VEINS OF STOMACH AND/OR ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$237.72	$237.72					
43245	DILATION OF STOMACH OUTLET USING A FLEXIBLE ENDOSCOPE		$225.60	$225.60					
43246	INSERTION OF STOMACH TUBE USING A FLEXIBLE ENDOSCOPE		$288.31	$288.31					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43247	REMOVAL OF FOREIGN BODIES OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$225.11	$225.11					
43248	INSERTION OF GUIDE WIRE WITH DILATION OF ESOPHAGUS USING A FLEXIBLE ENDOSCOPE		$209.03	$209.03					
43249	BALLOON DILATION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE, LESS THAN 3.0 CM		$192.43	$192.43					
43250	BALLOON DILATION OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE, LESS THAN 3.0 CM		$227.73	$227.73					
43251	REMOVAL OF POLYPS OR GROWTHS OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING AN ENDOSCOPE WITH MECHANICAL SNARE		$242.40	$242.40					
43252	MICROSCOPIC EXAM OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$142.59	$281.00					Added Effective 1/1/2016
43253	INJECTION OF DIAGNOSTIC OR THERAPEUTIC SUBSTANCE OR MARKER IN ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$218.18	$218.18					
43254	REMOVAL OF TISSUE LINING OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$226.55	$226.55					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43255	CONTROL OF BLEEDING OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$289.35	$289.35					
43257	HEAT DELIVERY TO MUSCLE AT ESOPHAGUS AND/OR STOMACH TO TREAT GASTRIC REFLUX USING A FLEXIBLE ENDOSCOPE		$228.65	$228.65					
43259	ULTRASOUND EXAM OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$259.82	$259.82					
43260	DIAGNOSTIC EXAM OF GALLBLADDER AND PANCREATIC, LIVER, AND BILE DUCTS USING AN ENDOSCOPE		$344.76	$344.76					
43261	BIOPSY OF GALLBLADDER, PANCREATIC, LIVER, AND BILE DUCTS USING A FLEXIBLE ENDOSCOPE		$353.86	$353.86					
43262	INCISION OF PANCREATIC OUTLET USING A FLEXIBLE ENDOSCOPE		$472.34	$472.34					
43263	PRESSURE MEASUREMENT OF PANCREATIC OR BILE DUCT SPHINCTER USING A FLEXIBLE ENDOSCOPE		$347.24	$347.24					
43264	REMOVAL OF STONE OR DEBRIS FROM BILE OR PANCREATIC DUCT USING A FLEXIBLE ENDOSCOPE		$515.23	$515.23					
43265	DESTRUCTION OF STONE OF BILE OR PANCREATIC DUCT USING A FLEXIBLE ENDOSCOPE		$455.99	$455.99					
43266	PLACEMENT OF STENT IN ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$187.50	$187.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43270	DESTRUCTION OF POLYP OR GROWTH OF ESOPHAGUS, STOMACH, AND/OR UPPER SMALL BOWEL USING A FLEXIBLE ENDOSCOPE		$196.90	$546.18					
43273	EXAM OF COMMON BILE AND/OR PANCREATIC DUCT USING A FLEXIBLE ENDOSCOPE		$103.25	$103.25					
43274	INSERTION OF STENT INTO PANCREATIC OR BILE DUCT USING A FLEXIBLE ENDOSCOPE		$388.60	$388.60					
43275	REMOVAL OF STENT FROM PANCREATIC OR BILE DUCT USING A FLEXIBLE ENDOSCOPE		$320.31	$320.31					
43276	REPLACEMENT OF STENT IN PANCREATIC OR BILE DUCT USING A FLEXIBLE ENDOSCOPE		$404.34	$404.34					
43277	BALLOON DILATION OF PANCREATIC OR BILE DUCT OR SPHINCTER USING A FLEXIBLE ENDOSCOPE		$322.27	$322.27					
43278	DESTRUCTION OF POLYP OR GROWTH OF GALLBLADDER AND/OR BILE DUCT USING A FLEXIBLE ENDOSCOPE		$366.50	$366.50					
43279	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH USING AN ENDOSCOPE		$969.91	$969.91					
43280	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH USING AN ENDOSCOPE		$820.29	$820.29					
43281	REPAIR OF HERNIA OF MUSCLE AT ESOPHAGUS AND STOMACH USING AN ENDOSCOPE		$1,149.87	$1,149.87					
43282	REPAIR OF HERNIA OF MUSCLE AT ESOPHAGUS AND STOMACH USING AN ENDOSCOPE		$1,293.66	$1,293.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43283	LENGTHENING OF ESOPHAGUS USING AN ENDOSCOPE		$143.31	$143.31					
43284	INSERTION OF MAGNETIC BAND AROUND BASE OF ESOPHAGUS TO TIGHTEN OPENING INTO STOMACH USING AN ENDOSCOPE		$520.73	$520.73					Added Effective 1/1/2017
43285	REMOVAL OF MAGNETIC BAND FROM BASE OF ESOPHAGUS USING AN ENDOSCOPE		$527.53	$527.53					Added Effective 1/1/2017
43286	REMOVAL OF ESOPHAGUS AND PARTIAL REMOVAL OF STOMACH USING AN ENDOSCOPE		$2,511.50	$2,511.50					Added Effective 1/1/2018
43287	REMOVAL OF LOWER ESOPHAGUS AND PARTIAL REMOVAL OF STOMACH USING AN ENDOSCOPE		$2,867.85	$2,867.85					Added Effective 1/1/2018
43288	REMOVAL OF ESOPHAGUS AND PARTIAL REMOVAL OF STOMACH USING AN ENDOSCOPE FOR EACH PROCEDURE WITH CONNECTION OF STOMACH TO THROAT OR TO REMAINING ESOPHAGUS		$2,995.36	$2,995.36					Added Effective 1/1/2018
43289	OTHER PROCEDURE ON ESOPHAGUS USING AN ENDOSCOPE	Yes	$0.00	$0.00					
43290	PLACEMENT OF BALLOON IN STOMACH FOR WEIGHT LOSS USING FLEXIBLE ENDOSCOPE		$150.23	$2,104.79					
43291	REMOVAL OF BALLOON IN STOMACH FOR WEIGHT LOSS USING FLEXIBLE ENDOSCOPE		$132.52	$369.52					
43300	ESOPHAGREPAIR OF DEFECT OF ESOPHAGUS THROUGH NECKOPLASTY (PLASTIC REPAIR OR RECONSTRUCTION), CERVICAL APPROACH;		$596.78	$596.78					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43305	REPAIR OF DEFECT OF ESOPHAGUS WITH REPAIR OF ABNORMAL DRAINAGE TRACT THOUGH NECK		$884.58	$884.58					
43310	REPAIR OF DEFECT OF ESOPHAGUS THROUGH CHEST		$1,244.30	$1,244.30					
43312	REPAIR OF DEFECT OF ESOPHAGUS WITH REPAIR OF ABNORMAL DRAINAGE TRACT THROUGH CHEST		$1,223.79	$1,223.79					
43313	REPAIR OF CONGENITAL DEFECT OF ESOPHAGUS THROUGH CHEST		$2,006.95	$2,006.95					
43314	REPAIR OF CONGENITAL DEFECT OF ESOPHAGUS AND ABNORMAL DRAINAGE TRACT BETWEEN ESOPHAGUS AND THROAT		$2,206.23	$2,206.23					
43320	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH THROUGH ABDOMEN OR CHEST		$788.28	$788.28					
43325	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH WITH PATCH		$796.34	$796.34					
43327	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH		$721.28	$721.28					
43328	REPAIR OF MUSCLE AT LOWER ESOPHAGUS AND STOMACH THROUGH CHEST		$1,059.52	$1,059.52					
43330	REPAIR OF ESOPHAGUS THROUGH ABDOMEN		$781.50	$781.50					
43331	REPAIR OF ESOPHAGUS THROUGH CHEST		$880.74	$880.74					
43332	REPAIR OF PARAESOPHAGEAL HERNIA THROUGH ABDOMEN		$1,033.11	$1,033.11					
43333	REPAIR OF PARAESOPHAGEAL HERNIA WITH MESH IMPLANT THROUGH ABDOMEN		$1,121.82	$1,121.82					
43334	REPAIR OF PARAESOPHAGEAL HERNIA THROUGH CHEST		$1,133.99	$1,133.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43335	REPAIR OF PARAESOPHAGEAL HERNIA WITH MESH IMPLANT THROUGH CHEST		$1,221.81	$1,221.81					
43336	REPAIR OF PARAESOPHAGEAL HERNIA THROUGH ABDOMINAL INCISION		$1,338.71	$1,338.71					
43337	REPAIR OF PARAESOPHAGEAL HERNIA WITH MESH IMPLANT THROUGH ABDOMINAL INCISION		$1,461.25	$1,461.25					
43338	LENGTHENING OF ESOPHAGUS		$118.98	$118.98					
43340	PARTIAL REMOVAL OF ESOPHAGUS AND STOMACH THROUGH ABDOMEN		$810.40	$810.40					
43341	PARTIAL REMOVAL OF ESOPHAGUS AND STOMACH THROUGH CHEST		$751.23	$751.23					
43351	RELOCATION OF ESOPHAGUS THROUGH CHEST		$666.20	$666.20					
43352	RELOCATION OF ESOPHAGUS THROUGH NECK		$593.79	$593.79					
43360	RECONNECTION OF ESOPHAGUS TO STOMACH AFTER PREVIOUS SURGERY		$1,439.42	$1,439.42					
43361	RECONNECTION OF ESOPHAGUS TO STOMACH WITH BOWEL GRAFT RECONSTRUCTION AFTER PREVIOUS SURGERY		$1,664.32	$1,664.32					
43400	TYING OF DILATED VEINS OF ESOPHAGUS		$786.11	$786.11					
43405	TYING OR STAPLING OF HOLE OR TEAR AT JUNCTION OF ESOPHAGUS AND STOMACH		$883.97	$883.97					
43410	SUTURE OF WOUND OR INJURY TO ESOPHAGUS THROUGH NECK		$558.13	$558.13					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43415	SUTURE OF WOUND OR INJURY TO ESOPHAGUS THROUGH CHEST OR ABDOMEN		$868.33	$868.33					
43420	REPAIR OF ABNORMAL DRAINAGE TRACT OF ESOPHAGUS THROUGH NECK		$475.68	$475.68					
43425	REPAIR OF ABNORMAL DRAINAGE TRACT OF ESOPHAGUS THROUGH CHEST OR ABDOMEN		$765.33	$765.33					
43450	DILATION OF ESOPHAGUS		$59.95	$59.95					
43453	DILATION OF ESOPHAGUS WITH A GUIDE WIRE		$87.48	$87.48					
43460	CONTROL OF BLEEDING OF ESOPHAGUS		$159.94	$159.94					
43496	RELOCATION OF UPPER SMALL BOWEL FOR GRAFT		$0.00	$0.00					
43497	INCISION OF MUSCLE OF LOWER ESOPHAGU		$652.57	$652.57					Added 1/1/2022
43499	OTHER PROCEDURE ON ESOPHAGUS	Yes	$0.00	$0.00					
43500	EXPLORATION OF STOMACH OR REMOVAL OF FOREIGN BODY IN STOMACH		$416.59	$416.59					
43501	SUTURE OF BLEEDING STOMACH ULCER		$681.01	$681.01					
43502	SUTURE OF LACERATED STOMACH		$738.81	$738.81					
43510	INSERTION OF PERMANENT STOMACH TUBE WITH DILATION OF ESOPHAGUS		$517.21	$517.21					
43520	SEVERING OF MUSCLE AT STOMACH OUTLET TO UPPER SMALL BOWEL		$346.71	$346.71					
43605	BIOPSY OF STOMACH		$431.36	$431.36					
43610	REMOVAL OF STOMACH ULCER OR GROWTH		$557.35	$557.35					
43611	REMOVAL OF MALIGNANT GROWTH OF STOMACH		$625.43	$625.43					
43620	REMOVAL OF STOMACH WITH UPPER SMALL BOWEL ATTACHMENT TO ESOPHAGUS		$1,107.13	$1,107.13					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43621	REMOVAL OF STOMACH WITH LOWER SMALL BOWEL ATTACHMENT TO ESOPHAGUS		$1,120.04	$1,120.04					
43622	REMOVAL OF STOMACH WITH CREATION OF INTESTINAL POUCH ATTACHED TO ESOPHAGUS		$1,159.66	$1,159.66					
43631	REMOVAL OF LOWER PART OF STOMACH WITH REATTACHMENT OF REMAINING STOMACH TO FIRST PART OF SMALL BOWEL		$928.88	$928.88					
43632	REMOVAL OF LOWER PART OF STOMACH WITH REATTACHMENT OF REMAINING STOMACH TO SECOND PART OF SMALL BOWEL		$928.88	$928.88					
43633	REMOVAL OF LOWER PORTION OF STOMACH WITH REATTACHMENT OF UPPER PORTION OF REMAINING STOMACH TO SMALL BOWEL		$941.79	$941.79					
43634	PARTIAL REMOVAL OF STOMACH WITH CREATION OF INTESTINE POUCH		$1,253.39	$1,253.39					
43635	SEVERING OF VAGUS NERVE WITH PARTIAL REMOVAL OF STOMACH		$95.73	$95.73					
43640	SEVERING OF VAGUS NERVE TO STOMACH		$720.24	$720.24					
43641	REPAIR OF STOMACH OUTLET MUSCLE AND SEVERING OF VAGUS NERVE		$719.99	$719.99					
43644	BYPASS OF STOMACH USING AN ENDOSCOPE	Yes	$1,202.92	$1,202.92					
43645	BYPASS OF STOMACH WITH RECONSTRUCTION OF SMALL BOWEL USING AN ENDOSCOPE	Yes	$1,286.28	$1,286.28					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43647	IMPLANTATION OR REPLACEMENT OF NEUROSTIMULATOR ELECTRODES IN UPPER STOMACH USING AN ENDOSCOPE	Yes	$0.00	$0.00					
43648	REVISION OR REMOVAL OF NEUROSTIMULATOR ELECTRODES IN UPPER STOMACH USING AN ENDOSCOPE		$0.00	$0.00					
43651	INCISION OF VAGUS NERVE IN STOMACH USING AN ENDOSCOPE		$448.81	$448.81					
43652	INCISION OF SELECTIVE VAGUS NERVES OF STOMACH USING AN ENDOSCOPE		$536.93	$536.93					
43653	CREATION OF SURGICAL OPENING FROM STOMACH TO SKIN USING AN ENDOSCOPE		$384.37	$384.37					
43659	OTHER PROCEDURE ON STOMACH USING AN ENDOSCOPE	Yes	$0.00	$0.00					
43752	INSERTION OF STOMACH TUBE THROUGH NOSE OR MOUTH USING FLUOROSCOPIC GUIDANCE		$154.78	$154.78					
43753	INSERTION OF STOMACH TUBE AND ASPIRATION OF STOMACH CONTENTS		$18.10	$18.10					
43754	DIAGNOSTIC INSERTION OF STOMACH TUBE AND ASPIRATION OF STOMACH CONTENTS		$27.59	$68.83					
43755	DIAGNOSTIC INSERTION OF STOMACH TUBE AND ASPIRATION OF STOMACH CONTENTS AFTER ADMINISTRATION OF DRUGS TO STIMULATE STOMACH SECRETIONS, WITH MULTIPLE SAMPLES		$50.44	$105.03					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43756	DIAGNOSTIC INSERTION OF TUBE INTO UPPER SMALL BOWEL AND SPECIMEN COLLECTION USING IMAGING GUIDANCE		$45.40	$190.48					
43757	INSERTION OF TUBE INTO UPPER SMALL BOWEL FOR COLLECTION OF MULTIPLE BILE AND PANCREATIC SPECIMENS USING IMAGING GUIDANCE AFTER ADMINISTRATION OF DRUGS TO STIMULATE SECRETIONS		$65.57	$245.07					
43761	REPOSITIONING OF ORAL OR NASAL FEEDING TUBE IN SMALL BOWEL		$93.49	$93.49					
43762	REPLACEMENT OF STOMACH STOMA TUBE		$30.93	$167.22					Effective 1/1/2019
43763	REPLACEMENT OF STOMACH STOMA TUBE WITH REVISION OF STOMA OPENING		$67.58	$249.31					Effective 1/1/2019
43770	INSERTION OF ADJUSTABLE STOMACH REDUCTION DEVICE USING AN ENDOSCOPE	Yes	$749.49	$749.49					
43771	ADJUSTMENT OF STOMACH REDUCTION DEVICE USING AN ENDOSCOPE	Yes	$864.05	$864.05					
43772	REMOVAL OF STOMACH REDUCTION DEVICE USING AN ENDOSCOPE	Yes	$659.11	$659.11					
43773	REPLACEMENT OF STOMACH REDUCTION DEVICE USING AN ENDOSCOPE	Yes	$864.31	$864.31					
43774	REMOVAL OF STOMACH REDUCTION DEVICE AND PORT USING AN ENDOSCOPE	Yes	$660.61	$660.61					
43775	PARTIAL REMOVAL OF STOMACH FOR WEIGHT LOSS USING AN ENDOSCOPE	Yes	$963.54	$963.54					
43800	REPAIR OF MUSCLE OF STOMACH OUTLET INTO UPPER SMALL BOWEL		$495.57	$495.57					
43810	REMOVAL OF END PORTION OF STOMACH WITH ATTACHMENT TO UPPER SMALL BOWEL		$537.88	$537.88					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43820	PARTIAL REMOVAL OF STOMACH WITH ATTACHMENT OF STOMACH TO SMALL BOWEL		$570.93	$570.93					
43825	PARTIAL REMOVAL OF STOMACH WITH SEVERING OF VAGUS NERVE		$742.76	$742.76					
43830	INSERTION OF STOMACH FEEDING TUBE		$336.97	$336.97					
43831	INSERTION OF STOMACH FEEDING TUBE, NEWBORN		$350.16	$350.16					
43832	CREATION OF STOMACH FEEDING TUBE		$559.67	$559.67					
43840	SUTURE OF PERFORATED ULCER, WOUND, OR INJURY OF STOMACH OR UPPER SMALL BOWEL		$557.26	$557.26					
43842	BANDING OF UPPER STOMACH TO REDUCE SIZE OF STOMACH	Yes	$842.96	$842.96					
43843	REDUCTION OF SIZE OF UPPER STOMACH	Yes	$842.96	$842.96					
43845	PARTIAL REMOVAL OF STOMACH, UPPER BOWEL, AND ILEUM FOR WEIGHT LOSS	Yes	$1,547.93	$1,547.93					
43846	BYPASS OF STOMACH FOR WEIGHT LOSS WITH ROUX-EN-Y CONNECTION OF UPPER BOWEL TO UPPER STOMACH	Yes	$1,058.91	$1,058.91					
43847	BYPASS OF STOMACH FOR WEIGHT LOSS WITH SMALL BOWEL RECONSTRUCTION	Yes	$1,060.21	$1,060.21					
43848	REVISION OF UPPER STOMACH BYPASS	Yes	$1,125.64	$1,125.64					
43860	REVISION OF SURGICALLY CREATED CONNECTION OF STOMACH TO SMALL BOWEL	Yes	$900.66	$900.66					
43865	REVISION OF ATTACHMENT OF STOMACH TO SMALL BOWEL WITH SEVERING OF VAGUS NERVE	Yes	$993.49	$993.49					
43870	CLOSURE OF SURGICALLY CREATED OPENING FROM STOMACH TO SKIN		$374.96	$374.96					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
43880	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM STOMACH TO LARGE BOWEL		$796.34	$796.34					
43881	IMPLANTATION OR REPLACEMENT OF STIMULATOR ELECTRODES IN UPPER STOMACH	Yes	$0.00	$0.00					
43882	REMOVAL OR REVISION OF STIMULATOR ELECTRODES IN UPPER STOMACH		$0.00	$0.00					
43886	REVISION OF PORT FOR SALINE INJECTION INTO STOMACH BANDING DEVICE		$205.28	$205.28					
43887	REMOVAL OF PORT FOR SALINE INJECTION INTO STOMACH BANDING DEVICE	Yes	$201.34	$201.34					
43888	REPLACEMENT OF PORT FOR SALINE INJECTION INTO STOMACH BANDING DEVICE	Yes	$286.41	$286.41					
43999	OTHER PROCEDURE ON STOMACH	Yes	$75.00	$100.00					
44005	RELEASE OF INTESTINAL SCAR TISSUE		$631.99	$631.99					
44010	EXPLORATION, BIOPSY, OR REMOVAL OF FOREIGN BODY IN SMALL BOWEL		$490.98	$490.98					
44015	INSERTION OF FEEDING TUBE OR TUBE INTO UPPER SMALL BOWEL		$174.18	$174.18					
44020	INCISION OF SMALL BOWEL FOR EXPLORATION, BIOPSY, OR REMOVAL OF FOREIGN BODY		$563.26	$563.26					
44021	INCISION OF SMALL BOWEL FOR INSERTION OF TUBE FOR RELIEF OF PRESSURE		$541.51	$541.51					
44025	BIOPSY OR REMOVAL OF FOREIGN BODY IN LARGE BOWEL		$571.56	$571.56					
44050	REPAIR OF TWISTED OR HERNIATED SMALL BOWEL		$543.16	$543.16					
44055	CORRECTION OF ABNORMAL ROTATION OF SMALL BOWEL		$594.11	$594.11					
44100	BIOPSY OF SMALL BOWEL BY CAPSULE ATTACHED TO TUBE PASSED THROUGH MOUTH		$99.15	$99.15					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44110	REMOVAL OF GROWTH OF SMALL OR LARGE BOWELS		$508.50	$508.50					
44111	REMOVAL OF MULTIPLE GROWTHS OF SMALL OR LARGE BOWEL		$635.61	$635.61					
44120	PARTIAL REMOVAL OF SMALL BOWEL WITH RECONNECTION		$688.69	$688.69					
44121	PARTIAL REMOVAL AND RECONNECTION OF SMALL BOWEL, EACH ADDITIONAL REMOVAL AND RECONNECTION		$205.93	$205.93					
44125	PARTIAL REMOVAL OF SMALL BOWEL WITH CREATION OF OPENING TO SKIN		$729.61	$729.61					
44126	PARTIAL REMOVAL OF SMALL BOWEL AND RECONNECTION TO CORRECT CONGENITAL DEFECT		$1,496.09	$1,496.09					
44127	PARTIAL REMOVAL OF SMALL BOWEL TO CORRECT CONGENITAL DEFECT WITH RECONNECTION AND TAPERING		$1,720.93	$1,720.93					
44128	PARTIAL REMOVAL AND RECONNECTION OF SMALL BOWEL TO CORRECT CONGENITAL DEFECT, EACH ADDITIONAL REMOVAL AND RECONNECTION		$185.26	$185.26					
44130	CREATION OF CONNECTION BETWEEN 2 SEGMENTS OF SMALL BOWEL		$603.16	$603.16					
44135	TRANSPLANTATION OF SMALL BOWEL FROM DONOR	Yes	$0.00	$0.00					
44137	REMOVAL OF TRANSPLANTED DONOR SMALL BOWEL	Yes	$0.00	$0.00					
44139	RELEASE OF LARGE BOWEL FROM SPLEEN AND ABDOMINAL WALL WITH PARTIAL REMOVAL OF LARGE BOWEL		$103.38	$103.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44140	PARTIAL REMOVAL OF LARGE BOWEL WITH CONNECTION		$920.07	$920.07					
44141	PARTIAL REMOVAL OF LARGE BOWEL WITH CREATION OF OPENING TO SKIN		$889.47	$889.47					
44143	PARTIAL REMOVAL OF LARGE BOWEL WITH CREATION OF OPENING FROM LARGE BOWEL TO SKIN		$832.65	$832.65					
44144	PARTIAL REMOVAL OF LARGE BOWEL WITH CREATION OF 2 OPENINGS FROM SMALL OR LARGE BOWEL TO SKIN		$825.10	$825.10					
44145	PARTIAL REMOVAL OF LARGE BOWEL AND REATTACHMENT TO RECTUM		$1,047.67	$1,047.67					
44146	PARTIAL REMOVAL OF LARGE BOWEL AND REATTACHMENT TO RECTUM AND CREATION OF LARGE BOWEL OPENING		$1,130.11	$1,130.11					
44147	PARTIAL REMOVAL OF LARGE BOWEL THROUGH ABDOMEN AND ANUS		$967.88	$967.88					
44150	REMOVAL OF LARGE BOWEL WITH ATTACHMENT OF SMALL BOWEL TO RECTUM OR CREATION OF OPENING FROM SMALL BOWEL TO SKIN THROUGH ABDOMEN		$1,033.77	$1,033.77					
44151	REMOVAL OF LARGE BOWEL WITH CREATION OF SMALL BOWEL OPENING TO SKIN THROUGH ABDOMEN		$854.51	$854.51					
44155	REMOVAL OF LARGE BOWEL AND RECTUM AND CREATION OF OPENING FROM END OF SMALL BOWEL TO SKIN THROUGH ABDOMEN		$1,179.83	$1,179.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44156	REMOVAL OF LARGE BOWEL AND RECTUM AND CREATION OF OPENING FROM END OF SMALL BOWEL TO SKIN THROUGH ABDOMEN, WITH CREATION OF SMALL BOWEL POUCH		$967.96	$967.96					
44157	REMOVAL OF LARGE BOWEL AND RECTUM WITH ATTACHMENT OF SMALL BOWEL TO ANUS		$1,519.07	$1,519.07					
44158	REMOVAL OF LARGE BOWEL AND RECTUM WITH ATTACHMENT OF SMALL BOWEL TO ANUS AND CREATION OF SMALL BOWEL POUCH		$1,558.78	$1,558.78					
44160	PARTIAL REMOVAL OF SMALL AND LARGE BOWEL WITH ATTACHMENT OF SMALL AND LARGE BOWEL		$812.24	$812.24					
44180	RELEASE OF SMALL BOWEL SCAR TISSUE USING AN ENDOSCOPE		$635.24	$635.24					
44186	CREATION OF OPENING FROM SMALL BOWEL TO SKIN WITH INSERTION OF A TUBE FOR DECOMPRESSION OR FEEDING USING AN ENDOSCOPE		$445.25	$445.25					
44187	CREATION OF OPENING FROM SMALL BOWEL TO SKIN USING AN ENDOSCOPE		$734.68	$734.68					
44188	CREATION OF LARGE BOWEL OPENING USING AN ENDOSCOPE		$806.58	$806.58					
44202	PARTIAL REMOVAL AND RECONNECTION OF SMALL BOWEL USING AN ENDOSCOPE		$1,003.41	$1,003.41					
44203	PARTIAL REMOVAL OF SMALL BOWEL USING AN ENDOSCOPE, EACH ADDITIONAL REMOVAL AND CONNECTION		$180.61	$180.61					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44204	PARTIAL REMOVAL OF LARGE BOWEL USING AN ENDOSCOPE		$1,037.52	$1,037.52					
44205	PARTIAL REMOVAL OF SMALL AND LARGE BOWEL WITH ATTACHMENT OF SMALL AND LARGE BOWEL USING AN ENDOSCOPE		$918.82	$918.82					
44206	PARTIAL REMOVAL OF LARGE BOWEL WITH CREATION OF OPENING FROM LARGE BOWEL TO SKIN USING AN ENDOSCOPE		$1,117.91	$1,117.91					
44207	PARTIAL REMOVAL OF LARGE BOWEL AND REATTACHMENT TO RECTUM USING AN ENDOSCOPE		$1,224.87	$1,224.87					
44208	PARTIAL REMOVAL OF LARGE BOWEL AND REATTACHMENT TO RECTUM AND CREATION OF OPENING FROM LARGE BOWEL TO SKIN USING AN ENDOSCOPE		$1,323.02	$1,323.02					
44210	REMOVAL OF LARGE BOWEL WITH ATTACHMENT OF SMALL BOWEL TO RECTUM OR CREATION OF SMALL BOWEL OPENING USING AN ENDOSCOPE		$1,170.34	$1,170.34					
44211	REMOVAL OF LARGE BOWEL AND RECTUM WITH ATTACHMENT OF SMALL BOWEL TO ANUS AND CREATION OF OPENING FROM SMALL BOWEL TO SKIN USING AN ENDOSCOPE		$1,453.85	$1,453.85					
44212	REMOVAL OF LARGE BOWEL AND RECTUM WITH CREATION OF OPENING FROM SMALL BOWEL TO SKIN USING AN ENDOSCOPE		$1,357.98	$1,357.98					
44213	PARTIAL RELEASE OF LARGE BOWEL AND PARTIAL REMOVAL OF LARGE BOWEL USING AN ENDOSCOPE		$146.37	$146.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44227	CLOSURE OF OPENING FROM LARGE OR SMALL BOWEL TO SKIN USING AN ENDOSCOPE		$1,145.29	$1,145.29					
44238	OTHER PROCEDURE ON BOWEL USING AN ENDOSCOPE	Yes	$0.00	$0.00					
44300	INSERTION OF TUBE INTO SMALL BOWEL		$421.08	$421.08					
44310	CREATION OF OPENING FROM SMALL BOWEL TO SKIN		$547.18	$547.18					
44312	SIMPLE REVISION OF SUPERFICIAL SCAR TISSUE FROM SURGICALLY CREATED OPENING OF SMALL BOWEL TO SKIN		$250.24	$250.24					
44314	RECONSTRUCTION OF OPENING FROM SMALL BOWEL TO SKIN		$495.26	$495.26					
44316	CREATION OF POUCH OF SMALL BOWEL WITH VALVE		$692.09	$692.09					
44320	CREATION OF OPENING FROM LARGE BOWEL TO SKIN		$572.46	$572.46					
44322	CREATION OF OPENING FROM LARGE BOWEL TO SKIN WITH MULTIPLE BOWEL BIOPSIES		$591.49	$591.49					
44340	SIMPLE REVISION OF SUPERFICIAL SCAR TISSUE FROM SURGICALLY CREATED OPENING OF LARGE BOWEL TO SKIN		$197.94	$197.94					
44345	COMPLICATED RECONSTRUCTION OF OPENING FROM LARGE BOWEL TO SKIN		$449.75	$449.75					
44346	REVISION OF OPENING FROM LARGE BOWEL TO SKIN WITH REPAIR OF HERNIA		$538.49	$538.49					
44360	DIAGNOSTIC EXAM OF SMALL BOWEL (EXCLUDING LOWER SMALL INTESTINE) USING AN ENDOSCOPE		$193.77	$193.77					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44361	BIOPSY OF SMALL BOWEL (EXCEPT ILEUM) USING AN ENDOSCOPE		$214.08	$214.08					
44363	REMOVAL OF FOREIGN BODIES FROM SMALL BOWEL USING AN ENDOSCOPE		$204.56	$204.56					
44364	REMOVAL OF SMALL BOWEL POLYPS OR GROWTHS USING AN ENDOSCOPE WITH MECHANICAL SNARE		$268.19	$268.19					
44365	REMOVAL OF SMALL BOWEL POLYPS OR GROWTHS USING AN ENDOSCOPE WITH ELECTRICAL CAUTERY		$253.81	$253.81					
44366	CONTROL OF BLEEDING OF FIRST OR SECOND PART OF SMALL BOWEL USING AN ENDOSCOPE		$313.95	$313.95					
44369	DESTRUCTION OF POLYP OR GROWTH OF SMALL BOWEL USING AN ENDOSCOPE		$336.39	$336.39					
44370	INSERTION OF SMALL BOWEL STENT ABOVE LOWER SMALL BOWEL USING AN ENDOSCOPE		$171.38	$171.38					
44372	INSERTION OF TUBE INTO MIDDLE SMALL BOWEL USING AN ENDOSCOPE		$318.49	$318.49					
44373	CONVERSION OF STOMACH TUBE TO TUBE IN MIDDLE SMALL BOWEL USING AN ENDOSCOPE		$262.68	$262.68					
44376	DIAGNOSTIC EXAM OF SMALL BOWEL (INCLUDING LOWER SMALL INTESTINE) USING AN ENDOSCOPE		$281.91	$281.91					
44377	BIOPSY OF SMALL BOWEL USING AN ENDOSCOPE		$296.54	$296.54					
44378	CONTROL OF BLEEDING OF SMALL BOWEL USING AN ENDOSCOPE		$376.09	$376.09					
44379	INSERTION OF SMALL BOWEL STENT BELOW LOWER SMALL BOWEL USING AN ENDOSCOPE		$279.76	$279.76					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44380	DIAGNOSTIC EXAM OF SMALL BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM SMALL BOWEL TO SKIN		$101.69	$101.69					
44381	BALLOON DILATION OF SMALL BOWEL USING AN ENDOSCOPE		$73.66	$740.13					Added Effective 1/1/2016
44382	BIOPSY OF SMALL BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LOWER SMALL BOWEL TO SKIN		$122.95	$122.95					
44384	BIOPSY OF SMALL BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LOWER SMALL BOWEL TO SKIN		$129.16	$129.16					Added Effective 1/1/2016
44385	DIAGNOSTIC EXAM OF SURGICALLY CREATED POUCH OF SMALL BOWEL USING AN ENDOSCOPE		$124.16	$124.16					
44386	BIOPSY OF SMALL BOWEL POUCH USING AN ENDOSCOPE		$107.16	$107.16					
44388	DIAGNOSTIC EXAM OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$191.73	$191.73					
44389	BIOPSY OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$210.07	$210.07					
44390	REMOVAL OF FOREIGN BODIES FROM LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$189.73	$189.73					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44391	CONTROL OF BLEEDING OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$280.73	$280.73					
44392	COLONOSCOPY THROUGH STOMA; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHE		$267.50	$267.50					
44394	REMOVAL OF GROWTHS OR POLYPS OF LARGE BOWEL BY ELECTRICAL CAUTERY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$285.40	$285.40					
44401	DESTRUCTION OF GROWTH OR POLYP OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$203.68	$2,409.55					Added Effective 1/1/2016
44402	INSERTION OF STENT INTO LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$220.69	$220.69					Added Effective 1/1/2016
44403	REMOVAL OF LINING OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$253.56	$253.56					Added Effective 1/1/2016
44404	INJECTION BENEATH LINING OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$145.81	$324.58					Added Effective 1/1/2016
44405	BALLOON DILATION OF LARGE BOWEL USING AN ENDOSCOPE		$155.07	$461.40					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44406	ULTRASOUND EXAM OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$193.27	$193.27					Added Effective 1/1/2016
44407	FINE NEEDLE ASPIRATION AND/OR BIOPSY OF LARGE BOWEL WITH ULTRASOUND GUIDANCE USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$231.38	$231.38					Added Effective 1/1/2016
44408	DECOMPRESSION OF LARGE BOWEL USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING IN LARGE BOWEL TO SKIN		$195.21	$195.21					Added Effective 1/1/2016
44500	DILATION OF STOMACH AND/OR SMALL BOWEL USING LONG GASTROINTESTINAL TUBE		$24.52	$24.52					
44602	SUTURE OF TEAR OF HOLE IN SMALL BOWEL		$529.77	$529.77					
44603	SUTURE OF MULTIPLE TEARS OR HOLES IN SMALL BOWEL		$671.14	$671.14					
44604	SUTURE OF TEAR OR HOLE IN LARGE BOWEL		$631.37	$631.37					
44605	SUTURE OF TEAR OR HOLE IN LARGE BOWEL AND CREATION OF OPENING FROM LARGE BOWEL TO SKIN		$708.57	$708.57					
44615	RELEASE OF SMALL BOWEL OBSTRUCTION		$597.17	$597.17					
44620	CLOSURE OF SURGICALLY CREATED LARGE OR SMALL BOWEL OPENING		$473.91	$473.91					
44625	CLOSURE OF SURGICALLY CREATED LARGE OR SMALL BOWEL OPENING WITH BOWEL REMOVAL AND REATTACHMENT		$661.34	$661.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44626	CLOSURE OF SURGICALLY CREATED LARGE OR SMALL BOWEL OPENING WITH BOWEL REMOVAL AND REATTACHMENT OF LARGE BOWEL AND RECTUM		$1,002.53	$1,002.53					
44640	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM SMALL BOWEL TO SKIN		$599.66	$599.66					
44650	CLOSURE OF ABNORMAL DRAINAGE TRACT WITHIN SMALL BOWEL OR SMALL TO LARGE BOWEL		$635.85	$635.85					
44660	CLOSURE OF ABNORMAL DRAINAGE TRACT OF SMALL BOWEL		$638.67	$638.67					
44661	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM SMALL BOWEL TO URINARY BLADDER WITH RESECTION OF BLADDER AND/OR SMALL BOWEL		$888.20	$888.20					
44680	SURGICAL FOLDING OF UPPER SMALL BOWEL UPON ITSELF		$676.59	$676.59					
44700	SUSPENSION OF SMALL BOWEL USING MESH OR PROSTHESIS OR SELF TISSUE		$765.14	$765.14					
44701	IRRIGATION OF LARGE BOWEL DURING SURGERY		$122.17	$122.17					
44705	ASSESSMENT AND OVERSEEING PREPARATION OF DONOR FECAL SPECIMEN		$59.01	$89.44					Added Effective 7/1/2022
44715	PREPARATION OF DONOR SMALL BOWEL AND ARTERY FOR TRANSPLANTATION		$0.00	$0.00					
44720	RECONSTRUCTION OF DONOR SMALL BOWEL AND VEIN FOR TRANSPLANTATION		$201.57	$201.57					
44721	RECONSTRUCTION OF DONOR SMALL BOWEL AND ARTERY FOR TRANSPLANTATION		$293.80	$293.80					
44799	UNLISTOTHER PROCEDURE ON SMALL BOWELED PROCEDURE, INTESTINE	Yes	$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
44800	REPAIR OF CONGENITAL BOWEL DEFECT		$463.75	$463.75					
44820	REMOVAL OF GROWTH OF ABDOMINAL CAVITY		$458.16	$458.16					
44850	SUTURE OF ABDOMINAL CAVITY TISSUE		$432.40	$432.40					
44899	OTHER PROCEDURE ON ABDOMEN OR ABDOMINAL LINING FOR CONGENITAL BOWEL DEFECT	Yes	$0.00	$0.00					
44900	DRAINAGE OF ABSCESS OF APPENDIX		$366.82	$366.82					
44950	REMOVAL OF APPENDIX		$443.78	$443.78					
44955	REMOVAL OF APPENDIX DURING OTHER MAJOR PROCEDURE		$112.05	$112.05					
44960	REMOVAL OF RUPTURED INFECTED APPENDIX		$475.09	$475.09					
44970	REMOVAL OF APPENDIX USING AN ENDOSCOPE		$395.19	$395.19					
44979	OTHER PROCEDURE ON APPENDIX USING AN ENDOSCOPE	Yes	$0.00	$0.00					
45000	DRAINAGE OF ABSCESS OF PELVIC REGION		$174.07	$174.07					
45005	DRAINAGE OF SUPERFICIAL RECTAL ABSCESS		$97.22	$97.22					
45020	INCISION AND DRAINAGE OF ABSCESS ABOVE PELVIC FLOOR OR BEHIND RECTUM		$211.51	$211.51					
45100	BIOPSY OF ANAL AND/OR RECTAL WALL THROUGH ANUS		$158.11	$158.11					
45108	REMOVAL OF MUSCLE IN ANUS AND RECTUM AREA		$209.82	$209.82					
45110	REMOVAL OF RECTUM WITH CREATION OF OPENING FROM LARGE BOWEL TO SKIN THROUGH ABDOMEN AND RECTUM		$1,157.25	$1,157.25					
45111	PARTIAL REMOVAL OF RECTUM THROUGH ABDOMEN		$815.47	$815.47					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45112	REMOVAL OF RECTUM AND SUTURING OF LARGE BOWEL TO ANUS THROUGH INCISION OF ABDOMEN AND REGION BETWEEN THIGHS		$1,217.24	$1,217.24					
45113	PARTIAL REMOVAL OF RECTUM AND ATTACHMENT OF SMALL BOWEL TO ANUS AND CREATION OF SMALL BOWEL POUCH		$1,236.90	$1,236.90					
45114	PARTIAL REMOVAL OF RECTUM THROUGH ABDOMEN AND SACRUM		$1,113.60	$1,113.60					
45116	PARTIAL REMOVAL OF RECTUM THROUGH ABDOMEN AND SACRUM		$905.90	$905.90					
45119	REMOVAL OF RECTUM WITH CREATION OF SMALL BOWEL POUCH THROUGH ABDOMEN AND REGION BETWEEN THIGHS		$1,251.18	$1,251.18					
45120	REMOVAL OF RECTUM FOR CONGENITAL DEFECT THROUGH ABDOMEN AND REGION BETWEEN THIGHS		$1,194.08	$1,194.08					
45121	REMOVAL OF RECTUM FOR CONGENITAL DEFECT AND LARGE BOWEL THROUGH ABDOMEN AND PERINEUM WITH MULTIPLE BIOPSIES		$1,070.67	$1,070.67					
45123	PARTIAL REMOVAL OF RECTUM THROUGH PERINEUM		$765.59	$765.59					
45126	REMOVAL OF LARGE BOWEL, RECTUM, BLADDER AND URETER		$1,580.48	$1,580.48					
45130	REPAIR OF PROLAPSED RECTUM THROUGH ANUS		$665.09	$665.09					
45135	REPAIR OF PROLAPSED RECTUM THROUGH ABDOMEN AND ANUS		$963.57	$963.57					
45136	REMOVAL OF SMALL BOWEL POUCH WITH CREATION OF OPENING FROM SMALL BOWEL TO SKIN		$1,167.19	$1,167.19					
45150	INCISION OF STRICTURE OF RECTUM		$260.31	$260.31					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45160	REMOVAL OF GROWTH OF RECTUM THROUGH SACRUM		$600.10	$600.10					
45171	REMOVAL OF GROWTH OF RECTUM THROUGH ANUS		$430.31	$430.31					
45172	REMOVAL OF GROWTH OF RECTUM THROUGH ANUS WITH REMOVAL OF A PORTION OF MUSCLE		$593.07	$593.07					
45190	DESTRUCTION OF GROWTH OF RECTUM		$394.39	$394.39					
45300	DIAGNOSTIC EXAM OF RECTUM AND LOWER LARGE BOWEL USING AN ENDOSCOPE		$29.62	$36.99					
45303	DILATION OF RECTUM AND/OR LOWER LARGE BOWEL USING AN ENDOSCOPE		$26.17	$34.75					
45305	BIOPSIES OF RECTUM AND/OR LOWER LARGE BOWEL USING A RIGID ENDOSCOPE		$44.30	$55.57					
45307	REMOVAL OF FOREIGN BODIES FROM RECTUM AND/OR LOWER LARGE BOWEL USING A RIGID ENDOSCOPE		$88.62	$88.62					
45308	REMOVAL OF POLYP OR GROWTH OF RECTUM AND LARGE BOWEL USING AN ENDOSCOPE WITH ELECTRICAL CAUTERY		$64.32	$79.48					
45309	REMOVAL OF POLYP OR GROWTH OF RECTUM AND LARGE BOWEL USING AN ENDOSCOPE WITH MECHANICAL SNARE		$78.99	$94.15					
45315	REMOVAL OF MULTIPLE GROWTHS OR POLYPS OF LOWER LARGE BOWEL BY ELECTRICAL CAUTERY OR MECHANICAL SNARE USING A RIGID ENDOSCOPE		$110.82	$110.82					
45317	CONTROL OF BLEEDING OF LOWER LARGE BOWEL USING AN ENDOSCOPE		$118.52	$118.52					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45320	DESTRUCTION OF MULTIPLE POLYPS OR GROWTHS OF LOWER LARGE BOWEL USING AN ENDOSCOPE		$142.93	$142.93					
45321	RELEASE OF TWISTED LOWER LARGE BOWEL USING A RIGID ENDOSCOPE		$108.20	$108.20					
45327	INSERTION OF STENT INTO LOWER LARGE BOWEL USING AN ENDOSCOPE		$66.44	$66.44					
45330	DIAGNOSTIC EXAM OF LOWER PORTION OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$47.58	$64.08					
45331	BIOPSY OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$83.80	$83.80					
45332	REMOVAL OF FOREIGN BODIES IN LOWER PORTION OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$108.61	$108.61					
45333	REMOVAL OF POLYPS OR GROWTHS OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE WITH ELECTRICAL CAUTERY		$123.91	$123.91					
45334	CONTROL OF BLEEDING OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$166.01	$166.01					
45335	INJECTION BENEATH LINING OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$57.66	$104.68					
45337	DECOMPRESSION OF TWISTED OR ABNORMALLY DILATED LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$159.75	$159.75					
45338	REMOVAL OF POLYPS OR GROWTHS OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE WITH MECHANICAL SNARE		$141.81	$141.81					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45340	BALLOON DILATION OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$69.12	$234.34					
45341	ULTRASOUND EXAM OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$148.42	$148.42					
45342	FINE NEEDLE ASPIRATION AND/OR BIOPSY OF LOWER LARGE BOWEL WITH ULTRASOUND GUIDANCE USING A FLEXIBLE ENDOSCOPE		$171.39	$171.39					
45346	DESTRUCTION OF POLYP OR GROWTH OF LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$135.88	$2,303.45					Added Effective 1/1/2016
45347	INSERTION OF STENT INTO LOWER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$131.18	$131.18					Added Effective 1/1/2016
45349	REMOVAL OF LOWER PORTION OF LARGE BOWEL TISSUE USING A FLEXIBLE ENDOSCOPE		$167.25	$167.25					Added Effective 1/1/2016
45350	BANDING OF HEMORRHOIDS USING A FLEXIBLE ENDOSCOPE (SIGMOIDOSCOPE)		$86.37	$435.13					Added Effective 1/1/2016
45378	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLE		$176.59	$324.55					Effective 4/1/2022
45379	REMOVAL OF FOREIGN BODIES IN LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$299.16	$417.11					Effective 4/1/2022
45380	BIOPSY OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$191.77	$415.51					Effective 4/1/2022
45381	INJECTION BENEATH LINING OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$191.77	$423.63					Effective 4/1/2022
45382	CONTROL OF BLEEDING OF UPPER LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$248.59	$639.54					Effective 4/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45384	REMOVAL OF POLYPS OR GROWTHS OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE WITH ELECTRICAL CAUTERY		$219.07	$467.77					Effective 4/1/2022
45385	REMOVAL OF POLYPS OR GROWTHS OF LARGE BOWEL USING AN ENDOSCOPE WITH MECHANICAL SNARE		$243.98	$435.84					Effective 4/1/2022
45386	BALLOON DILATION OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$202.30	$584.83					Effective 4/1/2022
45388	DESTRUCTION OF POLYP OR GROWTH OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$227.35	$2,425.97					Added Effective 1/1/2016
45389	INSERTION OF STENT IN LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$243.40	$243.40					Added Effective 1/1/2016
45390	REMOVAL OF LARGE BOWEL TISSUE USING A FLEXIBLE ENDOSCOPE		$277.89	$277.89					Added Effective 1/1/2016
45391	ULTRASOUND EXAM OF LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$247.04	$247.04					Effective 4/1/2022
45392	FINE NEEDLE ASPIRATION AND/OR BIOPSY OF LARGE BOWEL WITH ULTRASOUND GUIDANCE USING A FLEXIBLE ENDOSCOPE		$291.09	$291.09					Effective 4/1/2022
45393	DECOMPRESSION OF TWISTED OR ABNORMALLY DILATED LARGE BOWEL USING A FLEXIBLE ENDOSCOPE		$212.95	$212.95					Added Effective 1/1/2016
45395	REMOVAL OF RECTUM WITH CREATION OF OPENING FROM LARGE BOWEL TO SKIN USING AN ENDOSCOPE		$1,348.53	$1,348.53					
45397	REMOVAL OF RECTUM USING AN ENDOSCOPE		$1,468.46	$1,468.46					
45398	BANDING OF HEMORRHOIDS USING A FLEXIBLE ENDOSCOPE (COLONOSCOPE)		$197.74	$553.48					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45399	OTHER PROCEDURE ON LARGE BOWEL		$0.00	$0.00					Added Effective 1/1/2016
45400	REPAIR OF RECTAL PROLAPSE USING AN ENDOSCOPE		$788.46	$788.46					
45402	REPAIR OF RECTAL PROLAPSE WITH PARTIAL REMOVAL OF LOWER LARGE BOWEL USING AN ENDOSCOPE		$1,071.14	$1,071.14					
45499	OTHER PROCEDURE ON RECTUM USING AN ENDOSCOPE	Yes	$0.00	$0.00					
45500	REPAIR OF NARROWED RECTUM		$382.37	$382.37					
45505	REPAIR OF PROLAPSED LINING OF RECTUM THROUGH ANUS		$361.16	$361.16					
45520	INJECTION OF PROLAPSED VEIN IN RECTUM		$26.75	$34.93					
45540	SUTURE OF RECTUM TO SACRUM THROUGH ABDOMEN		$667.83	$667.83					
45541	SUTURE OF RECTUM TO SACRUM THROUGH PERINEUM		$609.62	$609.62					
45550	SUTURE OF RECTUM TO SACRUM WITH REMOVAL OF LARGE BOWEL		$758.63	$758.63					
45560	REPAIR OF BULGING OF RECTUM INTO VAGINA		$371.78	$371.78					
45562	REPAIR OF RECTAL WOUND		$581.98	$581.98					
45563	REPAIR OF RECTAL WOUND WITH SURGICALLY CREATED OPENING FROM LARGE BOWEL TO SKIN		$918.00	$918.00					
45800	CLOSURE OF ABNORMAL OPENING FROM RECTUM TO BLADDER		$672.75	$672.75					
45805	REPAIR OF HERNIATED RECTUM WITH CREATION OF LARGE BOWEL OPENING TO SKIN		$831.02	$831.02					
45820	REPAIR OF ABNORMAL RECTAL DRAINAGE TRACT		$661.31	$661.31					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
45825	REPAIR OF ABNORMAL RECTAL DRAINAGE TRACT WITH CREATION OF LARGE BOWEL OPENING TO SKIN		$758.43	$758.43					
45900	MANUAL REPLACEMENT OF PROLAPSED RECTUM UNDER ANESTHESIA		$67.53	$67.53					
45905	DILATION OF SPHINCTER OF ANUS UNDER ANESTHESIA		$66.27	$66.27					
45910	DILATION OF NARROWING OF RECTUM UNDER ANESTHESIA		$81.07	$81.07					
45915	REMOVAL OF IMPACTED STOOL OR FOREIGN BODY IN RECTUM UNDER ANESTHESIA		$84.44	$84.44					
45990	DIAGNOSTIC EXAM OF ANUS AND RECTUM UNDER ANESTHESIA		$77.97	$77.97					
45999	OTHER PROCEDURE ON RECTUM	Yes	$0.00	$0.00					
46020	INSERTION OF DRAIN (SETON) INTO ANUS		$149.88	$168.72					
46030	REMOVAL OF DRAIN (SETON) FROM ANUS		$47.64	$47.64					
46040	REMOVAL OF DRAIN (SETON) FROM ANUS		$197.37	$197.37					
46045	INCISION AND DRAINAGE OF ABSCESS WITHIN WALL OF RECTUM UNDER ANESTHESIA		$173.59	$173.59					
46050	DRAINAGE OF SUPERFICIAL RECTAL ABSCESS SURROUNDING ANUS		$44.17	$52.22					
46060	INCISION AND DRAINAGE OF ABSCESS IN WALL OF RECTUM OR BETWEEN RECTUM AND MUSCLE WITH INCISION OR REMOVAL OF ABNORMAL DRAINAGE TRACT		$318.31	$318.31					
46070	INCISION OF TISSUE BLOCKING RECTUM, INFANT		$121.94	$121.94					
46080	INCISION OF SPHINCTER OF ANUS		$136.54	$136.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
46083	INCISION OF EXTERNAL HEMORRHOID WITH BLOOD CLOT		$50.01	$58.46					
46200	REMOVAL OF CHRONIC TEAR OF ANUS		$192.90	$192.90					
46220	REMOVAL OF SINGLE EXTERNAL NONCANCER GROWTH OF ANUS		$64.12	$64.12					
46221	REMOVAL OF EXTERNAL HEMORRHOIDS BY RUBBER BANDING		$52.75	$61.60					
46230	REMOVAL OF MULTIPLE EXTERNAL NONCANCER GROWTHS OF ANUS		$87.99	$99.12					
46250	REMOVAL OF MULTIPLE EXTERNAL HEMORRHOIDS		$214.69	$214.69					
46255	REMOVAL OF SINGLE EXTERNAL AND INTERNAL HEMORRHOID GROUP		$292.50	$292.50					
46257	REMOVAL OF SINGLE EXTERNAL AND INTERNAL HEMORRHOID GROUP AND CHRONIC TEAR IN ANUS		$338.77	$338.77					
46258	REMOVAL OF SINGLE EXTERNAL AND INTERNAL HEMORRHOID GROUP WITH REMOVAL OF ABNORMAL DRAINAGE TRACT IN ANUS		$370.78	$370.78					
46260	REMOVAL OF MULTIPLE HEMORRHOID GROUPS		$389.78	$389.78					
46261	REMOVAL OF MULTIPLE HEMORRHOID GROUPS AND CHRONIC TEAR IN ANUS		$402.03	$402.03					
46262	REMOVAL OF MULTIPLE HEMORRHOID GROUPS WITH REMOVAL OF ABNORMAL DRAINAGE TRACT FROM ANUS		$412.67	$412.67					
46270	REPAIR OF ABNORMAL ANAL DRAINAGE TRACT		$162.14	$162.14					
46275	REPAIR OF ABNORMAL DRAINAGE TRACT IN ANAL SPHINCTER		$302.62	$302.62					
46280	REPAIR OF ABNORMAL DRAINAGE TRACT AROUND ANAL SPHINCTER		$358.41	$358.41					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
46285	SECOND STAGE REPAIR OF ABNORMAL ANAL DRAINAGE TRACT		$185.46	$185.46					
46288	REPAIR OF ABNORMAL ANAL DRAINAGE TRACT WITH RECTAL TISSUE FLAP		$316.34	$316.34					
46320	REMOVAL OF EXTERNAL HEMORRHOID WITH BLOOD CLOT		$58.42	$67.81					
46500	INJECTION OF HEMORRHOID		$50.65	$54.94					
46505	INJECTION OF AGENT TO DESTROY NERVE TO INTERNAL SPHINCTER OF ANUS		$138.75	$166.31					
46600	DIAGNOSTIC EXAM OF ANUS USING AN ENDOSCOPE		$19.16	$22.91					
46601	DIAGNOSTIC EXAM OF ANUS WITH MAGNIFICATION AND CHEMICAL AGENT ENHANCEMENT USING AN ENDOSCOPE		$75.66	$106.70					Added Effective 1/1/2016
46604	DIAGNOSTIC EXAM OF ANUS WITH MAGNIFICATION AND CHEMICAL AGENT ENHANCEMENT USING AN ENDOSCOPE		$44.99	$50.09					
46606	BIOPSY OF ANUS USING AN ENDOSCOPE		$30.05	$34.88					
46607	BIOPSY OF ANUS WITH MAGNIFICATION AND CHEMICAL AGENT ENHANCEMENT USING AN ENDOSCOPE		$102.05	$148.62					Added Effective 1/1/2016
46608	REMOVAL OF FOREIGN BODY IN ANUS USING AN ENDOSCOPE		$75.92	$75.92					
46610	REMOVAL OF ANAL POLYPS OR GROWTHS USING AN ENDOSCOPE WITH ELECTRICAL CAUTERY		$65.18	$65.18					
46611	REMOVAL OF SINGLE ANAL POLYP OR GROWTH USING AN ENDOSCOPE WITH MECHANICAL SNARE		$68.16	$79.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
46612	REMOVAL OF MULTIPLE ANAL POLYPS OR GROWTHS USING AN ENDOSCOPE WITH ELECTRICAL CAUTERY OR MECHANICAL SNARE		$110.81	$110.81					
46614	CONTROL OF BLEEDING OF ANUS USING AN ENDOSCOPE		$85.84	$106.63					
46615	DESTRUCTION OF ANAL POLYP OR GROWTH USING AN ENDOSCOPE		$105.50	$126.29					
46700	PLASTIC REPAIR OF ANAL STRICTURE, ADULT		$382.62	$382.62					
46705	PLASTIC REPAIR OF ANAL STRICTURE, INFANT		$302.48	$302.48					
46706	REPAIR OF ABNORMAL ANAL DRAINAGE TRACT WITH TISSUE GLUE		$105.07	$105.07					
46707	REPAIR OF ABNORMAL ANAL DRAINAGE TRACT WITH IMPLANTED PLUG		$330.57	$330.57					
46710	REPAIR OF ABNORMAL DRAINAGE TRACT OR POCKET FROM SURGICALLY CREATED POUCH OF SMALL BOWEL THROUGH INCISION OF REGION BETWEEN THIGHS		$708.73	$708.73					
46712	REPAIR OF ABNORMAL DRAINAGE TRACT OR POCKET FROM SURGICALLY CREATED POUCH OF SMALL BOWEL THROUGH INCISION OF ABDOMEN AND REGION BETWEEN THIGHS		$1,488.37	$1,488.37					
46715	CREATION OF ANAL OPENING		$311.55	$311.55					
46716	RECONSTRUCTION OF ABSENT ANAL OPENING		$536.09	$536.09					
46730	REPAIR OF ABSENCE OF OPENING IN ANUS, VIA INCISION OF REGION BETWEEN THIGHS OR BELOW SACRUM		$951.53	$951.53					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
46735	REPAIR OF ABSENCE OF OPENING IN ANUS THROUGH INCISION OF ABDOMEN AND REGION BETWEEN THIGHS AND BELOW SACRUM		$1,154.58	$1,154.58					
46740	REPAIR OF ABSENCE OF OPENING IN ANUS AND ABNORMAL OPENING FROM RECTUM INTO URETHRA OR VAGINA THROUGH REGION BETWEEN THIGHS OR BELOW SACRUM		$1,022.82	$1,022.82					
46742	REPAIR OF ABSENCE OF OPENING IN ANUS AND ABNORMAL OPENING FROM RECTUM INTO URETHRA OR VAGINA THROUGH ABDOMEN OR BELOW SACRUM		$1,392.97	$1,392.97					
46744	REPAIR OF DEFECT FOR SINGLE CHANNEL OUTLET OF RECTUM, VAGINA, AND URINARY TRACT THROUGH REGION BETWEEN THIGHS OR BELOW SACRUM		$1,563.77	$1,563.77					
46746	REPAIR OF DEFECT FOR SINGLE CHANNEL OUTLET OF RECTUM, VAGINA, AND URINARY TRACT THROUGH ABDOMEN AND REGION BETWEEN THIGHS OR BELOW SACRUM		$1,710.96	$1,710.96					
46748	REPAIR OF DEFECT FOR SINGLE CHANNEL OUTLET OF RECTUM, VAGINA, AND URINARY TRACT THROUGH INCISION OF REGION BETWEEN THIGHS OR BELOW SACRUM WITH LENGTHENING OF VAGINA		$1,906.25	$1,906.25					
46750	REPAIR OF ANAL MUSCLE FOR INCONTINENCE OR PROLAPSE, ADULT		$406.25	$406.25					
46751	REPAIR OF ANAL MUSCLE FOR INCONTINENCE OR PROLAPSE, CHILD		$360.54	$360.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
46753	REPAIR OF MUSCLE OF ANUS FOR INCONTINENCE AND/OR PROLAPSE USING WIRE, GRAFT, OR SUTURE		$333.18	$333.18					
46754	REMOVAL OF ANAL MUSCLE WIRE OR SUTURE		$91.29	$91.29					
46760	REPAIR OF ANAL MUSCLE TO CORRECT INCONTINENCE USING MUSCLE TRANSPLANT, ADULT		$527.99	$527.99					
46761	REPAIR OF ANAL MUSCLE TO CORRECT INCONTINENCE WITH MUSCLE TIGHTENING, ADULT		$514.13	$514.13					
46900	SIMPLE CHEMICAL DESTRUCTION OF GROWTH OF ANUS		$59.80	$65.03					
46910	SIMPLE DESTRUCTION OF GROWTH OF ANUS		$63.64	$72.22					
46916	ELECTRICAL DESTRUCTION OF GROWTH OF ANUS		$63.56	$72.54					
46917	LASER DESTRUCTION OF GROWTH OF ANUS		$86.66	$112.68					
46922	SIMPLE REMOVAL OF GROWTH OF ANUS		$93.03	$93.03					
46924	EXTENSIVE DESTRUCTION OF GROWTH OF ANUS		$159.36	$159.36					
46930	EXTENSIVE DESTRUCTION OF GROWTH OF ANUS		$104.14	$140.64					
46940	INITIAL REPAIR OF ANAL TEAR WITH DILATION OF ANAL MUSCLE		$76.22	$83.06					
46942	SUBSEQUENT REPAIR OF ANAL TEAR WITH DILATION OF ANAL MUSCLE		$67.09	$73.26					
46945	TYING OF SINGLE INTERNAL HEMORRHOID GROUP		$260.96	$260.96					Rate Change Effective 01/01/2020
46946	TYING OF MULTIPLE INTERNAL HEMORRHOID GROUPS		$295.36	$295.36					Updated Effective 01/01/2020
46947	STAPLING OF INTERNAL HEMORRHOID		$242.86	$242.86					
46999	OTHER PROCEDURE ON ANUS	Yes	$0.00	$0.00					
47000	NEEDLE BIOPSY OF LIVER THROUGH SKIN		$96.46	$96.46					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47001	NEEDLE BIOPSY OF LIVER		$82.93	$82.93					
47010	DRAINAGE OF ABSCESS OR CYST OF LIVER		$465.26	$465.26					
47011	DRAINAGE OF LIVER ABSCESS OR CYST		$186.91	$186.91					
47015	INJECTION AND/OR ASPIRATION OF ABSCESS OR CYST OF LIVER		$466.14	$466.14					
47100	PARTIAL REMOVAL OF LIVER TISSUE		$302.59	$302.59					
47120	PARTIAL REMOVAL OF LIVER LOBE		$968.70	$968.70					
47122	REMOVAL OF RIGHT LIVER LOBE WITH PARTIAL REMOVAL OF LEFT LIVER LOBE		$1,513.60	$1,513.60					
47125	REMOVAL OF LEFT LIVER LOBE		$1,396.80	$1,396.80					
47130	REMOVAL OF RIGHT LIVER LOBE		$1,535.32	$1,535.32					
47135	TRANSPLANTATION OF DONOR LIVER		$3,944.91	$3,944.91					
47140	PARTIAL REMOVAL OF LEFT SEGMENT OF DONOR LIVER		$2,288.26	$2,288.26					
47141	REMOVAL OF LEFT LIVER LOBE OF DONOR	Yes	$2,767.27	$2,767.27					
47142	REMOVAL OF RIGHT LOBE OF DONOR LIVER		$3,048.23	$3,048.23					
47143	PREPARATION OF DONOR LIVER FOR TRANSPLANTATION		$0.00	$0.00					
47144	PREPARATION OF DONOR LIVER FOR TRANSPLANTATION WITH SPLIT OF LIVER GRAFT		$0.00	$0.00					
47145	PREPARATION OF DONOR LIVER FOR TRANSPLANTATION WITH LOBE SPLIT OF LIVER GRAFT		$0.00	$0.00					
47146	PREPARATION OF DONOR LIVER AND VEIN GRAFTS FOR TRANSPLANTATION		$251.83	$251.83					
47147	PREPARATION OF DONOR LIVER AND ARTERY GRAFTS FOR TRANSPLANTATION		$293.80	$293.80					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47300	CREATION OF TRACT TO DRAIN ABSCESS OR CYST OF LIVER		$501.12	$501.12					
47350	SUTURE OF SIMPLE LIVER WOUND TO CONTROL BLEEDING		$567.59	$567.59					
47360	CONTROL OF BLEEDING OF WOUND OF LIVER WITH COMPLEX SUTURE		$796.27	$796.27					
47361	CONTROL OF BLEEDING OF LIVER WITH EXPLORATION, REMOVAL OF TISSUE, SUTURE OR CAUTERY		$1,297.15	$1,297.15					
47362	CONTROL OF BLEEDING OF LIVER WITH EXPLORATION, REMOVAL OF TISSUE, SUTURE OR CAUTERY		$463.36	$463.36					
47370	DESTRUCTION OF GROWTHS OF LIVER USING AN ENDOSCOPE		$724.87	$724.87					
47371	DESTRUCTION OF GROWTH OF LIVER BY FREEZING USING AN ENDOSCOPE		$683.26	$683.26					
47379	OTHER PROCEDURE ON LIVER USING AN ENDOSCOPE	Yes	$0.00	$0.00					
47380	DESTRUCTION OF GROWTH OF LIVER USING RADIOFREQUENCY		$851.70	$851.70					
47381	DESTRUCTION OF GROWTH OF LIVER USING FREEZING		$841.92	$841.92					
47382	DESTRUCTION OF GROWTH OF LIVER THROUGH SKIN USING RADIOFREQUENCY		$505.21	$505.21					
47383	DESTRUCTION OF GROWTH OF LIVER THROUGH SKIN USING FREEZING		$391.42	$5,608.30					Added effective 1/1/2015
47399	OTHER PROCEDURE ON LIVER	Yes	$0.00	$0.00					
47400	INCISION OR CREATION OF OPENING OF LIVER WITH DRAINAGE OR REMOVAL OF BILE DUCT STONE		$816.43	$816.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47420	INCISION OR CREATION OF OPENING OF GALLBLADDER WITH DRAINAGE OR REMOVAL OF BILE DUCT STONE		$751.88	$751.88					
47425	DRAINAGE OR REMOVAL OF BILE DUCT STONE WITH REDIRECTION OF BILE FLOW AND INCISION OR REPAIR OF GALLBLADDER SPHINCTER		$807.61	$807.61					
47460	REPAIR OF BILE DUCT		$883.88	$883.88					
47480	DRAINAGE OR REMOVAL OF STONE FROM GALLBLADDER		$478.70	$478.70					
47490	INSERTION OF TUBE INTO GALLBLADDER USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$282.22	$282.22					
47531	INJECTION OF BILE DUCT FOR X-RAY THROUGH ALREADY EXISTING SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$78.37	$279.66					Added Effective 1/1/2016
47532	INJECTION OF BILE DUCT FOR X-RAY THROUGH NEW SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$177.10	$616.15					Added Effective 1/1/2016
47533	PLACEMENT OF EXTERNAL DRAINAGE TUBE OF BILIARY DUCT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$250.89	$1,002.22					Added Effective 1/1/2016
47534	PLACEMENT OF INTERNAL-EXTERNAL DRAINAGE TUBE OF BILIARY DUCT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$332.82	$1,237.31					Added Effective 1/1/2016
47535	CONVERSION OF EXTERNAL BILIARY DRAINAGE TUBE TO INTERNAL-EXTERNAL BILIARY DRAINAGE TUBE USING IMAGING GUIDANCE AND STUDY OF BILE DUCT WITH REVIEW BY RADIOLOGIST		$190.66	$826.60					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47536	REPLACEMENT OF LIVER DUCT DRAINAGE TUBE USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$121.08	$608.51					Added Effective 1/1/2016
47537	REMOVAL OF BILIARY DRAINAGE TUBE USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$81.17	$302.38					Added Effective 1/1/2016
47538	PLACEMENT OF STENT OF BILIARY DUCT THROUGH EXISTING SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$270.30	$3,324.00					Added Effective 1/1/2016
47539	PLACEMENT OF STENT OF BILIARY DUCT THROUGH NEW SKIN ACCESS USING IMAGING WITH REVIEW BY RADIOLOGIST		$365.85	$3,639.72					Added Effective 1/1/2016
47540	PLACEMENT OF STENT AND DRAINAGE TUBE OF BILIARY DUCT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$437.07	$3,789.85					Added Effective 1/1/2016
47541	PLACEMENT OF ACCESS DEVICE INTO BILIARY TRACT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$232.13	$886.18					Added Effective 1/1/2016
47542	BALLOON DILATION OF BILE DUCT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$108.27	$387.17					Added Effective 1/1/2016
47543	BIOPSY OF BILE DUCT OR LIVER DUCT USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$136.48	$985.09					Added Effective 1/1/2016
47544	REMOVAL OF BILIARY DUCT OR GALLBLADDER STONE USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$173.65	$610.89					Added Effective 1/1/2016
47550	EXAM OF BILE DUCT DURING SURGERY USING AN ENDOSCOPE		$138.96	$138.96					
47552	DIAGNOSTIC EXAM OF BILE DUCT USING AN ENDOSCOPE		$218.82	$218.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47553	BIOPSY OF BILE DUCT USING AN ENDOSCOPE		$303.32	$303.32					
47554	REMOVAL OF BILE DUCT STONES USING AN ENDOSCOPE		$387.54	$387.54					
47555	DILATION OF BILE DUCTS USING AN ENDOSCOPE		$299.67	$299.67					
47556	DILATION OF BILE DUCTS WITH STENT INSERTION USING AN ENDOSCOPE		$329.01	$329.01					
47562	REMOVAL OF GALLBLADDER USING AN ENDOSCOPE		$522.64	$522.64					
47563	REMOVAL OF GALLBLADDER USING AN ENDOSCOPE		$562.24	$562.24					
47564	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH EXPLORATION OF COMMON DUCT		$667.69	$667.69					
47570	CONNECTION OF GALLBLADDER TO BOWEL USING AN ENDOSCOPE		$599.91	$599.91					
47600	REMOVAL OF GALLBLADDER		$553.75	$553.75					
47605	AL OF GALLBLADDER WITH X-RAY STUDY OF BILE DUCTS		$599.19	$599.19					
47610	REMOVAL OF GALLBLADDER WITH EXPLORATION OF COMMON BILE DUCT		$706.62	$706.62					
47612	REMOVAL OF GALLBLADDER AND CREATION OF BILE DUCT DRAINAGE TO BOWEL		$888.61	$888.61					
47620	REMOVAL OF GALLBLADDER AND INCISION OR REPAIR OF GALLBLADDER SPHINCTER		$821.89	$821.89					
47700	EXPLORATION OF CONGENITAL BILE DUCT DEFECT		$646.52	$646.52					
47701	CONNECTION OF PORTION OF UPPER SMALL BOWEL TO BILE DUCT		$1,046.04	$1,046.04					
47711	REMOVAL OF GROWTH OF BILE DUCT EXTERNAL TO LIVER		$916.13	$916.13					
47712	REMOVAL OF GROWTH OF BILE DUCT WITHIN LIVER		$1,079.86	$1,079.86					
47715	REMOVAL OF CYST OF GALLBLADDER		$687.51	$687.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
47720	CREATION OF DRAINAGE TRACT FROM GALLBLADDER TO SMALL BOWEL		$641.77	$641.77					
47721	CREATION OF DRAINAGE TRACT FROM GALLBLADDER TO SMALL BOWEL AND FROM STOMACH TO SMALL BOWEL		$789.17	$789.17					
47740	CREATION OF DRAINAGE TRACT FROM GALLBLADDER TO SMALL BOWEL USING ROUX-EN-Y CONNECTION		$734.61	$734.61					
47741	CREATION OF DRAINAGE TRACT FROM GALLBLADDER TO SMALL BOWEL USING ROUX-EN-Y CONNECTION AND CREATION OF DRAINAGE TRACT FROM STOMACH TO SMALL BOWEL		$934.52	$934.52					
47760	CONNECTION OF BILE DUCT EXTERNAL TO LIVER TO SMALL BOWEL		$957.70	$957.70					
47765	CONNECTION OF BILE DUCT WITHIN LIVER TO SMALL BOWEL		$1,022.74	$1,022.74					
47780	ROUX-EN-Y CONNECTION OF BILE DUCT EXTERNAL TO LIVER TO SMALL BOWEL		$1,015.51	$1,015.51					
47785	CONNECTION OF BILE DUCT WITHIN LIVER TO SMALL BOWEL USING ROUX-EN-Y CONNECTION		$1,133.18	$1,133.18					
47800	RECONSTRUCTION OF BILE DUCT		$933.31	$933.31					
47801	INSERTION OF STENT INTO BILE DUCT		$497.66	$497.66					
47900	SUTURE OF INJURED BILE DUCT		$872.27	$872.27					
47999	OTHER PROCEDURE ON BILE DUCT	Yes	$500.00	$650.00					
48000	INSERTION OF EXTERNAL DRAINS FROM GALLBLADDER, BILE DUCT, AND SMALL BOWEL FOR ACUTE PANCREATITIS		$607.51	$607.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
48001	INSERTION OF EXTERNAL DRAINS AROUND PANCREAS FOR ACUTE PANCREATITIS		$719.99	$719.99					
48020	REMOVAL OF PANCREATIC DUCT STONES		$600.88	$600.88					
48100	BIOPSY OF PANCREAS		$431.13	$431.13					
48102	NEEDLE BIOPSY OF PANCREAS		$200.71	$200.71					
48105	REMOVAL OF PANCREATIC TISSUE		$1,969.65	$1,969.65					
48120	REMOVAL OF GROWTH OF PANCREAS		$686.31	$686.31					
48140	PARTIAL REMOVAL OF PANCREAS		$961.34	$961.34					
48145	PARTIAL REMOVAL OF PANCREAS WITH CONNECTION OF PANCREAS TO SMALL BOWEL		$1,058.33	$1,058.33					
48146	PARTIAL REMOVAL OF PANCREAS WITH CONNECTION OF PANCREAS TO SMALL BOWEL, WITH PRESERVATION OF FIRST PART OF SMALL BOWEL		$1,126.58	$1,126.58					
48148	PARTIAL REMOVAL OF PANCREATIC AND COMMON BILE DUCTS		$684.41	$684.41					
48150	PARTIAL REMOVAL OF PANCREAS, BILE DUCT, AND SMALL BOWEL WITH CONNECTION OF PANCREAS TO SMALL BOWEL		$1,901.07	$1,901.07					
48152	PARTIAL REMOVAL OF PANCREAS, BILE DUCT, STOMACH, AND SMALL BOWEL		$1,791.03	$1,791.03					
48153	NEAR TOTAL REMOVAL OF PANCREAS, BILE DUCT, AND SMALL BOWEL WITH CONNECTION OF PANCREAS TO SMALL BOWEL		$1,901.07	$1,901.07					
48154	PARTIAL REMOVAL OF PANCREAS, BILE DUCT, AND SMALL BOWEL		$1,791.03	$1,791.03					
48155	REMOVAL OF PANCREAS		$1,220.83	$1,220.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
48160	REMOVAL OF PANCREAS WITH PANCREATIC CELL TRANSPLANTATION		$1,660.49	$1,660.49					
48400	INJECTION FOR X-RAY STUDY OF PANCREAS DURING SURGERY		$90.68	$90.68					
48500	CREATION OF DRAINAGE TRACT OF CYST OF PANCREAS		$622.42	$622.42					
48510	INSERTION OF DRAIN FROM CYST OF PANCREAS INTO ABDOMINAL CAVITY		$566.46	$566.46					
48520	CREATION OF DIRECT DRAINAGE TRACT FROM CYST OF PANCREAS TO SMALL BOWEL		$742.72	$742.72					
48540	CREATION OF DRAINAGE TRACT FROM CYST OF PANCREAS TO SMALL BOWEL		$866.71	$866.71					
48545	SUTURE OF PANCREATIC INJURY		$678.83	$678.83					
48547	REPAIR OF PANCREATIC INJURY		$981.38	$981.38					
48548	CREATION OF PANCREATIC DRAINAGE TRACT FROM PANCREAS AND UPPER SMALL BOWEL		$1,144.24	$1,144.24					
48551	PREPARATION OF DONOR PANCREAS FOR TRANSPLANTATION		$0.00	$0.00					
48552	PREPARATION OF DONOR PANCREAS AND VEIN GRAFTS FOR TRANSPLANTATION		$172.86	$172.86					
48554	TRANSPLANTATION OF DONOR PANCREAS		$1,583.06	$1,583.06					
48556	REMOVAL OF TRANSPLANTED DONOR PANCREAS		$643.37	$643.37					
48999	OTHER PROCEDURE ON PANCREAS	Yes	$0.00	$0.00					
49000	EXPLORATION OF ABDOMINAL CAVITY		$479.94	$479.94					
49002	REOPENING OF RECENT ABDOMINAL INCISION		$467.50	$467.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49010	EXPLORATION BEHIND ABDOMINAL CAVITY		$546.60	$546.60					
49013	EXPLORATION AND PACKING OF WOUND IN PELVIC REGION		$354.93	$354.93					Added Effective 01/01/2020
49014	RE-EXPLORATION OF PELVIC REGION WOUND WITH REMOVAL OF WOUND PACKING		$292.95	$292.95					Added Effective 01/01/2020
49020	DRAINAGE OF ABDOMINAL ABSCESS OR INFECTION		$417.25	$417.25					
49040	DRAINAGE OF ABSCESS OF DIAPHRAGM		$462.74	$462.74					
49060	DRAINAGE OF ABSCESS BEHIND ABDOMINAL CAVITY		$482.71	$482.71					
49062	DRAINAGE OF FLUID ACCUMULATION OF ABDOMEN		$554.88	$554.88					
49082	DRAINAGE OF FLUID FROM ABDOMINAL CAVITY		$56.27	$127.59					
49083	DRAINAGE OF FLUID FROM ABDOMINAL CAVITY USING IMAGING GUIDANCE		$86.96	$240.21					
49084	IRRIGATION OF ABDOMINAL CAVITY		$79.98	$79.98					
49180	NEEDLE BIOPSY OF GROWTH OF ABDOMINAL CAVITY		$97.40	$97.40					
49185	NJECTION OF CHEMICAL AGENT INTO FLUID COLLECTION USING IMAGING GUIDANCE		$100.74	$738.75					Added Effective 1/1/2016
49186	REMOVAL OR DESTRUCTION OF GROWTH(S) IN THE ABDOMEN, 5.0 CM OR LESS		$1,087.34	$1,087.34					
49187	REMOVAL OR DESTRUCTION OF GROWTH(S) IN THE ABDOMEN, 5.1 TO 10.0 CM		$1,391.63	$1,391.63					
49188	REMOVAL OR DESTRUCTION OF GROWTH(S) IN THE ABDOMEN, 10.1 TO 20.0 CM		$1,662.27	$1,662.27					
49189	REMOVAL OR DESTRUCTION OF GROWTH(S) IN THE ABDOMEN, 20.1 TO 30.0 CM		$1,934.96	$1,934.96					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49190	REMOVAL OR DESTRUCTION OF GROWTH(S) IN THE ABDOMEN, MORE THAN 30.0 CM		$2,386.89	$2,386.89					
49215	REMOVAL OF GROWTH OF PELVIS OR SACRUM		$884.30	$884.30					
49220	LIVER AND/OR BONE MARROW BIOPSY WITH REMOVAL OF SPLEEN AND LYMPH NODES		$792.22	$792.22					
49250	LIVER AND/OR BONE MARROW BIOPSY WITH REMOVAL OF SPLEEN AND LYMPH NODES		$362.29	$362.29					
49255	REMOVAL OF LINING COVERING ABDOMINAL ORGANS		$284.89	$284.89					
49320	DIAGNOSTIC EXAM OF ABDOMEN USING AN ENDOSCOPE		$258.39	$258.39					
49321	BIOPSY OF ABDOMEN USING AN ENDOSCOPE		$275.28	$275.28					
49322	ASPIRATION OF ABDOMINAL CAVITY OR CYST USING AN ENDOSCOPE		$286.25	$286.26					
49323	DRAINAGE OF LYMPH FLUID TO ABDOMINAL CAVITY USING AN ENDOSCOPE		$444.79	$444.79					
49324	INSERTION OF ABDOMINAL CAVITY TUBE USING AN ENDOSCOPE		$270.09	$270.09					
49325	REVISION OF ABDOMINAL CAVITY TUBE USING AN ENDOSCOPE		$291.09	$291.09					
49326	SUTURE OF INTERNAL ABDOMINAL LINING USING AN ENDOSCOPE		$135.28	$135.28					
49327	EXAM OF ABDOMEN WITH INSERTION OF DEVICE FOR RADIATION THERAPY USING AN ENDOSCOPE		$115.42	$115.42					
49329	OTHER PROCEDURE ON ABDOMEN USING AN ENDOSCOPE	Yes	$0.00	$0.00					
49400	INJECTION OF AIR OR X-RAY CONTRAST INTO ABDOMINAL CAVITY		$89.34	$89.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49402	REMOVAL OF FOREIGN BODY IN ABDOMINAL CAVITY		$584.27	$584.27					
49405	DRAINAGE OF FLUID COLLECTION BY TUBE THROUGH SKIN USING IMAGING GUIDANCE		$174.18	$655.14					
49406	DRAINAGE OF FLUID COLLECTION OF ABDOMINAL CAVITY BY TUBE USING IMAGING GUIDANCE		$174.44	$654.89					
49407	DRAINAGE OF FLUID COLLECTION BY TUBE THROUGH VAGINA OR RECTUM USING IMAGING GUIDANCE		$185.65	$556.66					
49418	INSERTION OF ABDOMINAL TUBE USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$205.02	$1,326.55					
49419	INSERTION OF ABDOMINAL CAVITY TUBE FOR DRUG DELIVERY		$303.59	$303.59					
49421	INSERTION OF ABDOMINAL CAVITY TUBE FOR DRAINAGE OR DIALYSIS		$274.21	$274.21					
49422	REMOVAL OF ABDOMINAL CAVITY TUBE		$302.38	$302.38					
49423	EXCHANGE OF ABDOMINAL CAVITY DRAINAGE TUBE USING IMAGING GUIDANCE		$73.62	$73.62					
49424	INJECTION OF CONTRAST THROUGH ABDOMINAL CAVITY TUBE FOR X-RAY STUDY		$38.31	$38.31					
49425	INSERTION OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$570.59	$570.59					
49426	REVISION OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$422.04	$422.04					
49427	INJECTION FOR X-RAY STUDY OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$39.99	$39.99					
49428	CLOSURE OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$91.83	$91.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49429	REMOVAL OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$294.09	$294.09					
49435	INSERTION OF ABDOMINAL CAVITY TUBE EXTENSION		$87.11	$87.11					
49436	CREATION OF EXIT SITE FOR TUBE IN ABDOMINAL CAVITY		$125.90	$125.90					
49440	INSERTION OF STOMACH TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$192.26	$882.09					
49441	INSERTION OF SMALL BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$209.77	$1,044.09					
49442	INSERTION OF LARGE BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$174.16	$851.53					
49446	CONVERSION OF STOMACH TUBE TO STOMACH-TO-SMALL BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$137.67	$868.44					
49450	REPLACEMENT OF STOMACH OR LARGE BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$55.78	$605.56					
49451	REPLACEMENT OF SMALL BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$76.85	$642.65					
49452	REPLACEMENT OF STOMACH-TO-SMALL BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$119.87	$787.74					
49460	REPLACEMENT OF STOMACH-TO-SMALL BOWEL TUBE USING FLUOROSCOPIC GUIDANCE WITH CONTRAST		$39.16	$640.87					
49465	CONTRAST INJECTION FOR X-RAY IMAGING THROUGH EXISTING TUBE IN STOMACH, SMALL BOWEL OR LARGE BOWEL		$25.81	$134.70					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49491	REPAIR OF GROIN HERNIA IN PRETERM INFANT YOUNGER THAN 37 WEEKS GESTATION PERFORMED FROM BIRTH TO 50 WEEKS POSTCONCEPTION		$604.46	$491.15					
49492	REPAIR OF TRAPPED GROIN HERNIA IN PRETERM INFANT YOUNGER THAN 37 WEEKS GESTATION PERFORMED FROM BIRTH TO 50 WEEKS POSTCONCEPTION		$604.46	$604.46					
49495	PAIR OF GROIN HERNIA IN FULL TERM INFANT YOUNGER THAN 6 MONTHS OR PRETERM INFANT OLDER THAN 50 WEEKS OF AGE POSTCONCEPTION AND YOUNGER THAN 6 MONTHS AT TIME OF SURGERY		$326.56	$326.56					
49496	REPAIR OF TRAPPED GROIN HERNIA IN FULL TERM INFANT YOUNGER THAN 6 MONTHS OR PRETERM INFANT OLDER THAN 50 WEEKS POSTCONCEPTION AND YOUNGER THAN 6 MONTHS AT TIME OF SURGERY		$407.03	$407.03					
49500	REPAIR OF GROIN HERNIA (6 MONTHS TO YOUNGER THAN 5 YEARS)		$286.06	$286.06					
49501	REPAIR OF TRAPPED GROIN HERNIA (6 MONTHS TO YOUNGER THAN 5 YEARS)		$374.46	$374.46					
49505	REPAIR OF GROIN HERNIA (5 YEARS OR OLDER)		$350.04	$350.04					
49507	REPAIR OF TRAPPED GROIN HERNIA (5 YEARS OR OLDER)		$378.57	$378.57					
49520	REPAIR OF GROIN HERNIA THAT IS NOT TRAPPED		$397.92	$397.92					
49521	REPAIR OF TRAPPED OR STRANGULATED GROIN HERNIA		$438.14	$438.14					
49525	REPAIR OF SLIDING GROIN HERNIA		$381.57	$381.57					
49540	REPAIR OF ABDOMINAL MUSCLE HERNIA		$398.80	$398.80					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49550	REPAIR OF FEMORAL GROIN HE		$351.74	$351.74					
49553	REPAIR OF TRAPPED FEMORAL GROIN HERNIA		$364.36	$364.36					
49555	REPAIR OF RECURRENT FEMORAL GROIN HERNIA		$407.34	$407.34					
49557	REPAIR OF TRAPPED RECURRENT FEMORAL GROIN HERNIA		$449.60	$449.60					
49591	INITIAL REPAIR OF SLIDING HERNIA OF ABDOMEN, LESS THAN 3 CM IN LENGTH		$286.53	$286.53					
49592	INITIAL REPAIR OF ENTRAPPED HERNIA OF ABDOMEN, LESS THAN 3 CM IN LENGTH		$399.24	$399.24					
49593	INITIAL REPAIR OF SLIDING HERNIA OF ABDOMEN, 3-10 CM IN LENGTH		$481.10	$481.10					
49594	INITIAL REPAIR OF ENTRAPPED HERNIA OF ABDOMEN, 3-10 CM IN LENGTH		$626.74	$626.74					
49595	INITIAL REPAIR OF SLIDING HERNIA OF ABDOMEN, MORE THAN 10 CM IN LENGTH		$647.20	$647.20					
49596	INITIAL REPAIR OF ENTRAPPED HERNIA OF ABDOMEN, MORE THAN 10 CM IN LENGTH		$859.97	$859.97					
49600	REPAIR OF SMALL DEFECT OF ABDOMINAL WALL AT NAVEL		$437.97	$437.97					
49605	REPAIR OF LARGE DEFECT OF ABDOMINAL WALL AT NAVEL		$916.08	$916.08					
49606	REPAIR OF DEFECT OF ABDOMINAL WALL AT NAVEL WITH REMOVAL OF PROSTHESIS		$772.35	$772.35					
49610	REPAIR OF DEFECT OF ABDOMINAL WALL AT NAVEL, STAGE 1 OF 2		$466.29	$466.29					
49611	REPAIR OF DEFECT OF ABDOMINAL WALL AT NAVEL, STAGE 2 OR 2		$497.57	$497.57					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49613	REPAIR OF RECURRENT SLIDING HERNIA OF ABDOMEN, LESS THAN 3 CM IN LENGTH		$353.39	$353.39					
49614	REPAIR OF RECURRENT ENTRAPPED HERNIA OF ABDOMEN, LESS THAN 3 CM IN LENGTH		$480.03	$480.03					
49615	REPAIR OF RECURRENT SLIDING HERNIA OF ABDOMEN, 3-10 CM IN LENGTH		$536.89	$536.89					
49616	REPAIR OF RECURRENT ENTRAPPED HERNIA OF ABDOMEN, 3-10 CM IN LENGTH		$721.61	$721.61					
49617	REPAIR OF RECURRENT SLIDING HERNIA OF ABDOMEN, MORE THAN 10 CM IN LENGTH		$743.36	$743.36					
49618	REPAIR OF RECURRENT ENTRAPPED HERNIA OF ABDOMEN, MORE THAN 10 CM IN LENGTH		$1,042.28	$1,042.28					
49621	REPAIR OF SLIDING HERNIA NEXT TO STOMA		$624.05	$624.05					
49622	REPAIR OF ENTRAPPED HERNIA NEXT TO STOMA		$770.57	$770.57					
49623	REMOVAL OF MESH AT SAME TIME AS HERNIA REPAIR		$166.36	$166.36					
49650	REPAIR OF GROIN HERNIA USING AN ENDOSCOPE		$302.13	$302.13					
49651	REPAIR OF RECURRENT GROIN HERNIA USING AN ENDOSCOPE		$387.99	$387.99					
49659	OTHER REPAIR OF HERNIA USING AN ENDOSCOPE	Yes	$0.00	$0.00					
49900	SUTURE OF POSTSURGICAL OPENING IN ABDOMINAL WALL		$249.61	$249.61					
49904	HARVEST OF ABDOMINAL CAVITY LINING FOR GRAFTING		$1,035.89	$1,035.89					
49905	REPAIR OF ABDOMEN USING ABDOMINAL LINING GRAFT		$303.37	$303.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
49906	REPAIR OF ABDOMEN USING ABDOMINAL LINING GRAFT		$0.00	$0.00					
49999	OTHER PROCEDURE ON ABDOMEN	Yes	$0.00	$0.00					
50010	EXPLORATION OF KIDNEY		$579.10	$579.10					
50020	DRAINAGE OF ABSCESS OF KIDNEY		$567.20	$567.20					
50021	DRAINAGE OF KIDNEY ABSCESS		$170.77	$170.77					
50040	INSERTION OF TUBE FOR DRAINAGE OF KIDNEY		$612.59	$612.59					
50045	INCISION OF KIDNEY WITH EXPLORATION		$709.64	$709.64					
50060	REMOVAL OF KIDNEY STONE		$886.15	$886.15					
50065	REMOVAL OF KIDNEY STONE, SECONDARY PROCEDURE		$982.15	$982.15					
50070	REMOVAL OF KIDNEY STONE COMPLICATED BY CONGENITAL ABNORMALITY		$939.93	$939.93					
50075	REMOVAL OF KIDNEY STONES		$1,197.56	$1,197.56					
50080	SIMPLE SURGICAL TREATMENT OF KIDNEY STONE WITH IMAGING GUIDANCE		$765.39	$765.39					
50081	COMPLEX SURGICAL TREATMENT OF KIDNEY STONE WITH IMAGING GUIDANCE		$1,040.14	$1,040.14					
50100	INCISION OR REPOSITIONING OF ABNORMAL KIDNEY BLOOD VESSEL		$753.52	$753.52					
50120	INCISION OF RENAL PELVIS OF KIDNEY WITH EXPLORATION		$762.91	$762.91					
50125	INCISION OF RENAL PELVIS OF KIDNEY WITH DRAINAGE		$777.51	$777.51					
50130	INCISION OF RENAL PELVIS OF KIDNEY WITH REMOVAL OF KIDNEY STONE		$846.95	$846.95					
50200	NEEDLE BIOPSY OF KIDNEY		$152.52	$152.52					
50205	BIOPSY OF KIDNEY		$540.41	$540.41					
50220	REMOVAL OF KIDNEY AND PARTIAL REMOVAL OF URETER		$860.66	$860.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50225	REMOVAL OF KIDNEY AND PARTIAL REMOVAL OF URETER COMPLICATED BY PREVIOUS SURGERY ON SAME KIDNEY		$1,039.88	$1,039.88					
50230	REMOVAL OF KIDNEY, LYMPH NODES, AND/OR BLOOD CLOT FROM MAJOR VEIN WITH PARTIAL REMOVAL OF URETER		$1,141.54	$1,141.54					
50234	REMOVAL OF KIDNEY AND URETER WITH PARTIAL REMOVAL OF BLADDER THROUGH SAME INCISION		$1,106.12	$1,106.12					
50236	REMOVAL OF KIDNEY AND URETER WITH PARTIAL REMOVAL OF BLADDER THROUGH SEPARATE INCISION		$1,202.69	$1,202.69					
50240	PARTIAL REMOVAL OF KIDNEY		$1,064.37	$1,064.37					
50250	DESTRUCTION OF GROWTH OF KIDNEY		$862.75	$862.75					
50280	DESTRUCTION OF GROWTH OF KIDNEY		$748.77	$748.77					
50290	REMOVAL OF CYSTS OF KIDNEY		$668.54	$668.54					
50300	REMOVAL OF DONOR KIDNEY		$553.19	$553.19					
50320	REMOVAL OF DONOR KIDNEY FROM LIVING DONOR		$1,188.51	$1,188.51					Rate updated 1/1/2018
50323	PREPARATION OF DONOR KIDNEY FOR TRANSPLANTATION		$0.00	$0.00					
50325	PREPARATION OF LIVING DONOR KIDNEY FOR TRANSPLANTATION		$0.00	$0.00					
50327	PREPARATION OF DONOR KIDNEY AND VEINS FOR TRANSPLANTATION		$160.64	$160.64					
50328	PREPARATION OF DONOR KIDNEY AND ARTERIES FOR TRANSPLANTATION		$140.69	$140.69					
50329	PREPARATION OF DONOR KIDNEY AND URETER FOR TRANSPLANTATION		$134.41	$134.41					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50340	REMOVAL OF KIDNEY FROM PATIENT RECEIVING DONOR KIDNEY		$704.29	$704.29					
50360	TRANSPLANTATION OF DONOR KIDNEY		$1,552.57	$1,552.57					
50365	REMOVAL OF KIDNEY AND TRANSPLANTATION OF DONOR KIDNEY		$1,873.06	$1,873.06					
50370	REMOVAL OF PREVIOUSLY TRANSPLANTED DONOR KIDNEY		$669.85	$669.85					
50380	REMOVAL WITH RELOCATION OF KIDNEY		$796.86	$796.86					
50382	REMOVAL AND REPLACEMENT OF STENT IN URETER WITH REVIEW BY RADIOLOGIST		$219.71	$1,096.19					
50384	REMOVAL OF STENT IN URETER THROUGH SKIN WITH REVIEW BY RADIOLOGIST		$200.01	$1,057.61					
50385	REMOVAL AND REPLACEMENT OF STENT IN URETER THROUGH URETHRA WITH REVIEW BY RADIOLOGIST		$200.57	$1,048.83					
50386	REMOVAL OF STENT IN URETER THROUGH URETER WITH REVIEW BY RADIOLOGIST		$151.61	$678.85					
50387	REMOVAL AND REPLACEMENT OF STENT IN KIDNEY AND URETER USING FLUOROSCOPIC GUIDANCE WITH REVIEW BY RADIOLOGIST		$79.54	$528.37					
50389	REMOVAL OF KIDNEY DRAINAGE TUBE USING FLUOROSCOPIC GUIDANCE		$43.89	$360.55					
50390	ASPIRATION AND/OR INJECTION OF CYST OF KIDNEY		$144.05	$144.05					
50391	INSTILLATION OF DRUG INTO KIDNEY AND/OR URETER		$77.85	$102.10					
50396	MEASUREMENT OF URINE FLOW IN KIDNEYS AND URETERS		$75.95	$75.95					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50400	SIMPLE RECONSTRUCTION OF NECK OF KIDNEY		$929.67	$929.67					
50405	COMPLICATED RECONSTRUCTION OF PELVIS OF KIDNEY		$1,164.79	$1,164.79					
50430	INJECTION PROCEDURE FOR IMAGING OF KIDNEY AND URETER THROUGH NEW SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$136.29	$393.71					Added Effective 1/1/2016
50431	INJECTION PROCEDURE FOR IMAGING OF KIDNEY AND URETER THROUGH ALREADY EXISTING SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$53.62	$122.70					Added Effective 1/1/2016
50432	PLACEMENT OF TUBE OF KIDNEY USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$180.36	$634.94					Added Effective 1/1/2016
50433	PLACEMENT OF TUBE OF KIDNEY AND URINARY TUBE THROUGH NEW SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$222.93	$853.18					Added Effective 1/1/2016
50434	CONVERSION OF KIDNEY TUBE TO NEPHROURETERAL TUBE USING IMAGING GUIDANCE AND STUDY OF KIDNEY AND URETER WITH REVIEW BY RADIOLOGIST		$170.64	$674.63					Added Effective 1/1/2016
50435	REPLACEMENT OF KIDNEY DRAINAGE TUBE USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$82.35	$352.98					Added Effective 1/1/2016
50436	DILATION OF EXISTING OPENING INTO URINARY TRACT USING IMAGING GUIDANCE		$123.51	$123.51					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50437	DILATION OF EXISTING OPENING INTO URINARY TRACT AND CREATION OF NEW ACCESS INTO URINE COLLECTING SYSTEM OF KIDNEY USING IMAGING GUIDANCE		$206.79	$206.79					Effective 1/1/2019
50500	SUTURE OF WOUND OR INJURY OF KIDNEY		$910.16	$910.16					
50520	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM KIDNEY TO SKIN		$781.23	$781.23					
50525	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM KIDNEY TO OTHER ABDOMINAL ORGAN THROUGH ABDOMEN		$990.76	$990.76					
50526	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM KIDNEY TO OTHER ABDOMINAL ORGAN THROUGH CHEST		$904.55	$904.55					
50540	REPAIR OF ABNORMALLY SHAPED KIDNEY		$959.03	$959.03					
50541	DESTRUCTION OF CYST OF KIDNEY USING AN ENDOSCOPE		$654.47	$654.47					
50542	DESTRUCTION OF GROWTH OF KIDNEY USING AN ENDOSCOPE		$825.28	$825.28					
50543	PARTIAL REMOVAL OF KIDNEY USING AN ENDOSCOPE		$1,038.55	$1,038.55					
50544	REPAIR OF KIDNEY USING AN ENDOSCOPE		$902.84	$902.84					
50545	REMOVAL OF KIDNEY AND LYMPH NODES USING AN ENDOSCOPE		$978.83	$978.83					
50546	REMOVAL OF KIDNEY AND PARTIAL REMOVAL OF URETER USING AN ENDOSCOPE		$836.59	$836.59					
50547	REMOVAL OF KIDNEY FROM LIVING DONOR USING AN ENDOSCOPE		$1,071.99	$1,071.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50548	REMOVAL OF KIDNEY AND URETER USING AN ENDOSCOPE		$982.90	$982.90					
50551	EXAM OF KIDNEY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$228.17	$228.17					
50553	INSERTION OF TUBE INTO URETER USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$224.42	$224.42					
50555	BIOPSY OF KIDNEY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$328.61	$328.61					
50557	DESTRUCTION AND/OR REMOVAL OF GROWTH OF KIDNEY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$332.49	$332.49					
50561	REMOVAL OF FOREIGN BODY OR STONE IN KIDNEY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$371.95	$371.95					
50562	REMOVAL OF GROWTH OF KIDNEY USING AN ENDOSCOPE INSERTED THROUGH SURGICALLY CREATED OPENING FROM KIDNEY TO SKIN		$439.42	$439.42					
50570	EXAM OF KIDNEY USING AN ENDOSCOPE		$322.23	$322.23					
50572	INSERTION OF TUBE INTO URETER USING AN ENDOSCOPE THROUGH UPPER KIDNEY AREA		$516.39	$516.39					
50574	BIOPSY OF KIDNEY USING AN ENDOSCOPE		$528.82	$528.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50575	DILATION AND URETER STENT INSERTION USING AN ENDOSCOPE		$700.13	$700.13					
50576	DESTRUCTION AND/OR REMOVAL OF GROWTH OF KIDNEY USING AN ENDOSCOPE		$574.28	$574.28					
50580	REMOVAL OF FOREIGN BODY OR STONE IN KIDNEY USING AN ENDOSCOPE		$452.54	$452.54					
50590	SHOCK WAVE CRUSHING OF KIDNEY STONES		$577.02	$577.02					
50592	DESTRUCTION OF GROWTH OF KIDNEY USING RADIOFREQUENCY		$287.70	$4,024.81					
50593	DESTRUCTION OF GROWTH OF KIDNEY BY FREEZING		$388.97	$3,687.39					
50600	EXPLORATION OF URETER		$718.14	$718.14					
50605	INSERTION OF STENT IN URETER		$601.01	$601.01					
50606	BIOPSY OF URETER AND/OR RENAL PELVIS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$129.18	$399.03					Added Effective 1/1/2016
50610	REMOVAL OF STONE FROM UPPER URETER		$780.17	$780.17					
50620	REMOVAL OF STONE FROM MIDDLE URETER		$752.17	$752.17					
50630	REMOVAL OF STONE FROM LOWER URETER		$780.62	$780.62					
50650	REMOVAL OF URETER AND PARTIAL REMOVAL OF BLADDER		$833.50	$833.50					
50660	REMOVAL OF AN EXTRA URETER		$913.28	$913.28					
50684	INJECTION OF URETER FOR IMAGING		$36.66	$36.66					
50686	MEASUREMENT OF URINE FLOW IN URETER		$55.20	$55.20					
50688	CHANGE OF TUBE OR STENT IN URETER		$44.88	$44.88					
50690	INJECTION OF BLADDER AND URETER FOR IMAGING		$43.35	$43.35					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50693	PLACEMENT OF STENT OF URETER THROUGH EXISTING SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$178.66	$791.57					Added Effective 1/1/2016
50694	PLACEMENT OF STENT OF URETER THROUGH NEW SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$231.14	$874.85					Added Effective 1/1/2016
50695	PLACEMENT OF STENT OF URETER AND SEPARATE TUBE IN KIDNEY THROUGH NEW SKIN ACCESS USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$293.14	$1,068.01					Added Effective 1/1/2016
50700	RECONSTRUCTION OF URETER		$782.24	$782.24					
50705	BLOCKING OF URETER USING IMAGING GUIDANCE WITH REVIEW BY RADIOLOGIST		$165.33	$1,265.41					Added Effective 1/1/2016
50706	RELEASE OF SCAR TISSUE AT URETER		$153.84	$574.78					Added Effective 1/1/2016
50715	RELEASE OF SCAR TISSUE AT URETER		$854.13	$854.13					
50722	RELEASE OF ABNORMAL VEINS BLOCKING URETER		$768.05	$768.05					
50725	REPAIR AND REPOSITIONING OF ABNORMALLY POSITIONED URETER		$868.09	$868.09					
50727	REVISION OF OPENING FROM URINARY TRACT TO SKIN		$378.56	$378.56					
50728	REVISION OF OPENING FROM URINARY TRACT TO SKIN WITH REPAIR OF HERNIA		$557.20	$557.20					
50740	CONNECTION OF URETER TO RENAL PELVIS		$897.53	$897.53					
50750	CONNECTION OF URETER TO RENAL CALYX		$939.49	$939.49					
50760	REMOVAL AND RECONNECTION OF DISEASED OR INJURED PORTION OF URETER		$899.61	$899.61					
50770	PARTIAL REMOVAL OF URETER WITH CONNECTION TO OPPOSITE URETER		$977.97	$977.97					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50780	CONNECTION OF URETER TO BLADDER		$907.44	$907.44					
50782	CONNECTION OF EXTRA URETER TO BLADDER		$940.01	$940.01					
50783	REPOSITIONING OF URETER TO BLADDER		$967.60	$967.60					
50785	REPOSITIONING OF URETER WITH CREATION OF BLADDER OR MUSCLE FLAP		$1,019.26	$1,019.26					
50800	CONNECTION OF URETER TO BOWEL		$814.57	$814.57					
50810	CONNECTION OF URETER TO LARGE BOWEL WITH CREATION OF POUCH IN BOWEL AND OPENING FROM POUCH TO SKIN		$911.97	$911.97					
50815	CONNECTION OF URETER TO LARGE BOWEL		$1,129.11	$1,129.11					
50820	CONNECTION OF URETER TO SMALL BOWEL WITH CREATION OF OPENING FROM URETER TO SKIN		$1,160.83	$1,160.83					
50825	CONNECTION OF URETER TO LARGE AND/OR SMALL BOWEL WITH CREATION OF OPENING TO SKIN		$1,668.56	$1,668.56					
50830	REPAIR TO RESTORE URINE FLOW IN URETER		$1,476.01	$1,476.01					
50840	REPLACEMENT OF URETER USING BOWEL		$922.36	$922.36					
50845	CONNECTION OF BLADDER TO POUCH AT JUNCTION OF SMALL AND LARGE BOWEL WITH CREATION OF OPENING TO SKIN		$977.61	$977.61					
50860	CONNECTION OF URETER TO SKIN		$731.60	$731.60					
50900	SUTURE REPAIR OF URETER		$664.77	$664.77					
50920	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM URETER TO SKIN		$667.32	$667.32					
50930	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM URETER TO AN ABDOMINAL ORGAN		$881.66	$881.66					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50940	REMOVAL OF PREVIOUSLY PLACED SUTURE OR WIRE IN URETER		$683.88	$683.88					
50945	REMOVAL OF STONE FROM URETER USING AN ENDOSCOPE		$692.25	$692.25					
50947	REPOSITIONING OF URETER AND INSERTION OF STENT USING AN ENDOSCOPE		$1,051.02	$1,051.02					
50948	REPOSITIONING OF URETER USING AN ENDOSCOPE		$961.31	$961.31					
50949	OTHER PROCEDURE ON URETER USING AN ENDOSCOPE		$0.00	$0.00					
50951	EXAM OF KIDNEY AND URETER USING AN ENDOSCOPE INSERTED THROUGH AN ALREADY CREATED URETER OPENING		$220.29	$220.29					
50953	INSERTION OF TUBE INTO URETER USING AN ENDOSCOPE INSERTED THROUGH AN ALREADY CREATED OPENING IN URETER		$231.52	$231.52					
50955	BIOPSY OF KIDNEY OR URETER USING AN ENDOSCOPE INSERTED THROUGH AN ALREADY CREATED OPENING IN URETER		$272.54	$272.54					
50957	DESTRUCTION AND/OR REMOVAL OF GROWTH OF KIDNEY OR URETER USING AN ENDOSCOPE INSERTED THROUGH AN ALREADY CREATED OPENING IN URETER		$272.37	$272.37					
50961	REMOVAL OF FOREIGN BODY OR STONE IN KIDNEY OR URETER USING AN ENDOSCOPE INSERTED THROUGH AN ALREADY CREATED OPENING IN URETER		$254.12	$254.12					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
50970	EXAM OF KIDNEY AND URETER USING AN ENDOSCOPE		$360.82	$360.82					
50972	INSERTION OF TUBE INTO URETER USING AN ENDOSCOPE		$247.37	$247.37					
50974	BIOPSY OF KIDNEY OR URETER USING AN ENDOSCOPE		$472.90	$472.90					
50976	DESTRUCTION AND/OR REMOVAL OF GROWTH OF KIDNEY OR URETER USING AN ENDOSCOPE		$452.26	$452.26					
50980	REMOVAL OF FOREIGN BODY OR STONE IN KIDNEY OR URETER USING AN ENDOSCOPE		$292.25	$292.25					
51020	INCISION OF BLADDER WITH DESTRUCTION OF GROWTH AND/OR INSERTION OF RADIOACTIVE MATERIAL		$378.22	$378.22					
51040	INCISION OF BLADDER WITH DRAINAGE		$278.22	$278.22					
51045	INCISION OF BLADDER WITH INSERTION OF TUBE OR STENT IN URETER		$322.42	$322.42					
51050	INCISION OF BLADDER WITH REMOVAL OF BLADDER STONE		$385.22	$385.22					
51060	INCISION OF BLADDER WITH REMOVAL OF STONE IN URETER		$541.66	$541.66					
51065	INCISION OF BLADDER WITH BASKET REMOVAL AND/OR ULTRASONIC CRUSHING OF STONE IN URETER		$443.37	$443.37					
51080	DRAINAGE OF ABSCESS OF BLADDER		$311.54	$311.54					
51100	NEEDLE ASPIRATION OF BLADDER		$32.64	$51.92					
51101	ASPIRATION OF BLADDER USING TUBE OR TROCAR		$43.32	$104.74					
51102	ASPIRATION OF BLADDER WITH INSERTION OF BLADDER TUBE TO SKIN		$205.32	$275.93					
51500	REPAIR OF CONGENITAL DEFECT OF BLADDER		$493.34	$493.34					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
51520	SIMPLE REMOVAL OF BLADDER NECK		$504.93	$504.93					
51525	REPAIR OF RUPTURED BOWEL INTO BLADDER		$686.96	$686.96					
51530	REMOVAL OF GROWTH OF BLADDER		$605.06	$605.06					
51535	INCISION, REMOVAL, OR REPAIR OF ABNORMAL DRAINAGE TRACT FROM BLADDER INTO BOWEL		$571.44	$571.44					
51550	SIMPLE PARTIAL REMOVAL OF BLADDER		$736.48	$736.48					
51555	COMPLICATED PARTIAL REMOVAL OF BLADDER		$935.80	$935.80					
51565	PARTIAL REMOVAL OF BLADDER WITH REIMPLANTATION OF URETERS		$1,052.60	$1,052.60					
51570	COMPLETE REMOVAL OF BLADDER		$1,109.65	$1,109.65					
51575	COMPLETE REMOVAL OF BLADDER AND LYMPH NODES ON BOTH SIDES OF PELVIS		$1,487.65	$1,487.65					
51580	COMPLETE REMOVAL OF BLADDER WITH TRANSPLANTATION OF URETERS		$1,412.15	$1,412.15					
51585	COMPLETE REMOVAL OF BLADDER WITH TRANSPLANTATION OF URETERS AND REMOVAL OF LYMPH NODES ON BOTH SIDES OF PELVIS		$1,678.02	$1,678.02					
51590	REMOVAL OF BLADDER WITH TRANSPLANTATION OF URETERS TO SMALL OR LARGE BOWEL WITH CREATION OF URINARY OPENING		$1,606.35	$1,606.35					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
51595	REMOVAL OF BLADDER AND LYMPH NODES ON BOTH SIDES OF PELVIS WITH TRANSPLANTATION OF URETERS TO SMALL OR LARGE BOWEL WITH CREATION OF URINARY OPENING		$1,992.75	$1,992.75					
51596	REMOVAL OF BLADDER AND LYMPH NODES ON BOTH SIDES OF PELVIS WITH TRANSPLANTATION OF URETERS TO SMALL AND/OR LARGE BOWEL WITH CREATION OF URINARY OPENING		$2,083.94	$2,083.94					
51597	REMOVAL OF BLADDER AND URETERS AND/OR REMOVAL OF RECTUM AND PARTIAL REMOVAL OF LARGE BOWEL WITH CREATION OF OPENING IN LARGE BOWEL THROUGH ABDOMINAL WALL TO SKIN		$1,961.23	$1,961.23					
51600	INJECTION PROCEDURE FOR IMAGING OF BLADDER DURING VOIDING		$34.06	$34.06					
51605	INJECTION PROCEDURE FOR IMAGING OF BLADDER AND URETHRA AND PLACEMENT OF X-RAY MARKER		$41.93	$41.93					
51610	INJECTION PROCEDURE THROUGH BLADDER AND URETHRA FOR X-RAY IMAGING		$54.38	$54.38					
51700	SIMPLE BLADDER IRRIGATION AND/OR INSTILLATION		$29.26	$32.21					
51701	INSERTION OF TEMPORARY BLADDER TUBE		$20.31	$42.41					
51702	SIMPLE INSERTION OF TEMPORARY BLADDER TUBE		$22.11	$65.79					
51703	COMPLICATED INSERTION OF BLADDER TUBE		$59.81	$93.72					
51705	SIMPLE CHANGE OF BLADDER TUBE		$35.12	$40.21					
51710	COMPLICATED CHANGE OF BLADDER TUBE		$51.94	$59.59					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
51715	INJECTION OF IMPLANT MATERIAL BENEATH LINING OF BLADDER AND/OR URETHRA USING AN ENDOSCOPE		$187.38	$187.38					
51720	INSTILLATION OF ANTI-CANCER DRUG INTO BLADDER		$64.76	$70.80					
51721	INSERTION OF TRANSDUCER THROUGH URETHRA FOR DELIVERY OF HEAT ULTRASOUND FOR DESTRUCTION OF PROSTATE TISSUE		$178.98	$433.46					
51725	SIMPLE MEASUREMENT OF PRESSURE OF URINE FLOW IN BLADDER		$74.07	$74.07		$107.41	$66.76		
51726	COMPLEX MEASUREMENT OF PRESSURE OF URINE FLOW IN BLADDER		$87.94	$87.94		$180.10	$75.36		
51727	COMPLEX MEASUREMENT OF PRESSURE OF URINE FLOW IN BLADDER WITH URETHRA PRESSURE STUDIES		$245.27	$245.27		$180.69	$94.65		
51728	COMPLEX MEASUREMENT OF PRESSURE OF URINE FLOW IN BLADDER WITH VOIDING PRESSURE STUDIES		$244.37	$244.37		$183.06	$91.09		
51729	COMPLEX MEASUREMENT OF PRESSURE OF URINE FLOW IN BLADDER WITH VOIDING PRESSURE STUDIES		$267.06	$267.06		$188.11	$110.97		
51736	SIMPLE TIMED ASSESSMENT OF BLADDER EMPTYING		$36.62	$36.62		$4.27	$32.35		
51741	NON-NEEDLE MEASUREMENT AND RECORDING OF ELECTRICAL ACTIVITY OF MUSCLES AT BLADDER AND BOWEL OPENINGS		$62.55	$62.55		$6.12	$56.43		
51784	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER, OTHER TH		$75.46	$75.46		$11.43	$64.03		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
51785	NEEDLE MEASUREMENT AND RECORDING OF ELECTRICAL ACTIVITY OF MUSCLES AT BLADDER AND BOWEL OPENINGS		$75.46	$75.46		$11.43	$64.03		
51792	ASSESSMENT OF MUSCLE SIGNAL OF PELVIC NERVES		$88.90	$88.90		$39.34	$49.56		
51797	INSERTION OF DEVICE INTO ABDOMEN WITH PRESSURE AND URINE FLOW RATE STUDY		$75.13	$75.13		$13.28	$61.84		
51798	ULTRASOUND MEASUREMENT OF BLADDER CAPACITY AFTER VOIDING		$14.15	$14.15					
51800	REPAIR OF BLADDER AND/OR URETHRA		$836.71	$836.71					
51820	REPAIR OF BLADDER, URETHRA, AND URETER		$719.45	$719.45					
51840	SIMPLE SUTURE OF BLADDER NECK TO VAGINAL WALL AND PUBIC BONE WITH URETHRA SUSPENSION		$564.89	$564.89					
51841	RESUTURE OF BLADDER NECK TO VAGINAL WALL AND PUBIC BONE WITH URETHRA SUSPENSION		$686.33	$686.33					
51845	REPAIR OF BLADDER NECK IN FEMALE		$579.60	$579.60					
51860	SUTURE OF SIMPLE WOUND, INJURY, OR RUPTURE OF BLADDER		$554.26	$554.26					
51865	SUTURE OF COMPLICATED WOUND, INJURY, OR RUPTURE OF BLADDER		$735.34	$735.34					
51880	CLOSURE OF SURGICALLY CREATED OPENING FROM BLADDER TO SKIN		$357.24	$357.24					
51900	REPAIR OF ABNORMAL DRAINAGE TRACT FROM BLADDER INTO VAGINA THROUGH ABDOMEN		$689.18	$689.18					
51920	REPAIR OF ABNORMAL DRAINAGE TRACT FROM BLADDER INTO VAGINA		$529.33	$529.33					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
51925	REPAIR OF ABNORMAL DRAINAGE TRACT FROM BLADDER INTO VAGINA AND REMOVAL OF UTERUS	Yes	$740.46	$740.46					
51940	REPAIR OF CONGENITAL DEFECT OF BLADDER WALL		$1,295.81	$1,295.81					
51960	ENLARGEMENT OF BLADDER USING A PORTION OF BOWEL		$1,249.76	$1,249.76					
51980	CREATION OF DRAINAGE TRACT FROM BLADDER TO SKIN		$524.37	$524.37					
51990	SUTURE SUSPENSION OF URETHRA TO CONTROL LEAKAGE USING AN ENDOSCOPE		$534.61	$534.61					
51992	CREATION OF SLING AROUND URETHRA TO CONTROL LEAKAGE USING AN ENDOSCOPE		$583.28	$583.28					
51999	OTHER PROCEDURE ON BLADDER USING AN ENDOSCOPE	Yes	$0.00	$0.00					
52000	DIAGNOSTIC EXAM OF BLADDER AND URETHRA USING AN ENDOSCOPE		$83.27	$83.27					
52001	IRRIGATION AND REMOVAL OF MULTIPLE BLOOD CLOTS FROM BLADDER AND URETHRA USING AN ENDOSCOPE		$101.50	$101.50					
52005	INSERTION OF TUBE INTO URETER USING AN ENDOSCOPE THROUGH BLADDER AREA		$133.90	$133.90					
52007	INSERTION OF TUBE INTO URETER AND BIOPSY OF URETER AND/OR RENAL PELVIS USING AN ENDOSCOPE		$171.06	$171.06					
52010	INSERTION OF TUBE INTO SPERM DUCT USING AN ENDOSCOPE		$118.96	$144.44					
52204	BIOPSY OF BLADDER USING AN ENDOSCOPE		$139.21	$139.21					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
52214	DESTRUCTION OF TISSUE OF BLADDER, URETHRA, OR SURROUNDING GLANDS USING AN ENDOSCOPE		$190.77	$190.77					
52224	DESTRUCTION OF GROWTH OF BLADDER AND URETHRA USING AN ENDOSCOPE, LESS THAN 0.5 CM		$176.97	$176.97					
52234	DESTRUCTION AND/OR REMOVAL OF GROWTH OF BLADDER AND URETHRA USING AN ENDOSCOPE, 0.5-2.0 CM		$273.13	$273.13					
52235	DESTRUCTION AND/OR REMOVAL OF GROWTH OF BLADDER AND URETHRA USING AN ENDOSCOPE, 2.0-5.0 CM		$366.55	$366.55					
52240	DESTRUCTION AND/OR REMOVAL OF LARGE GROWTH OF BLADDER USING AN ENDOSCOPE		$596.14	$596.14					
52250	INSERTION OF RADIOACTIVE SUBSTANCE OF BLADDER AND URETHRA USING AN ENDOSCOPE		$215.80	$215.80					
52260	DILATION OF BLADDER USING AN ENDOSCOPE UNDER GENERAL OR SPINAL ANESTHESIA		$176.97	$176.97					
52265	DILATION OF BLADDER USING AN ENDOSCOPE		$107.78	$125.88					
52270	INCISION OF URETHRA IN FEMALE USING AN ENDOSCOPE		$214.26	$214.26					
52275	INCISION OF URETHRA IN MALE USING AN ENDOSCOPE		$237.91	$237.91					
52276	INCISION OF URETHRA USING AN ENDOSCOPE		$249.10	$249.10					
52277	REMOVAL OF MUSCLES AT URINARY OPENING USING AN ENDOSCOPE		$321.75	$321.75					
52281	DILATION OF URETHRA USING AN ENDOSCOPE		$118.73	$149.71					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
52282	INSERTION OF A PERMANENT URETHRA STENT USING AN ENDOSCOPE		$313.59	$313.59					
52283	STEROID INJECTION INTO URETHRA STRICTURE USING AN ENDOSCOPE		$153.89	$153.89					
52284	DRUG DELIVERY USING A DRUG-COATED BALLOON FOR MALE TREATMENT OF URETHRAL STRICTURE USING AN ENDOSCOPE		$138.18	$2,100.65					
52285	EXAM OF BLADDER AND URETHRA FOR TREATMENT OF FEMALE URETHRAL SYNDROME USING AN ENDOSCOPE		$152.65	$192.08					
52287	EXAM WITH INJECTIONS OF CHEMICAL FOR DESTRUCTION OF BLADDER USING AN ENDOSCOPE		$134.96	$245.05					
52290	INCISION OF URETER USING AN ENDOSCOPE		$203.28	$203.28					
52300	REMOVAL OR DESTRUCTION OF ABNORMAL POUCHES OF URETER AT BLADDER USING AN ENDOSCOPE		$258.81	$258.81					
52301	REMOVAL OR DESTRUCTION OF ABNORMAL POUCHES OF URETER AT BLADDER, ECTOPIC URETEROCELE, USING AN ENDOSCOPE		$256.96	$256.96					
52305	REMOVAL OF BLADDER POUCHES USING AN ENDOSCOPE		$258.20	$258.20					
52310	SIMPLE REMOVAL OF FOREIGN BODY, STONE, OR STENT IN URETHRA OR BLADDER USING AN ENDOSCOPE		$169.94	$169.94					
52315	COMPLICATED REMOVAL OF FOREIGN BODY, STONE, OR STENT IN URETHRA OR BLADDER USING AN ENDOSCOPE		$271.76	$271.76					
52317	CRUSHING, FRAGMENTING, AND REMOVAL OF BLADDER STONES, LESS THAN 2.5 CM		$377.55	$377.55					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
52318	CRUSHING, FRAGMENTING, AND REMOVAL OF BLADDER STONES, MORE THAN 2.5 CM		$499.73	$499.73					
52320	REMOVAL OF STONE IN URETER USING AN ENDOSCOPE		$279.69	$279.69					
52325	FRAGMENTING OF STONE IN URETER USING AN ENDOSCOPE		$385.30	$385.30					
52327	INJECTION OF IMPLANT MATERIAL IN BLADDER USING AN ENDOSCOPE		$260.01	$260.01					
52330	MANIPULATION OF STONE IN URETER USING AN ENDOSCOPE		$249.47	$249.47					
52332	INSERTION OF STENT IN URETER USING AN ENDOSCOPE		$176.92	$176.92					
52334	INSERTION OF GUIDE WIRE THROUGH KIDNEY INTO URETER USING AN ENDOSCOPE		$239.31	$239.31					
52341	DILATION OF BLADDER AND URETHRA USING AN ENDOSCOPE		$243.12	$243.12					
52342	REPAIR OF STRICTURE AT JUNCTION OF KIDNEY AND URETER USING AN ENDOSCOPE		$263.18	$263.18					
52343	REPAIR OF STRICTURE IN KIDNEY USING AN ENDOSCOPE		$291.55	$291.55					
52344	REPAIR OF STRICTURE OF URETER USING AN ENDOSCOPE		$311.60	$311.60					
52345	REPAIR OF STRICTURE OF UPPER ATTACHMENT OF URETER TO KIDNEY USING AN ENDOSCOPE		$332.15	$332.15					
52346	REPAIR OF STRICTURE IN KIDNEY WITH EXAM OF URINARY TRACT USING AN ENDOSCOPE		$373.63	$373.63					
52351	DIAGNOSTIC EXAM OF BLADDER, URETHRA, AND URETER OR KIDNEY USING AN ENDOSCOPE		$247.37	$247.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
52352	REMOVAL OR MANIPULATION OF STONE IN URETER OR KIDNEY USING AN ENDOSCOPE		$305.07	$305.07					
52353	CRUSHING OF STONE OF URETER USING AN ENDOSCOPE		$353.43	$353.43					
52354	BIOPSY AND/OR DESTRUCTION OF GROWTH OF URETER OR KIDNEY USING AN ENDOSCOPE		$310.28	$310.28					
52355	REMOVAL OF GROWTH OF URETER OR KIDNEY USING AN ENDOSCOPE		$364.94	$364.94					
52356	CRUSHING OF STONE OF URETER WITH INSERTION OF STENT USING AN ENDOSCOPE		$334.30	$334.30					
52400	INCISION, DESTRUCTION, OR REMOVAL OF CONGENITAL DEFECTS OF BLADDER AND URETHRA USING AN ENDOSCOPE		$431.74	$431.74					
52402	INCISION OR REMOVAL OF EJACULATORY DUCT USING AN ENDOSCOPE		$210.10	$210.10					
52441	INSERTION OF IMPLANT IN URETHRA WITHIN PROSTATE GLAND USING AN ENDOSCOPE, 1 IMPLANT		$185.11	$918.84					Added effective 1/1/2015
52442	INSERTION OF IMPLANT IN URETHRA WITHIN PROSTATE GLAND USING AN ENDOSCOPE, EACH ADDITIONAL IMPLANT		$49.51	$694.77					Added effective 1/1/2015
52450	INCISION OF PROSTATE		$352.62	$352.62					
52500	REMOVAL OF BLADDER NECK THROUGH URETHRA		$446.52	$446.52					
52597	REMOVAL OF PROSTATE GLAND USING ROBOTIC-ASSISTED WATERJET THROUGH URETHRA		$467.88	$467.88					Added effective 1/1/2026, Do not report in conjunction with codes 52500, 52601, 52630, 76872.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
52601	REMOVAL OF PROSTATE GLAND USING AN ELECTROCAUTERY KNIFE THROUGH URETHRA WITH CONTROL OF BLEEDING USING AN ENDOSCOPE		$684.31	$684.31					
52630	COMPLETE REMOVAL OF REMAINING OR REGROWN PROSTATE TISSUE WITH CONTROL OF BLEEDING USING AN ENDOSCOPE		$444.43	$444.43					
52640	REMOVAL OF POSTSURGICAL TIGHTENING OF BLADDER NECK		$364.76	$364.76					
52647	COMPLETE LASER DESTRUCTION OF PROSTATE INCLUDING CONTROL OF BLEEDING USING AN ENDOSCOPE		$635.30	$635.30					
52648	COMPLETE LASER VAPORIZATION OF PROSTATE INCLUDING CONTROL OF BLEEDING USING AN ENDOSCOPE		$497.86	$660.24					
52649	COMPLETE LASER FRAGMENTATION OF PROSTATE INCLUDING CONTROL OF BLEEDING USING AN ENDOSCOPE		$818.60	$818.60					
52700	DRAINAGE OF PROSTATE ABSCESS		$281.93	$281.93					
53000	INCISION OR REPAIR OF URETHRA		$110.32	$110.32					
53010	INCISION OR REPAIR OF ABNORMAL URETHRA		$192.02	$192.02					
53020	INCISION OF EXTERNAL URINARY OPENING		$76.12	$76.12					
53025	INCISION OF EXTERNAL URINARY OPENING, INFANT		$56.56	$56.56					
53040	DRAINAGE OF ABSCESS AROUND URETHRA		$230.59	$230.59					
53060	DRAINAGE OF ABSCESS OR CYST OF SKENE'S GLANDS		$91.09	$91.09					
53080	UNCOMPLICATED DRAINAGE OF ABNORMAL URINE COLLECTION		$289.93	$289.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
53085	COMPLICATED DRAINAGE OF ABNORMAL URINE COLLECTION		$481.81	$481.81					
53200	BIOPSY OF URETHRA		$108.42	$108.42					
53210	REMOVAL OF BLADDER AND URETHRA IN FEMALE		$537.99	$537.99					
53215	REMOVAL OF BLADDER AND URETHRA IN MALE		$719.67	$719.67					
53220	REMOVAL OR DESTRUCTION OF CANCER URETHRA		$332.93	$332.93					
53230	REMOVAL OF POUCH OF URETHRA IN FEMALE		$497.16	$497.16					
53235	REMOVAL OF POUCH OF URETHRA IN MALE		$428.25	$428.25					
53240	REPAIR OF POUCH OF URETHRA		$304.01	$304.01					
53250	REMOVAL OF SEMINAL FLUID GLAND		$285.31	$285.31					
53260	REMOVAL OR DESTRUCTION OF POLYPS OF URETHRA		$119.91	$119.91					
53265	REMOVAL OR DESTRUCTION OF POLYPS OF URETHRA		$145.86	$145.86					
53270	REMOVAL OR DESTRUCTION OF MUCOUS GLANDS OF URETHRA		$101.62	$112.88					
53275	REMOVAL OR DESTRUCTION OF PROLAPSE OF URETHRA		$197.87	$197.87					
53400	REPAIR OF ABNORMAL DRAINAGE TRACT, POUCH, OR STRICTURE OF URETHRA, FIRST STAGE		$564.79	$564.79					
53405	SECOND STAGE REPAIR OF URETHRA WITH CREATION OF NEW URETHRA		$709.82	$709.82					
53410	RECONSTRUCTION OF URETHRA IN MALE		$707.47	$707.47					
53415	RECONSTRUCTION OR REPAIR OF URETHRA		$889.18	$889.18					
53420	RECONSTRUCTION OR REPAIR OF URETHRA, STAGE 1 OF 2		$561.11	$707.02					
53425	RECONSTRUCTION OR REPAIR OF URETHRA, STAGE 2 OF 2		$714.92	$714.92					
53430	RECONSTRUCTION OF URETHRA IN FEMALE		$666.51	$666.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
53431	REPAIR OF URETHRA AND/OR LOWER BLADDER FOR INCONTINENCE		$808.61	$808.61					
53440	CREATION OF SLING AROUND URETHRA IN MALE TO CONTROL LEAKAGE		$723.37	$723.37					
53442	REMOVAL OR REVISION OF SLING IN MALE FOR URINARY INCONTINENCE		$397.99	$397.99					
53444	INSERTION OF ARTIFICIAL URINARY SPHINCTER		$577.30	$577.30					
53445	INSERTION OF INFLATABLE URETHRA OR BLADDER NECK SPHINCTER		$886.61	$886.61					
53446	REMOVAL OF INFLATABLE URETHRA OR BLADDER NECK SPHINCTER		$528.03	$528.03					
53447	REMOVAL AND REPLACEMENT OF INFLATABLE URETHRA OR BLADDER NECK SPHINCTER		$630.29	$630.29					
53448	REMOVAL AND REPLACEMENT OF INFLATABLE URETHRA OR BLADDER NECK SPHINCTER THROUGH AN INFECTED FIELD		$959.21	$959.21					
53449	REMOVAL AND REPLACEMENT OF INFLATABLE URETHRA OR BLADDER NECK SPHINCTER THROUGH AN INFECTED FIELD		$514.28	$514.28					
53450	REPAIR OF URETHRA AND URINARY OPENING		$247.90	$247.90					
53451	INSERTION OF ADJUSTABLE BALLOON CONTINENCE DEVICE ON BOTH SIDES OF URETHRA USING IMAGING GUIDANCE		$0.00	$0.00					Added 1/1/2022
53452	INSERTION OF ADJUSTABLE BALLOON CONTINENCE DEVICE ON ONE SIDE OF URETHRA USING IMAGING GUIDANCE		$0.00	$0.00					Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
53453	REMOVAL OF ADJUSTABLE BALLOON CONTINENCE DEVICE FROM BESIDE URETHRA		$0.00	$0.00					Added 1/1/2022
53454	ADJUSTMENT OF FLUID VOLUME IN ADJUSTABLE BALLOON CONTINENCE DEVICE BESIDE URETHRA		$0.00	$0.00					Added 1/1/2022
53460	REPAIR AND PARTIAL REMOVAL OF URETHRA AND URINARY OPENING		$268.12	$268.12					
53500	RELEASE OF SCAR TISSUE OF URETHRA USING AN ENDOSCOPE		$533.60	$533.60					
53502	SUTURE OF WOUND OR INJURY OF URETHRA IN FEMALE		$358.48	$358.48					
53505	SUTURE OF WOUND OR INJURY OF URETHRA IN PENIS		$362.90	$362.90					
53510	SUTURE OF URETHRA WOUND OR INJURY		$484.07	$484.07					
53515	SUTURE OF WOUND OR INJURY OF URETHRA NEAR PROSTATE GLAND		$636.54	$636.54					
53520	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM URETHRA TO SKIN IN MALE		$412.50	$412.50					
53600	INITIAL DILATION OF URETHRA IN MALE USING DILATOR		$40.66	$45.09					
53601	SUBSEQUENT DILATION OF STRICTURE OF URETHRA IN MALE BY PASSAGE OF DILATOR		$33.37	$37.26					
53605	DILATION OF NARROWING OF URETHRA IN MALE UNDER GENERAL OR SPINAL ANESTHESIA		$51.11	$51.11					
53620	INITIAL DILATION OF URETHRA IN MALE USING FILIFORM DILATOR		$55.05	$61.36					
53621	SUBSEQUENT DILATION OF URETHRAL STRICTURE IN MALE BY PASSAGE OF FILIFORM URETHRAL DILATOR		$45.68	$50.78					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
53660	INITIAL DILATION OF URETHRA IN FEMALE		$25.32	$29.07					
53661	SUBSEQUENT DILATION OF URETHRA IN FEMALE		$25.21	$28.56					
53665	DILATION OF URETHRA IN FEMALE UNDER GENERAL OR SPINAL ANESTHESIA		$32.93	$32.93					
53850	DESTRUCTION OF PROSTATE TISSUE USING MICROWAVE INDUCED HEAT		$461.57	$461.57					
53852	DESTRUCTION OF PROSTATE TISSUE USING RADIOFREQUENCY INDUCED HEAT		$482.44	$482.44					
53854	DESTRUCTION OF PROSTATE TISSUE USING RADIOFREQUENCY INDUCED HEATED WATER VAPOR		$304.20	$1,378.87					Effective 1/1/2019
53855	INSERTION OF A TEMPORARY URETHRA STENT USING AN ENDOSCOPE		$63.06	$465.45					
53860	RECONSTRUCTION OF FEMALE BLADDER NECK FOR STRESS URINARY INCONTINENCE USING RADIOFREQUENCY		$204.13	$1,274.92					
53865	INSERTION OF A TEMPORARY DEVICE FOR PRESSURE NECROSIS OF BLADDER NECK AND PROSTATE USING AN ENDOSCOPE		$135.90	$2,297.43					
53866	REMOVAL OF TEMPORARY DEVICE FOR PRESSURE NECROSIS OF BLADDER NECK AND PROSTATE USING CATHETERIZATION		$67.89	$113.95					
53899	OTHER PROCEDURE ON URINARY SYSTEM		$50.00	$0.00					
54000	INCISION OF NEWBORN FORESKIN		$62.32	$62.32					
54001	INCISION OF FORESKIN		$87.51	$87.51					
54015	INCISION AND DRAINAGE OF PENIS		$175.86	$175.86					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54050	SIMPLE DESTRUCTION OF GROWTHS OF PENIS USING CHEMICAL		$40.74	$45.84					
54055	SIMPLE DESTRUCTION OF GROWTH OF PENIS USING ELECTRIC CURRENT		$44.56	$52.74					
54056	SIMPLE DESTRUCTION OF GROWTH OF PENIS USING FREEZING		$43.00	$50.11					
54057	SIMPLE DESTRUCTION OF GROWTH OF PENIS USING LASER		$80.79	$80.79					
54060	REMOVAL OF GROWTH OF PENIS		$89.46	$89.46					
54065	DESTRUCTION OF MULTIPLE GROWTHS OF PENIS		$108.74	$141.87					
54100	BIOPSY OF PENIS		$74.89	$74.89					
54105	BIOPSY OF DEEP STRUCTURE OF PENIS		$131.00	$131.00					
54110	REMOVAL OF THICKENED TISSUE OF PENIS		$460.02	$460.02					
54111	REMOVAL OF ABNORMALLY THICKENED TISSUE IN PENIS WITH GRAFT, 5.0 CM OR LESS		$652.14	$652.14					
54112	REMOVAL OF ABNORMALLY THICKENED TISSUE IN PENIS WITH GRAFT, MORE THAN 5.0 CM		$762.71	$762.71					
54115	REMOVAL OF FOREIGN BODY IN PENIS		$289.48	$289.48					
54120	PARTIAL AMPUTATION OF PENIS		$459.74	$459.74					
54125	AMPUTATION OF PENIS		$714.09	$714.09					
54130	AMPUTATION OF PENIS AND REMOVAL OF LYMPH NODES ON BOTH SIDES OF GROIN		$980.46	$980.46					
54135	AMPUTATION OF PENIS AND REMOVAL OF LYMPH NODES ON BOTH SIDES OF PELVIS		$1,252.25	$1,252.25					
54150	REMOVAL OF FORESKIN USING CLAMP OR DEVICE		$76.27	$76.27					
54160	REMOVAL OF FORESKIN (28 DAYS OR YOUNGER)		$120.93	$120.93					
54161	REMOVAL OF FORESKIN (OLDER THAN 28 DAYS)		$158.28	$158.28					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54162	REMOVAL OF SCAR TISSUE AFTER FORESKIN REMOVAL		$165.95	$165.95					
54163	REPAIR OF INCOMPLETE REMOVAL OF FORESKIN		$156.40	$156.40					
54164	INCISION OF MEMBRANE ATTACHING FORESKIN AND PENIS		$136.87	$136.87					
54200	INJECTION PROCEDURE TO CORRECT THICKENED PENILE TISSUE		$34.66	$38.95					
54205	INJECTION PROCEDURE AND SURGERY OF THICKENED PENILE TISSUE		$360.48	$360.48					
54220	INJECTION OF DRUG INTO ERECTILE TISSUE AT SIDES AND BACK OF PENIS		$117.52	$117.52					
54230	INJECTION PROCEDURE FOR IMAGING OF PENILE ERECTION		$60.45	$78.42					
54231	ASSESSMENT OF ERECTILE DYSFUNCTION INCLUDING INJECTION OF DRUGS INTO PENIS	Yes	$101.89	$101.89					
54235	INJECTION PROCEDURE TO CAUSE ERECTION		$41.66	$47.42					
54240	ASSESSMENT OF PENILE BLOOD FLOW		$67.91	$67.91		$14.33	$53.58		
54250	ASSESSMENT OF NIGHTTIME ERECTION		$88.54	$88.54		$8.78	$79.77		
54300	REPAIR OF CURVED PENIS		$500.58	$500.58					
54304	REPAIR OF CURVED PENIS AND URINARY OUTLET		$610.08	$610.08					
54308	REPAIR OF URINARY OUTLET AT UNDERSIDE OF PENIS, LESS THAN 3.0 CM		$514.42	$514.42					
54312	REPAIR OF URINARY OUTLET AT UNDERSIDE OF PENIS, MORE THAN 3.0 CM		$659.59	$659.59					
54316	REPAIR OF URINARY OUTLET OF PENIS WITH SKIN GRAFT, STAGE 2 OF 2		$799.99	$799.99					
54318	REPAIR OF URINARY OUTLET WITH RELEASE OF PENIS FROM SCROTUM		$536.17	$536.17					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54322	SIMPLE REPAIR AND RELOCATION OF URINARY OUTLET AT UNDERSIDE OF PENIS		$584.20	$584.20					
54324	REPAIR OF URINARY OUTLET OF PENIS WITH SKIN FLAP		$774.40	$774.40					
54326	REPAIR OF URINARY OUTLET AT UNDERSIDE OF PENIS WITH SKIN FLAP		$741.50	$741.50					
54328	REPAIR OF URINARY OUTLET AT UNDERSIDE OF HEAD OF PENIS WITH LOCAL SKIN FLAPS, SKIN GRAFT PATCH, AND/OR ISLAND FLAP		$751.95	$751.95					
54332	REPAIR OF URINARY OUTLET AT UNDERSIDE OF BASE OF PENIS WITH SKIN GRAFT TUBE AND/OR ISLAND FLAP		$837.75	$837.75					
54336	REPAIR OF URINARY OUTLET BETWEEN THIGHS IN MALE WITH SKIN GRAFT TUBE AND/OR ISLAND FLAP		$1,094.06	$1,094.06					
54340	SIMPLE REPAIR OF URINARY OUTLET COMPLICATIONS AT UNDERSIDE OF PENIS		$428.03	$428.03					
54344	REPAIR OF COMPLICATION OF URINARY OUTLET OF PENIS AT UNDERSIDE OF PENIS WITH MOBILIZATION OF SKIN GRAFT OR FLAP		$918.85	$918.85					
54348	EXTENSIVE REPAIR OF URINARY OUTLET AT UNDERSIDE OF PENIS WITH FLAP, PATCH OR GRAFT		$819.72	$819.72					
54352	EXTENSIVE REVISION OF PREVIOUS REPAIR OF URINARY OUTLET AT UNDERSIDE OF PENIS WITH SKIN GRAFTS AND FLAPS		$1,169.73	$1,169.73					
54360	SURGERY TO CORRECT ABNORMAL PENIS ANGLE		$540.25	$540.25					
54380	REPAIR OF URINARY OUTLET OF PENIS		$640.32	$640.32					
54385	REPAIR OF URINARY OUTLET OF PENIS WITH INCONTINENCE		$735.00	$735.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54390	REPAIR OF URINARY OUTLET OF PENIS WITH CREATION OF BLADDER OPENING		$1,017.70	$1,017.70					
54400	INSERTION OF NON-INFLATABLE PENILE IMPLANT	Yes	$577.40	$577.40					
54401	INSERTION OF INFLATABLE PENILE IMPLANT	Yes	$657.84	$657.84					
54405	INSERTION OF MULTICOMPONENT INFLATABLE PENILE IMPLANT	Yes	$855.35	$855.35					
54406	REMOVAL OF ALL COMPONENTS OF INFLATABLE PENILE IMPLANT		$525.42	$525.42					
54408	REPAIR OF MULTICOMPONENT INFLATABLE PENILE IMPLANT		$553.68	$553.68					
54410	REMOVAL AND REPLACEMENT OF MULTICOMPONENT INFLATABLE PENILE IMPLANT DURING SAME SURGERY	Yes	$656.06	$656.06					
54411	REMOVAL AND REPLACEMENT OF INFECTED COMPONENTS OF INFLATABLE PENILE IMPLANT	Yes	$712.26	$712.26					
54415	REMOVAL OF INFLATABLE OR NONINFLATABLE PENILE IMPLANT		$387.83	$387.83					
54416	REMOVAL AND REPLACEMENT OF NONINFLATABLE PENILE IMPLANT	Yes	$505.72	$505.72					
54417	REMOVAL AND REPLACEMENT OF INFECTED NONINFLATABLE PENILE IMPLANT	Yes	$625.79	$625.79					
54420	CREATION OF BLOOD FLOW TRACT FROM PENIS TO GROIN		$544.18	$544.18					
54430	CREATION OF BLOOD FLOW TRACT FROM PENIS TO OTHER PENILE ANATOMY		$484.48	$484.48					
54435	REDIRECTION OF BLOOD FLOW FROM PENIS WITH PARTIAL REMOVAL OF TISSUE AT HEAD OF PENIS		$285.99	$285.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54437	REPAIR OF PENIS		$547.20	$547.20					Added Effective 1/1/2016
54440	REPAIR OF INJURY OF PENIS		$683.52	$683.52					
54450	REPOSITIONING OF FORESKIN INCLUDING SCAR TISSUE REMOVAL		$52.80	$52.80					
54500	NEEDLE BIOPSY OF TESTICLE		$51.46	$51.46					
54505	INCISION OF TESTICLE FOR BIOPSY		$155.30	$155.30					
54512	REMOVAL OF GROWTH OF TESTICLE		$385.12	$385.12					
54520	SIMPLE REMOVAL OF TESTICLE		$299.72	$299.72					
54522	PARTIAL REMOVAL OF TESTICLE		$437.11	$437.11					
54530	REMOVAL OF GROWTH OF TESTICLE THROUGH GROIN		$450.97	$450.97					
54535	REMOVAL OF GROWTH OF TESTICLE THROUGH ABDOMEN		$589.24	$589.24					
54550	EXPLORATION OF SPERMATIC VEINS AND SCROTUM USING AN ENDOSCOPE		$371.61	$371.61					
54560	EXPLORATION FOR LOCATION OF TESTICLE IN ABDOMEN		$520.54	$520.54					
54600	REPAIR OF TWISTED TESTICLE		$328.95	$328.95					
54620	SUTURE OF TESTICLE TO OTHER TESTICLE		$234.69	$234.69					
54640	REPOSITIONING AND SUTURE OF MISPLACED TESTICLE		$349.46	$349.46					Updated Effective 01/01/2020
54650	REPAIR OF CONGENITAL MALPOSITIONED TESTICLE		$552.58	$552.58					
54660	INSERTION OF TESTICULAR IMPLANT		$240.31	$240.31					
54670	SUTURE OR REPAIR OF INJURY TO TESTICLE		$303.60	$303.60					
54680	TRANSPLANTATION OF TESTICLES TO THIGH		$577.44	$577.44					
54690	REMOVAL OF TESTICLES USING AN ENDOSCOPE	Yes	$516.32	$516.32					
54692	REMOVAL OF CONGENITAL MALPOSITIONED TESTICLE USING AN ENDOSCOPE	Yes	$535.70	$535.70					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
54700	INCISION AND DRAINAGE OF SPERM RESERVOIR, TESTIS, AND/OR SCROTAL AREA		$125.99	$125.99					
54800	NEEDLE BIOPSY OF SPERM RESERVOIR		$125.83	$125.83					
54830	REMOVAL OF GROWTH OF SPERM DUCT		$252.39	$252.39					
54840	REMOVAL OF FLUID ACCUMULATION IN SPERM RESERVOIR		$288.49	$288.49					
54860	REMOVAL OF SPERM RESERVOIR		$327.17	$327.17					
54861	REMOVAL OF BOTH SPERM RESERVOIRS		$463.89	$463.89					
54865	SEARCH OF SPERM RESERVOIR		$256.84	$256.84					
55000	ASPIRATION OF FLUID COLLECTION IN TESTICLE AND SPERM RESERVOIR		$48.30	$53.66					
55040	REMOVAL OF FLUID COLLECTION IN TESTICLE AND SPERM RESERVOIR		$295.37	$295.37					
55041	REMOVAL OF FLUID COLLECTION IN BOTH TESTICLES AND SPERM RESERVOIRS		$436.60	$436.60					
55060	REPAIR OF FLUID COLLECTION IN TESTICLE AND SPERM RESERVOIR		$275.80	$275.80					
55100	DRAINAGE OF ABSCESS OF SCROTUM		$78.17	$78.17					
55110	SEARCH OF SCROTUM		$257.26	$257.26					
55120	REMOVAL OF FOREIGN BODY IN SCROTUM		$193.38	$193.38					
55150	REMOVAL OF DISEASED OR INJURED SCROTUM		$354.28	$354.28					
55175	SIMPLE REPAIR OF SCROTUM		$276.76	$276.76					
55180	COMPLICATED REPAIR OF SCROTUM		$498.61	$498.61					
55200	INCISION OF SPERM DUCT		$179.18	$179.18					
55250	REMOVAL OF SPERM DUCT	Yes	$136.27	$171.54					
55300	INCISION OF SPERM DUCT FOR X-RAY PROCEDURE		$182.24	$182.24					
55400	INCISION OR REPAIR OF SPERM DUCT		$433.10	$433.10					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
55500	REMOVAL OF FLUID COLLECTION IN SPERM CORD		$282.95	$282.95					
55520	REMOVAL OF GROWTH OF SPERM CORD		$263.92	$263.92					
55530	REMOVAL OF SPERMATIC CORD VENOUS DILATION OR TYING OF SPERMATIC VEINS		$313.98	$313.98					
55535	REMOVAL OF SPERMATIC CORD VENOUS DILATION OR SUTURING OF SPERMATIC VEINS		$312.35	$312.35					
55540	REMOVAL OF SPERMATIC CORD VENOUS DILATION OR SUTURING SPERMATIC VEINS WITH HERNIA REPAIR		$356.62	$356.62					
55550	TYING OF SPERM VEINS USING AN ENDOSCOPE	Yes	$304.18	$304.18					
55600	INCISION OR PUNCTURE OF FLUID-PRODUCING GLAND FOR SPERM MOVEMENT		$307.08	$307.08					
55605	COMPLICATED INCISION OF FLUID-PRODUCING GLANDS FOR SPERM MOVEMENT		$387.55	$387.55					
55650	REMOVAL OF FLUID-PRODUCING GLANDS FOR SPERM MOVEMENT		$542.53	$542.53					
55680	REMOVAL OF CONGENITAL REMNANT OF FLUID-PRODUCING GLANDS FOR SPERM MOVEMENT		$269.49	$269.49					
55700	BIOPSY OF PROSTATE GLAND		$69.83	$89.95					Termed 12/31/2025, See Code (55877)
55705	NON-IMAGING GUIDED BIOPSY OF PROSTATE GLAND		$85.24	$190.74					AMA created new detailed code descriptions of 55705 utilizing new codes 55707-55725
55706	NEEDLE BIOPSY OF PROSTATE GLAND USING IMAGE GUIDANCE		$324.29	$324.29					
55707	ULTRASOUND-GUIDED BIOPSY OF PROSTATE GLAND THROUGH RECTUM		$116.55	$279.29					Added effective 1/1/2026, Updated detailed code descriptions of 55705 utilizing new codes 55707-55725

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
55709	ULTRASOUND-GUIDED OF PROSTATE GLAND THROUGH AREA BETWEEN SCROTUM AND ANUS	Yes	$139.68	$470.71					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55710	ULTRASOUND-GUIDED BIOPSY OF FIRST-TARGETED TUMOR OF PROSTATE GLAND WITH MRI-FUSION GUIDANCE THROUGH AREA BETWEEN SCROTUM AND ANUS	Yes	$161.68	$528.32					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55711	MRI-ULTRASOUND-FUSION GUIDED BIOPSY OF PROSTATE GLAND FIRST TARGETED TUMOR ONLY THROUGH RECTUM	Yes	$115.95	$299.01					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55712	MRI-ULTRASOUND-FUSION GUIDED BIOPSY OF PROSTATE GLAND FIRST TARGETED TUMOR ONLY THROUGH AREA BETWEEN SCROTUM AND RECTUM	Yes	$135.29	$490.05					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55713	CT- OR MRI-GUIDED BIOPSY OF PROSTATE GLAND OF TARGETED TUMORS	Yes	$160.21	$617.58					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55714	CT- OR MRI-GUIDED BIOPSY OF PROSTATE GLAND OF FIRST TARGETED TUMOR	Yes	$145.74	$601.53					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55715	MRI-ULTRASOUND FUSION, OR CT-, OR MRI-GUIDED BIOPSY OF PROSTATE GLAND, EACH ADDITIONAL TARGETED TUMOR	Yes	$40.76	$67.66					Added effective 1/1/2026, Updated descriptions of 55705 utilizing new codes 55707-55725
55720	NEEDLE BIOPSY OF PROSTATE GLAND USING IMAGE GUIDANCE		$324.39	$324.39					
55725	COMPLICATED INCISION AND DRAINAGE OF ABSCESS OF PROSTATE		$389.81	$389.81					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
55801	PARTIAL REMOVAL OF PROSTATE GLAND THROUGH INCISION BETWEEN SCROTUM AND ANUS		$854.07	$854.07					
55810	REMOVAL OF PROSTATE GLAND, GLANDS FOR SPERM MOVEMENT, AND SPERM DUCT		$1,144.96	$1,144.96					
55812	REMOVAL OF PROSTATE GLAND WITH LYMPH NODE BIOPSY THROUGH INCISION BETWEEN SCROTUM AND ANUS		$1,274.01	$1,274.01					
55815	REMOVAL OF PROSTATE GLAND THROUGH INCISION BETWEEN SCROTUM AND ANUS AND REMOVAL OF SURROUNDING LYMPH NODES ON BOTH SIDES OF PELVIS		$1,570.12	$1,570.12					
55821	PARTIAL REMOVAL OF PROSTATE (SUPRAPUBIC)		$778.78	$778.78					
55831	PARTIAL REMOVAL OF PROSTATE (RETROPUBIC)		$845.13	$845.13					
55840	REMOVAL OF PROSTATE		$1,106.74	$1,106.74					
55842	REMOVAL OF PROSTATE GLAND AND LYMPH NODE BIOPSY THROUGH ABDOMINAL INCISION		$1,225.69	$1,225.69					
55845	REMOVAL OF PROSTATE GLAND AND SURROUNDING LYMPH NODES ON BOTH SIDES OF PELVIS THROUGH ABDOMINAL INCISION		$1,516.87	$1,516.87					
55860	SURGICAL OPENING OF PROSTATE FOR RADIATION THERAPY		$599.40	$599.40					
55862	EXPOSURE OF PROSTATE GLAND FOR RADIATION THERAPY WITH BIOPSY OF LYMPH NODES		$844.19	$844.19					
55865	EXPOSURE OF PROSTATE GLAND FOR RADIATION THERAPY WITH REMOVAL OF SURROUNDING LYMPH NODES ON BOTH SIDES OF PELVIS		$1,351.03	$1,351.03					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
55866	SURGICAL REMOVAL OF PROSTATE AND SURROUNDING LYMPH NODES USING AN ENDOSCOPE		$928.38	$928.38					Added effective 1/1/2026, AMA created new detailed complexity code descriptions of 55866 utilizing new codes 55868-55869
55867	SIMPLE SURGICAL SUBTOTAL REMOVAL OF		$873.49	$873.49					
55868	SURGICAL REMOVAL OF PROSTATE AND SURROUNDING LYMPH NODES, WITH BIOPSY OF LYMPH NODES, USING AN ENDOSCOPE		$950.86	$950.86					Added effective 1/1/2026, Adding detailed complexity code descriptions of 55866 utilizing new codes 55868-55869
55869	SURGICAL REMOVAL OF PROSTATE AND SURROUNDING LYMPH NODES USING AN ENDOSCOPE		$1,142.27	$1,142.27					Added effective 1/1/2026, Adding detailed complexity code descriptions of 55866 utilizing new codes 55868-55869
55873	DESTRUCTION OF PROSTATE USING IMAGING GUIDANCE		$799.77	$799.77					
55874	INJECTION OF BIODEGRADABLE MATERIAL NEXT TO PROSTATE		$133.33	$2,761.79					Added Effective 1/1/2018
55875	INSERTION OF NEEDLE OR TUBE INTO PROSTATE FOR RADIATION THERAPY		$567.59	$567.59					
55876	PLACEMENT OF DEVICE IN PROSTATE FOR RADIATION THERAPY		$83.05	$108.68					
55877	DESTRUCTION USING IRREVERSIBLE ELECTRICAL IMPULSES OF PROSTATE TUMORS		$575.87	$575.87					Added effective 1/1/2026, Replacing code 55700 for prostate biopsies
55880	HIGH-INTENSITY ULTRASOUND DESTRUCTION OF CANCEROUS TISSUE IN PROSTATE GLAND, ACCESSED THROUGH RECTUM USING ULTRASOUND GUIDANCE		$800.44	$800.44					Added Effective 01/01/2021
55881	DESTRUCTION OF PROSTATE TISSUE THROUGH URETHRA USING HEAT ULTRASOUND WITH MRI GUIDANCE		$404.53	$6,870.39					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
55882	INSERTION OF ULTRASOUND TRANSDUCER THROUGH URETHRA FOR DELIVERY OF HEAT ULTRASOUND FOR DESTRUCTION OF PROSTATE TISSUE USING MRI GUIDANCE		$496.32	$7,113.36					
55899	OTHER PROCEDURE ON MALE GENITAL SYSTEM	Yes	$0.00	$0.00					
55920	INSERTION OF NEEDLES OR TUBES INTO PELVIC OR GENITAL ORGANS FOR RADIATION THERAPY		$356.93	$356.93					
56405	INCISION AND DRAINAGE OF ABSCESS OF EXTERNAL FEMALE GENITALS		$54.62	$64.82					
56420	INCISION AND DRAINAGE OF ABSCESS OF FEMALE GENITAL GLAND		$53.21	$63.94					
56440	CREATION OF DRAINAGE TRACT FOR GLAND CYST OF FEMALE GENITALS		$165.05	$165.05					
56441	REMOVAL OF SCAR TISSUE OF FEMALE GENITALS		$107.89	$107.89					
56442	SIMPLE INCISION OF HYMEN		$34.55	$34.55					
56501	SIMPLE DESTRUCTION OF GROWTH OF EXTERNAL FEMALE GENITALS		$53.34	$60.59					
56515	EXTENSIVE DESTRUCTION OF GROWTH OF EXTERNAL FEMALE GENITALS		$133.62	$133.62					
56605	BIOPSY OF GROWTH OF EXTERNAL FEMALE GENITALS, FIRST GROWTH		$38.00	$47.12					
56606	BIOPSY OF GROWTH OF EXTERNAL FEMALE GENITALS, EACH ADDITIONAL GROWTH		$19.26	$23.95					
56620	SIMPLE PARTIAL REMOVAL OF EXTERNAL FEMALE GENITALS		$403.28	$403.28					
56625	REMOVAL OF EXTERNAL FEMALE GENITALS		$524.54	$524.54					
56630	EXTENSIVE PARTIAL REMOVAL OF EXTERNAL FEMALE GENITALS		$747.95	$747.95					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
56631	PARTIAL REMOVAL OF EXTERNAL FEMALE GENITALS AND LYMPH NODES ON SIDE OF GROIN		$1,038.69	$1,038.69					
56632	PARTIAL REMOVAL OF EXTERNAL FEMALE GENITALS AND LYMPH NODES ON BOTH SIDES OF GROIN		$1,228.98	$1,228.98					
56633	COMPLETE REMOVAL OF FEMALE GENITALS		$864.57	$864.57					
56634	COMPLETE REMOVAL OF EXTERNAL FEMALE GENITALS AND LYMPH NODES ON SIDE OF GROIN		$1,155.31	$1,155.31					
56637	COMPLETE REMOVAL OF EXTERNAL FEMALE GENITALS AND LYMPH NODES ON BOTH SIDES OF GROIN		$1,280.96	$1,280.96					
56640	COMPLETE REMOVAL OF FEMALE GENITALS AND LYMPH NODES		$1,230.55	$1,230.55					
56700	PARTIAL REMOVAL OF HYMEN		$128.33	$128.33					
56740	REMOVAL OF CYST OF FEMALE GENITAL GLAND		$195.98	$195.98					
56800	PLASTIC REPAIR OF VAGINAL OPENING		$201.62	$201.62					
56805	RECONSTRUCTION OR CREATION OF THE EXTERNAL FEMALE SEXUAL ORGAN FOR INTERSEX STATE		$802.98	$802.98					
56810	REPAIR OF SKIN IN AREA BETWEEN ANUS AND GENITALS		$199.16	$199.16					
56820	EXAM OF EXTERNAL FEMALE GENITALS USING AN ENDOSCOPE		$62.47	$87.91					
56821	EXAM AND BIOPSY OF EXTERNAL FEMALE GENITALS USING AN ENDOSCOPE		$86.02	$114.28					
57000	INCISION AND EXPLORATION OF VAGINA		$148.64	$148.64					
57010	INCISION AND DRAINAGE OF ABSCESS OF PELVIS		$242.22	$242.22					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57020	REMOVAL OF ABDOMINAL FLUID		$64.85	$64.85					
57022	INCISION AND DRAINAGE OF VAGINAL BLOOD ACCUMULATION FOLLOWING DELIVERY		$118.47	$118.47					
57023	INCISION AND DRAINAGE OF VAGINAL BLOOD ACCUMULATION		$118.47	$118.47					
57061	SIMPLE DESTRUCTION OF GROWTH OF VAGINA		$50.34	$61.34					
57065	EXTENSIVE DESTRUCTION OF GROWTH OF VAGINA		$181.08	$181.08					
57100	SIMPLE BIOPSY OF VAGINAL MUCOUS MEMBRANE		$39.94	$48.25					
57105	BIOPSY OF EXTENSIVE AREA OF VAGINAL MUCOUS MEMBRANE		$98.25	$98.25					
57106	PARTIAL REMOVAL OF VAGINAL WALL		$265.09	$267.16					
57107	PARTIAL REMOVAL OF VAGINAL WALL AND TISSUE		$903.73	$908.39					
57109	PARTIAL REMOVAL OF VAGINAL WALL AND TISSUE WITH REMOVAL OF PELVIC LYMPH NODES AND BIOPSY OF AORTIC LYMPH NODE		$1,092.33	$1,103.74					
57110	REMOVAL OF VAGINAL WALL		$649.67	$649.67					
57111	COMPLETE REMOVAL OF VAGINAL WALL AND TISSUE		$1,094.14	$1,094.14					
57120	SUTURE CLOSURE OF VAGINA AND VAGINAL OPENING		$421.66	$421.66					
57130	REMOVAL OF ABNORMAL TISSUE DIVIDING VAGINA		$154.06	$154.06					
57135	REMOVAL OF CYST OR GROWTH OF VAGINAL		$138.47	$138.47					
57150	IRRIGATION OF VAGINA AND/OR APPLICATION OF DRUG TO TREAT INFECTION		$31.10	$33.65					
57155	INSERTION OF DEVICE INTO UTERUS FOR RADIATION THERAPY		$290.92	$290.92					
57156	INSERTION OF DEVICE INTO VAGINA FOR RADIATION THERAPY		$89.60	$130.84					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57160	FITTING AND INSERTION OF VAGINAL SUPPORT DEVICE		$30.68	$34.04					
57170	FITTING AND INSERTION OF PREGNANCY PREVENTION DEVICE		$32.45	$36.74					
57180	INSERTION OF DRUG AGENT OR PACKING TO CONTROL VAGINAL BLEEDING		$54.94	$62.32					
57200	SUTURE OF NONOBSTETRICAL INJURY OF VAGINA		$195.25	$195.25					
57210	SUTURE OF INJURY OF VAGINA AND/OR SKIN		$242.30	$242.30					
57220	PLASTIC REPAIR OF MUSCLES AT URINARY OPENING THROUGH VAGINA		$252.09	$252.09					
57230	PLASTIC REPAIR OF URETHRA PROLAPSE		$267.32	$267.32					
57240	REPAIR OF BLADDER HERNIA INTO VAGINAL WALL		$382.11	$382.11					
57250	REPAIR OF HERNIATED RECTUM INTO VAGINAL WALL		$357.20	$357.20					
57260	PLASTIC REPAIR OF VAGINA AND TISSUE SEPARATING VAGINA, RECTUM, AND BLADDER		$500.41	$500.41					
57265	REPAIR OF BULGING OF RECTUM AND BLADDER INTO VAGINAL WALL		$519.90	$519.90					
57267	INSERTION OF ARTIFICIAL MATERIAL FOR PELVIC FLOOR DEFECT		$211.63	$211.63					
57268	REPAIR OF PROTRUSION OF INTESTINE INTO RECTUM OR VAGINA THROUGH VAGINA		$404.91	$404.91					
57270	REPAIR OF PROTRUSION OF INTESTINE INTO RECTUM OR VAGINA THROUGH ABDOMEN		$434.15	$434.15					
57280	ATTACHMENT OF VAGINA TO REAR PELVIC BONE		$518.76	$518.76					
57282	REPAIR OF PELVIC LIGAMENTS THROUGH VAGINA		$516.32	$516.32					
57283	REPAIR OF PROLAPSING VAGINAL VAULT THROUGH VAGINA		$498.84	$498.84					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57284	REPAIR OF VAGINAL WALL DEFECT THROUGH ABDOMEN		$605.87	$605.87					
57285	REPAIR OF VAGINAL WALL DEFECT THROUGH VAGINA		$513.59	$513.59					
57287	REMOVAL OR REVISION OF INCONTINENCE SLING		$505.43	$505.43					
57288	CREATION OF SLING AROUND URETHRA IN FEMALE TO CONTROL LEAKAGE		$682.68	$682.68					
57289	REPAIR OF PROLAPSED URINARY CANAL AND BLADDER INTO VAGINAL WALL		$434.93	$434.93					
57291	CONSTRUCTION OF ARTIFICIAL VAGINA		$391.32	$391.32					
57292	CONSTRUCTION OF ARTIFICIAL VAGINA USING TISSUE GRAFT		$571.32	$571.32					
57295	REVISION OF PROSTHETIC VAGINAL GRAFT		$357.90	$357.90					
57296	REVISION OR REMOVAL OF PROSTHETIC VAGINAL GRAFT		$687.77	$687.77					
57300	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM RECTUM TO VAGINA THROUGH VAGINA OR ANUS		$452.33	$452.33					
57305	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM RECTUM TO VAGINA THROUGH ABDOMEN		$495.41	$495.41					
57307	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM RECTUM TO VAGINA WITH CREATION OF LARGE BOWEL OPENING THROUGH ABDOMEN		$489.89	$489.89					
57308	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM RECTUM TO VAGINA WITH PERINEAL RECONSTRUCTION		$507.22	$507.22					
57310	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM URETHRA TO VAGINA		$306.53	$306.53					
57311	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM URETHRA TO VAGINA WITH TRANSPLANT		$371.78	$371.78					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57320	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM BLADDER TO VAGINA THROUGH VAGINA		$499.48	$499.48					
57330	CLOSURE OF ABNORMAL DRAINAGE TRACT FROM BLADDER TO VAGINA THROUGH BLADDER AND VAGINA		$584.47	$584.47					
57335	PLASTIC REPAIR OF VAGINA FOR INTERSEX STATE		$900.98	$900.98					Rate updated 1/1/2018
57400	DILATION OF VAGINA UNDER ANESTHESIA		$34.66	$34.66					
57410	PELVIC EXAMINATION UNDER ANESTHESIA		$28.18	$28.18					
57415	REMOVAL OF IMPACTED FOREIGN BODY IN VAGINA UNDER ANESTHESIA		$37.57	$37.57					
57420	EXAM OF VAGINA AND CERVIX USING AN ENDOSCOPE		$66.38	$91.82					
57421	BIOPSY OF VAGINA AND CERVIX USING AN ENDOSCOPE		$91.88	$120.14					
57423	REPAIR OF VAGINAL DEFECT USING AN ENDOSCOPE		$717.12	$717.12					
57425	SURGICAL REPAIR OF VAGINAL DEFECT USING AN ENDOSCOPE		$669.30	$669.30					
57426	REVISION OR REMOVAL OF PROSTHETIC VAGINAL GRAFT USING AN ENDOSCOPE		$638.39	$638.39					
57452	EXAM OF CERVIX AND UPPER PART OF VAGINA USING AN ENDOSCOPE		$41.17	$49.89					
57454	BIOPSY AND SCRAPING OF CERVIX USING AN ENDOSCOPE		$59.81	$76.04					
57455	BIOPSY OF CERVIX USING AN ENDOSCOPE		$83.52	$110.50					
57456	SCRAPING OF CERVIX USING AN ENDOSCOPE		$78.21	$104.42					
57460	BIOPSY OF CERVIX USING AN ENDOSCOPE WITH LOOP ELECTRODE		$121.31	$148.40					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57461	CONE BIOPSY OF CERVIX AND VAGINA USING AN ENDOSCOPE WITH LOOP ELECTRODE		$144.83	$242.98					
57465	COMPUTER-AIDED MAPPING OF CERVIX DURING EXAMINATION OF VAGINA AND CERVIX USING ENDOSCOPE		$35.02	$45.59					Added Effective 01/01/2021
57500	COMPUTER-AIDED MAPPING OF CERVIX DURING EXAMINATION OF VAGINA AND CERVIX USING ENDOSCOPE		$39.02	$46.67					
57505	SCRAPING OF TISSUE OF CERVIX		$43.59	$52.04					
57510	ELECTRO OR THERMAL DESTRUCTION OF CERVIX		$63.45	$70.42					
57511	DESTRUCTION OF CERVIX USING FREEZING		$69.82	$81.22					
57513	LASER DESTRUCTION OF CERVIX		$133.87	$133.87					
57520	REMOVAL OR DESTRUCTION OF CERVIX WITH COLD KNIFE OR LASER		$226.47	$226.47					
57522	REMOVAL OR DESTRUCTION OF CERVIX USING LOOP ELECTRODE		$205.93	$205.93					
57530	AMPUTATION OF CERVIX		$245.48	$245.48					
57531	REMOVAL OF CERVIX WITH REMOVAL OF LYMPH NODES ON BOTH SIDES OF PELVIS AND AORTIC LYMPH NODE BIOPSY		$1,187.54	$1,187.54					
57540	REMOVAL OF REMAINING CERVIX THROUGH ABDOMEN		$393.83	$393.83					
57545	REMOVAL OF REMAINING CERVIX WITH REPAIR OF PELVIC FLOOR THROUGH ABDOMEN		$342.42	$342.42					
57550	REMOVAL OF REMAINING CERVIX THROUGH VAGINA		$349.94	$349.94					
57555	REMOVAL OF REMAINING CERVIX WITH REPAIR OF SUPPORTING VAGINAL TISSUE		$562.49	$562.49					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
57556	REMOVAL OF REMAINING CERVIX WITH REPAIR OF HERNIATED BOWEL INTO VAGINAL WALL		$521.69	$521.69					
57558	DILATION AND SCRAPING OF CERVIX		$82.15	$90.27					
57700	SUTURE OF CERVIX		$169.20	$169.20					
57720	PLASTIC REPAIR OF CERVIX		$199.74	$199.74					
57800	DILATION OF CERVICAL CANAL		$31.46	$37.90					
58100	BIOPSY OF LINING OF UTERUS		$33.09	$41.94					
58110	EXAM OF CERVIX USING AN ENDOSCOPE WITH BIOPSY OF LINING OF UTERUS		$33.09	$39.21					
58120	DILATION AND SCRAPING OF UTERUS		$157.92	$157.92					
58140	REMOVAL OF GROWTH OF UTERUS THROUGH ABDOMEN, 1-4 GROWTHS		$488.28	$488.28					
58145	REMOVAL OF GROWTH OF UTERUS THROUGH VAGINA, 1-4 GROWTHS		$474.40	$474.40					
58146	REMOVAL OF 5 OR MORE GROWTHS OF UTERUS THROUGH ABDOMEN		$819.91	$819.91					
58150	REMOVAL OF UTERUS AND CERVIX THROUGH ABDOMEN	Yes	$695.52	$695.52					
58152	REMOVAL OF UTERUS AND CERVIX THROUGH ABDOMEN WITH REPAIR OF VAGINA	Yes	$798.27	$798.27					
58180	REMOVAL OF UTERUS THROUGH ABDOMEN	Yes	$578.91	$578.91					
58200	REMOVAL OF UTERUS THROUGH ABDOMEN WITH PARTIAL REMOVAL OF VAGINA	Yes	$1,013.03	$1,013.03					
58210	REMOVAL OF UTERUS, CERVIX, AND LYMPH NODES OF PELVIS WITH BIOPSY OF LYMPH NODES OF AORTA	Yes	$1,274.03	$1,274.03					
58240	REMOVAL OF MALIGNANT UTERUS, CERVIX, LYMPH NODES, AND BLADDER WITH TRANSPLANT OF URETERS AND BOWEL	Yes	$1,764.83	$1,764.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58260	REMOVAL OF UTERUS THROUGH VAGINA, 250.0 G OR LESS	Yes	$636.38	$636.38					
58262	THROUGH VAGINA, 250.0 G OR LESS	Yes	$685.38	$685.38					
58263	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES WITH REPAIR OF HERNIATED BOWEL THROUGH VAGINA, 250.0 G OR LESS	Yes	$749.48	$749.48					
58267	REMOVAL OF UTERUS WITH REPAIR FOR INCONTINENCE, 250.0 G OR LESS	Yes	$778.08	$778.08					
58270	REMOVAL OF UTERUS WITH REPAIR FOR INCONTINENCE, 250.0 G OR LESS	Yes	$700.47	$700.47					
58275	REMOVAL OF UTERUS AND VAGINA	Yes	$762.47	$762.47					
58280	REMOVAL OF UTERUS AND VAGINA WITH REPAIR OF HERNIATED BOWEL INTO RECTUM OR VAGINA THROUGH VAGINA	Yes	$758.60	$758.60					
58285	REMOVAL OF UTERUS, VAGINA, AND PELVIC LYMPH NODES THROUGH VAGINA	Yes	$888.79	$888.79					
58290	REMOVAL OF UTERUS THROUGH VAGINA, MORE THAN 250.0 G	Yes	$819.58	$819.58					
58291	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES THROUGH VAGINA, MORE THAN 250.0 G	Yes	$900.96	$900.96					
58292	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES WITH REPAIR OF HERNIATED BOWEL THROUGH VAGINA, MORE THAN 250.0 G	Yes	$954.57	$954.57					
58294	REMOVAL OF UTERUS WITH REPAIR OF HERNIATED BOWEL THROUGH VAGINA. 250.0 G OR MORE	Yes	$878.82	$878.82					
58300	INSERTION OF IUD FOR PREGNANCY PREVENTION		$47.06	$59.25					
58301	REMOVAL OF IUD		$29.40	$35.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58340	INSERTION OF TUBE AND INTRODUCTION OF CONTRAST FOR X-RAY OF UTERUS AND FALLOPIAN TUBES		$43.05	$43.05					
58345	INSERTION OF TUBE INTO FALLOPIAN TUBE	Yes	$238.84	$238.84					
58346	INSERTION OF CAPSULE INTO UTERUS FOR RADIATION THERAPY		$310.37	$310.37					
58350	INJECTION OF X-RAY CONTRAST INTO FALLOPIAN TUBE	Yes	$50.56	$50.56					
58353	DESTRUCTION OF LINING OF UTERUS		$162.96	$162.96					
58356	DESTRUCTION OF LINING OF UTERUS USING ULTRASOUND GUIDANCE		$278.58	$1,777.40					
58400	REPOSITIONING OF UTERUS		$345.55	$345.55					
58410	REPOSITIONING OF UTERUS WITH REMOVAL OF NERVE		$367.69	$367.69					
58520	REPAIR OF RUPTURED UTERUS		$324.11	$324.11					
58540	REPAIR OF ABNORMAL UTERUS		$450.69	$450.69					
58541	PARTIAL REMOVAL OF UTERUS WITH RETENTION OF CERVIX USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$617.90	$617.90					
58542	PARTIAL REMOVAL OF UTERUS, TUBES, AND/OR OVARIES WITH RETENTION OF CERVIX USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$684.88	$684.88					
58543	PARTIAL REMOVAL OF UTERUS WITH RETENTION OF CERVIX USING AN ENDOSCOPE, MORE THAN 250.0 G	Yes	$696.59	$696.59					
58544	PARTIAL REMOVAL OF UTERUS, TUBES, AND/OR OVARIES WITH RETENTION OF CERVIX USING AN ENDOSCOPE, MORE THAN 250.0 G	Yes	$754.75	$754.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58545	REMOVAL OF GROWTH OF UTERUS USING AN ENDOSCOPE, 250.0 G OR LESS		$657.30	$657.30					
58546	REMOVAL OF GROWTH OF UTERUS USING AN ENDOSCOPE, MORE THAN 250.0 G		$829.93	$829.93					
58548	REMOVAL OF UTERUS, CERVIX, AND LYMPH NODES OF PELVIS WITH BIOPSY OF AORTIC LYMPH NODE USING AN ENDOSCOPE	Yes	$1,318.03	$1,318.03					
58550	REMOVAL OF UTERUS THROUGH VAGINA USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$649.94	$649.94					
58552	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES THROUGH VAGINA USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$640.10	$640.10					
58553	REMOVAL OF UTERUS THROUGH VAGINA USING AN ENDOSCOPE, MORE THAN 250.0	Yes	$824.72	$824.72					
58554	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES THROUGH VAGINA USING AN ENDOSCOPE, MORE THAN 250.0 G	Yes	$816.75	$816.75					
58555	DIAGNOSTIC EXAM OF UTERUS USING AN ENDOSCOPE		$162.74	$162.74					
58558	BIOPSY OF LINING OF UTERUS AND/OR REMOVAL OF POLYP USING AN ENDOSCOPE		$213.26	$213.26					Updated Effective 01/01/2020
58559	RELEASE OF SCAR TISSUE OF UTERUS USING AN ENDOSCOPE		$273.34	$273.34					
58560	RELEASE OF SCAR TISSUE OF UTERUS AND RELEASE OR REMOVAL AND SEPTUM USING AN ENDOSCOPE		$302.82	$302.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58561	REMOVAL OF GROWTH OF MUSCLE OF UTERUS USING AN ENDOSCOPE		$426.04	$426.04					
58562	REMOVAL OF FOREIGN BODY IN UTERUS USING AN ENDOSCOPE		$213.72	$213.72					
58563	EXAM OF UTERUS WITH DESTRUCTION OF LINING OF UTERUS USING AN ENDOSCOPE		$281.64	$281.64					
58565	PLACEMENT OF IMPLANTS TO BLOCK FALLOPIAN TUBES USING AN ENDOSCOPE	Yes	$338.62	$338.62					Place of Service (POS) 22 will pay $338.62 effective 1/1/2011
58570	REMOVAL OF UTERUS THROUGH ABDOMEN USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$712.97	$712.97					
58571	REMOVAL OF UTERUS THROUGH ABDOMEN USING AN ENDOSCOPE, 250.0 G OR LESS	Yes	$780.91	$780.91					
58572	REMOVAL OF UTERUS THROUGH ABDOMEN USING AN ENDOSCOPE, MORE THAN 250.0 G	Yes	$886.24	$886.24					
58573	REMOVAL OF UTERUS, TUBES, AND/OR OVARIES THROUGH ABDOMEN USING AN ENDOSCOPE, MORE THAN 250.0 G	Yes	$999.29	$999.29					
58575	REMOVAL OF UTERUS FOR REMOVAL OF GROWTH USING AN ENDOSCOPE	Yes	$1,481.83	$1,481.83					Added Effective 1/1/2018
58578	OTHER PROCEDURE ON UTERUS USING AN ENDOSCOPE	Yes	$0.00	$0.00					
58579	OTHER PROCEDURE ON UTERUS ACCESSED THROUGH VAGINA USING AN ENDOSCOPE	Yes	$0.00	$0.00					
58580	DESTRUCTION OF UTERINE FIBROID(S) USING HEAT WITH ULTRASOUND GUIDANCE AND MONITORING		$338.31	$2,449.36					
58600	TYING OR INCISION OF FALLOPIAN TUBES	Yes	$271.75	$271.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58605	TYING OR INCISION OF FALLOPIAN TUBES DURING SAME HOSPITALIZATION	Yes	$234.00	$234.00					
58611	TYING OR INCISION OF FALLOPIAN TUBES DURING CESAREAN DELIVERY OR OTHER ABDOMINAL SURGERY	Yes	$33.52	$33.52					
58615	TYING OF FALLOPIAN TUBES BY DEVICE THROUGH VAGINA	Yes	$199.53	$199.53					
58660	REMOVAL OF SCAR TISSUE OF OVARIES OR FALLOPIAN TUBES USING AN ENDOSCOPE	Yes	$497.38	$497.38					
58661	REMOVAL OF OVARIES AND/OR TUBES USING AN ENDOSCOPE	Yes	$503.77	$503.77					
58662	DESTRUCTION OR REMOVAL OF OVARY OR GROWTH OF PELVIS USING AN ENDOSCOPE	Yes	$507.04	$507.04					
58670	DESTRUCTION OF FALLOPIAN TUBES USING AN ENDOSCOPE	Yes	$280.12	$280.12					
58671	BLOCKAGE OF UTERINE TUBES BY DEVICE USING AN ENDOSCOPE	Yes	$287.90	$287.90					
58673	REPAIR OF UTERINE TUBE USING AN ENDOSCOPE	Yes	$583.55	$583.55					
58674	DESTRUCTION OF GROWTH OF UTERUS USING AN ENDOSCOPE WITH ULTRASOUND GUIDANCE AND MONITORING		$652.21	$652.21					Added Effective 1/1/2017
58700	DESTRUCTION OF GROWTH OF UTERUS USING AN ENDOSCOPE WITH ULTRASOUND GUIDANCE AND MONITORING	Yes	$375.33	$375.33					
58720	REMOVAL OF UTERINE TUBES AND OVARIES	Yes	$422.70	$422.70					
58740	REMOVAL OF SCAR TISSUE OF OVARIES OR FALLOPIAN TUBES	Yes	$381.93	$381.93					
58770	REPAIR OF BLOCKED UTERINE TUBE OPENING	Yes	$372.82	$372.82					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58800	DRAINAGE OF CYSTS OF OVARIES THROUGH VAGINA		$195.39	$195.39					
58805	DRAINAGE OF CYSTS OF OVARIES THROUGH ABDOMEN		$363.80	$363.80					
58820	DRAINAGE OF ABSCESS OF OVARIES THROUGH VAGINA		$202.14	$202.14					
58822	DRAINAGE OF ABSCESS OF OVARIES THROUGH ABDOMEN		$296.24	$296.24					
58825	RELOCATION OF OVARIES BEHIND UTERUS		$295.89	$295.89					
58900	BIOPSY OF OVARIES		$326.30	$326.30					
58920	PARTIAL REMOVAL OF OVARIES	Yes	$400.39	$400.39					
58925	REMOVAL OF CYSTS OF OVARIES		$397.28	$397.28					
58940	REMOVAL OF OVARIES	Yes	$398.30	$398.30					
58943	REMOVAL OF OVARIES FOR OVARIAN CANCER	Yes	$901.94	$901.94					
58950	REMOVAL OF LINING OF ABDOMEN, OVARIES, AND FALLOPIAN TUBES		$773.05	$773.05					
58951	REMOVAL OF LINING OF ABDOMEN, UTERUS, OVARIES, FALLOPIAN TUBES, AND LYMPH NODES OF PELVIS AND AORTA	Yes	$1,184.26	$1,184.26					
58952	REMOVAL OF LINING OF ABDOMEN, OVARIES, AND FALLOPIAN TUBES WITH REDUCTION OF GROWTH	Yes	$1,207.48	$1,207.48					
58953	REMOVAL OF LINING OF ABDOMEN, UTERUS, OVARIES, AND FALLOPIAN TUBES WITH EXTENSIVE REDUCTION OF GROWTH	Yes	$1,403.32	$1,403.32					
58954	REMOVAL OF LINING OF ABDOMEN, UTERUS, OVARIES, FALLOPIAN TUBES, AND LYMPH NODES OF PELVIS AND AORTA FOR REDUCTION OF GROWTH	Yes	$1,526.07	$1,526.07					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
58956	REMOVAL OF LINING OF ABDOMEN, UTERUS, OVARIES, AND FALLOPIAN TUBES		$982.70	$982.70					
58958	REMOVAL OF UTERUS, OVARIES, FALLOPIAN TUBES, AND LYMPH NODES FOR REDUCTION OF GROWTH WITH LYMPH NODE DISSECTION		$1,185.03	$1,185.03					
58960	EXAM OF ABDOMINAL CAVITY WITH REMOVAL OR BIOPSY OF ABDOMINAL LINING OR LYMPH NODES		$717.37	$717.37					
58999	EXAM OF ABDOMINAL CAVITY WITH REMOVAL OR BIOPSY OF ABDOMINAL LINING OR LYMPH NODES	Yes	$570.00	$741.00					
59000	REMOVAL OF SAMPLE OF AMNIOTIC FLUID SURROUNDING FETUS FOR DIAGNOSIS		$68.54	$68.54					
59001	REMOVAL OF AMNIOTIC FLUID TO REDUCE AMOUNT OF FLUID SURROUNDING FETUS USING ULTRASOUND GUIDANCE		$127.45	$127.45					
59012	REMOVAL OF BLOOD FROM FETAL UMBILICAL CORD		$162.34	$162.34					
59015	REMOVAL OF TISSUE FROM PLACENTA FOR DIAGNOSIS		$99.17	$99.17					
59020	FETAL CONTRACTION STRESS TEST		$62.62	$62.62		$15.84	$46.78		
59025	FETAL TEST		$34.83	$34.83		$6.87	$27.96		
59030	REMOVAL OF BLOOD FROM SCALP OF FETUS		$105.88	$105.88					
59050	FETAL MONITORING DURING LABOR BY CONSULTING PHYSICIAN		$51.49	$51.49					
59051	INTERPRETATION OF FETAL MONITORING DURING LABOR BY CONSULTING PHYSICIAN		$47.08	$47.08					
59070	INFUSION OF NORMAL SALINE INTO FETAL AMNIOTIC SAC USING ULTRASOUND GUIDANCE		$219.94	$290.85					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
59072	OCCLUSION OF FETAL UMBILICAL CORD USING ULTRASOUND GUIDANCE		$356.42	$356.42					
59074	DRAINAGE OF FETAL FLUID USING ULTRASOUND GUIDANCE		$219.94	$277.24					
59076	PLACEMENT OF SHUNT INTO FETAL CHEST USING ULTRASOUND GUIDANCE		$356.42	$356.42					
59100	INCISION OF UTERUS		$309.26	$309.26					
59120	REMOVAL OF OVARIAN OR TUBAL PREGNANCY WITH REMOVAL OF OVARIES		$455.90	$455.90					
59121	REMOVAL OF OVARIAN OR TUBAL PREGNANCY		$375.41	$375.41					
59130	REMOVAL OF PREGNANCY CONTENTS IN ABDOMINAL CAVITY		$408.09	$408.09					
59135	REMOVAL IMPREGNATED OVUM OUTSIDE THE UTERUS AND ENTIRE UTERUS		$673.61	$673.61					
59136	REMOVAL OF TUBAL PREGNANCY AND REPAIR OF UTERINE WALL		$456.82	$456.82					
59140	REMOVAL OF IMPREGNATED OVUM OUTSIDE UTERUS		$281.40	$281.40					
59150	REMOVAL OF OVARIAN OR TUBAL PREGNANCY USING AN ENDOSCOPE		$333.06	$333.06					
59151	REMOVAL OF OVARIAN OR TUBAL PREGNANCY WITH REMOVAL OF OVARY AND/OR TUBE USING AN ENDOSCOPE		$458.93	$458.93					
59160	SCRAPING OF LINING OF UTERUS AFTER DELIVERY		$169.28	$169.28					
59200	INSERTION OF DILATOR DEVICE INTO CERVIX		$33.10	$40.34					
59300	EPISIOTOMY OR REPAIR OF VAGINA		$86.42	$99.70					
59320	SUTURE OF CERVIX DURING PREGNANCY THROUGH VAGINA		$130.48	$130.48					
59325	SUTURE OF CERVIX DURING PREGNANCY THROUGH ABDOMEN		$203.99	$203.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
59350	REPAIR OF TEAR OF UTERUS		$260.13	$260.13					
59409	VAGINAL DELIVERY		$870.00	$870.00					
59410	VAGINAL DELIVERY WITH POST DELIVERY CARE		$900.00	$900.00					
59414	DELIVERY OF PLACENTA		$84.65	$84.65					
59430	POST DELIVERY CARE		$65.78	$70.87					
59514	CESAREAN DELIVERY		$870.00	$870.00					
59515	CESAREAN DELIVERY WITH CARE AFTER DELIVERY		$900.00	$900.00					
59525	CESAREAN DELIVERY WITH REMOVAL OF UTERUS	Yes	$374.17	$374.17					
59612	CESAREAN DELIVERY WITH REMOVAL OF UTERUS		$870.00	$870.00					
59614	VAGINAL DELIVERY AND CARE AFTER DELIVERY AFTER PRIOR CESAREAN DELIVERY		$900.00	$900.00					
59620	CESAREAN DELIVERY FOLLOWING VAGINAL DELIVERY ATTEMPT AFTER PREVIOUS CESAREAN DELIVERY		$870.00	$870.00					
59622	CESAREAN DELIVERY WITH CARE AFTER DELIVERY FOLLOWING VAGINAL DELIVERY ATTEMPT AFTER PREVIOUS CESAREAN DELIVERY		$900.00	$900.00					
59812	TREATMENT OF MISCARRIAGE		$206.50	$206.50					
59820	TREATMENT OF MISCARRIAGE DURING FIRST TRIMESTER		$228.74	$228.74					
59821	TREATMENT OF MISCARRIAGE DURING SECOND TRIMESTER		$213.02	$213.02					
59830	TREATMENT OF MISCARRIAGE FROM INFECTION		$309.03	$309.03					
59840	INDUCED ABORTION BY DILATION AND SCRAPING OF UTERINE	Yes	$188.52	$188.52					
59841	INDUCED ABORTION BY DILATION	Yes	$214.12	$214.12					
59850	INDUCED ABORTION BY AMNIOTIC FLUID INJECTION	Yes	$288.16	$288.16					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
59851	INDUCED ABORTION BY INJECTION INTO AMNIOTIC FLUID WITH DILATION AND REMOVAL OF PREGNANCY CONTENTS	Yes	$301.09	$301.09					
59852	INDUCED ABORTION BY INJECTION INTO AMNIOTIC FLUID	Yes	$404.59	$404.59					
59855	INDUCED ABORTION BY INSERTION OF VAGINAL SUPPOSITORY	Yes	$304.56	$304.56					
59856	INDUCED ABORTION BY INSERTION OF VAGINAL SUPPOSITORY WITH DILATION AND REMOVAL OF PREGNANCY CONTENTS	Yes	$376.08	$376.08					
59857	INDUCED ABORTION BY INSERTION OF VAGINAL SUPPOSITORY WITH INCISION OF UTERUS	Yes	$457.41	$457.41					
59866	ELIMINATION OF FETUSES OF A MULTIFETAL PREGNANCY	Yes	$173.79	$173.79					Rate updated 1/1/2018
59870	REMOVAL OF ABNORMAL PREGNANCY CONTENTS WITH SCRAPING OF UTERINE WALL		$214.05	$214.05					
59871	REMOVAL OF SUTURE OF CERVIX UNDER ANESTHESIA		$117.25	$117.25					
59897	OTHER PROCEDURE ON FETUS	Yes	$0.00	$0.00					
59899	OTHER MATERNITY CARE AND DELIVERY PROCEDURE	Yes	$0.00	$0.00					
60000	INCISION AND DRAINAGE OF CYST OF THYROID DUCT		$60.41	$68.46					
60100	NEEDLE BIOPSY OF THYROID THROUGH SKIN		$45.46	$59.54					
60200	INCISION OF CYST OR GROWTH OF THYROID		$445.84	$445.84					
60210	PARTIAL REMOVAL OF THYROID LOBE ON SIDE OF NECK		$581.31	$581.31					
60212	PARTIAL REMOVAL OF THYROID LOBES ON BOTH SIDES OF NECK AND CONNECTING TISSUE		$738.99	$738.99					
60220	REMOVAL OF THYROID LOBE ON SIDE OF NECK		$557.51	$557.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
60225	REMOVAL OF THYROID LOBE ON SIDE OF NECK AND PARTIAL REMOVAL OF THYROID LOBE ON OPPOSITE SIDE OF NECK INCLUDING TISSUE IN BETWEEN		$669.87	$669.87					
60240	REMOVAL OF THYROID LOBE ON SIDE OF NECK		$790.92	$790.92					
60252	REMOVAL OF THYROID AND SURROUNDING LYMPH NODES WITH LIMITED NECK REMOVAL		$879.97	$879.97					
60254	REMOVAL OF THYROID AND SURROUNDING LYMPH NODES WITH EXTENSIVE NECK REMOVAL		$1,079.54	$1,079.54					
60260	REMOVAL OF REMAINING THYROID TISSUE FROM PRIOR OPERATION		$517.67	$517.67					
60270	REMOVAL OF THYROID FROM UNDER BREASTBONE		$918.83	$918.83					
60271	REMOVAL OF THYROID THROUGH CHEST OR BACK		$795.80	$795.80					
60280	REMOVAL OF CYST OF THYROID OR DRAINAGE OF THYROID GLAND DUCT		$380.26	$380.26					
60281	REMOVAL OF RECURRENT CYST OF THYROID OR DRAINAGE OF THYROID GLAND DUCT		$393.02	$393.02					
60300	ASPIRATION AND/OR INJECTION OF CYST OF THYROID		$39.76	$88.42					
60500	REMOVAL OR EXPLORATION OF PARATHYROID GLANDS		$812.72	$812.72					
60502	REMOVAL OR RE-EXPLORATION OF PARATHYROID GLANDS		$926.98	$926.98					
60505	REMOVAL OR EXPLORATION OF PARATHYROID GLANDS AND BREAST BONE TISSUE		$999.46	$999.46					
60512	REMOVAL OR EXPLORATION OF PARATHYROID GLANDS AND BREAST BONE TISSUE		$205.93	$205.93					
60520	REMOVAL OF THYMUS GLAND THROUGH NECK		$887.16	$887.16					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
60521	REMOVAL OF THYMUS GLAND THROUGH STERNUM OR CHEST		$945.26	$945.26					
60522	REMOVAL OF THYMUS GLAND SURROUNDING LYMPH NODES THROUGH STERNUM OR CHEST		$1,061.46	$1,061.46					
60540	REMOVAL OR EXPLORATION OF ADRENAL GLAND THROUGH ABDOMEN		$835.03	$835.03					
60545	REMOVAL OR EXPLORATION OF ADRENAL GLAND THROUGH ABDOMEN WITH REMOVAL OF GROWTH ABDOMEN		$982.76	$982.76					
60600	REMOVAL OF GROWTH OF CAROTID ARTERY		$826.37	$826.37					
60605	REMOVAL OF CAROTID ARTERY AND GROWTH		$875.02	$875.02					
60650	REMOVAL OR EXPLORATION OF ADRENAL GLAND THROUGH ABDOMEN USING AN ENDOSCOPE		$739.73	$739.73					
60660	DESTRUCTION USING HEAT OF ONE OR MORE NODULES ON ONE THYROID LOBE		$262.36	$1,938.86					
60661	DESTRUCTION USING HEAT OF ONE OR MORE NODULES ON ADDITIONAL THYROID LOBE		$182.33	$323.36					
60699	OTHER PROCEDURE ON ENDOCRINE SYSTEM	Yes	$0.00	$0.00					
61000	INITIAL REMOVAL OF CEREBROSPINAL FLUID FROM SKULL BONE SOFT SPOT, INFANT		$79.19	$79.19					
61001	SUBSEQUENT ASPIRATION OF CEREBROSPINAL FLUID FROM INFANT SKULL BONE SOFT SPOT		$59.65	$71.46					
61020	REMOVAL OF CEREBROSPINAL FLUID FROM BRAIN FOR DIAGNOSIS		$82.96	$82.96					
61026	REMOVAL OF CEREBROSPINAL FLUID FROM BRAIN AND INJECTION OF SUBSTANCE		$109.38	$109.38					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61050	REMOVAL OF CEREBROSPINAL FLUID FROM UPPER SPINE		$80.94	$80.94					
61055	SPINAL PUNCTURE IN UPPER SPINE WITH INJECTION OF SUBSTANCE		$116.66	$116.66					
61070	ASPIRATION OF CEREBROSPINAL FLUID AND INJECTION IN SHUNT TUBING OR RESERVOIR		$33.42	$39.99					
61105	CREATION OF OPENING IN SKULL FOR REMOVAL OF FLUID FROM BRAIN		$455.26	$455.26					
61107	CREATION OF OPENING IN SKULL FOR INSERTION OF BRAIN TUBE OR MONITORING DEVICE		$307.66	$307.66					
61108	CREATION OF OPENING IN SKULL FOR REMOVAL AND/OR DRAINAGE OF BLOOD ACCUMULATION OUTSIDE BRAIN		$694.06	$694.06					
61120	BURR HOLE FOR INJECTION INTO VENTRICLE OF BRAIN		$459.02	$459.02					
61140	BURR HOLE WITH DRAINAGE OR BIOPSY OF BRAIN OR GROWTH		$876.66	$876.66					
61150	BURR HOLE WITH DRAINAGE OF ABSCESS OR CYST OF BRAIN		$937.20	$937.20					
61151	BURR HOLE WITH SUBSEQUENT ASPIRATION OF ABSCESS OR CYST OF BRAIN		$400.64	$400.64					
61154	BURR HOLE WITH REMOVAL AND/OR DRAINAGE OF BLOOD ACCUMULATION OUTSIDE OR BELOW BRAIN MEMBRANE		$949.97	$949.97					
61156	BURR HOLE WITH ASPIRATION OF BLOOD ACCUMULATION OR CYST OF BRAIN		$955.26	$955.26					
61210	BURR HOLE FOR INSERTION OF BRAIN TUBE OR MONITORING DEVICE		$337.68	$337.68					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61215	INSERTION OF DEVICE FOR CONTINUOUS INFUSION IN BRAIN		$575.91	$575.91					
61250	BURR HOLE FOR EXPLORATION OF UPPER BRAIN		$574.03	$574.03					
61253	BURR HOLE FOR EXPLORATION OF LOWER BRAIN		$680.56	$680.56					
61304	BURR HOLE FOR EXPLORATION OF LOWER BRAIN		$1,419.68	$1,419.68					
61305	REMOVAL OF SKULL BONE FOR EXPLORATION OF LOWER BRAIN		$1,630.33	$1,630.33					
61312	REMOVAL OF SKULL BONE FOR ASPIRATION OF BLOOD ACCUMULATION IN UPPER BRAIN OUTSIDE OR BELOW BRAIN MEMBRANE		$1,358.30	$1,358.30					
61313	REMOVAL OF SKULL BONE FOR ASPIRATION OF BLOOD ACCUMULATION IN UPPER BRAIN		$1,353.94	$1,353.94					
61314	REMOVAL OF SKULL BONE FOR ASPIRATION OF BLOOD ACCUMULATION IN LOWER BRAIN OUTSIDE OR BELOW BRAIN MEMBRANE		$1,469.34	$1,469.34					
61315	REMOVAL OF SKULL BONE FOR ASPIRATION OF BLOOD ACCUMULATION IN LOWER BRAIN		$1,523.63	$1,523.63					
61316	PLACEMENT OF BONE GRAFT IN SKULL		$65.84	$65.84					
61320	REMOVAL OF SKULL BONE FOR DRAINAGE OF UPPER BRAIN ABSCESS		$1,285.74	$1,285.74					
61321	REMOVAL OF SKULL BONE FOR DRAINAGE OF LOWER BRAIN ABSCESS		$1,400.20	$1,400.20					
61322	REMOVAL OF SKULL BONE TO REDUCE BRAIN PRESSURE		$1,335.49	$1,335.49					
61323	REMOVAL OF SKULL BONE AND BRAIN LOBE TO REDUCE BRAIN PRESSURE		$1,383.79	$1,383.79					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61330	INCISION OF EYE BONE TO REDUCE PRESSURE		$836.75	$836.75					
61333	EXPLORATION AND REMOVAL OF BONE GROWTH OF EYE SOCKET		$1,412.93	$1,412.93					
61340	INCISION OF SKULL TO REDUCE BRAIN PRESSURE		$797.89	$797.89					
61343	REMOVAL OF SKULL BASE BONE AND UPPER SPINE BONE TO RELEASE SPINAL CORD		$1,752.10	$1,752.10					
61345	REMOVAL OF BASE OF SKULL TO REDUCE PRESSURE ON BRAIN		$1,342.43	$1,342.43					
61450	REMOVAL OF SKULL BONE TO REDUCE FACIAL NERVE PRESSURE		$1,344.07	$1,344.07					
61458	REMOVAL OF SKULL BASE BONE FOR EXPLORATION OR RELEASE OF CRANIAL NERVES		$1,612.09	$1,612.09					
61460	REMOVAL OF SKULL BASE BONE TO SEVER CRANIAL NERVE		$1,553.54	$1,553.54					
61500	REMOVAL OF GROWTH OF BRAIN OR OTHER GROWTH OF SKULL BONE		$1,122.09	$1,122.09					
61501	REMOVAL OF INFECTED SKULL BONE		$946.40	$946.40					
61510	REMOVAL OF SKULL BONE FOR REMOVAL OF GROWTH OF UPPER BRAIN		$1,530.67	$1,530.67					
61512	REMOVAL OF SKULL BONE FOR REMOVAL OF GROWTH OF UPPER BRAIN MEMBRANE		$1,618.54	$1,618.54					
61514	REMOVAL OF SKULL BONE FOR REMOVAL OF UPPER BRAIN ABSCESS		$1,488.95	$1,488.95					
61516	REMOVAL OF SKULL BONE FOR REMOVAL OR DRAINAGE OF CYST OF UPPER BRAIN		$1,491.50	$1,491.50					
61517	IMPLANTATION OF CHEMOTHERAPY AGENT INTO BRAIN		$56.19	$56.19					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61518	REMOVAL OF SKULL BONE FOR REMOVAL OF GROWTH OF LOWER BRAIN		$1,884.78	$1,884.78					
61519	REMOVAL OF SKULL BONE FOR REMOVAL OF GROWTH OF LOWER BRAIN MEMBRANE		$1,970.57	$1,970.57					
61520	REMOVAL OF SKULL BONE FOR REMOVAL OF EIGHTH CRANIAL NERVE BRAIN GROWTH		$2,176.37	$2,176.37					
61521	REMOVAL OF SKULL BONE FOR REMOVAL OF SKULL BASE BONE GROWTH		$2,184.95	$2,184.95					
61522	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN ABSCESS		$1,435.87	$1,435.87					
61524	REMOVAL OF SKULL BONE FOR REMOVAL OR DRAINAGE OF CYST OF BRAIN		$1,624.92	$1,624.92					
61526	REMOVAL OF SKULL BONE WITH BONE FLAP FOR REMOVAL OF EIGHTH CRANIAL NERVE BRAIN TUMOR		$1,900.40	$1,900.40					
61530	REMOVAL OF SKULL BONE WITH BONE FLAP FOR REMOVAL OF EIGHTH CRANIAL NERVE BRAIN TUMOR WITH MIDDLE/POSTERIOR SKULL BONE REMOVAL		$2,271.30	$2,271.30					
61531	IMPLANTATION OF BRAIN STRIP ELECTRODES FOR SEIZURE MONITORING		$1,045.86	$1,045.86					
61533	REMOVAL OF SKULL BONE FOR INSERTION OF BRAIN ELECTRODE FOR SEIZURE MONITORING		$1,224.36	$1,224.36					
61534	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN TISSUE TO STOP SEIZURES		$781.31	$781.31					
61535	REMOVAL OF SKULL BONE FOR REMOVAL OF ELECTRODE FROM BRAIN		$536.01	$536.01					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61536	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN TISSUE TO STOP SEIZURES WITH MONITORING		$1,549.54	$1,549.54					
61537	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN LOBE		$1,258.82	$1,258.82					
61538	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN LOBE WITH MONITORING		$1,723.83	$1,723.83					
61539	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN LOBE (OTHER THAN TEMPORAL LOBE) WITH MONITORING		$1,596.50	$1,596.50					
61540	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN LOBE (OTHER THAN TEMPORAL LOBE)		$1,518.91	$1,518.91					
61541	REMOVAL OF SKULL BONE FOR INCISION OF BRAIN TISSUE		$1,413.73	$1,413.73					
61543	REMOVAL OF SKULL BONE FOR PARTIAL REMOVAL OF BRAIN		$1,127.98	$1,127.98					
61544	REMOVAL OF SKULL BONE FOR REMOVAL OR CLOTTING OF CEREBROSPINAL FLUID SITE		$1,503.11	$1,503.11					
61545	REMOVAL OF SKULL BONE WITH BONE FLAP FOR REMOVAL OF GROWTH OF PITUITARY GLAND		$1,817.24	$1,817.24					
61546	REMOVAL OF SKULL BONE FOR REMOVAL OF GROWTH OF PITUITARY GLAND		$1,701.25	$1,701.25					
61548	REMOVAL OF GROWTH OF PITUITARY GLAND		$1,353.84	$1,353.84					
61550	REMOVAL OF SKULL BONE FOR REPAIR OF SINGLE SKULL SUTURE DEFECT PRESENT AT BIRTH		$761.59	$761.59					
61552	REMOVAL OF SKULL BONE FOR REPAIR OF MULTIPLE SKULL SUTURE DEFECTS PRESENT AT BIRTH		$994.67	$994.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61556	REMOVAL OF SKULL BONE FOR INCISION OF PREMATURELY CLOSED SKULL SUTURE		$1,116.90	$1,116.90					
61557	REMOVAL OF FRONTAL SKULL BONE FOR INCISION OF PREMATURELY CLOSED SKULL SUTURE		$1,123.08	$1,123.08					
61558	EXTENSIVE REMOVAL OF SKULL BONE FOR MULTIPLE SKULL SUTURE DEFECTS		$1,276.41	$1,276.41					
61559	EXTENSIVE REMOVAL OF SKULL BONE WITH BONE GRAFTS FOR MULTIPLE SKULL SUTURE DEFECTS TO RESTORE SKULL SHAPE		$1,655.24	$1,655.24					
61563	REMOVAL OF GROWTH OF SKULL BONE		$1,353.06	$1,353.06					
61564	REMOVAL OF GROWTH OF SKULL BONE WITH RELEASE OF OPTIC NERVE		$1,707.01	$1,707.01					
61566	REMOVAL OF SKULL BONE FOR REMOVAL OF BRAIN TISSUE TO RELIEVE SEIZURE ACTIVITY		$1,507.18	$1,507.18					
61567	REMOVAL OF SKULL BONE FOR INCISION OF BRAIN TISSUE FOR SEIZURES WITH MONITORING		$1,722.45	$1,722.45					
61570	REMOVAL OF FOREIGN BODY IN BRAIN		$1,188.32	$1,188.32					
61571	TREATMENT OF PENETRATING BRAIN WOUND		$1,289.76	$1,289.76					
61575	BIOPSY, RELEASE OF PRESSURE, OR REMOVAL OF GROWTH OF BRAIN STEM OF UPPER SPINAL CORD		$1,956.24	$1,956.24					
61576	BIOPSY OF BRAIN STEM OR UPPER SPINAL CORD WITH SPLITTING OF TONGUE AND LOWER JAW BONE		$1,844.59	$1,844.59					
61580	REMOVAL OF NASAL SINUSES TO APPROACH GROWTH OF BRAIN		$1,511.18	$1,511.18					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61581	REMOVAL OF NASAL SINUSES TO APPROACH GROWTH OF BRAIN WITH THE REMOVAL OF THE MAXILLA OR EYEBALL		$1,715.14	$1,715.14					
61582	REMOVAL OF FACIAL BONE TO APPROACH GROWTH OF BRAIN OUTSIDE BRAIN MEMBRANE		$1,556.79	$1,556.79					
61583	REMOVAL OF FACIAL BONE TO APPROACH GROWTH OF BRAIN WITHIN BRAIN MEMBRANE		$1,776.67	$1,776.67					
61584	REMOVAL OF FACIAL BONE TO APPROACH GROWTH OF BRAIN WITHOUT ORBITAL EXENTERATION		$1,720.14	$1,720.14					
61585	REMOVAL OF FACIAL BONE AND EYEBALL TO APPROACH GROWTH OF BRAIN		$1,924.41	$1,924.41					
61586	REMOVAL OF FACIAL BONE TO APPROACH GROWTH OF BRAIN WITHOUT BONE GRAFT		$1,287.53	$1,287.53					
61590	REMOVAL OF JAW BONE TO APPROACH GROWTH OF BRAIN		$2,092.87	$2,092.87					
61591	REMOVAL OF SKULL BONE BEHIND EAR TO APPROACH GROWTH OF BRAIN		$2,194.98	$2,194.98					
61592	REMOVAL OF CHEEK BONE AND SKULL TO APPROACH GROWTH OF BRAIN		$1,991.00	$1,991.00					
61595	REMOVAL OF SKULL BONE BEHIND EAR TO APPROACH GROWTH OF BRAIN THROUGH THE TEMPORAL LOBE		$1,470.58	$1,470.58					
61596	REMOVAL OF SKULL BONE BEHIND EAR TO APPROACH GROWTH OF BRAIN THROUGH THE EAR		$1,787.02	$1,787.02					
61597	REMOVAL OF BASE SKULL BONE TO APPROACH GROWTH OF BRAIN		$1,888.89	$1,888.89					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61598	REMOVAL OF SKULL BONE TO APPROACH GROWTH OF BRAIN OR DEFECT AT SKULL BASE WITH TYING OF SINUS		$1,664.23	$1,664.23					
61600	REMOVAL OF GROWTH OR TISSUE OF FRONT OF SKULL BASE OUTSIDE MEMBRANES COVERING BRAIN		$1,276.17	$1,276.17					
61601	REMOVAL OF GROWTH OR TISSUE OF FRONT OF SKULL BASE WITHIN MEMBRANES COVERING BRAIN		$1,368.44	$1,368.44					
61605	REMOVAL OF GROWTH OR TISSUE OF LOWER SKULL BASE OUTSIDE BRAIN MEMBRANE		$1,444.82	$1,444.82					
61606	REMOVAL OF GROWTH OR TISSUE OF LOWER SKULL BASE WITHIN BRAIN MEMBRANE		$1,934.79	$1,934.79					
61607	REMOVAL OF GROWTH OR TISSUE OF MIDDLE SKULL BASE OUTSIDE BRAIN MEMBRANE		$1,807.46	$1,807.46					
61608	REMOVAL OF GROWTH OR TISSUE OF MIDDLE SKULL BASE WITHIN BRAIN MEMBRANE		$2,102.92	$2,102.92					
61611	INCISION OR TYING OF CAROTID ARTERY AT SKULL BASE		$388.06	$388.06					
61613	DESTRUCTION OF ABNORMAL BLOOD VESSEL AT SKULL BASE		$2,062.32	$2,062.32					
61615	REMOVAL OF GROWTH OR TISSUE OF SKULL BASE OUTSIDE BRAIN MEMBRANE		$1,587.56	$1,587.56					
61616	REMOVAL OF GROWTH OR TISSUE OF SKULL BASE WITHIN BRAIN MEMBRANE		$2,159.45	$2,159.45					
61618	REPAIR OF BRAIN COVERING BY TISSUE OR SYNTHETIC GRAFT		$816.72	$816.72					
61619	REPAIR OF BRAIN COVERING BY VASCULAR OR COMBINED VASCULAR MUSCLE GRAFT		$1,020.70	$1,020.70					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61623	BALLOON OCCLUSION OF HEAD OR NECK ARTERY WITH REVIEW BY RADIOLOGIST		$408.34	$408.34					
61624	OCCLUSION OF INTRACRANIAL OR SPINAL CORD ARTERY		$894.20	$894.20					
61626	OCCLUSION OF HEAD OR NECK ARTERY		$647.61	$7,745.29					
61630	BALLOON DILATION OF BLOOD VESSEL IN HEAD		$1,056.84	$1,007.67					
61635	INSERTION OF STENT IN BLOOD VESSEL OF HEAD		$1,105.84	$1,105.84					
61640	BALLOON DILATION OF BLOOD VESSEL SPASM IN HEAD		$504.33	$504.33					
61641	BALLOON DILATION OF ADDITIONAL BLOOD VESSEL SPASM IN HEAD IN SAME VESSEL FAMILY		$177.40	$177.40					
61642	BALLOON DILATION OF ADDITIONAL BLOOD VESSEL SPASM IN HEAD IN DIFFERENT VESSEL FAMILY		$354.58	$354.58					
61645	REMOVAL OF BLOOD CLOT AND INJECTION TO DISSOLVE BLOOD CLOT FROM HEAD ARTERY USING FLUOROSCOPIC GUIDANCE		$634.38	$634.38					Added Effective 1/1/2016
61650	INFUSION OF CHEMICAL AGENT INTO ARTERY OF BRAIN WITH INSERTION OF TUBE AND IMAGING, INITIAL TERRITORY		$433.13	$433.13					Added Effective 1/1/2016
61651	INFUSION OF CHEMICAL AGENT INTO ARTERY OF BRAIN WITH INSERTION OF TUBE AND IMAGING, EACH ADDITIONAL TERRITORY		$184.45	$184.45					Added Effective 1/1/2016
61680	SIMPLE REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN UPPER BRAIN		$2,043.35	$2,043.35					
61682	COMPLEX REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN UPPER BRAIN		$2,340.21	$2,340.21					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61684	SIMPLE REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN LOWER BRAIN		$2,034.27	$2,034.27					
61686	COMPLEX REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN LOWER BRAIN		$2,459.46	$2,459.46					
61690	SIMPLE REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN MEMBRANE COVERING BRAIN		$1,828.31	$1,828.31					
61692	COMPLEX REPAIR OF ABNORMAL ARTERY-VEIN CONNECTION IN MEMBRANE COVERING BRAIN		$1,967.73	$1,967.73					
61697	REPAIR OF COMPLEX ANEURYSM OF NECK ARTERY		$2,409.61	$2,409.61					
61698	REPAIR OF COMPLEX ANEURYSM OF BACK OF BRAIN ARTERY		$2,318.66	$2,318.66					
61700	REPAIR OF SIMPLE ANEURYSM OF NECK ARTERY		$2,009.80	$2,009.80					
61702	REPAIR OF SIMPLE ANEURYSM OF BACK OF BRAIN ARTERY		$2,284.79	$2,284.79					
61703	REPAIR OF ANEURYSM OF NECK ARTERY WITH CLAMP		$859.34	$859.34					
61705	REPAIR OF ABNORMAL BLOOD VESSEL IN BRAIN BY CLAMPING NECK ARTERY		$1,955.28	$1,955.28					
61708	REPAIR OF ABNORMAL BLOOD VESSEL IN BRAIN BY CREATING CLOT USING ELECTRICITY		$1,717.93	$1,717.93					
61710	REPAIR OF ABNORMAL BLOOD VESSEL IN BRAIN BY CREATING OBSTRUCTION		$1,314.30	$1,314.30					
61711	CONNECTION OF ARTERIES OF HEAD		$2,052.72	$2,052.72					
61715	MRI GUIDED HIGH INTENSITY FOCUSED ULTRASOUND, COMPUTER-ASSISTED DESTRUCTION OF INTRACRANIAL TISSUE		$1,004.25	$1,004.25					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61720	COMPUTER-ASSISTED CREATION OF GROWTH OF BRAIN OF GLOBUS PALLIDUS OR THALAMUS		$1,107.72	$1,107.72					
61735	COMPUTER-ASSISTED CREATION OF GROWTH OF BRAIN OF DEEP BRAIN STRUCTURE		$885.49	$885.49					
61736	LASER INTERSTITIAL THERMAL THERAPY (LI		$760.31	$760.31					Added 1/1/2022
61737	LASER INTERSTITIAL THERMAL THERAPY (LI		$905.42	$905.42					Added 1/1/2022
61750	COMPUTER-ASSISTED BIOPSY, ASPIRATION, OR EXCISION OF GROWTH OF BRAIN		$762.21	$762.21					
61751	COMPUTER-ASSISTED BIOPSY, ASPIRATION, OR EXCISION OF GROWTH OF BRAIN USING CT AND/OR MRI GUIDANCE		$1,074.47	$1,074.47					
61760	COMPUTER-ASSISTED IMPLANTATION OF BRAIN ELECTRODES FOR SEIZURE MONITORING		$1,172.92	$1,172.92					
61770	COMPUTER-ASSISTED INSERTION OF TUBE OR PROBE FOR RADIATION PLACEMENT		$1,047.41	$1,047.41					
61781	COMPUTER-ASSISTED PROCEDURE INSIDE BRAIN		$211.55	$211.55					
61782	COMPUTER-ASSISTED PROCEDURE OUTSIDE MEMBRANE COVERING BRAIN		$173.57	$173.57					
61783	COMPUTER-ASSISTED SPINAL PROCEDURE		$211.55	$211.55					
61790	COMPUTER-ASSISTED CREATION OF GROWTH OF FACE NERVE		$729.94	$729.94					
61791	COMPUTER-ASSISTED CREATION OF GROWTH OF BRAINSTEM		$552.75	$552.75					
61796	COMPUTER-ASSISTED RADIOSURGERY OF SIMPLE GROWTH OF BRAIN, FIRST GROWTH		$601.71	$601.71					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61797	COMPUTER-ASSISTED RADIOSURGERY OF SIMPLE GROWTH OF BRAIN, EACH ADDITIONAL GROWTH		$164.37	$164.37					
61798	COMPUTER-ASSISTED RADIOSURGERY OF COMPLEX GROWTH OF BRAIN, FIRST GROWTH		$601.71	$601.71					
61799	COMPUTER-ASSISTED RADIOSURGERY OF COMPLEX GROWTH OF BRAIN, EACH ADDITIONAL GROWTH		$227.27	$227.27					
61800	COMPUTER-ASSISTED RADIOSURGERY APPLICATION OF HEADFRAME		$116.60	$116.60					
61850	CREATION OF OPENING IN SKULL FOR INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN		$835.76	$835.76					
61860	REMOVAL OF SKULL BONE FOR INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN		$585.61	$585.61					
61863	REMOVAL OF SKULL BONE WITH COMPUTER-ASSISTED INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN, FIRST ARRAY		$761.87	$761.87					
61864	REMOVAL OF SKULL BONE WITH COMPUTER-ASSISTED INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN, EACH ADDITIONAL ARRAY		$217.34	$217.34					
61867	REMOVAL OF SKULL BONE WITH COMPUTER-ASSISTED INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN WITH RECORDING, FIRST ARRAY		$1,139.83	$1,139.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
61868	REMOVAL OF SKULL BONE WITH COMPUTER-ASSISTED INSERTION OF NEUROSTIMULATOR ELECTRODES IN BRAIN WITH RECORDING, EACH ADDITIONAL ARRAY		$362.23	$362.23					
61880	REVISION OR REMOVAL OF BRAIN NEUROSTIMULATOR ELECTRODES		$312.36	$312.36					
61885	INSERTION OF BRAIN NEUROSTIMULATOR PULSE DEVICE WITH CONNECTION TO SINGLE ELECTRODE ARRAY		$128.57	$128.57					
61886	INSERTION OF BRAIN NEUROSTIMULATOR PULSE DEVICE WITH CONNECTION TO 2 OR MORE ELECTRODE ARRAYS		$419.55	$419.55					
61888	REMOVAL OF BRAIN NEUROSTIMULATOR DEVICE		$162.01	$162.01					
61889	INSERTION OF SKULL-MOUNTED CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER		$1,083.85	$1,083.85					
61891	REVISION OR REPLACEMENT OF SKULL-MOUNTED CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER		$510.62	$510.62					
61892	REMOVAL OF SKULL-MOUNTED CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER		$702.22	$702.22					
62000	ELEVATION OF SIMPLE DEPRESSED BROKEN SKULL BONE		$507.18	$507.18					
62005	ELEVATION OF COMPLICATED DEPRESSED BROKEN SKULL BONE		$780.51	$780.51					
62010	ELEVATION OF DEPRESSED BROKEN SKULL BONE WITH REPAIR OF BRAIN		$1,138.16	$1,138.16					
62100	REMOVAL OF SKULL BONE FLAP OR SKULL PLATE		$1,280.04	$1,280.04					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62115	REDUCTION OF ENLARGED SKULL BONE		$1,061.77	$1,061.77					
62117	REDUCTION AND RESHAPING OF ENLARGED SKULL BONE		$1,314.39	$1,314.39					
62120	REPAIR OF HERNIATED BRAIN AND RECONSTRUCTION OF SKULL BONE		$1,156.94	$1,156.94					
62121	REMOVAL OF SKULL BONE FOR REPAIR OF HERNIATED BRAIN AT SKULL BASE		$1,146.72	$1,146.72					
62140	REPAIR OF SKULL BONE DEFECT, 5 CM OR LESS		$788.90	$788.90					
62141	REPAIR OF SKULL BONE DEFECT, MORE THAN 5.0 CM		$963.13	$963.13					
62142	REMOVAL OF SKULL BONE FLAP OR SKULL PLATE		$695.31	$695.31					
62143	REPLACEMENT OF SKULL BONE FLAP OR SKULL PLATE		$641.40	$641.40					
62145	REPAIR OF SKULL BONE DEFECT AND BRAIN		$927.42	$927.42					
62146	REPAIR OF SKULL BONE WITH GRAFT, 5.0 CM OR LESS		$790.40	$790.40					
62147	REPAIR OF SKULL BONE WITH GRAFT, MORE THAN 5.0 CM		$947.99	$947.99					
62148	REPAIR OF SKULL BONE WITH GRAFT, MORE THAN 5.0 CM		$89.82	$89.82					
62160	INSERTION OF TUBE IN BRAIN USING AN ENDOSCOPE		$129.68	$129.68					
62161	REMOVAL OF BRAIN SCAR TISSUE OR DRAINAGE OF CYST AND INSERTION OR REMOVAL TUBE IN BRAIN USING AN ENDOSCOPE		$921.37	$921.37					
62162	DRAINAGE OF CYST OF BRAIN AND INSERTION OF TUBE IN BRAIN USING AN ENDOSCOPE		$1,182.34	$1,182.34					
62164	REMOVAL OF GROWTH OF BRAIN AND INSERTION OF TUBE IN BRAIN USING AN ENDOSCOPE		$1,278.69	$1,278.69					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62165	REMOVAL OF GROWTH OF PITUITARY USING AN ENDOSCOPE		$1,002.03	$1,002.03					
62180	CREATION OF CEREBROSPINAL FLUID DRAINAGE TRACT IN BRAIN		$820.00	$820.00					
62190	CREATION OF BRAIN FLUID DRAINAGE SHUNT, SUB-ATRIAL, -JUGULAR, -AURICULAR		$723.13	$723.13					
62192	CREATION OF BRAIN FLUID DRAINAGE SHUNT, SUB-PERITONEAL, -PLEURAL, OTHER TERMINUS		$786.84	$786.84					
62194	REPLACEMENT OR IRRIGATION OF TUBE IN MEMBRANES COVERING BRAIN		$139.93	$139.93					
62200	CREATION OF SPINAL FLUID DRAINAGE TRACT IN THIRD VENTRICLE OF BRAIN		$918.22	$918.22					
62201	COMPUTER-ASSISTED CREATION OF CEREBROSPINAL FLUID DRAINAGE TRACT IN THIRD VENTRICLE OF BRAIN		$632.35	$632.35					
62220	CREATION OF BRAIN FLUID DRAINAGE SHUNT, VENTRICULO-ATRIAL, -JUGULAR, -AURICULAR		$843.56	$843.56					
62223	CREATION OF BRAIN FLUID DRAINAGE SHUNT, VENTRICULO-PERITONEAL, -PLEURAL, OTHER TERMINUS		$889.15	$889.15					
62225	REPLACEMENT OR IRRIGATION OF TUBE IN BRAIN		$281.05	$281.05					
62230	INSERTION OR REVISION OF CEREBROSPINAL FLUID DRAINAGE SHUNT VALVE OR TUBE		$592.81	$592.81					
62252	REPROGRAMMING OF CEREBROSPINAL FLUID SHUNT		$58.43	$58.43		$28.89	$29.54		
62256	REMOVAL OF CEREBROSPINAL FLUID SHUNT SYSTEM		$372.68	$372.68					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62258	REMOVAL AND INSERTION OF CEREBROSPINAL FLUID SHUNT SYSTEM		$857.46	$857.46					
62263	REMOVAL OF SPINAL CANAL SCAR TISSUE, MULTIPLE SESSIONS OVER 2 DAYS OR MORE		$313.87	$313.87					
62264	REMOVAL OF SPINAL CANAL SCAR TISSUE, MULTIPLE SESSIONS IN 1 DAY		$169.22	$427.70					
62267	ASPIRATION OF SPINAL DISC TISSUE FOR DIAGNOSTIC PURPOSES		$129.95	$196.12					
62268	ASPIRATION OF FLUID FROM CYST OF SPINAL CORD OR FLUID-FILLED CAVITY		$202.24	$202.24					
62269	BIOPSY OF SPINAL CORD WITH NEEDLE THROUGH SKIN		$173.17	$173.17					
62270	REMOVAL OF CEREBROSPINAL FLUID WITH LOWER BACK SPINAL TAP FOR DIAGNOSTIC TEST		$50.19	$106.75					Updated Effective 01/01/2020
62272	REMOVAL OF CEREBROSPINAL FLUID WITH LOWER BACK SPINAL TAP		$70.59	$140.11					Rate Change Effective 01/01/2020
62273	INJECTION OF BLOOD OR BLOOD CLOT INTO SPINAL CANAL		$99.45	$99.45					
62280	INJECTION OF SUBSTANCE INTO SPINAL CANAL FOR REMOVAL OF NERVE TISSUE IN SPACE AROUND BRAIN		$98.15	$98.15					
62281	INJECTION OF SUBSTANCE INTO SPINAL CANAL FOR REMOVAL OF UPPER SPINE NERVE TISSUE		$106.73	$106.73					
62282	INJECTION OF SUBSTANCE INTO SPINAL CANAL FOR REMOVAL OF LOWER SPINE NERVE TISSUE		$122.22	$122.22					
62284	INJECTION OF CONTRAST FOR IMAGING OF LOWER SPINAL CANAL		$106.56	$106.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62287	REMOVAL OF LOWER SPINE DISC TISSUE AT SINGLE OR MULTIPLE LEVELS USING FLUOROSCOPIC GUIDANCE		$451.96	$451.96					
62290	INJECTION OF CONTRAST FOR IMAGING OF EACH LEVEL OF LOWER SPINE		$160.77	$160.77					
62291	INJECTION OF CONTRAST FOR IMAGING OF EACH LEVEL OF MIDDLE OR UPPER SPINE		$142.61	$142.61					
62292	INJECTION FOR REMOVAL OF LOWER SPINE DISC		$793.50	$793.50					
62294	INJECTION OF SUBSTANCE TO OCCLUDE SPINAL CORD ARTERY AND/OR VEIN		$409.38	$409.38					
62302	X-RAY OF UPPER SPINAL CANAL WITH REVIEW BY RADIOLOGIST		$101.48	$187.89					Added effective 1/1/2015
62303	X-RAY OF MIDDLE SPINAL CANAL WITH REVIEW BY RADIOLOGIST		$102.77	$194.88					Added effective 1/1/2015
62304	X-RAY OF LOWER SPINAL CANAL WITH REVIEW BY RADIOLOGIST		$99.77	$185.41					Added effective 1/1/2015
62305	X-RAY OF MULTIPLE REGIONS OF SPINAL CANAL WITH REVIEW BY RADIOLOGIST		$104.53	$202.07					Added effective 1/1/2015
62320	INJECTION OF SUBSTANCE INTO MIDDLE OR UPPER SPINE CANAL		$82.59	$129.63					Added Effective 1/1/2017
62321	INJECTION OF SUBSTANCE INTO MIDDLE OR UPPER SPINE CANAL USING IMAGING GUIDANCE		$89.07	$190.18					Added Effective 1/1/2017
62322	INJECTION OF SUBSTANCE INTO LOWER SPINE CANAL		$71.09	$120.47					Added Effective 1/1/2017
62323	INJECTION OF SUBSTANCE INTO LOWER SPINE CANAL USING IMAGING GUIDANCE		$81.33	$186.33					Added Effective 1/1/2017
62324	INSERTION OF TUBE AND INJECTION OF SUBSTANCE INTO MIDDLE OR UPPER SPINE CANAL		$76.12	$114.32					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62325	INSERTION OF TUBE AND INJECTION OF SUBSTANCE INTO MIDDLE OR UPPER SPINE CANAL USING IMAGING GUIDANCE		$87.57	$170.22					Added Effective 1/1/2017
62326	INSERTION OF TUBE AND INJECTION OF SUBSTANCE INTO LOWER SPINE CANAL		$74.47	$119.44					Added Effective 1/1/2017
62327	INSERTION OF TUBE AND INJECTION OF SUBSTANCE INTO LOWER SPINE CANAL USING IMAGING GUIDANCE		$79.29	$172.34					Added Effective 1/1/2017
62328	REMOVAL OF SPINAL FLUID WITH LOWER BACK SPINAL TAP FOR DIAGNOSTIC TEST USING IMAGING GUIDANCE		$72.50	$197.28					Added Effective 01/01/2020
62329	REMOVAL OF CEREBROSPINAL FLUID WITH LOWER BACK SPINAL TAP USING IMAGING GUIDANCE		$90.57	$244.41					Added Effective 01/01/2020
62350	INSERTION, REVISION, OR REPOSITIONING OF SPINAL CANAL TUBE FOR MEDICATION ADMINISTRATION		$301.79	$301.79					
62351	INSERTION, REVISION, OR REPOSITIONING OF SPINAL CANAL TUBE FOR MEDICATION ADMINISTRATION WITH REMOVAL OF SPINE BONE		$446.28	$446.28					
62355	REMOVAL OF IMPLANTED TUBE IN SPINAL CANAL		$250.98	$250.98					
62360	INSERTION OF SPINAL CANAL DRUG INFUSION DEVICE BENEATH SKIN		$96.75	$96.75					
62361	INSERTION OF SPINAL CANAL DRUG INFUSION PUMP		$231.69	$231.69					
62362	INSERTION OF PROGRAMMABLE SPINAL CANAL DRUG INFUSION PUMP		$303.50	$303.50					
62365	INSERTION OF PROGRAMMABLE SPINAL CANAL DRUG INFUSION PUMP		$249.56	$249.56					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
62367	ELECTRONIC ANALYSIS OF SPINAL CANAL DRUG INFUSION PUMP		$17.57	$30.58			$25.17		
62368	ELECTRONIC ANALYSIS AND REPROGRAMMING OF SPINAL CANAL DRUG INFUSION PUMP		$30.53	$39.43					
62369	ELECTRONIC ANALYSIS REPROGRAMMING AND REFILL OF SPINAL CANAL DRUG INFUSION PUMP		$28.46	$96.43					
62370	ELECTRONIC ANALYSIS REPROGRAMMING AND REFILL OF SPINAL CANAL DRUG INFUSION PUMP BY PHYSICIAN		$38.12	$101.44					
62380	RELEASE OF LOWER SPINAL CORD AND/OR NERVE ROOT USING ENDOSCOPE		$0.00	$0.00					Added Effective 1/1/2017
63001	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF UPPER SPINAL CORD OR NERVES, 1-2 SEGMENTS		$1,006.13	$1,006.13					
63003	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF MIDDLE SPINAL CORD OR NERVES, 1-2 SEGMENTS		$988.70	$988.70					
63005	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF LOWER SPINAL CORD OR NERVES, 1-2 SEGMENTS		$936.90	$936.90					
63011	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF SACRAL SPINAL CORD OR NERVES, 1-2 SEGMENTS		$639.40	$639.40					
63012	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF LOWER SPINAL CORD OR NERVES		$978.18	$978.18					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63015	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF UPPER SPINAL CORD OR NERVES, MORE THAN 2 SEGMENTS		$1,157.81	$1,157.81					
63016	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF MIDDLE SPINAL CORD OR NERVES, MORE THAN 2 SEGMENTS		$1,209.45	$1,209.45					
63017	PARTIAL REMOVAL OF SPINE BONE WITH EXPLORATION AND/OR RELEASE OF LOWER SPINAL CORD OR NERVES, MORE THAN 2 SEGMENTS		$1,106.51	$1,106.51					
63020	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF UPPER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, 1 INTERSPACE		$880.03	$880.03					
63030	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF LOWER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC		$839.37	$839.37					
63035	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF UPPER OR LOWER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, EACH ADDITIONAL INTERSPACE		$219.26	$219.26					
63040	PARTIAL REMOVAL OF SPINE BONE WITH RE-EXPLORATION, RELEASE OF UPPER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, 1 INTERSPACE		$1,222.71	$1,222.71					
63042	PARTIAL REMOVAL OF SPINE BONE WITH RE-EXPLORATION, RELEASE OF LOWER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, 1 INTERSPACE		$1,205.96	$1,205.96					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63043	PARTIAL REMOVAL OF SPINE BONE WITH RE-EXPLORATION, RELEASE OF UPPER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, EACH ADDITIONAL INTERSPACE		$283.74	$283.74					
63044	PARTIAL REMOVAL OF SPINE BONE WITH RE-EXPLORATION, RELEASE OF UPPER OR LOWER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, EACH ADDITIONAL INTERSPACE		$269.57	$269.57					
63045	PARTIAL REMOVAL OF SPINE BONE WITH RE-EXPLORATION, RELEASE OF UPPER OR LOWER SPINAL CORD OR NERVES AND/OR REMOVAL OF DISC, EACH ADDITIONAL INTERSPACE		$1,081.12	$1,081.12					
63046	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF MIDDLE SPINAL CORD AND/OR NERVES, 1 SEGMENT		$1,041.57	$1,041.57					
63047	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF LOWER SPINAL CORD AND/OR NERVES, 1 SEGMENT		$921.29	$921.29					
63048	PARTIAL REMOVAL OF SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, EACH ADDITIONAL SEGMENT		$232.54	$232.54					
63050	RECONSTRUCTION OF UPPER SPINE BONE WITH RELEASE OF UPPER SPINAL CORD, 2 OR MORE SEGMENTS		$1,037.95	$1,037.95					
63051	RECONSTRUCTION OF UPPER SPINE BONE AND POSTERIOR BONY ELEMENTS WITH RELEASE OF UPPER SPINAL CORD		$1,183.39	$1,183.39					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63052	PARTIAL REMOVAL OF BONE OF SINGLE SEGMENT OF SPINE IN LOWER BACK WITH RELEASE OF SPINAL CORD AND/OR NERVES DURING FUSION OF SPINE IN LOWER BACK		$211.38	$211.38					Added 1/1/2022
63053	PARTIAL REMOVAL OF BONE OF ADDITIONAL SEGMENT OF SPINE IN LOWER BACK WITH RELEASE OF SPINAL CORD AND/OR NERVES DURING FUSION OF SPINE IN LOWER BACK		$158.18	$158.18					Added 1/1/2022
63055	RELEASE OF MIDDLE SPINAL CORD AND/OR NERVES, SINGLE SEGMENT		$1,344.58	$1,344.58					
63056	RELEASE OF LOWER SPINAL CORD AND/OR NERVES, SINGLE SEGMENT		$1,237.91	$1,237.91					
63057	RELEASE OF MIDDLE OR LOWER SPINAL CORD AND/OR NERVES, SINGLE SEGMENT		$211.68	$211.68					
63064	RELEASE OF MIDDLE SPINAL CORD OR NERVES THROUGH RIB AND SPINE JOINT, SINGLE SEGMENT		$1,420.20	$1,420.20					
63066	RELEASE OF MIDDLE SPINAL CORD OR NERVES THROUGH RIB AND SPINE JOINT, EACH ADDITIONAL SEGMENT		$173.11	$173.11					
63075	REMOVAL OF UPPER SPINE DISC AND RELEASE OF SPINAL CORD AND/OR NERVES, SINGLE INTERSPACE		$1,129.38	$1,129.38					
63076	REMOVAL OF UPPER SPINE DISC AND RELEASE OF SPINAL CORD AND/OR NERVES, EACH ADDITIONAL INTERSPACE		$281.62	$281.62					
63077	REMOVAL OF MIDDLE SPINE DISC AND RELEASE OF SPINAL CORD AND/OR NERVES, SINGLE INTERSPACE		$1,165.29	$1,165.29					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63078	REMOVAL OF MIDDLE SPINE DISC AND RELEASE OF SPINAL CORD AND/OR NERVES, EACH ADDITIONAL INTERSPACE		$177.19	$177.19					
63081	REMOVAL OF UPPER SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, ANTERIOR APPROACH, SINGLE SEGMENT		$1,461.59	$1,461.59					
63082	REMOVAL OF UPPER SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, ANTERIOR APPROACH, EACH ADDITIONAL SEGMENT		$308.08	$308.08					
63085	REMOVAL OF MIDDLE SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, TRANSTHORACIC APPROACH, SINGLE SEGMENT		$1,584.26	$1,584.26					
63086	REMOVAL OF MIDDLE SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, TRANSTHORACIC APPROACH, EACH ADDITIONAL SEGMENT		$229.04	$229.04					
63087	REMOVAL OF MIDDLE OR LOWER SPINE BONE WITH RELEASE OF SPINAL CORD OR NERVES, COMBINED THORACOLUMBAR APPROACH, SINGLE SEGMENT		$1,684.28	$1,684.28					
63088	REMOVAL OF MIDDLE OR LOWER SPINE BONE WITH RELEASE OF SPINAL CORD OR NERVES, COMBINED THORACOLUMBAR APPROACH, EACH ADDITIONAL SEGMENT		$304.59	$304.59					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63090	REMOVAL OF MIDDLE, LOWER, OR SACRAL SPINE BONE WITH RELEASE OF SPINAL CORD OR NERVES, TRANSPERITONEAL OR RETROPERITONEAL APPROACH, SINGLE SEGMENT		$1,672.09	$1,672.09					
63091	REMOVAL OF MIDDLE, LOWER, OR SACRAL SPINE BONE WITH RELEASE OF SPINAL CORD OR NERVES, TRANSPERITONEAL OR RETROPERITONEAL APPROACH, EACH ADDITIONAL SEGMENT		$173.31	$173.31					
63101	REMOVAL OF MIDDLE SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, LATERAL EXTRA CAVITARY APPROACH, SINGLE SEGMENT		$1,565.55	$1,565.55					
63102	REMOVAL OF LOWER SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, LATERAL EXTRA CAVITARY APPROACH, SINGLE SEGMENT		$1,565.55	$1,565.55					
63103	REMOVAL OF MIDDLE OR LOWER SPINE BONE WITH RELEASE OF SPINAL CORD AND/OR NERVES, LATERAL EXTRA CAVITARY APPROACH, EACH ADDITIONAL SEGMENT		$183.56	$183.56					
63170	REMOVAL OF SPINE BONE WITH INCISION OF SPINAL CORD		$1,119.56	$1,119.56					
63172	REMOVAL OF SPINE BONE WITH DRAINAGE OF CYST OF SPINAL CORD INTO SPINAL CANAL		$1,134.34	$1,134.34					
63173	REMOVAL OF SPINE BONE WITH DRAINAGE OF CYST OF SPINAL CORD INTO LUNG OR ABDOMEN		$1,057.52	$1,057.52					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63185	REMOVAL OF SPINE BONE WITH SEVERING OF NERVE ROOTS, 1-2 SEGMENTS	Yes	$894.68	$894.68					
63190	REMOVAL OF SPINE BONE WITH SEVERING OF NERVE ROOTS, MORE THAN 2 SEGMENTS		$1,130.30	$1,130.30					
63191	REMOVAL OF SPINE BONE WITH SEVERING OF SPINAL ACCESSORY NERVE		$885.28	$885.28					
63197	PARTIAL REMOVAL OF SPINE BONE WITH INCISION OF BOTH MIDDLE SPINAL CORD TRACTS		$1,017.50	$1,017.50					
63200	REMOVAL OF LOWER SPINE BONE WITH RELEASE OF FRAYED SPINAL CORD		$897.68	$897.68					
63250	REMOVAL OF UPPER SPINE BONE AND ARTERY-VEIN MALFORMATION		$2,012.30	$2,012.30					
63251	REMOVAL OF MIDDLE SPINE BONE AND ARTERY-VEIN MALFORMATION		$1,855.19	$1,855.19					
63252	REMOVAL OF MIDDLE AND LOWER SPINE BONE AND ARTERY-VEIN MALFORMATION		$2,031.85	$2,031.85					
63265	REMOVAL OF UPPER SPINE BONE AND GROWTH OUTSIDE SPINE MEMBRANE		$1,273.16	$1,273.16					
63266	REMOVAL OF GROWTH OF MIDDLE SPINE BONE OUTSIDE SPINE MEMBRANE		$1,377.70	$1,377.70					
63267	REMOVAL OF GROWTH OF LOWER SPINE BONE OUTSIDE SPINE MEMBRANE		$1,165.55	$1,165.55					
63268	REMOVAL OF GROWTH OF SACRAL SPINE BONE OUTSIDE SPINE MEMBRANE		$903.42	$903.42					
63270	REMOVAL OF UPPER SPINE BONE AND GROWTH WITHIN SPINE MEMBRANE		$1,298.55	$1,298.55					
63271	REMOVAL OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE		$1,562.27	$1,562.27					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63272	REMOVAL OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE		$1,419.59	$1,419.59					
63273	REMOVAL OF GROWTH OF SACRAL SPINE BONE WITHIN SPINE MEMBRANE		$1,211.73	$1,211.73					
63275	REMOVAL OR BIOPSY OF GROWTH OF UPPER SPINE BONE OUTSIDE SPINE MEMBRANE		$1,516.89	$1,516.89					
63276	REMOVAL OR BIOPSY OF GROWTH OF MIDDLE SPINE BONE OUTSIDE SPINE MEMBRANE		$1,429.64	$1,429.64					
63277	REMOVAL OR BIOPSY OF GROWTH OF LOWER SPINE BONE OUTSIDE SPINE MEMBRANE		$1,312.78	$1,312.78					
63278	REMOVAL OR BIOPSY OF GROWTH OF SACRAL SPINE BONE OUTSIDE SPINE MEMBRANE		$1,295.56	$1,295.56					
63280	REMOVAL OR BIOPSY OF GROWTH OF UPPER SPINE BONE WITHIN SPINE MEMBRANE, EXTRAMEDULLARY		$1,658.47	$1,658.47					
63281	REMOVAL OR BIOPSY OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE, EXTRAMEDULLARY		$1,637.94	$1,637.94					
63282	REMOVAL OR BIOPSY OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE, EXTRAMEDULLARY		$1,486.98	$1,486.98					
63283	REMOVAL OR BIOPSY OF GROWTH OF SACRAL SPINE BONE WITHIN SPINE MEMBRANE		$1,278.66	$1,278.66					
63285	REMOVAL OR BIOPSY OF GROWTH OF UPPER SPINE BONE WITHIN SPINE MEMBRANE, INTRAMEDULLARY		$1,770.69	$1,770.69					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63286	REMOVAL OR BIOPSY OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE, INTRAMEDULLARY		$1,886.87	$1,886.87					
63287	REMOVAL OR BIOPSY OF GROWTH OF LOWER SPINE BONE WITHIN SPINE MEMBRANE, INTRAMEDULLARY		$1,810.23	$1,810.23					
63290	REMOVAL OR BIOPSY OF GROWTH OF SPINE BONE OUTSIDE AND WITHIN SPINE MEMBRANE		$1,869.67	$1,869.67					
63295	RECONSTRUCTION OF SPINE BONE FOLLOWING SPINAL PROCEDURE		$237.05	$237.05					
63300	REMOVAL OF GROWTH OF UPPER SPINE BONE OUTSIDE SPINE MEMBRANE		$1,180.74	$1,180.74					
63301	REMOVAL OF GROWTH OF MIDDLE SPINE BONE OUTSIDE SPINE MEMBRANE, TRANSTHORACIC APPROACH		$1,317.79	$1,317.79					
63302	REMOVAL OF GROWTH OF MIDDLE SPINE BONE OUTSIDE SPINE MEMBRANE, THORACOLUMBAR APPROACH		$1,397.49	$1,397.49					
63303	REMOVAL OF GROWTH OF LOWER OR SACRAL SPINE BONE OUTSIDE SPINE MEMBRANE, TRANSPERITONEAL OR RETROPERITONEAL APPROACH		$1,413.99	$1,413.99					
63304	REMOVAL OF GROWTH OF UPPER SPINE BONE WITHIN SPINE MEMBRANE		$1,456.63	$1,456.63					
63305	REMOVAL OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE, TRANSTHORACIC APPROACH		$1,557.63	$1,557.63					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63306	REMOVAL OF GROWTH OF MIDDLE SPINE BONE WITHIN SPINE MEMBRANE, THORACOLUMBAR APPROACH		$1,555.46	$1,555.46					
63307	REMOVAL OF GROWTH OF LOWER OR SACRAL SPINE BONE WITHIN SPINE MEMBRANE, PERITONEAL APPROACH		$1,590.69	$1,590.69					
63308	REMOVAL OF GROWTH OF SPINE BONE		$280.42	$280.42					
63600	COMPUTER-ASSISTED CREATION OF GROWTH OF SPINAL CORD		$734.71	$734.71					
63610	COMPUTER-ASSISTED STIMULATION OF SPINAL CORD		$486.74	$486.74					
63620	COMPUTER-ASSISTED RADIOSURGERY OF GROWTH OF SPINE, FIRST GROWTH		$601.71	$601.71					
63621	COMPUTER-ASSISTED RADIOSURGERY OF GROWTH OF SPINE, EACH ADDITIONAL GROWTH		$189.00	$189.00					
63650	COMPUTER-ASSISTED RADIOSURGERY OF GROWTH OF SPINE, EACH ADDITIONAL GROWTH		$433.25	$433.25					
63655	REMOVAL OF SPINE BONE FOR INSERTION OF NEUROSTIMULATOR ELECTRODE PLATE IN SPINE		$671.06	$671.06					
63661	INSERTION OF SPINAL NEUROSTIMULATOR ELECTRODE ARRAY USING FLUOROSCOPIC GUIDANCE		$227.64	$394.52					
63662	REMOVAL OF SPINAL NEUROSTIMULATOR ELECTRODE PLATE USING FLUOROSCOPIC GUIDANCE		$514.42	$514.42					
63663	REVISION OF SPINAL NEUROSTIMULATOR ELECTRODE ARRAY USING FLUOROSCOPIC GUIDANCE		$346.66	$580.39					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
63664	REVISION OF SPINAL NEUROSTIMULATOR ELECTRODE PLATE USING FLUOROSCOPIC GUIDANCE		$535.89	$535.89					
63685	INSERTION OR REPLACEMENT OF SPINAL NEUROSTIMULATOR GENERATOR OR RECEIVER		$418.53	$418.53					
63688	REMOVAL OR REVISION OF SPINAL NEUROSTIMULATOR GENERATOR OR RECEIVER		$334.20	$334.20					
63700	REPAIR OF SPINAL CORD DEFECT, 5.0 CM OR LESS		$816.72	$816.72					
63702	REPAIR OF SPINAL CORD DEFECT, MORE THAN 5.0 CM		$918.85	$918.85					
63704	REPAIR OF SPINA BIFIDA, 5.0 CM OR LESS		$1,020.70	$1,020.70					
63706	REPAIR OF SPINA BIFIDA, MORE THAN 5.0 CM		$1,174.04	$1,174.04					
63707	REPAIR OF CEREBROSPINAL FLUID LEAK		$707.90	$707.90					
63709	REPAIR OF CEREBROSPINAL FLUID LEAK WITH PARTIAL REMOVAL OF VERTEBRA		$924.45	$924.45					
63710	PLACEMENT OF SPINAL CORD GRAFT		$681.67	$681.67					
63740	CREATION OF CEREBROSPINAL FLUID SHUNT WITH PARTIAL REMOVAL OF VERTEBRA		$736.78	$736.78					
63741	CREATION OF CEREBROSPINAL FLUID SHUNT		$512.18	$512.18					
63744	REPLACEMENT, IRRIGATION, OR REVISION OF LOWER SPINAL CANAL SHUNT		$459.84	$459.84					
63746	REMOVAL OF LOWER SPINAL CANAL SHUNT		$338.62	$338.62					
64400	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO FACE NERVE		$39.54	$81.31					Updated Effective 01/01/2020
64405	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO UPPER NECK AND BACK OF HEAD NERVE		$42.97	$56.46					Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64408	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO VAGUS NERVE		$34.75	$53.43					Updated Effective 01/01/2020
64415	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO ARM NERVE BUNDLE (BRACHIAL PLEXUS)		$51.73	$87.79					Updated Effective 01/01/2020
64416	CONTINUOUS INFUSION OF ANESTHETIC AGENT AND/OR STEROID INTO ARM NERVE BUNDLE THROUGH CATHETER		$52.68	$52.68					Updated Effective 01/01/2020
64417	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO UPPER ARM AND SHOULDER NERVE (AXILLARY NERVE)		$49.40	$104.91					Updated Effective 01/01/2020
64418	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO SUPRASCAPULAR SHOULDER NERVE		$45.97	$66.20					Updated Effective 01/01/2020
64420	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO RIB NERVE		$47.99	$77.31					Updated Effective 01/01/2020
64421	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO MULTIPLE RIB NERVES FOR REGIONAL NERVE BLOCK		$20.50	$26.73					Updated Effective 01/01/2020
64425	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO LOWER ABDOMEN AND GROIN NERVE		$44.62	$85.87					Updated Effective 01/01/2020
64430	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO EXTERNAL GENITALS AND ANUS NERVE		$44.36	$69.78					Updated Effective 01/01/2020
64435	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO UTERUS NERVE		$34.98	$56.51					Updated Effective 01/01/2020
64445	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO LOWER BACK AND LEG NERVE (SCIATIC NERVE)		$43.35	$95.75					Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64446	CONTINUOUS INFUSION OF ANESTHETIC AGENT AND/OR STEROID INTO LOWER BACK AND LEG NERVE (SCIATIC NERVE) THROUGH CATHETER		$48.65	$48.65					Updated Effective 01/01/2020
64447	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO THIGH NERVE (FEMORAL NERVE)		$43.16	$69.10					Updated Effective 01/01/2020
64448	CONTINUOUS INFUSION OF ANESTHETIC AGENT AND/OR STEROID INTO THIGH NERVE (FEMORAL NERVE) THROUGH CATHETER		$50.37	$50.37					Updated Effective 01/01/2020
64449	INJECTION BY CONTINUOUS INFUSION OF ANESTHETIC AGENT INTO LOWER BACK NERVE BUNDLE		$50.42	$50.42					Updated Effective 01/01/2020
64450	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO OTHER NERVE OR BRANCH		$34.23	$58.88					Updated Effective 01/01/2020
64451	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO SPINE AND PELVIS NERVE USING IMAGING GUIDANCE		$64.16	$160.15					Added Effective 01/01/2020
64454	INJECTION OF ANESTHETIC AGENT AND/OR STEROID INTO KNEE NERVE BRANCH USING IMAGING GUIDANCE		$65.98	$161.70					Added Effective 01/01/2020
64455	INJECTION OF ANESTHETIC AND/OR STEROID DRUG INTO FOOT NERVE		$40.35	$32.04					
64461	INJECTION OF ANESTHETIC AGENT INTO THORACIC VERTEBRA USING IMAGING GUIDANCE, SINGLE SITE		$70.96	$116.24					Added Effective 1/1/2016
64462	INJECTION OF ANESTHETIC AGENT INTO THORACIC VERTEBRA USING IMAGING GUIDANCE, ADDITIONAL SITES		$44.57	$66.04					Added Effective 1/1/2016
64463	INJECTION OF ANESTHETIC AGENT THROUGH TUBE INTO THORACIC VERTEBRA USING IMAGING GUIDANCE		$69.94	$127.89					Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64466	UNILATERAL THORACIC FASCIAL PLANE BLOCK BY INJECTION(S)		$55.16	$100.44					
64467	UNILATERAL THORACIC FASCIAL PLANE BLOCK BY CONTINUOUS INFUSION(S)		$63.57	$183.01					
64468	BILATERAL THORACIC FASCIAL PLANE BLOCK BY INJECTION(S)		$61.32	$115.70					
64469	BILATERAL THORACIC FASCIAL PLANE BLOCK BY INFUSION(S)		$66.66	$277.17					
64473	UNILATERAL LOWER EXTREMITY FASCIAL PLANE BLOCK BY INJECTION(S)		$49.27	$94.55					
64474	UNILATERAL LOWER EXTREMITY FASCIAL PLANE BLOCK BY INFUSION(S)		$61.32	$180.75					
64479	INJECTION OF ANESTHETIC AND/OR STEROID DRUG INTO UPPER OR MIDDLE SPINE NERVE ROOT USING IMAGING GUIDANCE, SINGLE LEVEL		$162.85	$162.85					
64480	INJECTION OF ANESTHETIC AND/OR STEROID DRUG INTO UPPER OR MIDDLE SPINE NERVE ROOT USING IMAGING GUIDANCE, EACH ADDITIONAL LEVEL		$145.49	$145.49					
64483	INJECTION OF ANESTHETIC AND/OR STEROID DRUG INTO SACRAL SPINE NERVE ROOT USING IMAGING GUIDANCE, SINGLE LEVEL		$149.91	$149.91					
64484	INJECTION OF ANESTHETIC AND/OR STEROID DRUG INTO SACRAL SPINE NERVE ROOT USING IMAGING GUIDANCE, EACH ADDITIONAL LEVEL		$137.14	$137.14					
64486	INJECTION OF LOCAL ANESTHETIC FOR ABDOMINAL WALL PAIN CONTROL ON SIDE USING IMAGING GUIDANCE		$51.42	$95.92					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64487	CONTINUOUS INFUSION OF LOCAL ANESTHETIC FOR ABDOMINAL WALL PAIN CONTROL ON SIDE USING IMAGING GUIDANCE		$59.18	$116.88					Added effective 1/1/2015
64488	INJECTION OF LOCAL ANESTHETIC FOR ABDOMINAL WALL PAIN CONTROL ON BOTH SIDES USING IMAGING GUIDANCE		$64.53	$118.09					Added effective 1/1/2015
64489	CONTINUOUS INFUSION OF LOCAL ANESTHETIC FOR ABDOMINAL WALL PAIN CONTROL ON BOTH SIDES USING IMAGING GUIDANCE		$72.47	$162.50					Added effective 1/1/2015
64490	INJECTION OF UPPER OR MIDDLE SPINE FACET JOINT USING IMAGING GUIDANCE, SINGLE LEVEL		$88.94	$133.62					
64491	INJECTION OF UPPER OR MIDDLE SPINE FACET JOINT USING IMAGING GUIDANCE, SECOND LEVEL		$46.83	$68.01					
64492	INJECTION OF UPPER OR MIDDLE SPINE FACET JOINT USING IMAGING GUIDANCE, THIRD AND ANY ADDITIONAL LEVEL		$47.59	$68.77					
64493	INJECTION OF LOWER OR SACRAL SPINE FACET JOINT USING IMAGING GUIDANCE, SINGLE LEVEL		$68.79	$119.31					
64494	INJECTION OF LOWER OR SACRAL SPINE FACET JOINT USING IMAGING GUIDANCE, SECOND LEVEL		$40.06	$61.74					
64495	INJECTION OF LOWER OR SACRAL SPINE FACET JOINT USING IMAGING GUIDANCE, THIRD AND ANY ADDITIONAL LEVEL		$40.82	$62.51					
64505	INJECTION OF ANESTHETIC AGENT, TRIGEMINAL NERVE BUNDLE		$49.68	$57.99					
64510	INJECTION OF ANESTHETIC AGENT INTO SYMPATHETIC NERVE BUNDLE		$59.22	$59.22					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64517	INJECTION OF ANESTHETIC AGENT INTO SACRAL NERVE BUNDLE		$89.27	$137.32					
64520	INJECTION OF ANESTHETIC AGENT INTO MIDDLE OR LOWER SPINE SYMPATHETIC NERVE		$63.06	$63.06					
64530	INJECTION OF ANESTHETIC AGENT INTO ABDOMINAL SYMPATHETIC NERVE BUNDLE		$84.55	$84.55					
64553	INSERTION OF SACRAL NERVE NEUROSTIMULATOR ELECTRODE ARRAY		$82.43	$96.10					
64555	INSERTION OF PERIPHERAL NERVE NEUROSTIMULATOR ELECTRODE THROUGH SKIN		$73.21	$78.84					
64561	INSERTION OF SACRAL NERVE NEUROSTIMULATOR ELECTRODE ARRAY		$295.59	$591.15					
64566	INSERTION OF LOWER LEG NEUROSTIMULATOR ELECTRODE		$24.89	$98.12					Added effective 6/1/21
64568	INSERTION OF CRANIAL NERVE NEUROSTIMULATOR ELECTRODE AND GENERATOR		$560.47	$560.47					
64569	REVISION OF CRANIAL NERVE NEUROSTIMULATOR ELECTRODES		$553.35	$553.35					
64570	REMOVAL OF CRANIAL NERVE NEUROSTIMULATOR ELECTRODES		$487.18	$487.18					
64575	INSERTION OF PERIPHERAL NERVE NEUROSTIMULATOR ELECTRODE		$217.36	$217.36					
64580	INSERTION OF MUSCLE NEUROSTIMULATOR ELECTRODES		$201.46	$201.46					
64581	INSERTION OF SACRAL NERVE NEUROSTIMULATOR ELECTRODE		$571.23	$571.23					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64582	INSERTION OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ELECTRODE AND GENERATOR AND BREATHING SENSOR ELECTRODE		$712.20	$712.20					Added 1/1/2022
64583	REVISION OR REPLACEMENT OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ELECTRODE AND BREATHING SENSOR ELECTRODE WITH CONNECTION TO EXISTING GENERATOR		$656.39	$656.39					Added 1/1/2022
64584	REMOVAL OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ELECTRODE AND GENERATOR AND BREATHING SENSOR ELECTRODE		$552.31	$552.31					Added 1/1/2022
64585	REVISION OF PERIPHERAL NEUROSTIMULATOR ELECTRODES		$87.18	$87.18					
64590	INSERTION OR REPLACEMENT OF PERIPHERAL, SACRAL, OR GASTRIC NEUROSTIMULATOR GENERATOR OR RECEIVER		$126.81	$126.81					
64595	REMOVAL OR REVISION OF A PERIPHERAL, SACRAL, OR GASTRIC NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER		$84.44	$84.44					
64596	INSERTION OR REPLACEMENT OF A PERIPHERAL INTEGRATED NEUROSTIMULATOR INITIAL ELECTRODE ARRAY		$0.00	$0.00					
64597	INSERTION OR REPLACEMENT OF A PERIPHERAL INTEGRATED NEUROSTIMULATOR EACH ADDITIONAL ELECTRODE ARRAY		$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64598	REVISION OR REMOVAL OF A ELECTRODE ARRAY WITH AN INTEGRATED NEUROSTIMULATOR		$0.00	$0.00					
64600	DESTRUCTION OF FIRST DIVISION OF FACE NERVE BRANCH		$149.23	$149.23					
64605	DESTRUCTION OF SECOND AND THIRD DIVISION OF FACE NERVE BRANCH		$213.01	$213.01					
64610	DESTRUCTION OF FACE NERVE BRANCH UNDER X-RAY MONITORING		$436.16	$436.16					
64611	INJECTION OF CHEMICAL FOR PARALYSIS OF SALIVARY GLANDS ON BOTH SIDES OF MOUTH		$79.22	$87.53					
64612	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON SIDE OF FACE		$79.62	$99.07					
64615	INJECTION OF CHEMICAL FOR PARALYSIS OF FACIAL AND NECK NERVE MUSCLES ON BOTH SIDES OF FACE		$101.83	$112.68					
64616	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON SIDE OF NECK EXCLUDING VOICE BOX		$83.99	$94.60					
64617	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON SIDE OF VOICE BOX		$90.89	$146.26					
64620	INJECTION OF AGENT TO DESTROY RIB NERVE		$113.31	$113.31					Added effective date 7/1/1996
64624	DESTRUCTION OF NERVE BRANCHES OF KNEE USING IMAGING GUIDANCE		$117.57	$307.98					Added Effective 01/01/2020
64625	DESTRUCTION OF NERVES SUPPLYING JOINT BETWEEN SPINE AND PELVIS USING IMAGING GUIDANCE		$155.64	$377.45					Added Effective 01/01/2020
64628	HEAT DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE IN BONES OF SPINE IN LOWER BACK, FIRST TWO BONES		$375.88	$375.88					Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64629	HEAT DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE IN ADDITIONAL BONE OF SPINE IN LOWER BACK		$177.53	$177.53					Added 1/1/2022
64630	DESTRUCTION OF EXTERNAL GENITAL NERVE		$142.47	$142.47					
64632	DESTRUCTION OF FOOT NERVE		$55.78	$65.27					
64633	DESTRUCTION OF UPPER OR MIDDLE SPINAL FACET JOINT NERVES USING IMAGING GUIDANCE, SINGLE FACET JOINT		$189.06	$353.68					
64634	DESTRUCTION OF UPPER OR MIDDLE SPINAL FACET JOINT NERVES USING IMAGING GUIDANCE, EACH ADDITIONAL FACET JOINT		$57.02	$160.91					
64635	DESTRUCTION OF LOWER OR SACRAL SPINAL FACET JOINT NERVES USING IMAGING GUIDANCE, SINGLE FACET JOINT		$185.30	$347.59					
64636	DESTRUCTION OF LOWER OR SACRAL SPINAL FACET JOINT NERVES USING IMAGING GUIDANCE, EACH ADDITIONAL FACET JOINT		$49.64	$144.74					
64640	DESTRUCTION OF PERIPHERAL NERVE OR BRANCH		$99.93	$99.93					
64642	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON ARM OR LEG, 1-4 MUSCLES, FIRST EXTREMITY		$84.53	$107.56					
64643	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON ARM OR LEG, 1-4 MUSCLES, EACH ADDITIONAL EXTREMITY		$57.03	$71.26					
64644	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON ARM OR LEG, 5 OR MORE MUSCLES, FIRST EXTREMITY		$92.37	$122.64					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64645	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON ARM OR LEG, 5 OR MORE MUSCLES, EACH ADDITIONAL EXTREMITY		$65.32	$86.80					
64646	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON TRUNK, 1-5 MUSCLES		$91.51	$115.83					Added Effective 1/1/2014
64647	INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLES ON TRUNK, 6 OR MORE MUSCLES		$105.74	$134.20					Added Effective 1/1/2014
64650	INJECTION OF CHEMICAL FOR PARALYSIS OF UNDERARM SWEAT GLANDS		$29.98	$44.52					Added Effective 1/1/2006
64653	INJECTION OF CHEMICAL FOR PARALYSIS OF SWEAT GLANDS		$37.88	$51.66					Added Effective 1/1/2006
64680	INJECTION OF AGENT TO DESTROY ABDOMINAL NERVE BUNDLE		$126.95	$126.95					Added Effective 1/1/1990
64681	INJECTION OF AGENT TO DESTROY PRESACRAL NERVE BUNDLE		$160.99	$332.63					Added Effective 10/1/2003
64702	REVISE FINGER/TOE NERVE RELEASE OF FINGER NERVE		$248.16	$248.16					
64704	RELEASE OF HAND OR FOOT NERVE		$292.57	$292.57					
64708	RELEASE OF ARM OR LEG NERVE		$394.24	$394.24					
64712	RELEASE OF SCIATIC NERVE		$498.00	$498.00					
64713	RELEASE OF MAJOR ARM OR LEG NERVE		$597.33	$597.33					
64714	RELEASE OF UPPER LEG NERVE		$488.30	$488.30					
64716	RELEASE AND/OR RELOCATION OF CRANIAL NERVE		$316.02	$316.02					
64718	RELEASE AND/OR RELOCATION OF ELBOW NERVE		$368.50	$368.50					
64719	RELEASE AND/OR RELOCATION OF WRIST NERVE		$291.92	$291.92					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64721	RELEASE AND/OR RELOCATION OF HAND NERVE		$284.77	$284.77					
64722	RELEASE OF UNSPECIFIED NERVE		$311.00	$311.00					
64726	RELEASE OF SOLE OF FOOT NERVE		$137.51	$137.51					
64727	RELEASE OF NERVE USING OPERATING MICROSCOPE		$191.23	$191.23					
64732	INCISION OR REMOVAL OF FOREHEAD, SCALP AND UPPER EYELID NERVE		$254.87	$254.87					
64734	INCISION OR REMOVAL OF LOWER EYELID, UPPER LIP, AND MOUTH NERVE		$275.50	$275.50					
64736	INCISION OR REMOVAL OF CHIN, LOWER LIP, AND JAW NERVE		$258.94	$258.94					
64738	INCISION OR REMOVAL OF TEETH AND JAW BONE NERVE		$309.85	$309.85					
64740	INCISION AND REMOVAL OF TONGUE NERVE		$308.94	$308.94					
64742	INCISION OR REMOVAL OF FACE NERVE		$318.22	$318.22					
64744	INCISION OR REMOVAL OF SCALP AND OVER EAR NERVE		$333.25	$333.25					
64746	INCISION OR REMOVAL OF ABDOMEN, GALLBLADDER, AND LIVER NERVE		$284.74	$284.74					
64755	INCISION OR REMOVAL OF STOMACH NERVE		$720.38	$720.38					
64760	INCISION OR REMOVAL OF ABDOMEN NERVE		$406.72	$406.72					
64763	INCISION OR REMOVAL OF OUTSIDE PELVIC AND THIGH NERVE		$348.29	$348.29					
64766	INCISION OR REMOVAL OF INSIDE PELVIC AND THIGH NERVE		$451.91	$451.91					
64771	INCISION OR REMOVAL OF CRANIAL NERVE		$395.05	$395.05					
64772	INCISION OR REMOVAL OF SPINAL NERVE		$412.42	$412.42					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64774	REMOVAL OF GROWTH OF SKIN NERVE		$227.04	$227.04					
64776	REMOVAL OF GROWTH OF FINGER OR TOE NERVE, SAME DIGIT		$227.14	$227.14					
64778	REMOVAL OF GROWTH OF FINGER OR TOE NERVE, EACH ADDITIONAL DIGIT		$174.93	$174.93					
64782	REMOVAL OF GROWTH OF NERVE OF HAND OR FOOT NERVE, FIRST NERVE		$307.73	$307.73					
64783	REMOVAL OF GROWTH OF NERVE OF HAND OR FOOT NERVE, EACH ADDITIONAL NERVE		$208.02	$208.02					
64784	REMOVAL OF GROWTH OF PERIPHERAL NERVE		$452.19	$452.19					
64786	REMOVAL OR GROWTH OF SCIATIC NERVE		$834.65	$834.65					
64787	IMPLANTATION OF NERVE END INTO BONE OR MUSCLE		$233.83	$233.83					
64788	REMOVAL OF GROWTH OF SKIN NERVE OR NERVE LINING		$235.69	$235.69					
64790	REMOVAL OF GROWTH OF MAJOR PERIPHERAL NERVE OR NERVE LINING		$541.66	$541.66					
64792	REMOVAL OF GROWTH OF MAJOR PERIPHERAL NERVE OR NERVE LINING, EXTENSIVE INCLUDING GROWTH		$704.01	$704.01					
64795	BIOPSY OF NERVE		$161.64	$161.64					
64802	REMOVAL OF UPPER SPINE SYMPATHETIC NERVES		$412.77	$412.77					
64804	REMOVAL OF UPPER AND MIDDLE SPINE SYMPATHETIC NERVES		$802.34	$802.34					
64809	REMOVAL OF MIDDLE AND LOWER SPINE SYMPATHETIC NERVES		$707.85	$707.85					
64818	REMOVAL OF LOWER SPINE SYMPATHETIC NERVES		$548.07	$548.07					
64820	REMOVAL OF FINGER OR TOE SYMPATHETIC NERVE		$522.94	$522.94					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64821	REMOVAL OF LOWER ARM RADIAL ARTERY SYMPATHETIC NERVE		$459.57	$459.57					
64822	REMOVAL OF LOWER ARM ULNAR ARTERY SYMPATHETIC NERVE		$459.57	$459.57					
64823	REMOVAL OF HAND SYMPATHETIC NERVE		$531.34	$531.34					
64831	SUTURE OF HAND OR FOOT DIGITAL NERVE, FIRST DIGITAL NERVE		$363.66	$363.66					
64832	SUTURE OF HAND OR FOOT DIGITAL NERVE, EACH ADDITIONAL DIGITAL NERVE		$209.47	$209.47					
64834	SUTURE OF HAND OR FOOT COMMON SENSORY NERVE		$394.17	$394.17					
64835	SUTURE OF HAND MEDIAN MOTOR NERVE		$492.11	$492.11					
64836	SUTURE OF FOREARM AND HAND NERVE		$516.58	$516.58					
64837	SUTURE OF HAND OR FOOT NERVE, EACH ADDITIONAL NERVE		$323.70	$323.70					
64840	SUTURE OF FORELEG NERVE TO SOLE OF FOOT		$655.22	$655.22					
64856	SUTURE AND RELOCATION OF ARM OR LEG PERIPHERAL NERVE		$631.58	$631.58					
64857	SUTURE OF ARM OR LEG PERIPHERAL NERVE		$687.12	$687.12					
64858	SUTURE OF SCIATIC NERVE		$798.55	$798.55					
64859	SUTURE OF PERIPHERAL NERVE		$232.97	$232.97					
64861	SUTURE OF ARM NERVE BUNDLE		$919.91	$919.91					
64862	SUTURE OF LOWER SPINE NERVE BUNDLE		$1,149.69	$1,149.69					
64864	SUTURE OF FACE NERVE OUTSIDE SKULL		$587.31	$587.31					
64865	SUTURE OF FACE NERVE AT TEMPLE		$798.78	$798.78					
64866	CONNECTION OF FACE-SPINAL NERVES TO RESTORE FUNCTION TO THE FACE		$783.24	$783.24					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64868	CONNECTION OF FACE-HYPOGLOSSAL NERVES TO RESTORE FUNCTION TO THE FACE		$727.89	$727.89					
64872	DELAYED SUTURE NERVE REPAIR		$104.06	$104.06					
64874	SUTURE AND RELOCATION OF NERVE TO RESTORE FUNCTION		$156.10	$156.10					
64876	SUTURE OF NERVE WITH SHORTENING OF ARM OR LEG BONE		$176.83	$176.83					
64885	GRAFT OF HEAD OR NECK NERVE, 4.0 CM OR LESS		$867.25	$867.25					
64886	GRAFT OF HEAD OR NECK NERVE, MORE THAN 4.0 CM		$1,034.23	$1,034.23					
64890	GRAFT OF HAND OR FOOT NERVE , 4.0 CM OR LESS		$801.43	$801.43					
64891	GRAFT OF HAND OR FOOT NERVE, MORE THAN 4.0 CM		$767.84	$767.84					
64892	GRAFT OF ARM OR LEG NERVE, 4.0 CM OR LESS		$743.59	$743.59					
64893	GRAFT OF ARM OR LEG NERVE, MORE THAN 4.0 CM		$857.50	$857.50					
64895	GRAFT OF MULTIPLE HAND OR FOOT NERVES, 4.0 CM OR LESS		$954.57	$954.57					
64896	GRAFT OF MULTIPLE HAND OR FOOT NERVES, MORE THAN 4.0 CM		$1,085.03	$1,085.03					
64897	GRAFT OF MULTIPLE ARM OR LEG NERVES, 4.0 CM OR LESS		$908.77	$908.77					
64898	GRAFT OF MULTIPLE ARM OR LEG NERVES, MORE THAN 4.0 CM		$982.97	$982.97					
64901	GRAFT OF SINGLE STRAND OF NERVE, EACH ADDITIONAL NERVE		$593.54	$593.54					
64902	GRAFT OF MULTIPLE NERVE SECTIONS		$690.91	$690.91					
64905	TRANSFER OF NERVE TO INJURED NERVE, STAGE 1 OF 2		$657.06	$657.06					
64907	TRANSFER OF NERVE TO INJURED NERVE, STAGE 2 OF 2		$936.43	$936.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
64910	REPAIR OF NERVE WITH GRAFT		$499.14	$499.14					
64911	REPAIR OF NERVE USING VEIN GRAFT		$609.09	$609.09					
64912	REPAIR OF NERVE USING NERVE GRAFT, FIRST STRAND		$614.88	$614.88					Added Effective 1/1/2018
64913	REPAIR OF NERVE USING NERVE GRAFT, EACH ADDITIONAL STRAND		$126.07	$126.07					Added Effective 1/1/2018
64999	OTHER PROCEDURE ON NERVOUS SYSTEM	Yes	$2,800.00	$3,640.00					
65091	REMOVAL OF EYE CONTENTS		$399.41	$399.41					
65093	REMOVAL OF EYE CONTENTS WITH INSERTION OF IMPLANT		$424.57	$424.57					
65101	REMOVAL OF EYEBALL		$426.70	$426.70					
65103	REMOVAL OF EYEBALL WITH INSERTION OF IMPLANT		$461.78	$461.78					
65105	REMOVAL OF EYEBALL WITH INSERTION OF IMPLANT ATTACHED TO MUSCLES		$511.32	$511.32					
65110	REMOVAL OF EYE CONTENTS AND EYE SOCKET BONE		$843.33	$843.33					
65112	REMOVAL OF EYE CONTENTS AND THERAPEUTIC REMOVAL OF EYE SOCKET BONE		$805.70	$805.70					
65114	REMOVAL OF EYE CONTENTS WITH MUSCLE OR FLAP GRAFT		$877.46	$877.46					
65125	PLACEMENT OR REPLACEMENT OF PEG IN EYE IMPLANT		$156.56	$156.56					
65130	INSERTION OF EYE IMPLANT IN SCLERAL SHELL AFTER EVISCERATION		$441.96	$441.96					
65135	INSERTION OF EYE IMPLANT AFTER REMOVAL OF EYE		$357.23	$357.23					
65140	INSERTION OF EYE IMPLANT ATTACHED TO MUSCLES AFTER REMOVAL OF EYE		$393.75	$393.75					
65150	REINSERTION OF EYE IMPLANT		$393.71	$393.71					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
65155	REINSERTION OF EYE IMPLANT USING FOREIGN MATERIAL AND/OR ATTACHMENT TO MUSCLES FOR REINFORCEMENT		$544.41	$544.41					
65175	REMOVAL OF EYE IMPLANT		$384.62	$384.62					
65205	REMOVAL OF FOREIGN BODY FROM EXTERNAL EYE (CONJUNCTIVA)		$28.34	$33.30					
65210	REMOVAL OF FOREIGN BODY FROM EXTERNAL EYE (CONJUNCTIVA OR SCLERA)		$31.55	$37.72					
65220	REMOVAL OF FOREIGN BODY IN CORNEA		$28.78	$35.75					
65222	REMOVAL OF FOREIGN BODY IN CORNEA USING SLIT LAMP		$35.66	$43.31					
65235	REMOVAL OF FOREIGN BODY IN EYE OR LENS		$366.69	$366.69					
65260	REMOVAL OF FOREIGN BODY IN EYE WITH A MAGNET		$546.11	$546.11					
65265	REMOVAL OF FOREIGN BODY IN EYE		$634.98	$634.98					
65270	REPAIR OF LACERATED CONJUNCTIVA		$87.37	$87.37					
65272	REPAIR OF LACERATED CONJUNCTIVA USING FLAP OR GRAFT		$151.17	$151.17					
65273	REPAIR OF LACERATED CONJUNCTIVA USING FLAP OR GRAFT WITH HOSPITALIZATION		$205.62	$205.62					
65275	REMOVAL OR RELOCATION OF CORNEAL CONJUNCTIVA		$166.57	$166.57					
65280	REPAIR OF PERFORATING LACERATION OF CORNEA AND/OR SCLERA		$464.06	$464.06					
65285	REPAIR OF PERFORATING LACERATION OF CORNEA AND/OR SCLERA WITH REPOSITION OR REMOVAL OF UVEAL TISSUE		$698.27	$698.27					
65286	REPAIR OF LACERATED CORNEA AND/OR SCLERA USING TISSUE GLUE		$221.73	$285.96					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
65290	REPAIR OF WOUND OF EYE MUSCLE OR TENDON		$323.76	$323.76					
65400	REMOVAL OF GROWTH OF CORNEA		$346.39	$346.39					
65410	BIOPSY OF CORNEA		$88.45	$88.45					
65420	REMOVAL OR RELOCATION OF CORNEAL CONJUNCTIVA		$236.88	$236.88					
65426	REMOVAL OR RELOCATION OF CORNEAL CONJUNCTIVA WITH GRAFT		$330.96	$330.96					
65430	SCRAPING OF CORNEA FOR DIAGNOSIS		$33.50	$40.74					
65435	REMOVAL OF OUTER LAYER OF CORNEA		$38.29	$48.62					
65436	REMOVAL OF OUTER LAYER OF CORNEA WITH APPLICATION OF CHELATING AGENT		$139.54	$160.06					
65450	DESTRUCTION OF GROWTH OF CORNEA		$182.19	$182.19					
65600	MULTIPLE PUNCTURES OF CORNEA		$130.97	$166.11					
65710	TRANSPLANTATION OF TISSUE FROM 1 CORNEA TO OTHER CORNEA		$640.47	$640.47					
65730	PENETRATING TRANSPLANTATION OF TISSUE FROM 1 CORNEA TO OTHER CORNEA (EXCEPT IN APHAKIA OR PSEUDOPHAKIA)		$784.56	$784.56					
65750	PENETRATING TRANSPLANTATION OF TISSUE FROM 1 CORNEA TO OTHER CORNEA (IN APHAKIA)		$833.29	$833.29					
65755	PENETRATING TRANSPLANTATION OF TISSUE FROM 1 CORNEA TO OTHER CORNEA (IN PSEUDOPHAKIA)		$834.75	$834.75					
65756	TRANSPLANTATION OF OUTER LAYER OF CORNEAL TISSUE		$815.33	$815.33					
65757	PREPARATION OF CORNEAL TISSUE FOR TRANSPLANT		$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
65760	REMOVAL AND RESHAPING OF CORNEAL TISSUE	Yes	$964.08	$964.08					
65765	TRANSPLANTATION OF DONOR CORNEA	Yes	$992.66	$992.66					
65767	TRANSPLANTATION OF DONOR CORNEAL TISSUE		$646.76	$646.76					
65770	INSERTION OF CORNEA PROSTHESIS		$873.59	$873.59					
65771	INCISION IN CORNEA TO CORRECT REFRACTION ERROR		$367.58	$367.58					
65772	INCISION OF CORNEA TO CORRECT ASTIGMATISM		$195.28	$264.48					
65775	REMOVAL OF CORNEAL TISSUE TO CORRECT ASTIGMATISM		$358.46	$358.46					
65778	PLACEMENT OF AMNIOTIC MEMBRANE ON EYE SURFACE FOR WOUND HEALING		$65.57	$1,095.71					
65779	PLACEMENT OF AMNIOTIC MEMBRANE ON EYE SURFACE WITH SUTURES FOR WOUND HEALING		$253.68	$991.27					
65780	TRANSPLANTATION OF FETAL SAC TISSUE TO CORNEA		$560.32	$560.32					
65781	TRANSPLANTATION OF STEM CELLS TO CORNEA		$860.34	$860.34					
65782	TRANSPLANTATION OF STEM CELLS FROM 1 CORNEA TO OTHER CORNEA		$741.13	$741.13					
65785	TRANSPLANTATION OF STEM CELLS FROM 1 CORNEA TO OTHER CORNEA	Yes	$304.64	$1,569.54					Added Effective 1/1/2016
65800	REMOVAL OF EYE FLUID		$104.61	$104.61					
65810	COMPLEX REMOVAL OF EYE FLUID		$287.57	$287.57					
65815	REMOVAL OF BLOOD FROM EYE		$265.64	$265.64					
65820	INCISION TO IMPROVE EYE FLUID FLOW		$491.28	$491.28					
65850	INSERTION OF EYE FLUID DRAINAGE TUBE		$664.97	$664.97					
65855	LASER REPAIR TO IMPROVE EYE FLUID FLOW		$229.68	$310.28					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
65860	LASER REMOVAL OF SCAR TISSUE OF EYE		$165.68	$223.48					
65865	REMOVAL OF SCAR TISSUE IN EYE (GONIOSYNECHIAE)		$354.88	$354.88					
65870	REMOVAL OF SCAR TISSUE IN EYE (ANTERIOR SYNECHIAE)		$338.42	$338.42					
65875	REMOVAL OF SCAR TISSUE IN EYE (POSTERIOR SYNECHIAE)		$356.87	$356.87					
65880	REMOVAL OF CORNEAL SCAR TISSUE		$389.03	$389.03					
65900	REMOVAL OF OUTER LINING OF CORNEA		$540.57	$540.57					
65920	REMOVAL OF IMPLANTED LENS OF EYE		$466.74	$466.74					
65930	REMOVAL OF BLOOD CLOT OF EYE		$422.24	$422.24					
66020	INJECTION OF AIR OR LIQUID INTO EYE		$101.70	$101.70					
66130	REMOVAL OF GROWTH OF SCLERA		$369.67	$369.67					
66150	PARTIAL REMOVAL OF IRIS AND CREATION OF DRAINAGE HOLE FOR TREATMENT OF GLAUCOMA		$498.06	$498.06					
66155	PARTIAL REMOVAL OF IRIS USING HEAT FOR TREATMENT OF GLAUCOMA		$488.32	$488.32					
66160	REMOVAL OF SCLERA AND IRIS AND CREATION OF EYE FLUID DRAINAGE TRACT FOR TREATMENT OF GLAUCOMA		$580.12	$580.12					
66170	CREATION OF EYE FLUID DRAINAGE TRACT FOR TREATMENT OF GLAUCOMA		$673.07	$673.07					
66172	CREATION OF EYE FLUID DRAINAGE TRACT FOR TREATMENT OF GLAUCOMA WITH PREVIOUS SCARRING		$742.32	$742.32					
66174	DILATION OF FLUID OUTFLOW DRAINAGE WITHIN EYE		$857.76	$857.76					
66175	DILATION OF FLUID OUTFLOW DRAINAGE WITHIN EYE WITH INSERTION OF DEVICE TO MAINTAIN OPEN CHANNEL		$972.58	$972.58					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
66179	CREATION OF SHUNT TO IMPROVE EYE FLUID FLOW		$839.42	$839.42					Added effective 1/1/2015
66180	CREATION OF SHUNT TO IMPROVE EYE FLUID FLOW USING TISSUE GRAFT		$829.35	$829.35					
66183	REVISION OF EYE FLUID DRAINAGE SHUNT		$830.74	$830.74					
66184	REVISION OF EYE FLUID DRAINAGE SHUNT		$608.89	$608.89					Added effective 1/1/2015
66185	REVISION OF EYE FLUID DRAINAGE SHUNT WITH GRAFT		$503.94	$503.94					
66225	REPAIR OF PROTRUSION OF INNER TISSUE THROUGH EYEBALL WITH GRAFT		$692.83	$692.83					
66250	REVISION OR REPAIR OF OPERATIVE WOUND OF EYE		$367.55	$367.55					
66500	INCISION OF IRIS TO IMPROVE EYE FLUID FLOW		$234.45	$234.45					
66505	INCISION AND DRAINAGE OF EYE FLUID ACCUMULATION OF IRIS		$207.16	$207.16					
66600	REMOVAL OF IRIS AND GROWTH		$504.94	$504.94					
66605	REMOVAL OF IRIS AND EYELID BORDER TO IMPROVE EYE FLUID FLOW WITH PARTIAL REMOVAL OF CILIARY MUSCLE		$696.75	$696.75					
66625	REMOVAL OF MARGIN OF IRIS TO IMPROVE EYE FLUID FLOW		$326.70	$326.70					
66630	REMOVAL OF SECTION OF IRIS TO IMPROVE EYE FLUID FLOW		$380.71	$380.71					
66635	PARTIAL REMOVAL OF IRIS AND EYELID BORDER TO IMPROVE EYE FLUID FLOW		$387.81	$387.81					
66680	REPAIR OF IRIS AND LENS		$331.53	$331.53					
66682	SUTURE OF IRIS AND LENS		$377.79	$377.79					
66683	IMPLANTATION OF IRIS PROSTHESIS		$629.85	$629.85					
66710	DESTRUCTION OF LENS TISSUE USING LASER		$299.85	$299.85					
66711	DESTRUCTION OF LENS TISSUE USING LASER		$386.94	$386.94					Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
66720	DESTRUCTION OF TISSUE ENCIRCLING LENS		$299.12	$299.12					
66740	DESTRUCTION OF TISSUE OF EYELID BORDER		$299.36	$299.36					
66761	CREATION OF EYE FLUID DRAINAGE TRACTS IN IRIS USING A LASER, PER SESSION		$190.44	$258.84					
66762	CREATION OF OPENING OF IRIS FOR EYE FLUID DRAINAGE USING A LASER		$219.81	$299.21					
66770	DESTRUCTION OF GROWTH OF IRIS USING A LASER		$237.82	$321.50					
66820	REMOVAL OF RECURRING CATARACT IN LENS CAPSULE BY STAB INCISION		$246.39	$246.39					
66821	REMOVAL OF RECURRING CATARACT IN LENS CAPSULE USING A LASER		$192.76	$192.76					
66825	REPOSITIONING OF LENS PROSTHESIS		$432.66	$432.66					
66830	REMOVAL OF RECURRING CATARACT IN LENS CAPSULE WITH SECTIONING OF CORNEA AND SCLERAL AREAS		$444.32	$444.32					
66840	ASPIRATION OF LENS MATERIAL BY ASPIRATION		$491.25	$491.25					
66850	ASPIRATION OF LENS MATERIAL BY FRAGMENTING AND ASPIRATION		$568.58	$568.58					
66852	REMOVAL OF LENS MATERIAL		$628.18	$628.18					
66920	REMOVAL OF LENS MATERIAL AND CAPSULE		$553.04	$553.04					
66930	REMOVAL OF LENS MATERIAL AND CAPSULE FOR DISLOCATED LENS		$580.72	$580.72					
66940	REMOVAL OF LENS MATERIAL AND PORTION OF LENS CAPSULE		$554.92	$554.92					
66982	COMPLEX REMOVAL OF CATARACT WITH INSERTION OF PROSTHETIC LENS		$582.42	$582.42					Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
66983	REMOVAL OF CATARACT AND CAPSULE WITH INSERTION OF PROSTHETIC LENS		$567.11	$567.11					
66984	REMOVAL OF CATARACT WITH INSERTION OF PROSTHETIC LENS		$424.10	$424.10					Updated Effective 01/01/2020
66985	INSERTION OF PROSTHETIC LENS		$517.73	$517.73					
66986	EXCHANGE OF PROSTHETIC LENS		$688.20	$688.20					
66987	COMPLEX REMOVAL OF CATARACT WITH INSERTION OF PROSTHETIC LENS AND LASER TREATMENT TO DECREASE FLUID PRODUCTION IN EYE		$0.00	$0.00					Added Effective 01/01/2020
66988	REMOVAL OF CATARACT WITH INSERTION OF PROSTHETIC LENS AND LASER TREATMENT TO DECREASE FLUID PRODUCTION IN EYE		$0.00	$0.00					Added Effective 01/01/2020
66989	COMPLEX EXTRACAPSULAR REMOVAL OF CATARACT WITH INSERTION OF ARTIFICIAL LENS AND INSERTION OF DRAINAGE DEVICE IN FRONT CHAMBER OF EYE		$684.12	$684.12					Added 1/1/2022
66990	EXAM OF EYE USING AN ENDOSCOPE		$63.00	$63.00					
66991	EXTRACAPSULAR REMOVAL OF CATARACT WITH INSERTION OF ARTIFICIAL LENS AND INSERTION OF DRAINAGE DEVICE IN FRONT CHAMBER OF EYE		$544.25	$544.25					Added 1/1/2022
66999	OTHER PROCEDURE ON FRONT OF EYE	Yes	$0.00	$0.00					
67005	PARTIAL REMOVAL OF EYE FLUID BETWEEN LENS AND RETINA		$497.73	$497.73					
67010	PARTIAL REMOVAL OF EYE FLUID BETWEEN LENS AND RETINA WITH MECHANICAL REMOVAL OF EYE FLUID		$488.67	$488.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67015	ASPIRATION OR RELEASE OF EYE FLUID BETWEEN LENS AND RETINA		$377.81	$377.81					
67025	INJECTION OF SYNTHETIC EYE FLUID		$378.77	$378.77					
67027	IMPLANTATION OF EYE DRUG DELIVERY SYSTEM		$557.54	$557.54					
67028	INJECTION OF DRUG INTO EYE		$164.69	$164.69					
67030	CUTTING OF STRANDS OF EYE FLUID BETWEEN LENS AND RETINA		$296.66	$296.66					
67031	RELEASE OF SCAR TISSUE BETWEEN LENS AND RETINA USING A LASER		$201.06	$283.53					
67036	REMOVAL OF EYE FLUID (VITREOUS) BETWEEN LENS AND RETINA		$788.97	$788.97					
67039	DESTRUCTION OF EYE FLUID (VITREOUS) BETWEEN LENS AND RETINA USING A LASER		$928.59	$928.59					
67040	DESTRUCTION OF EYE FLUID (VITREOUS) BETWEEN LENS AND RETINA AND ALL OF RETINA USING A LASER		$1,077.81	$1,077.81					
67041	REMOVAL OF MEMBRANE OF RETINA		$896.92	$896.92					
67042	REMOVAL OF MEMBRANE OF RETINA WITH REMOVAL OF INTERNAL LIMITING MEMBRANE OF RETINA		$1,027.18	$1,027.18					
67043	REMOVAL OF MEMBRANE OF RETINA WITH REMOVAL OF SUBRETINAL MEMBRANE		$1,077.91	$1,077.91					
67101	REPAIR OF DETACHED RETINA BY COLD TREATMENT		$342.59	$463.16					
67105	REPAIR OF DETACHED RETINA USING A LASER		$349.18	$471.76					
67107	REPAIR OF DETACHED RETINA AND DRAINAGE OF EYE FLUID BETWEEN LENS AND RETINA		$917.62	$917.62					
67108	REPAIR OF DETACHED RETINA WITH DRAINAGE AND REMOVAL OF EYE FLUID BETWEEN LENS AND RETINA		$1,309.85	$1,309.85					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67110	REPAIR OF DETACHED RETINA BY INJECTION OF AIR OR GAS		$546.74	$546.74					
67113	COMPLEX REPAIR OF DETACHED RETINA AND DRAINAGE OF EYE FLUID BETWEEN LENS AND RETINA		$1,183.24	$1,183.24					
67115	RELEASE OF MATERIAL USED FOR RETINA REPAIR		$305.90	$305.90					
67120	REMOVAL OF IMPLANT MATERIAL FROM OUTSIDE OF EYE		$366.21	$366.21					
67121	REMOVAL OF IMPLANT MATERIAL FROM INSIDE OF EYE		$562.99	$562.99					
67141	HEAT OR FREEZING TREATMENT TO PREVENT DETACHMENT OF RETINA		$239.53	$323.62					
67145	PHOTOCOAGULATION TREATMENT TO PREVENT DETACHMENT OF RETINA		$247.85	$335.02					
67208	DESTRUCTION OF GROWTH OF RETINA BY HEAT OR FREEZING		$310.27	$420.10					
67210	DESTRUCTION OF GROWTH OF RETINA USING A LASER		$410.56	$531.53					
67218	DESTRUCTION OF GROWTH OF RETINA BY IMPLANTATION OF RADIATION SOURCE		$747.55	$747.55					
67220	DESTRUCTION OF VASCULAR GROWTH BETWEEN RETINA AND SCLERA BY PHOTOCOAGULATION		$556.33	$558.15					
67221	DESTRUCTION OF VASCULAR GROWTH BETWEEN RETINA AND SCLERA BY PHOTODYNAMIC THERAPY		$179.52	$179.52					
67225	DESTRUCTION OF VASCULAR GROWTH BETWEEN RETINA AND SCLERA BY PHOTODYNAMIC THERAPY FOR SECOND EYE AT 1 SESSION		$30.92	$32.21					
67227	DESTRUCTION OF LEAKING BLOOD VESSELS OF RETINA		$412.32	$412.32					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67228	DESTRUCTION OF LEAKING BLOOD VESSELS OF RETINA USING LASER		$691.57	$691.57					
67229	DESTRUCTION OF LEAKING BLOOD VESSELS OF RETINA, PRETERM INFANT		$778.24	$778.24					
67250	REPAIR OF DEFECT OF SCLERA		$442.52	$442.52					
67255	REPAIR OF DEFECT OF SCLERA WITH GRAFT		$555.13	$555.13					
67299	OTHER PROCEDURE ON BACK OF EYE	Yes	$0.00	$0.00					
67311	REALIGNMENT OF HORIZONTAL EYE MUSCLE		$412.47	$412.47					
67312	REALIGNMENT OF EYE BY REPAIR OF 2 HORIZONTAL MUSCLES		$493.52	$493.52					
67314	REALIGNMENT OF VERTICAL EYE MUSCLE		$467.63	$467.63					
67316	REALIGNMENT OF MULTIPLE VERTICAL EYE MUSCLES		$527.08	$527.08					
67318	REALIGNMENT OF EYE MUSCLE AT UPPER INNER EDGE OF EYE		$393.19	$393.19					
67320	RELOCATION OF EYE MUSCLE TO RESTORE FUNCTION		$542.65	$542.65					
67331	REALIGNMENT OF EYE MUSCLE FOLLOWING INJURY OR EYE SURGERY		$504.92	$504.92					
67332	REALIGNMENT OF EYE MUSCLE COMPLICATED BY SCARRING OR RESTRICTIVE MUSCLE MOVEMENT		$561.19	$561.19					
67334	REALIGNMENT OF EYE MUSCLE BY SUTURE		$398.83	$398.83					
67335	PLACEMENT OF ADJUSTABLE SUTURES DURING EYE MUSCLE SURGERY		$187.85	$187.85					
67340	REALIGNMENT AND REPAIR OF DETACHED EYE MUSCLE		$498.62	$498.62					
67343	RELEASE OF EXTENSIVE SCAR TISSUE OF EYE		$369.31	$369.31					
67345	DESTRUCTION OF EYE MUSCLE BY INJECTION OF CHEMICAL		$121.48	$151.25					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67346	BIOPSY OF EYE MUSCLE		$132.84	$132.84					
67399	OTHER PROCEDURE ON EYE MUSCLE	Yes	$0.00	$0.00					
67400	EXPLORATION OF CAVITY BEHIND EYE		$577.65	$577.65					
67405	INCISION AND DRAINAGE OF CAVITY BEHIND EYE		$488.55	$488.55					
67412	REMOVAL OF GROWTH OF CAVITY BEHIND EYE		$598.30	$598.30					
67413	REMOVAL OF GROWTH OF CAVITY BEHIND EYE		$516.94	$516.94					
67414	REMOVAL OF BONE CAVITY BEHIND EYE FOR DECOMPRESSION		$531.22	$531.22					
67415	FINE NEEDLE ASPIRATION OF ORBITAL CONTENTS		$108.74	$108.74					
67420	REMOVAL OF BONE AND GROWTH OF CAVITY BEHIND EYE		$869.07	$869.07					
67430	REMOVAL OF BONE AND FOREIGN BODY IN CAVITY BEHIND EYE		$674.08	$674.08					
67440	REMOVAL OF BONE WITH DRAINAGE FROM CAVITY BEHIND EYE		$815.04	$815.04					
67445	REMOVAL OF BONE FROM CAVITY BEHIND EYE WITH BONE FLAP		$704.41	$704.41					
67450	EXPLORATION OF CAVITY BEHIND EYE WITH BONE FLAP		$806.84	$806.84					
67500	INJECTION OF DRUG INTO CAVITY BEHIND EYE		$44.22	$44.22					
67505	INJECTION OF ALCOHOL INTO CAVITY BEHIND EYE		$39.47	$53.41					
67515	INJECTION OF DRUG OR SUBSTANCE INTO MEMBRANE COVERING EYEBALL		$26.14	$33.65					
67516	INJECTION OF DRUG INTO THE SPACE BETWEEN THE CORNEA AND RETINA IN THE EYE		$80.39	$98.87					
67550	INSERTION OF IMPLANT OUTSIDE EYE MUSCLES		$559.37	$559.37					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67560	REMOVAL OR REVISION OF IMPLANT OUTSIDE EYE MUSCLES		$530.65	$530.65					
67570	RELEASE OF OPTIC NERVE		$579.63	$579.63					
67599	OTHER PROCEDURE ON BONE CAVITY OF EYE	Yes	$0.00	$0.00					
67700	INCISION AND DRAINAGE OF ABSCESS OF EYELID		$45.45	$52.02					
67710	REMOVAL OF SUTURES BETWEEN UPPER AND LOWER EYELIDS		$43.47	$57.01					
67715	INCISION OF CORNER OF EYE AT EYELID		$76.48	$76.48					
67800	REMOVAL OF CHRONIC GROWTH OF EYELID		$53.44	$66.04					
67801	REMOVAL OF MULTIPLE CHRONIC GROWTHS OF SAME EYELID		$74.87	$93.51					
67805	REMOVAL OF MULTIPLE CHRONIC GROWTHS OF DIFFERENT EYELIDS		$84.13	$102.63					
67808	REMOVAL OF CHRONIC EYELID GROWTH UNDER GENERAL ANESTHESIA AND/OR REQUIRING HOSPITALIZATION		$164.46	$164.46					
67810	BIOPSY OF EYELID		$55.51	$66.37					
67820	REMOVAL OF EYELASHES USING FORCEPS		$31.70	$36.79					
67825	REMOVAL OF EYELASHES		$52.31	$64.38					
67830	REMOVAL OF EYELASHES BY INCISION		$109.41	$109.41					
67835	REMOVAL OF EYELASHES WITH GRAFT		$355.29	$355.29					
67840	REMOVAL OF GROWTH OF EYELID		$76.46	$92.82					
67850	DESTRUCTION OF GROWTH OF EYELID MARGIN, 1.0 CM OR LESS		$60.34	$71.33					
67875	TEMPORARY CLOSURE OF EYELIDS BY SUTURE		$88.91	$88.91					
67880	CREATION OF PERMANENT EYELID MARGIN SCARRING		$215.44	$215.44					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67882	CREATION OF PERMANENT EYELID MARGIN SCARRING WITH RELOCATION OF EYELID TISSUE		$312.57	$312.57					
67900	REPAIR OF BROW PARALYSIS	Yes	$239.47	$239.47					
67901	REPAIR OF UPPER EYELID MUSCLE TO CORRECT DROOPING OR PARALYSIS USING EXTERNAL MATERIAL	Yes	$449.83	$449.83					
67902	REPAIR OF UPPER EYELID MUSCLE TO CORRECT DROOPING OR PARALYSIS USING INTERNAL TISSUES	Yes	$455.68	$455.68					
67903	SHORTENING OR ADVANCEMENT OF UPPER EYELID MUSCLE TO CORRECT DROOPING OR PARALYSIS	Yes	$413.76	$413.76					
67904	REPAIR OF TENDON OF UPPER EYELID	Yes	$397.06	$397.06					
67906	SUSPENSION OF UPPER EYELID MUSCLE TO CORRECT DROOPING OR PARALYSIS	Yes	$350.04	$350.04					
67908	REMOVAL OF TISSUE, MUSCLE, AND MEMBRANE TO CORRECT EYELID DROOPING OR PARALYSIS	Yes	$328.42	$328.42					
67909	REVISION OF SURGERY TO CORRECT DROOPING OR PARALYZED UPPER EYELID		$344.27	$344.27					
67911	CORRECTION OF WIDELY-OPENED UPPER EYELID	Yes	$345.04	$345.04					
67912	RESTORATION OF EYELID BLINKING FUNCTION WITH IMPLANT		$306.83	$698.92					
67914	SUTURE REPAIR OF TURNING-OUTWARD UPPER OR LOWER EYELID DEFECT		$238.76	$238.76					
67915	REPAIR OF TURNING-OUTWARD DEFECT OF UPPER OR LOWER EYELID USING HEAT		$109.43	$126.19					
67916	REPAIR OF TURNING-OUTWARD EYELID DEFECT		$334.11	$334.11					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
67917	EXTENSIVE REPAIR OF TURNING-OUTWARD EYELID DEFECT		$383.41	$383.41					
67921	SUTURE REPAIR OF TURNING-INWARD EYELID DEFECT		$204.74	$204.74					
67922	REPAIR OF TURNING-INWARD EYELID DEFECT USING HEAT		$105.10	$121.06					
67923	REPAIR OF TURNING-INWARD EYELID DEFECT		$361.03	$361.03					
67924	EXTENSIVE REPAIR OF TURNING-INWARD EYELID DEFECT		$369.60	$369.60					
67930	SUTURE OF RECENT WOUND OF EYELID		$123.44	$140.47					
67935	REPAIR OF WOUND OF EYELID MARGIN		$285.60	$285.60					
67938	REMOVAL OF EMBEDDED FOREIGN BODY IN EYELID		$45.26	$52.24					
67950	RECONSTRUCTION OF EYELID MARGIN		$370.09	$370.09					
67961	REMOVAL OF UP TO 1/4 OF EYELID MARGIN AND REPAIR OF EYELID		$362.93	$362.93					
67966	REMOVAL OF OVER 1/4 OF EYELID MARGIN AND REPAIR OF EYELID		$422.94	$422.94					
67971	RECONSTRUCTION OF UP TO 2/3 OF EYELID WITH TISSUE FROM OPPOSITE EYELID		$582.53	$582.53					
67973	RECONSTRUCTION OF LOWER EYELID BY TRANSFER OF EYELID TISSUE FROM OPPOSITE EYELID		$754.71	$754.71					
67974	RECONSTRUCTION OF UPPER EYELID WITH TISSUE FROM OPPOSITE EYELID		$767.08	$767.08					
67975	RECONSTRUCTION OF EYELID BY TRANSFER OF EYELID TISSUE FROM OPPOSITE EYELID		$378.30	$378.30					
67999	OTHER PROCEDURE ON EYELID	Yes	$0.00	$0.00					
68020	INCISION AND DRAINAGE OF CYST OF EYE		$46.30	$53.14					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
68040	REMOVAL OF SCARS OF EYELID LINING DUE TO INFECTION		$31.46	$37.50					
68100	BIOPSY OF EYELID LINING		$54.35	$67.63					
68110	REMOVAL OF GROWTH OF EYELID LINING, 1.0 CM OR LESS		$68.80	$85.43					
68115	REMOVAL OF GROWTH OF EYELID LINING, MORE THAN 1.0 CM		$122.22	$122.22					
68130	REMOVAL OF GROWTH OF EYELID LINING AND SCLERA		$254.43	$254.43					
68135	DESTRUCTION OF GROWTH OF EYELID LINING		$63.42	$73.35					
68200	INJECTION INTO CONJUNCTIVA		$22.08	$29.05					
68320	REPAIR OF EYELID LINING WITH GRAFT FROM EXTERNAL EYE		$326.90	$326.90					
68325	REPAIR OF CONJUNCTIVA WITH GRAFT FROM CHEEK TISSUE		$458.28	$458.28					
68326	RECONSTRUCTION OF CONJUNCTIVA WITH GRAFT FROM OUTER EYE OR REARRANGEMENT		$441.18	$441.18					
68328	RECONSTRUCTION OF CONJUNCTIVA WITH GRAFT FROM CHEEK		$515.36	$515.36					
68330	RELEASE OF SCAR TISSUE FROM CONJUNCTIVA		$297.00	$297.00					
68335	RELEASE OF SCAR TISSUE FROM EYELIDS WITH GRAFT		$448.85	$448.85					
68340	RELEASE OF SCAR TISSUE FROM EYELIDS		$203.38	$203.38					
68360	PARTIAL RELOCATION OF CONJUNCTIVAL FLAP		$270.53	$270.53					
68362	RELOCATION OF CONJUNCTIVAL FLAP		$428.69	$428.69					
68371	HARVEST OF DONOR CONJUNCTIVA		$265.09	$265.09					
68399	OTHER PROCEDURE ON CONJUNCTIVA	Yes	$0.00	$0.00					
68400	INCISION AND DRAINAGE OF TEAR PRODUCING GLAND		$62.99	$76.40					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
68420	INCISION AND DRAINAGE OF TEAR DUCT SAC		$81.16	$94.84					
68440	SNIP INCISION OF TEAR DUCT AT INNER CORNER OF EYE		$37.28	$47.47					
68500	REMOVAL OF TEAR PRODUCING GLAND		$529.57	$529.57					
68505	PARTIAL REMOVAL OF TEAR PRODUCING GLAND		$549.87	$549.87					
68510	BIOPSY OF TEAR PRODUCING GLAND		$241.05	$241.05					
68520	REMOVAL OF TEAR SAC		$465.10	$465.10					
68525	BIOPSY OF TEAR SAC		$234.29	$234.29					
68530	REMOVAL OF FOREIGN BODY OR STONE IN TEAR PASSAGES		$148.28	$186.50					
68540	REMOVAL OF GROWTH OF TEAR PRODUCING GLAND		$531.41	$531.41					
68550	REMOVAL OF GROWTH OF TEAR PRODUCING GLAND WITH OSTEOTOMY		$693.63	$693.63					
68700	PLASTIC REPAIR OF TEAR DUCT		$257.73	$257.73					
68705	RELEASE OF TISSUE AT TEAR DUCT OPENING		$73.87	$87.55					
68720	CREATION OF DRAINAGE TRACT FROM TEAR SAC TO NASAL CAVITY		$507.27	$507.27					
68745	CREATION OF TEAR DRAINAGE TRACT TO NASAL CAVITY		$428.38	$428.38					
68750	CREATION OF TEAR DRAINAGE TRACT TO NASAL CAVITY WITH INSERTION OF TUBE OR STENT		$542.71	$542.71					
68760	REPAIR TEAR DUCT OPENING BY HEAT, TYING, OR LASER SURGERY		$62.61	$74.95					
68761	CLOSURE OF TEAR DUCT OPENING USING PLUG		$51.75	$64.09					
68770	CLOSURE OF ABNORMAL TEAR DRAINAGE TRACT		$256.71	$313.57					
68801	DILATION OF TEAR DRAINAGE OPENING		$36.96	$36.96					
68810	INSERTION OF PROBE INTO NASAL TEAR DUCT		$51.50	$51.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
68811	INSERTION OF PROBE INTO NASAL TEAR DUCT UNDER ANESTHESIA		$105.43	$105.43					
68815	PROBING OF NASAL TEAR DUCT WITH INSERTION OF TUBE OR STENT		$138.62	$138.62					
68816	PROBING OF NASAL TEAR DUCT WITH BALLOON TUBE DILATION		$168.23	$472.05					
68840	PROBING OF NASAL TEAR DUCT		$43.10	$49.67					
68841	INSERTION OF DRUG DELIVERY IMPLANT INTO TEAR DUCT OF EYE		$30.47	$30.47					Added 1/1/2022
68850	INJECTION OF CONTRAST FOR IMAGING OF TEAR SAC		$38.13	$38.13					
68899	OTHER PROCEDURE ON TEAR PRODUCING DRAINAGE SYSTEM	Yes	$0.00	$0.00					
69000	SIMPLE DRAINAGE OF ABSCESS OR BLOOD ACCUMULATION OF EXTERNAL EAR		$46.50	$51.20					
69005	COMPLICATED DRAINAGE OF EXTERNAL EAR ABSCESS OR BLOOD ACCUMULATION		$79.16	$94.72					
69020	DRAINAGE OF ABSCESS OF EAR CANAL		$48.97	$55.00					
69100	BIOPSY OF EAR		$32.85	$41.70					
69105	BIOPSY OF EAR CANAL		$37.86	$48.59					
69110	PARTIAL REMOVAL OF EXTERNAL EAR WITH SIMPLE REPAIR	Yes	$177.54	$177.54					
69120	REMOVAL OF ENTIRE EAR		$138.53	$138.53					
69140	REMOVAL OF BONY GROWTHS OF EAR CANAL		$461.32	$461.32					
69145	REMOVAL OF GROWTH IN SOFT TISSUE OF EAR CANAL		$148.66	$148.66					
69150	REMOVAL OF GROWTH OF EAR CANAL		$692.69	$692.69					
69155	REMOVAL OF GROWTH OF EAR CANAL WITH NECK DISSECTION		$965.85	$965.85					
69200	REMOVAL OF FOREIGN BODY IN EAR CANAL		$29.20	$34.83					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69205	REMOVAL OF FOREIGN BODY IN EAR CANAL UNDER ANESTHESIA		$65.12	$65.12					
69209	REMOVAL OF IMPACTED EAR WAX BY WASHING		$9.29	$9.29					Added Effective 1/1/2016
69210	REMOVAL OF IMPACTED EAR WAX		$21.47	$24.55					
69220	SIMPLE REMOVAL OF SKIN DEBRIS AND DRAINAGE OF MASTOID CAVITY		$32.28	$38.98					
69222	COMPLEX REMOVAL OF SKIN DEBRIS AND DRAINAGE OF MASTOID CAVITY		$51.48	$61.41					
69300	REPAIR OF PROTRUDING EAR	Yes	$335.58	$335.58					
69310	RECONSTRUCTION OF EAR CANAL		$600.92	$600.92					
69320	CREATION OF EAR CANAL		$920.38	$920.38					
69399	OTHER PROCEDURE ON EXTERNAL EAR	Yes	$0.00	$0.00					
69420	INCISION, ASPIRATION, AND/OR INFLATION OF EARDRUM		$48.76	$58.01					
69421	INCISION, ASPIRATION, AND INFLATION OF EARDRUM UNDER ANESTHESIA		$83.03	$83.03					
69424	REMOVAL OF IMPLANTED EARDRUM TUBE UNDER ANESTHESIA		$34.45	$42.49					
69433	INCISION OF EARDRUM WITH INSERTION OF EARDRUM TUBE UNDER LOCAL OR TOPICAL ANESTHESIA		$64.62	$82.45					
69436	INCISION OF EARDRUM WITH PLACEMENT OF EARDRUM TUBE UNDER GENERAL ANESTHESIA		$122.45	$122.45					
69440	EXPLORATION OF MIDDLE EAR		$470.18	$470.18					
69450	INCISION OF EAR CANAL WITH RELEASE OF SCAR TISSUE		$374.25	$374.25					
69501	INCISION OF MASTOID BONE		$579.30	$579.30					
69502	REMOVAL OF MIDDLE EAR (MASTOID) BONE		$744.52	$744.52					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69505	REMOVAL OF MIDDLE EAR BONE AND REMOVAL OF GROWTH OF MIDDLE EAR		$843.91	$843.91					
69511	EXTENSIVE REMOVAL OF MASTOID BONE		$878.91	$878.91					
69530	EXTENSIVE REMOVAL OF BONES AROUND INNER EAR AND MASTOID BONE		$1,019.34	$1,019.34					
69535	REMOVAL OF SKULL BONE SURROUNDING EAR		$1,759.39	$1,759.39					
69540	REMOVAL OF POLYP OF OUTER EAR		$54.18	$71.21					
69550	REMOVAL OF GROWTH OF OUTER EAR THROUGH EAR CANAL		$730.03	$730.03					
69552	REMOVAL OF GROWTH OF OUTER EAR THROUGH MASTOID BONE		$1,046.76	$1,046.76					
69554	REMOVAL OF GROWTH OF OUTER EAR		$1,433.80	$1,433.80					
69601	REVISION OF OPERATION OF MIDDLE EAR BONES AND REMOVAL OF REMAINING BONES		$789.01	$789.01					
69602	REVISION OF PREVIOUS MASTOID BONE SURGERY		$865.08	$865.08					
69603	EXTENSIVE REVISION OF PREVIOUS MASTOID BONE SURGERY		$909.84	$909.84					
69604	REVISION OF OPERATION OF MIDDLE EAR AND EARDRUM		$931.65	$931.65					
69610	REPAIR OF EARDRUM		$143.43	$155.90					
69620	REPAIR OF DEFECT OR TEAR OF EARDRUM		$393.49	$393.49					
69631	REPAIR OF EARDRUM AND EAR CANAL WITH OPENING TO EAR BONES		$647.12	$647.12					
69632	REPAIR OF EARDRUM, EAR CANAL, AND BONES		$832.12	$832.12					
69633	REPAIR OF EARDRUM, EAR CANAL, AND BONES WITH INSERTION OF PROSTHESIS		$792.00	$792.00					
69635	REPAIR OF EARDRUM AND EAR CANAL WITH INCISION OF MIDDLE EAR BONE		$875.05	$875.05					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69636	REPAIR OF EARDRUM, EAR CANAL, AND BONES WITH INCISION OF MIDDLE EAR BONE		$998.86	$998.86					
69637	REPAIR OF EARDRUM, EAR CANAL, AND BONES WITH PLACEMENT OF IMPLANT AND OPENING OF MIDDLE EAR		$994.28	$994.28					
69641	COMPLEX REPAIR OF EARDRUM AND EAR CANAL WITH REMOVAL OF MASTOID BONE		$827.98	$827.98					
69642	REPAIR OF EARDRUM, EAR CANAL, AND BONES WITH REMOVAL OF MIDDLE EAR BONE		$1,087.12	$1,087.12					
69643	REPAIR OF EARDRUM AND EAR CANAL WITH REMOVAL OF MIDDLE EAR BONE		$1,003.84	$1,003.84					
69644	REPAIR OF EARDRUM, EAR CANAL, AND BONES WITH REMOVAL OF MASTOID BONE, WITH INTACT CANAL WALL		$1,113.74	$1,113.74					
69645	EXTENSIVE REPAIR OF EARDRUM AND EAR CANAL WITH REMOVAL OF MIDDLE EAR BONE		$1,067.22	$1,067.22					
69646	EXTENSIVE REPAIR AND RECONSTRUCTION OF EARDRUM AND EAR CANAL WITH REMOVAL OF MIDDLE EAR BONE		$1,156.70	$1,156.70					
69650	RELEASE OF EAR BONE		$630.81	$630.81					
69660	INCISION OR REMOVAL OF MIDDLE EAR BONE		$785.43	$785.43					
69661	INCISION OR REMOVAL OF EAR BONE WITH DRILLING		$991.03	$991.03					
69662	REVISION OF OPERATION OF EAR BONE		$971.80	$971.80					
69666	REPAIR OF OPENING OF MIDDLE TO INNER EAR		$640.11	$640.11					
69667	REPAIR OF OPENING TO COCHLEA		$638.27	$638.27					
69670	CREATION OF FLAP TO CLOSE MASTOID CAVITY		$623.54	$623.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69676	REMOVAL OF EARDRUM NERVE		$520.53	$520.53					
69700	CLOSURE OF DRAINAGE TRACT OF MIDDLE EAR		$465.10	$465.10					
69705	DILATION OF CANAL BETWEEN MIDDLE EAR AND THROAT (EUSTACHIAN TUBE) ON ONE SIDE OF BODY, USING ENDOSCOPE INSERTED THROUGH NOSE		$140.99	$2,463.03					Added Effective 01/01/2021
69706	DILATION OF CANAL BETWEEN MIDDLE EAR AND THROAT (EUSTACHIAN TUBE) ON BOTH SIDES OF BODY, USING ENDOSCOPE INSERTED THROUGH NOSE		$197.40	$2,539.30					Added Effective 01/01/2021
69710	INSERTION OR REPLACEMENT OF EAR BONE HEARING DEVICE		$775.35	$775.35					
69711	REMOVAL OR REPAIR OF HEARING DEVICE IN SKULL BONE SURROUNDING EAR		$534.32	$534.32					
69714	IMPLANTATION OF COCHLEAR STIMULATING SYSTEM INTO SKULL WITH ATTACHMENT THROUGH SKIN TO EXTERNAL SPEECH PROCESSOR		$651.98	$651.98					
69716	IMPLANTATION OF COCHLEAR STIMULATING SYSTEM INTO MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$500.57	$500.57					Added 1/1/2022
69717	REPLACEMENT OF COCHLEAR STIMULATING SYSTEM IN SKULL WITH ATTACHMENT THROUGH SKIN TO EXTERNAL SPEECH PROCESSOR		$673.16	$673.16					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69719	REPLACEMENT OF COCHLEAR STIMULATING SYSTEM INTO MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$500.57	$500.57					Added 1/1/2022
69720	RELEASE OF FACE NERVE THROUGH SIDE		$933.77	$933.77					
69725	RELEASE OF FACE NERVE THROUGH BONE SURROUNDING EAR		$986.57	$986.57					
69726	REMOVAL OF ENTIRE COCHLEAR STIMULATING SYSTEM FROM SKULL WITH ATTACHMENT THROUGH SKIN TO EXTERNAL SPEECH PROCESSOR		$338.01	$338.01					Added 1/1/2022
69727	REMOVAL OF ENTIRE COCHLEAR STIMULATING SYSTEM FROM MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$387.93	$387.93					Added 1/1/2022
69728	REMOVAL OF ENTIRE COCHLEAR STIMULATING SYSTEM FROM OUTSIDE MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$493.23	$493.23					
69729	IMPLANTATION OF COCHLEAR STIMULATING SYSTEM OUTSIDE MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$559.88	$559.88					
69730	REPLACEMENT OF COCHLEAR STIMULATING SYSTEM OUTSIDE MASTOID BONE OF SKULL WITH MAGNETIC ATTACHMENT TO EXTERNAL SPEECH PROCESSOR		$573.10	$573.10					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
69740	REPAIR OF FACIAL NERVE EXTERNAL TO GENICULATE GANGLION		$809.97	$809.97					
69745	REPAIR OF FACIAL NERVE EXTERNAL TO GENICULATE GANGLION		$937.42	$937.42					
69799	OTHER PROCEDURE ON MIDDLE EAR	Yes	$0.00	$650.00					
69801	INCISION OF FLUID CANAL OF INNER EAR WITH INFUSION OF DRUGS		$566.13	$566.13					
69805	OPERATION OF INNER EAR		$702.40	$702.40					
69806	OPERATION OF INNER EAR WITH INSERTION OF SHUNT		$814.38	$814.38					
69905	REMOVAL OF INNER EAR CANAL		$731.73	$731.73					
69910	REMOVAL OF INNER EAR CANAL AND MASTOID BONE		$891.06	$891.06					
69915	SEVERING OF EAR CANAL NERVE THROUGH MIDDLE EAR AND SKULL BONES		$1,107.74	$1,107.74					
69930	INSERTION OF COCHLEAR DEVICE		$989.78	$989.78					
69949	OTHER PROCEDURE ON INNER EAR	Yes	$0.00	$0.00					
69950	SEVERING OF EAR CANAL NERVE THROUGH SKULL BONE		$1,159.27	$1,159.27					
69955	RELEASE OF FACE NERVE		$1,247.70	$1,247.70					
69960	RELEASE OF EAR CANAL		$1,105.20	$1,105.20					
69970	OVAL OF GROWTH FROM SKULL BONE SURROUNDING EAR		$1,237.40	$1,237.40					
69979	OTHER PROCEDURE ON SKULL BONE SURROUNDING EAR	Yes	$0.00	$0.00					
69990	USE OF OPERATING MICROSCOPE		$162.90	$162.90					
70010	REVIEW BY RADIOLOGIST OF LOWER BACK PORTION OF BRAIN IMAGE		$167.90	$167.90		$117.09	$50.81		
70015	REVIEW BY RADIOLOGIST OF BRAIN AND SPINAL CORD IMAGE		$87.60	$87.60		$36.79	$50.81		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
70030	X-RAY OF EYE FOR DETECTION OF FOREIGN BODY		$18.83	$18.83		$11.46	$7.38		
70100	X-RAY OF PART OF LOWER JAW, 1-4 VIEWS		$22.08	$22.08		$14.14	$7.94		
70110	X-RAY OF LOWER JAW, MINIMUM OF 4 VIEWS		$27.84	$27.84		$16.80	$11.04		
70120	X-RAY OF BONE BEHIND THE EAR, 1-2 VIEWS PER SIDE		$24.74	$24.74		$16.80	$7.94		
70130	X-RAY OF BONE BEHIND THE EAR, MINIMUM OF 3 VIEWS PER SIDE		$36.09	$36.09		$21.33	$14.75		
70134	X-RAY OF INSIDE OF EAR CANAL		$34.74	$34.74		$19.99	$14.75		
70140	X-RAY OF FACE BONES, 1-2 VIEWS		$25.03	$25.03		$16.80	$8.23		
70150	X-RAY OF FACE BONES, MINIMUM OF 3 VIEWS		$32.67	$32.67		$21.33	$11.33		
70160	X-RAY OF NOSE BONES, MINIMUM OF 3 VIEWS		$21.52	$21.52		$14.14	$7.38		
70170	REVIEW BY RADIOLOGIST OF TEAR DRAINAGE STRUCTURE OF EYE IMAGE		$38.64	$38.64		$25.60	$13.04		
70190	X-RAY OF EYE CANAL		$25.88	$25.88		$16.80	$9.09		
70200	X-RAY OF EYE SOCKET, MINIMUM OF 4 VIEWS		$33.52	$33.52		$21.33	$12.19		
70210	X-RAY OF PARANASAL SINUS, 1-2 VIEWS		$24.17	$24.17		$16.80	$7.38		
70220	X-RAY OF PARANASAL SINUS, MINIMUM OF 3 VIEWS		$32.37	$32.37		$21.33	$11.04		
70240	X-RAY OF BONE AT BASE OF SKULL		$19.69	$19.69		$11.46	$8.23		
70250	X-RAY OF SKULL, 1-3 VIEWS		$27.28	$27.28		$16.80	$10.48		
70260	X-RAY OF SKULL, MINIMUM OF 4 VIEWS		$39.01	$39.01		$24.26	$14.75		
70300	X-RAY OF TEETH, 1 VIEW		$11.71	$11.71		$7.19	$4.52		
70310	X-RAY OF TEETH, LESS THAN FULL MOUTH		$18.27	$18.27		$11.46	$6.82		
70320	X-RAY OF TEETH, FULL MOUTH		$40.38	$40.38		$21.33	$9.62		
70328	X-RAY OF JAW JOINT ON 1 SIDE OF MOUTH		$21.27	$21.27		$13.34	$7.94		
70330	X-RAY OF JAW JOINTS ON BOTH SIDES OF MOUTH		$33.15	$33.15		$22.67	$10.48		
70332	X-RAY OF JAW JOINTS ON BOTH SIDES OF MOUTH		$80.33	$80.33		$56.80	$23.52		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
70336	MRI SCAN OF JAW JOINT	Yes	$343.60	$343.60		$302.74	$40.87		
70350	IMAGING OF JAWS AND SKULL		$17.52	$17.52		$10.14	$7.38		
70355	X-RAY OF LOWER JAWS, UPPER JAWS AND TEETH		$16.80	$16.80		$15.46	$8.53		
70360	X-RAY OF SOFT TISSUE OF NECK		$18.83	$18.83		$11.46	$7.38		
70370	X-RAY OF VOICE BOX OR THROAT		$49.10	$49.10		$35.20	$13.90		
70371	IMAGING OF VOICE BOX WITH SPEECH EVALUATION	Yes	$93.10	$93.10		$56.80	$36.30		
70380	X-RAY OF SALIVA GLAND		$25.52	$25.52		$18.14	$7.38		
70390	REVIEW BY RADIOLOGIST OF SALIVARY STRUCTURE IMAGE		$64.71	$64.71		$48.27	$16.44		
70450	CT SCAN HEAD OR BRAIN WITHOUT CONTRAST		$164.34	$164.34		$127.74	$36.59		
70460	CT SCAN HEAD OR BRAIN WITHOUT CONTRAST		$201.59	$201.59		$153.07	$48.51		
70470	CT SCAN OF HEAD OR BRAIN BEFORE AND AFTER CONTRAST		$245.70	$245.70		$191.23	$54.47		
70471	CT SCAN OF BLOOD VESSELS IN THE HEAD AND NECK WITH CONTRAST		$306.16	$306.16		$204.44	$101.72		Do not report in conjunction with codes 70496 and 70498, for same member, same day.
70480	CT SCAN OF CRANIAL CAVITY WITHOUT CONTRAST		$182.78	$182.78		$127.74	$55.04		
70481	CT SCAN OF CRANIAL CAVITY WITH CONTRAST		$212.12	$212.12		$153.07	$59.04		
70482	CT SCAN OF CRANIAL CAVITY BEFORE AND AFTER CONTRAST		$253.37	$253.37		$191.23	$62.14		
70486	CT SCAN OF FACE WITHOUT CONTRAST		$176.55	$176.55		$127.74	$48.81		
70487	CT SCAN OF FACE WITH CONTRAST		$208.70	$208.70		$153.07	$55.62		
70488	CT SCAN OF FACE BEFORE AND AFTER CONTRAST		$252.22	$252.22		$191.23	$61.00		
70490	CT SCAN OF SOFT TISSUE OF NECK WITHOUT CONTRAST		$182.78	$182.78		$127.74	$55.04		
70491	CT SCAN OF SOFT TISSUE OF NECK WITH CONTRAST		$212.12	$212.12		$153.07	$59.04		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
70492	CT SCAN OF SOFT TISSUE OF NECK BEFORE AND AFTER CONTRAST		$253.37	$253.37		$191.23	$62.14		
70496	CT SCAN OF BLOOD VESSELS OF HEAD WITH CONTRAST		$262.87	$262.87		$192.94	$69.93		Do not report in conjunction with codes 70471 and 70498, for same member, same day.
70498	CT SCAN OF BLOOD VESSELS OF NECK WITH CONTRAST		$262.87	$262.87		$192.94	$69.93		Do not report in conjunction with codes 70496 and 70471, for same member, same day.
70540	MRI SCAN OF BONE OF EYE SOCKET, FACE, AND/OR NECK WITHOUT CONTRAST	Yes	$366.30	$366.30		$302.74	$63.56		
70542	MRI SCAN OF BONE OF EYE SOCKET, FACE, AND/OR NECK WITH CONTRAST	Yes	$399.60	$399.60		$354.09	$45.51		
70543	MRI SCAN OF BONE OF EYE SOCKET, FACE, AND/OR NECK BEFORE AND AFTER CONTRAST	Yes	$716.67	$716.67		$655.32	$61.35		
70544	MRI SCAN OF BLOOD VESSELS OF HEAD WITHOUT CONTRAST	Yes	$411.51	$411.51		$365.08	$46.44		
70545	MRI SCAN OF BLOOD VESSELS OF HEAD WITH CONTRAST	Yes	$346.92	$346.92		$299.54	$47.38		
70546	MRI SCAN OF BLOOD VESSELS OF HEAD BEFORE AND AFTER CONTRAST	Yes	$656.65	$656.65		$586.58	$70.07		
70547	MRI SCAN OF BLOOD VESSELS OF NECK WITHOUT CONTRAST	Yes	$410.49	$410.49		$364.05	$46.44		
70548	MRI SCAN OF BLOOD VESSELS OF NECK WITH CONTRAST	Yes	$346.92	$346.92		$299.54	$47.38		
70549	MRI SCAN OF BLOOD VESSELS OF NECK BEFORE AND AFTER CONTRAST	Yes	$656.65	$656.65		$586.58	$70.07		
70551	MRI SCAN OF BRAIN WITHOUT CONTRAST	Yes	$366.30	$366.30		$302.74	$63.56		
70552	MRI SCAN OF BRAIN WITH CONTRAST	Yes	$439.87	$439.87		$363.27	$76.60		
70553	MRI SCAN OF BRAIN BEFORE AND AFTER CONTRAST	Yes	$774.25	$774.25		$672.42	$101.84		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
70555	FUNCTIONAL MRI SCAN OF BRAIN WITH NEUROFUNCTIONAL TESTING	Yes	$0.00	$0.00		$0.00	$94.17		
70557	MRI SCAN OF BRAIN WITHOUT CONTRAST DURING BRAIN PROCEDURE	Yes	$0.00	$0.00		$0.00	$110.40		
70558	MRI SCAN OF BRAIN WITH CONTRAST DURING BRAIN PROCEDURE	Yes	$0.00	$0.00		$0.00	$122.12		
70559	MRI SCAN OF BRAIN BEFORE AND AFTER CONTRAST DURING BRAIN PROCEDURE	Yes	$0.00	$0.00		$0.00	$122.64		
71045	X-RAY EXAM CHEST 1 VIEW		$15.09	$15.09		$7.81	$7.27		Added Effective 1/1/2018
71046	X-RAY EXAM CHEST 2 VIEWS		$23.03	$23.03		$14.34	$8.69		Added Effective 1/1/2018
71047	X-RAY EXAM CHEST 3 VIEWS		$29.44	$29.44		$18.26	$11.18		Added Effective 1/1/2018
71048	X-RAY EXAM CHEST 4+ VIEWS		$31.64	$31.64		$18.78	$12.86		Added Effective 1/1/2018
71100	X-RAY OF RIBS ON SIDE OF BODY, 2 VIEWS		$25.08	$25.08		$15.46	$9.62		
71101	X-RAY OF RIBS ON SIDE OF BODY, MINIMUM OF 3 VIEWS		$30.03	$30.03		$18.14	$11.90		
71110	X-RAY OF RIBS ON BOTH SIDES OF BODY, 3 VIEWS		$33.23	$33.23		$21.33	$11.90		
71111	X-RAY OF RIBS ON BOTH SIDES OF BODY, MINIMUM OF 4 VIEWS		$38.16	$38.16		$24.26	$13.90		
71120	X-RAY OF CHEST BONE, MINIMUM OF 2 VIEWS		$26.13	$26.13		$17.60	$8.53		
71130	X-RAY OF JOINT BETWEEN BREAST AND COLLAR BONES, MINIMUM OF 2 VIEWS		$28.32	$28.32		$18.94	$9.38		
71250	CT SCAN OF CHEST WITHOUT CONTRAST		$209.42	$209.42		$159.75	$49.66		
71260	CT SCAN OF CHEST WITH CONTRAST		$244.31	$244.31		$191.23	$53.08		
71270	CT SCAN OF CHEST BEFORE AND AFTER CONTRAST		$297.79	$297.79		$238.74	$59.04		
71271	LOW DOSE CT SCAN OF CHEST FOR LUNG CANCER SCREENING		$116.09	$116.09		$73.99	$42.11		Added Effective 01/01/2021

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
71275	CT SCAN OF BLOOD VESSELS OF CHEST WITH CONTRAST		$282.81	$282.81		$234.63	$48.18		
71550	MRI SCAN OF CHEST WITHOUT CONTRAST	Yes	$371.67	$371.67		$302.74	$68.93		
71551	MRI SCAN OF CHEST WITH CONTRAST	Yes	$405.62	$405.62		$355.09	$50.54		
71552	MRI SCAN OF CHEST BEFORE AND AFTER CONTRAST	Yes	$717.99	$717.99		$651.83	$66.16		
71555	MRI SCAN OF BLOOD VESSELS OF CHEST	Yes	$377.83	$377.83		$302.74	$75.10		
72020	X-RAY OF SPINE, 1 VIEW		$17.98	$17.98		$11.46	$6.52		
72040	X-RAY OF UPPER SPINE, 2-3 VIEWS		$25.64	$25.64		$16.26	$9.38		
72050	X-RAY OF UPPER SPINE, 4-5 VIEWS		$37.59	$37.59		$24.26	$13.34		
72052	X-RAY OF UPPER SPINE, 6 OR MORE VIEWS		$46.28	$46.28		$30.67	$15.61		
72070	X-RAY OF MIDDLE SPINE, 2 VIEWS		$26.98	$26.98		$17.60	$9.38		
72072	X-RAY OF MIDDLE SPINE, 3 VIEWS		$29.37	$29.37		$19.99	$9.38		
72074	X-RAY OF MIDDLE SPINE, MINIMUM OF 4 VIEWS		$34.17	$34.17		$24.79	$9.38		
72080	X-RAY OF MIDDLE AND LOWER SPINE, 2 VIEWS		$27.52	$27.52		$18.14	$9.38		
72081	X-RAY OF ENTIRE MIDDLE AND LOWER SPINE, 1 VIEW		$29.12	$29.12		$18.35	$10.77		Added Effective 1/1/2016
72082	X-RAY OF ENTIRE MIDDLE AND LOWER SPINE, 2-3 VIEWS		$46.39	$46.39		$33.35	$13.03		Added Effective 1/1/2016
72083	X-RAY OF ENTIRE MIDDLE AND LOWER SPINE, 4-5 VIEWS		$50.42	$50.42		$36.20	$14.22		Added Effective 1/1/2016
72084	X-RAY OF ENTIRE MIDDLE AND LOWER SPINE, MINIMUM OF 6 VIEWS		$59.96	$59.96		$43.44	$16.52		Added Effective 1/1/2016
72100	X-RAY OF LOWER AND SACRAL SPINE, 2-3 VIEWS		$27.52	$27.52		$18.14	$9.38		
72110	X-RAY OF LOWER AND SACRAL SPINE, MINIMUM OF 4 VIEWS		$38.13	$38.13		$24.79	$13.34		
72114	X-RAY OF LOWER AND SACRAL SPINE, MINIMUM OF 4 VIEWS		$47.62	$47.62		$32.01	$15.61		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
72120	X-RAY LOWER AND SACRAL SPINE, 2-3 VIEWS BENDING VIEWS		$33.64	$33.64		$24.26	$9.38		
72125	CT SCAN OF UPPER SPINE WITHOUT CONTRAST		$209.42	$209.42		$159.75	$49.66		
72126	CT SCAN OF UPPER SPINE WITH CONTRAST		$243.19	$243.19		$191.23	$51.96		
72127	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOW		$293.22	$293.22		$238.74	$54.47		
72128	CT SCAN OF UPPER SPINE WITH CONTRAST		$209.42	$209.42		$159.75	$49.66		
72129	CT SCAN OF MIDDLE SPINE WITH CONTRAST		$243.19	$243.19		$191.23	$51.96		
72130	CT SCAN OF MIDDLE SPINE BEFORE AND AFTER CONTRAST		$293.22	$293.22		$238.74	$54.47		
72131	CT SCAN OF LOWER SPINE WITHOUT CONTRAST		$209.42	$209.42		$159.75	$49.66		
72132	CT SCAN OF LOWER SPINE WITH CONTRAST		$243.19	$243.19		$191.23	$51.96		
72133	CT SCAN OF LOWER SPINE BEFORE AND AFTER CONTRAST		$293.22	$293.22		$238.74	$54.47		
72141	MRI SCAN OF UPPER SPINAL CANAL WITHOUT CONTRAST	Yes	$371.67	$371.67		$302.74	$68.93		
72142	MRI SCAN OF UPPER SPINAL CANAL WITH CONTRAST	Yes	$445.83	$445.83		$363.27	$82.57		
72146	MRI SCAN OF MIDDLE SPINAL CANAL WITHOUT CONTRAST	Yes	$405.02	$405.02		$336.09	$68.93		
72147	MRI SCAN OF MIDDLE SPINAL CANAL WITH CONTRAST	Yes	$445.83	$445.83		$363.27	$82.57		
72148	MRI SCAN OF LOWER SPINAL CANAL WITHOUT CONTRAST	Yes	$399.65	$399.65		$336.09	$63.56		
72149	MRI SCAN OF LOWER SPINAL CANAL WITH CONTRAST	Yes	$439.87	$439.87		$363.27	$76.60		
72156	MRI SCAN OF UPPER SPINAL CANAL BEFORE AND AFTER CONTRAST	Yes	$782.81	$782.81		$672.42	$110.39		
72157	MRI SCAN OF UPPER SPINAL CANAL BEFORE AND AFTER CONTRAST	Yes	$782.81	$782.81		$672.42	$110.39		
72158	MRI SCAN OF LOWER SPINAL CANAL BEFORE AND AFTER CONTRAST	Yes	$774.25	$774.25		$672.42	$101.84		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
72159	MRI SCAN OF BLOOD VESSELS OF SPINAL CANAL	Yes	$409.04	$409.04		$336.09	$72.95		
72170	X-RAY OF PELVIS, 1-2 VIEWS		$21.25	$21.25		$14.14	$7.11		
72190	X-RAY OF PELVIS, MINIMUM OF 3 VIEWS		$27.23	$27.23		$18.14	$9.09		
72191	CT SCAN OF BLOOD VESSELS OF PELVIS WITH CONTRAST		$273.77	$273.77		$225.60	$48.18		
72192	CT SCAN OF PELVIS WITHOUT CONTRAST		$206.31	$206.31		$159.75	$46.56		
72193	CT SCAN OF PELVIS WITH CONTRAST		$234.50	$234.50		$184.84	$49.66		
72194	CT SCAN OF PELVIS BEFORE AND AFTER CONTRAST		$281.10	$281.10		$229.14	$51.96		
72195	MRI SCAN OF PELVIS WITHOUT CONTRAST	Yes	$357.63	$357.63		$301.03	$56.60		
72196	MRI SCAN OF PELVIS WITH CONTRAST	Yes	$371.67	$371.67		$302.74	$68.93		
72197	MRI SCAN OF PELVIS BEFORE AND AFTER CONTRAST	Yes	$723.49	$723.49		$656.82	$66.66		
72198	MRI SCAN OF BLOOD VESSELS OF PELVIS	Yes	$377.54	$377.54		$302.74	$74.80		
72200	X-RAY OF JOINT BETWEEN LOWER SPINE AND HIP BONE, 1-2 VIEWS		$21.52	$21.52		$14.14	$7.38		
72202	X-RAY OF JOINT BETWEEN LOWER SPINE AND HIP BONE, 3 OR MORE VIEWS		$25.03	$25.03		$16.80	$8.23		
72220	X-RAY OF SACRUM AND TAILBONE, MINIMUM OF 2 VIEWS		$22.83	$22.83		$15.46	$7.38		
72240	REVIEW BY RADIOLOGIST OF UPPER SPINAL CANAL IMAGE		$167.44	$167.44		$128.28	$39.16		
72255	REVIEW BY RADIOLOGIST OF MIDDLE SPINAL CANAL IMAGE		$156.25	$156.25		$117.09	$39.16		
72265	REVIEW BY RADIOLOGIST OF LOWER SPINAL CANAL IMAGE		$146.15	$146.15		$110.14	$36.01		
72270	REVIEW BY RADIOLOGIST OF MULTIPLE SPINAL CANALS IMAGE		$221.86	$221.86		$164.82	$57.04		
72285	REVIEW BY RADIOLOGIST OF DISC OF UPPER OR MIDDLE SPINE IMAGE		$262.46	$262.46		$226.46	$36.01		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
72295	REVIEW BY RADIOLOGIST OF DISC OF LOWER SPINE IMAGE		$248.08	$248.08		$212.07	$36.01		
73000	X-RAY OF COLLAR BONE		$20.96	$20.96		$14.14	$6.82		
73010	X-RAY OF SHOULDER BLADE		$21.52	$21.52		$14.14	$7.38		
73020	X-RAY OF SHOULDER, 1 VIEW		$19.32	$19.32		$12.80	$6.52		
73030	X-RAY OF SHOULDER, MINIMUM OF 2 VIEWS		$23.13	$23.13		$15.46	$7.67		
73040	REVIEW BY RADIOLOGIST OF SHOULDER JOINT IMAGE		$80.33	$80.33		$56.80	$23.52		
73050	X-RAY OF BOTH COLLAR BONES JOINTS		$26.66	$26.66		$18.14	$8.53		
73060	X-RAY OF UPPER ARM, MINIMUM OF 2 VIEWS		$22.83	$22.83		$15.46	$7.38		
73070	X-RAY OF ELBOW, 2 VIEWS		$20.66	$20.66		$14.14	$6.52		
73080	X-RAY OF ELBOW, MINIMUM OF 3 VIEWS		$22.83	$22.83		$15.46	$7.38		
73085	REVIEW BY RADIOLOGIST OF ELBOW IMAGE		$80.33	$80.33		$56.80	$23.52		
73090	X-RAY OF FOREARM, 2 VIEWS		$20.96	$20.96		$14.14	$6.82		
73092	X-RAY OF INFANT ARM, MINIMUM OF 2 VIEWS		$20.15	$20.15		$13.34	$6.82		
73100	X-RAY OF WRIST, 2 VIEWS		$20.15	$20.15		$13.34	$6.82		
73110	X-RAY OF WRIST, MINIMUM OF 3 VIEWS		$21.79	$21.79		$14.41	$7.38		
73115	REVIEW BY RADIOLOGIST OF WRIST JOINT IMAGE		$66.19	$66.19		$42.66	$23.52		
73120	X-RAY OF HAND, 2 VIEWS		$20.15	$20.15		$13.34	$6.82		
73130	X-RAY OF HAND, MINIMUM OF 3 VIEWS		$21.79	$21.79		$14.41	$7.38		
73140	X-RAY OF FINGER, MINIMUM OF 2 VIEWS		$17.12	$17.12		$11.46	$5.67		
73200	CT SCAN OF ARM WITHOUT CONTRAST		$180.72	$180.72		$134.16	$46.56		
73201	CT SCAN OF ARM WITH CONTRAST		$209.42	$209.42		$159.75	$49.66		
73202	CT SCAN OF ARM BEFORE AND AFTER CONTRAST		$252.79	$252.79		$200.83	$51.96		
73206	CT SCAN OF BLOOD VESSELS OF ARM WITH CONTRAST		$246.41	$246.41		$198.24	$48.18		
73218	MRI SCAN OF ARM WITHOUT CONTRAST	Yes	$333.53	$333.53		$295.29	$38.24		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
73219	MRI SCAN OF ARM WITH CONTRAST	Yes	$399.60	$399.60		$354.09	$45.51		
73220	MRI SCAN OF ARM BEFORE AND AFTER CONTRAST	Yes	$366.30	$366.30		$302.74	$63.56		
73221	MRI SCAN OF ARM JOINT WITHOUT CONTRAST	Yes	$338.64	$338.64		$286.23	$52.41		
73222	MRI SCAN OF ARM JOINT WITH CONTRAST	Yes	$399.60	$399.60		$354.09	$45.51		
73223	MRI SCAN OF ARM JOINT BEFORE AND AFTER CONTRAST	Yes	$716.67	$716.67		$655.32	$61.35		
73225	MRI SCAN OF ARM JOINT BEFORE AND AFTER CONTRAST	Yes	$373.63	$373.63		$302.74	$70.90		
73501	X-RAY OF HIP, 1 VIEW		$22.37	$22.37		$14.72	$7.65		Added Effective 1/1/2016
73502	X-RAY OF HIP, 2-3 VIEWS		$30.80	$30.80		$21.71	$9.09		Added Effective 1/1/2016
73503	X-RAY OF HIP, MINIMUM OF 4 VIEWS		$38.47	$38.47		$26.88	$11.59		Added Effective 1/1/2016
73521	X-RAY OF BOTH HIPS, 2 VIEWS		$29.77	$29.77		$20.42	$9.35		Added Effective 1/1/2016
73522	X-RAY OF BOTH HIPS, 3-4 VIEWS		$36.48	$36.48		$24.30	$12.18		Added Effective 1/1/2016
73523	X-RAY OF BOTH HIPS, MINIMUM OF 5 VIEWS		$42.25	$42.25		$29.21	$13.03		Added Effective 1/1/2016
73525	REVIEW BY RADIOLOGIST OF HIP JOINT IMAGE		$80.33	$80.33		$56.80	$23.52		
73551	X-RAY OF THIGH BONE, 1 VIEW		$20.74	$20.74		$13.95	$6.79		Added Effective 1/1/2016
73552	X-RAY OF THIGH BONE, MINIMUM 2 VIEWS		$24.18	$24.18		$16.54	$7.65		Added Effective 1/1/2016
73560	X-RAY OF THIGH BONE, MINIMUM 2 VIEWS		$21.25	$21.25		$14.14	$7.11		
73562	X-RAY OF KNEE, 3 VIEWS		$23.39	$23.39		$15.46	$7.94		
73564	X-RAY OF KNEE, 4 OR MORE VIEWS		$26.42	$26.42		$16.80	$9.62		
73565	X-RAY OF BOTH KNEES WHILE STANDING		$20.44	$20.44		$13.34	$7.11		
73580	REVIEW BY RADIOLOGIST OF KNEE JOINT IMAGE		$94.71	$94.71		$71.19	$23.52		
73590	X-RAY OF LOWER LEG, 2 VIEWS		$21.25	$21.25		$14.14	$7.11		
73592	X-RAY OF INFANT LEG, MINIMUM OF 2 VIEWS		$20.15	$20.15		$13.34	$6.82		
73600	X-RAY OF ANKLE, 2 VIEWS		$20.15	$20.15		$13.34	$6.82		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
73610	X-RAY OF ANKLE, MINIMUM OF 3 VIEWS		$21.79	$21.79		$14.41	$7.38		
73615	REVIEW BY RADIOLOGIST OF ANKLE JOINT IMAGE		$80.33	$80.33		$56.80	$23.52		
73620	X-RAY OF FOOT, 2 VIEWS		$20.15	$20.15		$13.34	$6.82		
73630	X-RAY OF FOOT, MINIMUM OF 3 VIEWS		$21.79	$21.79		$14.41	$7.38		
73650	X-RAY OF HEEL, MINIMUM OF 2 VIEWS		$19.61	$19.61		$12.80	$6.82		
73660	X-RAY OF TOE, MINIMUM OF 2 VIEWS		$17.12	$17.12		$11.46	$5.67		
73700	CT SCAN OF LEG WITHOUT CONTRAST		$180.72	$180.72		$134.16	$46.56		
73701	CT SCAN OF LEG WITH CONTRAST MATERIAL		$209.42	$209.42		$159.75	$49.66		
73702	CT SCAN OF LEG BEFORE AND AFTER CONTRAST		$252.79	$252.79		$200.83	$51.96		
73706	CT SCAN OF BLOOD VESSELS OF LOWER LEG WITH CONTRAST		$246.41	$246.41		$198.24	$48.18		
73718	MRI SCAN OF LEG WITHOUT CONTRAST	Yes	$333.53	$338.24		$295.29	$38.24		
73719	MRI SCAN OF LEG WITH CONTRAST	Yes	$399.60	$399.60		$354.09	$45.51		
73720	MRI SCAN OF LEG BEFORE AND AFTER CONTRAST	Yes	$366.30	$366.30		$302.74	$63.56		
73721	MRI SCAN OF LEG JOINT WITHOUT CONTRAST	Yes	$344.77	$344.77		$292.35	$52.41		
73722	MRI SCAN OF LEG JOINT WITH CONTRAST	Yes	$399.60	$399.60		$354.09	$45.51		
73723	MRI SCAN OF LEG JOINT BEFORE AND AFTER CONTRAST	Yes	$716.67	$716.67		$655.32	$61.35		
73725	MRI SCAN OF BLOOD VESSELS OF LEG	Yes	$376.27	$376.27		$302.74	$73.54		
74018	X-RAY OF ABDOMEN, 1 VIEW		$20.57	$20.57		$13.30	$7.27		Added Effective 1/1/2018
74019	X-RAY OF ABDOMEN, 2 VIEWS		$25.15	$25.15		$15.91	$9.24		Added Effective 1/1/2018
74021	X-RAY OF ABDOMEN, MINIMUM OF 3 VIEWS		$29.42	$29.42		$18.52	$10.90		Added Effective 1/1/2018
74022	X-RAY SERIES OF ABDOMEN WITH SINGLE X-RAY OF CHEST		$36.30	$36.30		$23.59	$12.71		Updated Effective 01/01/2020
74150	CT SCAN OF ABDOMEN WITHOUT CONTRAST		$203.88	$203.88		$153.07	$50.81		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
74160	CT SCAN OF ABDOMEN WITH CONTRAST		$239.31	$239.31		$184.84	$54.47		
74170	CT SCAN OF ABDOMEN BEFORE AND AFTER CONTRAST		$289.28	$289.28		$229.14	$60.14		
74174	CT SCAN OF BLOOD VESSELS OF ABDOMEN AND PELVIS WITH CONTRAST		$434.81	$434.81		$346.77	$88.04		
74175	CT SCAN OF BLOOD VESSELS OF ABDOMEN WITH CONTRAST		$273.77	$273.77		$225.60	$48.18		
74176	CT SCAN OF ABDOMEN AND PELVIS WITHOUT CONTRAST		$189.00	$189.00		$115.12	$73.88		
74177	CT SCAN OF ABDOMEN AND PELVIS WITH CONTRAST		$297.00	$297.00		$219.56	$77.44		
74178	CT SCAN OF ABDOMEN AND PELVIS WITH CONTRAST		$375.92	$375.92		$290.17	$85.75		
74181	MRI SCAN OF ABDOMEN WITHOUT CONTRAST	Yes	$371.67	$371.67		$302.74	$68.93		
74182	MRI SCAN OF ABDOMEN WITH CONTRAST	Yes	$405.62	$405.62		$355.09	$50.54		
74183	MRI SCAN OF ABDOMEN BEFORE AND AFTER CONTRAST	Yes	$723.49	$723.49		$656.82	$66.66		
74185	MRI SCAN OF BLOOD VESSELS OF ABDOMEN	Yes	$377.54	$377.54		$302.74	$74.80		
74190	REVIEW BY RADIOLOGIST OF ABDOMINAL CAVITY LINING IMAGE		$53.26	$53.26		$35.20	$18.06		
74210	X-RAY OF VOICE BOX AND/OR ESOPHAGUS WITH CONTRAST		$70.88	$70.88		$47.20	$23.68		Updated Effective 01/01/2020
74220	SINGLE CONTRAST X-RAY OF ESOPHAGUS		$72.21	$72.21		$48.24	$23.97		Updated Effective 01/01/2020
74221	DOUBLE CONTRAST X-RAY OF ESOPHAGUS		$81.62	$81.62		$53.68	$27.93		Added Effective 01/01/2020
74230	IMAGING FOR EVALUATION OF SWALLOWING FUNCTION	Yes	$96.12	$96.12		$74.96	$21.16		Updated Effective 01/01/2020
74235	REVIEW BY RADIOLOGIST OF IMAGING FOR REMOVAL OF ESOPHAGEAL FOREIGN BODY IN ESOPHAGUS		$122.00	$122.00		$71.19	$50.81		
74240	SINGLE CONTRAST X-RAY OF UPPER DIGESTIVE TRACT		$90.47	$90.47		$58.09	$32.38		Updated Effective 01/01/2020
74246	DOUBLE CONTRAST X-RAY OF UPPER DIGESTIVE TRACT		$104.03	$104.03		$67.95	$36.08		Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
74248	FOLLOW-THROUGH X-RAY OF SMALL INTESTINES		$62.43	$62.43		$34.50	$27.93		Added Effective 01/01/2020
74250	SINGLE CONTRAST X-RAY OF SMALL INTESTINE		$91.03	$91.03		$58.35	$32.67		Updated Effective 01/01/2020
74251	DOUBLE CONTRAST X-RAY OF SMALL INTESTINE		$297.13	$297.13		$250.32	$46.81		Updated Effective 01/01/2020
74261	DIAGNOSTIC CT SCAN OF LARGE INTESTINE WITHOUT CONTRAST		$296.05	$296.05		$210.96	$85.09		
74262	DIAGNOSTIC CT SCAN OF LARGE INTESTINE WITH CONTRAST		$332.42	$332.42		$239.03	$93.40		
74270	SINGLE CONTRAST X-RAY OF LARGE INTESTINE		$115.91	$115.91		$74.44	$41.47		Updated Effective 01/01/2020
74280	DOUBLE CONTRAST X-RAY OF LARGE INTESTINE		$165.90	$165.90		$115.69	$50.22		Updated Effective 01/01/2020
74283	ENEMA USING AIR OR CONTRAST		$156.15	$156.15		$69.33	$86.82		
74290	IMAGING OF GALLBLADDER WITH CONTRAST		$33.89	$33.89		$19.99	$13.90		
74300	REVIEW BY RADIOLOGIST OF BILE AND/OR PANCREATIC DUCT IMAGE DURING SURGERY		$39.94	$39.94		$25.98	$13.96		
74301	REVIEW BY RADIOLOGIST OF ADDITIONAL BILE AND/OR PANCREATIC DUCT IMAGE DURING SURGERY		$23.19	$23.19		$15.08	$8.10		
74328	REVIEW BY RADIOLOGIST OF IMAGE FROM TUBE PLACEMENT INTO BILE DUCT USING AN ENDOSCOPE		$115.42	$115.42		$85.08	$30.34		
74329	REVIEW BY RADIOLOGIST OF IMAGE FROM TUBE PLACEMENT INTO PANCREATIC DUCT USING AN ENDOSCOPE		$115.42	$115.42		$85.08	$30.34		
74330	REVIEW BY RADIOLOGIST OF IMAGE FROM TUBE PLACEMENT INTO BILE AND PANCREATIC DUCT USING AN ENDOSCOPE		$115.42	$115.42		$85.08	$30.34		
74340	REVIEW BY RADIOLOGIST OF PLACEMENT OF LONG SMALL BOWEL TUBE		$94.71	$94.71		$71.19	$23.52		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
74355	REVIEW BY RADIOLOGIST OF PLACEMENT OF SMALL BOWEL TUBE		$104.09	$104.09		$71.19	$32.90		
74360	REVIEW BY RADIOLOGIST OF IMAGE TO GUIDE OPENING OF DIGESTIVE TRACT		$108.60	$108.60		$85.08	$23.52		
74363	REVIEW BY RADIOLOGIST OF IMAGE TO GUIDE OPENING OF BILE DUCT		$202.83	$202.83		$164.82	$38.01		
74400	IMAGING OF URINARY TRACT WITH INJECTION OF CONTRAST INTO A VEIN		$66.60	$66.60		$45.59	$21.01		
74410	IMAGING OF URINARY TRACT USING INFUSION TECHNIQUE		$73.81	$73.81		$52.80	$21.01		
74415	IMAGING OF URINARY TRACT USING INFUSION TECHNIQUE WITH KIDNEY SECTION FILMING		$78.35	$78.35		$57.34	$21.01		
74420	IMAGING OF URINARY TRACT FOLLOWING INJECTION OF A CONTRAST AGENT		$86.53	$86.53		$71.19	$15.34		
74425	REVIEW BY RADIOLOGIST OF UPPER URINARY TRACT IMAGE		$50.54	$50.54		$35.20	$15.34		
74430	REVIEW BY RADIOLOGIST OF URINARY BLADDER IMAGE		$42.42	$42.42		$28.52	$13.90		
74440	REVIEW BY RADIOLOGIST OF MALE INTERNAL GENITALS IMAGE		$47.11	$47.11		$30.67	$16.44		
74445	REVIEW BY RADIOLOGIST OF PENIS IMAGE		$79.47	$79.47		$30.67	$48.81		
74450	REVIEW BY RADIOLOGIST OF URINARY BLADDER AND URETHRA IMAGES WITH CONTRAST		$53.66	$53.66		$39.47	$14.19		
74455	REVIEW BY RADIOLOGIST OF URINARY BLADDER AND URETHRA IMAGES WITH CONTRAST AND AFTER PASSING URINE		$56.86	$56.86		$42.66	$14.19		
74470	REVIEW BY RADIOLOGIST OF KIDNEY CYST IMAGE		$57.38	$57.38		$33.86	$23.52		
74485	REVIEW BY RADIOLOGIST OF URETER OR URETHRA IMAGE		$108.60	$108.60		$85.08	$23.52		
74712	MRI SCAN OF FETUS FOR SINGLE OR FIRST PREGNANCY	Yes	$361.01	$361.01		$239.01	$122.00		Added Effective 1/1/2016

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
74713	MRI SCAN OF FETUS FOR EACH ADDITIONAL PREGNANCY	Yes	$174.68	$174.68		$102.43	$72.25		Added Effective 1/1/2016
74740	REVIEW BY RADIOLOGIST OF UTERINE TUBE AND OVARY IMAGE		$51.64	$51.64		$35.20	$16.44		
74742	REVIEW BY RADIOLOGIST OF IMAGE FROM PLACEMENT OF UTERINE TUBE		$110.66	$110.66		$85.08	$25.58		
74775	IMAGING OF ANOGENITAL REGION		$66.41	$66.41		$39.47	$26.94		
75557	MRI SCAN OF HEART WITHOUT CONTRAST		$309.93	$309.93		$170.24	$51.53		
75559	MRI SCAN OF HEART WITHOUT CONTRAST WITH STRESS IMAGING		$311.88	$311.88		$256.27	$65.66		
75561	MRI SCAN OF HEART BEFORE AND AFTER CONTRAST		$475.58	$475.58		$241.68	$57.00		
75563	MRI SCAN OF HEART BEFORE AND AFTER CONTRAST WITH STRESS IMAGING		$477.59	$477.59		$301.00	$68.25		
75565	MRI SCAN OF BLOOD FLOW OF HEART		$65.50	$65.50		$55.82	$9.68		
75571	CT SCAN OF HEART WITH EVALUATION OF BLOOD VESSEL CALCIUM		$65.23	$65.23		$43.57	$21.65		
75572	CT SCAN OF HEART STRUCTURE WITH CONTRAST		$191.56	$191.56		$125.73	$65.82		
75573	CT SCAN OF CONGENITAL HEART DISEASE WITH CONTRAST		$272.36	$272.36		$178.04	$94.31		
75574	CT SCAN OF BLOOD VESSELS AND GRAFTS OF HEART WITH CONTRAST		$417.89	$417.89		$328.08	$89.81		
75580	ANALYSIS OF DATA FROM CT STUDY OF HEART BLOOD VESSELS TO ASSESS SEVERITY OF HEART ARTERY DISEASE, WITH INTERPRETATION AND REPORT		$708.51	$708.51		$678.68	$29.83		
75600	REVIEW BY RADIOLOGIST OF CHEST AORTA IMAGE		$361.36	$361.36		$340.35	$21.01		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
75605	REVIEW BY RADIOLOGIST OF CHEST AORTA SERIAL IMAGES		$389.16	$389.16		$340.35	$48.81		
75625	REVIEW BY RADIOLOGIST OF ABDOMINAL AORTA IMAGE		$389.16	$389.16		$340.35	$48.81		
75630	REVIEW BY RADIOLOGIST OF ABDOMINAL AORTA AND BOTH LEG ARTERIES IMAGE		$410.92	$410.92		$354.74	$56.18		
75635	CT SCAN OF ABDOMINAL AORTA AND BOTH LEG ARTERIES WITH CONTRAST		$300.86	$300.86		$225.60	$75.26		
75705	REVIEW BY RADIOLOGIST OF SPINAL ARTERY IMAGE		$434.25	$434.25		$340.35	$93.90		
75710	REVIEW BY RADIOLOGIST OF ARM OR LEG ARTERY IMAGE		$389.16	$389.16		$340.35	$48.81		
75716	REVIEW BY RADIOLOGIST OF BOTH ARMS OR LEGS ARTERIES IMAGE		$396.54	$396.54		$340.35	$56.18		
75726	REVIEW BY RADIOLOGIST OF ABDOMINAL ARTERY IMAGE		$389.16	$389.16		$340.35	$48.81		
75731	REVIEW BY RADIOLOGIST OF ADRENAL GLAND ARTERY IMAGE		$389.16	$389.16		$340.35	$48.81		
75733	REVIEW BY RADIOLOGIST OF BOTH ADRENAL GLANDS ARTERIES IMAGE		$396.54	$396.54		$340.35	$56.18		
75736	REVIEW BY RADIOLOGIST OF PELVIS ARTERY IMAGE		$389.16	$389.16		$340.35	$48.81		
75741	VIEW BY RADIOLOGIST OF LUNG ARTERY IMAGE		$396.54	$396.54		$340.35	$56.18		
75743	REVIEW BY RADIOLOGIST OF ARTERIES OF BOTH LUNGS IMAGE		$411.58	$411.58		$340.35	$71.23		
75746	REVIEW BY RADIOLOGIST OF LUNG ARTERY IMAGE WITH CONTRAST		$389.16	$389.16		$340.35	$48.81		
75756	REVIEW BY RADIOLOGIST OF BREAST ARTERY OF BREAST IMAGE		$389.16	$389.16		$340.35	$48.81		
75774	REVIEW BY RADIOLOGIST OF ADDITIONAL ARTERY IMAGE		$355.69	$355.69		$340.35	$15.34		
75801	REVIEW BY RADIOLOGIST OF LYMPHATIC SYSTEM OF ARM OR LEG IMAGE		$181.33	$181.33		$146.42	$34.91		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
75803	REVIEW BY RADIOLOGIST OF LYMPHATIC SYSTEM OF ARM OR LEG IMAGE		$196.37	$196.37		$146.42	$49.96		
75805	REVIEW BY RADIOLOGIST OF LYMPHATIC SYSTEM OF SIDE OF PELVIS AND ABDOMEN IMAGE		$199.73	$199.73		$164.82	$34.91		
75807	REVIEW BY RADIOLOGIST OF LYMPHATIC SYSTEM OF BOTH SIDE OF PELVIS AND ABDOMEN IMAGE		$214.78	$214.78		$164.82	$49.96		
75809	REVIEW BY RADIOLOGIST OF PREVIOUS PLACED SHUNT IMAGE		$40.95	$40.95		$21.33	$19.62		
75810	REVIEW BY RADIOLOGIST OF SPLEEN AND LIVER VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		
75820	REVIEW BY RADIOLOGIST OF 1 ARM OR LEG VEIN OF 1 ARM OR LEG IMAGE		$55.94	$55.94		$25.60	$30.34		
75822	REVIEW BY RADIOLOGIST OF BOTH ARMS AND LEGS VEINS OF BOTH ARMS OR LEGS IMAGE		$85.42	$85.42		$40.01	$45.41		
75825	REVIEW BY RADIOLOGIST OF MAJOR LOWER BODY VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		
75827	REVIEW BY RADIOLOGIST OF MAJOR UPPER BODY VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		
75831	REVIEW BY RADIOLOGIST OF KIDNEY IMAGE		$389.16	$389.16		$340.35	$48.81		
75833	REVIEW BY RADIOLOGIST OF BOTH KIDNEYS VEINS IMAGE		$404.21	$404.21		$340.35	$63.85		
75840	REVIEW BY RADIOLOGIST OF ADRENAL GLAND VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		
75842	REVIEW BY RADIOLOGIST OF BOTH ADRENAL GLAND VEINS IMAGE		$404.21	$404.21		$340.35	$63.85		Termed 12/31/2025
75860	REVIEW BY RADIOLOGIST OF HEAD OR NECK VEIN SYSTEM IMAGE		$389.16	$389.16		$340.35	$48.81		
75870	REVIEW BY RADIOLOGIST OF HEAD VEIN SYSTEM IMAGE		$389.16	$389.16		$340.35	$48.81		
75872	REVIEW BY RADIOLOGIST OF SPINAL CANAL VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
75880	REVIEW BY RADIOLOGIST OF EYE SOCKET VEIN OF EYE SOCKET IMAGE		$55.94	$55.94		$25.60	$30.34		
75885	REVIEW BY RADIOLOGIST OF THE VEIN THAT TRANSPORTS BLOOD TO THE LIVER IMAGE WITH ASSESSMENT OF BLOOD FLOW		$402.20	$402.20		$340.35	$61.85		
75887	REVIEW BY RADIOLOGIST OF THE VEIN THAT TRANSPORTS BLOOD TO THE LIVER IMAGE		$402.20	$402.20		$340.35	$61.85		
75889	REVIEW BY RADIOLOGIST OF LIVER VEIN IMAGE WITH ASSESSMENT OF BLOOD FLOW		$389.16	$389.16		$340.35	$48.81		
75891	REVIEW BY RADIOLOGIST OF LIVER VEIN IMAGE		$389.16	$389.16		$340.35	$48.81		
75893	REVIEW BY RADIOLOGIST OF IMAGING GUIDANCE FOR REMOVAL OF BLOOD SAMPLE		$363.88	$363.88		$340.35	$23.52		
75894	REVIEW BY RADIOLOGIST OF IMAGE FOR INSERTION OF MATERIAL TO BLOCK BLOOD FLOW		$708.07	$708.07		$651.89	$56.18		
75898	IMAGING OF BLOOD VESSEL		$99.46	$99.46		$28.52	$70.94		
75901	REVIEW BY RADIOLOGIST OF IMAGE FOR REMOVAL OF OBSTRUCTIVE MATERIAL		$70.35	$70.35		$51.36	$18.99		
75902	REVIEW BY RADIOLOGIST OF IMAGE FOR REMOVAL OF TISSUE OR OBSTRUCTIVE MATERIAL FROM CENTRAL VENOUS TUBE		$66.44	$66.44		$51.36	$15.08		
75956	REVIEW BY RADIOLOGIST OF IMAGE FOR REPAIR OF DESCENDING AORTA AND SUBCLAVIAN ARTERY WITH INSERTION OF GRAFT AND EXTENSIONS		$294.71	$294.71					Effective 1/1/2006 Termed 12/31/2025
75957	REVIEW BY RADIOLOGIST OF IMAGE FOR REPAIR OF DESCENDING AORTA WITH INSERTION OF GRAFT AND EXTENSIONS		$252.50	$252.50		$0.00	$252.50		Termed 12/31/2025

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
75958	REVIEW BY RADIOLOGIST OF IMAGE FOR INSERTION OF EXTENSION		$168.33	$168.33		$0.00	$168.33		Termed 12/31/2025
75959	REVIEW BY RADIOLOGIST OF IMAGE FOR INSERTION OF EXTENSION AFTER PREVIOUS REPAIR OF DESCENDING AORTA		$147.35	$147.35		$0.00	$147.35		Termed 12/31/2025
75970	REVIEW BY RADIOLOGIST OF IMAGE FOR BIOPSY OF BLOOD VESSEL WITH TUBE		$347.81	$347.81		$311.81	$36.01		
75984	REVIEW BY RADIOLOGIST OF IMAGE FOR REPLACEMENT OF STOMACH OR LARGE BOWEL TUBE		$84.00	$84.00		$52.80	$31.19		
75989	REVIEW BY RADIOLOGIST OF IMAGE FOR DRAINAGE OF FLUID		$135.89	$135.89		$85.08	$50.81		
76000	IMAGING GUIDANCE FOR PROCEDURE, 60 MINUTES OR LESS		$42.31	$42.31		$35.20	$7.11		
76010	X-RAY FROM NOSE TO RECTUM		$21.81	$21.81		$14.14	$7.67		
76014	ASSESSMENT BY TRAINED CLINICAL STAFF OF IMPLANT AND/OR FOREIGN BODY FOR MR SAFETY, INCLUDING IDENTIFICATION AND VERIFICATION OF IMPLANT COMPONENTS FROM APPROPRIATE SOURCES, ANALYZING CURRENT MR CONDITIONAL STATUS OF INDIVIDUAL COMPONENTS AND SYSTEMS, AND CONSULTING PUBLISHED PROFESSIONAL GUIDANCE WITH WRITTEN REPORT, INITIAL 15 MINUTES		$8.60	$8.60					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76015	ASSESSMENT BY TRAINED CLINICAL STAFF OF IMPLANT AND/OR FOREIGN BODY FOR MR SAFETY, INCLUDING IDENTIFICATION AND VERIFICATION OF IMPLANT COMPONENTS FROM APPROPRIATE SOURCES, ANALYZING CURRENT MR CONDITIONAL STATUS OF INDIVIDUAL COMPONENTS AND SYSTEMS, AND CONSULTING PUBLISHED PROFESSIONAL GUIDANCE WITH WRITTEN REPORT, EACH ADDITIONAL 30 MINUTES		$41.43	$41.43					
76016	DETERMINATION OF MR SAFETY BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL RESPONSIBLE FOR THE SAFETY OF THE MR PROCEDURE, INCLUDING REVIEW OF IMPLANT MR CONDITIONS FOR INDICATED MR EXAMINATION, ANALYSIS OF RISK VS CLINICAL BENEFIT OF PERFORMING MR EXAMINATION, AND DETERMINATION OF MR EQUIPMENT, ACCESSORY EQUIPMENT, AND EXPERTISE REQUIRED TO PERFORM EXAMINATION, WITH WRITTEN REPORT		$58.79	$58.79		$35.41	$23.38		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76017	MEDICAL PHYSICS EXAMINATION CUSTOMIZATION, PLANNING AND PERFORMANCE MONITORING BY MEDICAL PHYSICIST OR MR SAFETY EXPERT FOR MR SAFETY, WITH REVIEW AND ANALYSIS BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL TO PRIORITIZE AND SELECT VIEWS AND IMAGING SEQUENCES, TO TAILOR MR ACQUISITION SPECIFIC TO RESTRICTIVE REQUIREMENTS OR ARTIFACTS ASSOCIATED WITH MR CONDITIONAL IMPLANTS OR TO MITIGATE RISK OF NON-CONDITIONAL IMPLANTS OR FOREIGN BODIES, WITH WRITTEN REPORT		$178.69	$178.69		$148.91	$29.78		
76018	PREPARATION UNDER SUPERVISION OF PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL OF ELECTRONICS FOR MR SAFETY, INCLUDING MR-SPECIFIC PROGRAMMING OF PULSE GENERATOR AND/OR TRANSMITTER TO VERIFY DEVICE INTEGRITY, PROTECTION OF DEVICE INTERNAL CIRCUITRY FROM MR ELECTROMAGNETIC FIELDS, AND PROTECTION OF PATIENT FROM RISKS OF UNINTENDED STIMULATION OR HEATING WHILE IN THE MR ROOM, WITH WRITTEN REPORT		$91.68	$91.68		$62.46	$29.22		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76019	IMPLANT POSITIONING AND/OR IMMOBILIZATION UNDER SUPERVISION OF PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL FOR MR SAFETY, INCLUDING APPLICATION OF PHYSICAL PROTECTIONS TO SECURE IMPLANTED MEDICAL DEVICE FROM MR-INDUCED TRANSLATIONAL OR VIBRATIONAL FORCES, MAGNETICALLY INDUCED FUNCTIONAL CHANGES, AND/OR PREVENTION OF RADIOFREQUENCY BURNS FROM INADVERTENT TISSUE CONTACT WHILE IN THE MR ROOM, WITH WRITTEN REPORT		$118.65	$118.65		$95.51	$23.15		
76080	REVIEW BY RADIOLOGIST OF ABSCESS OR SINUS CAVITY STUDY		$52.05	$52.05		$28.52	$23.52		
76098	X-RAY OF SURGICAL SPECIMEN		$18.27	$18.27		$11.46	$6.82		
76100	X-RAY OF BODY PLANE		$59.09	$59.09		$33.86	$25.23		
76102	COMPLEX MOTION IMAGING PROCEDURE ON BOTH SIDES OF BODY		$72.16	$72.16		$46.93	$25.23		
76120	IMAGING OF ORGAN	Yes	$44.96	$44.96		$28.52	$16.44		
76125	IMAGING OF ORGAN, COMPLIMENTING ROUTINE EXAM	Yes	$32.96	$32.96		$21.33	$11.63		
76140	WRITTEN CONSULTATION REPORT ON X-RAY		$19.86	$19.86					
76145	MEDICAL PHYSICS DOSE EVALUATION FOR RADIATION EXPOSURE, INCLUDING REPORT		$640.73	$640.73					Added Effective 01/01/2021
76376	3D RADIOGRAPHIC PROCEDURE		$97.83	$97.83		$89.59	$8.24		
76377	3D RADIOGRAPHIC PROCEDURE WITH COMPUTERIZED IMAGE POSTPROCESSING		$127.95	$127.95		$95.55	$32.40		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76380	LIMITED OR FOLLOW-UP CT SCAN		$136.95	$136.95		$94.69	$42.26		
76390	MRI STUDY FOR MEASURING BIOCHEMICAL CHANGES IN THE BRAIN	Yes	$351.96	$351.96		$292.16	$59.80		
76391	MAGNETIC RESONANCE (EG, VIBRATION) ELASTOGRAPHY		$177.68	$177.68		$132.62	$45.06		Effective 1/1/2019
76496	OTHER FLUOROSCOPIC PROCEDURE	Yes	$0.00	$0.00		$0.00	$0.00		
76497	OTHER CT SCAN	Yes	$0.00	$0.00		$0.00	$0.00		
76498	OTHER MRI SCAN	Yes	$0.00	$0.00		$0.00	$0.00		
76499	OTHER DIAGNOSTIC IMAGING PROCEDURE	Yes	$0.00	$0.00		$0.00	$0.00		
76506	ULTRASOUND SCAN OF BRAIN		$65.63	$65.63		$38.40	$27.24		
76510	1D AND 2D ULTRASOUND SCAN OF EYE TISSUE AND STRUCTURES		$121.56	$121.56		$57.44	$64.12		
76512	2D ULTRASOUND SCAN OF EYE TISSUE AND STRUCTURES		$69.95	$69.95		$41.32	$28.63		Adding to fee schedule only, effective 1/1/2017
76513	ULTRASOUND SCAN OF EYE USING WATER BATH METHOD		$69.95	$69.95		$41.32	$28.63		
76514	ULTRASOUND SCAN OF CORNEA TO DETERMINE THICKNESS		$9.01	$9.01		$1.80	$7.21		
76519	ULTRASOUND SCAN TO DETERMINE EYE LENGTH AND LENS POWER		$52.34	$52.34		$30.05	$22.29		
76536	ULTRASOUND SCAN OF HEAD AND NECK SOFT TISSUE		$62.77	$62.77		$38.40	$24.38		
76604	ULTRASOUND SCAN OF CHEST		$59.29	$59.29		$35.20	$24.08		
76641	COMPLETE ULTRASOUND SCAN OF 1 BREAST		$81.80	$81.80		$51.98	$29.82		Added effective 1/1/2015
76642	LIMITED ULTRASOUND SCAN OF 1 BREAST		$67.64	$67.64		$39.82	$27.82		Added effective 1/1/2015
76700	COMPLETE ULTRASOUND SCAN OF ABDOMEN		$88.25	$88.25		$53.34	$34.91		
76705	LIMITED ULTRASOUND SCAN OF ABDOMEN		$63.92	$63.92		$38.40	$25.53		
76706	ULTRASOUND SCAN OF ABDOMINAL AORTA		$71.08	$71.08		$48.58	$22.49		Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76770	COMPLETE ULTRASOUND SCAN BEHIND ABDOMINAL CAVITY		$85.39	$85.39		$53.34	$32.05		
76775	LIMITED ULTRASOUND SCAN BEHIND ABDOMINAL CAVITY		$63.63	$63.63		$38.40	$25.23		
76776	ULTRASOUND SCAN OF TRANSPLANTED KIDNEY		$87.59	$87.59		$59.12	$28.47		
76800	ULTRASOUND SCAN OF SPINAL CANAL		$86.91	$86.91		$38.40	$48.51		
76801	ULTRASOUND SCAN OF PREGNANT UTERUS (LESS THAN 14 WEEKS), SINGLE OR FIRST FETUS	*	$68.11	$68.11		$29.32	$38.78		*More than two ultrasounds in a 9-month period requires a PA.
76802	ULTRASOUND SCAN OF PREGNANT UTERUS (LESS THAN 14 WEEKS), EACH ADDITIONAL FETUS	*	$53.48	$53.48		$20.84	$32.64		*More than two ultrasounds in a 9-month period requires a PA.
76805	ULTRASOUND SCAN OF PREGNANT UTERUS (14 WEEKS OR MORE), SINGLE OR FIRST FETUS	*	$99.62	$99.62		$56.80	$42.82		*More than two ultrasounds in a 9-month period requires a PA.
76810	ULTRASOUND SCAN OF PREGNANT UTERUS (14 WEEKS OR MORE), EACH ADDITIONAL FETUS	*	$197.93	$197.93		$113.36	$84.57		*More than two ultrasounds in a 9-month period requires a PA.
76811	ULTRASOUND SCAN OF PREGNANT UTERUS WITH DETAILED FETAL ANATOMIC EXAMINATION, SINGLE OR FIRST FETUS	*	$139.29	$139.29		$67.30	$71.98		*More than two ultrasounds in a 9-month period requires a PA.
76812	ULTRASOUND SCAN OF PREGNANT UTERUS WITH DETAILED FETAL ANATOMIC EXAMINATION, EACH ADDITIONAL FETUS	*	$106.62	$106.62		$35.57	$71.05		*More than two ultrasounds in a 9-month period requires a PA.
76813	ULTRASOUND SCAN OF PREGNANT UTERUS (LESS THAN 14 WEEKS), WITH MEASUREMENT OF THE CLEAR SPACE BENEATH SKIN AT THE BACK OF FETAL NECK, SINGLE OR FIRST FETUS	*	$91.06	$91.06		$47.45	$43.61		*More than two ultrasounds in a 9-month period requires a PA.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76814	ULTRASOUND SCAN OF PREGNANT UTERUS (LESS THAN 14 WEEKS), WITH MEASUREMENT OF THE CLEAR SPACE BENEATH SKIN AT THE BACK OF FETAL NECK, EACH ADDITIONAL FETUS	*	$61.49	$61.49		$24.88	$36.62		*More than two ultrasounds in a 9-month period requires a PA.
76815	LIMITED ULTRASOUND OF PREGNANT UTERUS	*	$66.49	$66.49		$38.40	$28.09		*More than two ultrasounds in a 9-month period requires a PA.
76816	FOLLOW-UP ULTRASOUND SCAN OF PREGNANT UTERUS	*	$80.13	$80.13		$47.91	$32.22		*More than two ultrasounds in a 9-month period requires a PA.
76817	VAGINAL ULTRASOUND OF PREGNANT UTERUS	*	$71.90	$71.90		$43.32	$28.58		*More than two ultrasounds in a 9-month period requires a PA.
76818	ULTRASOUND AND MONITORING OF HEART OF FETUS		$76.93	$76.93		$43.74	$33.20		
76819	ULTRASOUND SCAN OF FETUS		$68.38	$68.38		$43.30	$25.08		
76820	ULTRASOUND SCAN OF FETAL UMBILICAL ARTERY BLOOD FLOW RATE		$64.65	$64.65		$44.19	$20.46		
76821	ULTRASOUND SCAN OF FETAL BRAIN ARTERY BLOOD FLOW RATE		$72.62	$72.62		$44.19	$28.44		
76825	ULTRASOUND SCAN OF FETAL HEART		$92.70	$92.70		$53.34	$39.36		
76826	FOLLOW-UP ULTRASOUND SCAN OF FETAL HEART		$62.99	$62.99		$19.19	$43.81		
76827	ULTRASOUND SCAN OF FETAL HEART BLOOD FLOW		$83.89	$83.89		$47.15	$36.74		
76828	FOLLOW-UP ULTRASOUND SCAN OF FETAL HEART BLOOD FLOW		$55.05	$55.05		$30.62	$24.43		
76830	ULTRASOUND SCAN OF UTERUS, OVARIES, TUBES, CERVIX AND PELVIC AREA THROUGH VAGINA		$71.37	$71.37		$41.32	$30.05		
76831	ULTRASOUND SCAN OF UTERUS AND UTERINE CAVITY		$100.97	$70.10		$82.48	$31.15		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76856	COMPLETE ULTRASOUND SCAN OF PELVIS		$71.37	$71.37		$41.32	$30.05		
76857	LIMITED ULTRASOUND SCAN OF PELVIS		$44.96	$44.96		$28.52	$16.44		
76870	ULTRASOUND SCAN OF SCROTUM		$68.85	$68.85		$41.32	$27.53		
76872	ULTRASOUND SCAN OF PELVIC REGION THROUGH RECTUM		$71.37	$71.37		$41.32	$30.05		
76873	ULTRASOUND SCAN OF PROSTATE THROUGH RECTUM		$110.37	$110.37		$57.83	$52.54		
76881	COMPLETE ULTRASOUND SCAN OF JOINT		$100.58	$100.58		$75.36	$25.22		
76882	LIMITED ULTRASOUND SCAN OF JOINT OR OTHER EXTREMITY STRUCTURE EXCEPT BLOOD VESSELS		$26.41	$26.41		$8.90	$17.51		
76883	COMPREHENSIVE ULTRASOUND SCAN OF ENTIRE LENGTH OF NERVES IN EXTREMITY		$60.24	$60.24		$11.40	$48.85		
76885	ULTRASOUND SCAN OF INFANT HIP DURING MOVEMENT		$70.68	$70.68		$39.88	$30.79		
76886	ULTRASOUND SCAN OF INFANT HIP		$62.86	$62.86		$37.06	$25.80		
76932	ULTRASONIC GUIDANCE FOR BIOPSY OF HEART MUSCLE		$70.51	$70.51		$41.32	$29.19		
76936	ULTRASOUND GUIDED COMPRESSION REPAIR OF BLOOD VESSEL		$264.25	$264.25		$170.16	$94.08		
76937	ULTRASONIC GUIDANCE FOR BLOOD VESSEL ACCESS		$24.86	$24.86		$12.36	$12.50		
76940	ULTRASOUND GUIDANCE FOR TISSUE REMOVAL		$123.68	$123.68		$46.33	$77.35		
76941	ULTRASONIC GUIDANCE FOR FETAL TRANSFUSION OR UMBILICAL BLOOD SAMPLING		$99.46	$99.46		$41.35	$58.11		
76942	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT		$70.51	$70.51		$41.32	$29.19		
76945	ULTRASONIC GUIDANCE FOR TESTING PLACENTAL TISSUE		$79.80	$79.80		$41.35	$38.45		
76946	ULTRASONIC GUIDANCE FOR REMOVAL OF AMNIOTIC FLUID		$57.76	$57.76		$41.32	$16.44		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76948	ULTRASONIC GUIDANCE FOR RETRIEVAL OF EGG		$74.87	$74.87		$43.59	$31.28		Effective 3/1/2022
76965	ULTRASONIC GUIDANCE FOR ADMINISTRATION OF RADIATION THERAPY		$249.90	$249.90		$150.44	$99.46		
76975	REVIEW BY RADIOLOGIST OF ULTRASOUND OF DIGESTIVE TRACT USING AN ENDOSCOPE		$75.42	$75.42		$41.32	$34.10		
76977	ULTRASOUND SCAN OF BONE FOR MEASURING LOSS		$32.14	$32.14		$23.26	$8.88		
76978	ULTRASOUND SCAN OF GROWTH USING CONTRAST, FIRST GROWTH		$245.25	$245.25		$179.62	$65.64		Effective 1/1/2019
76979	ULTRASOUND SCAN OF GROWTH USING CONTRAST, EACH ADDITIONAL GROWTH		$165.60	$165.60		$131.07	$34.53		Effective 1/1/2019
76981	ULTRASOUND SCAN OF ORGAN TISSUE FOR MEASURING ELASTICITY		$81.38	$81.38		$57.16	$24.22		Effective 1/1/2019
76982	ULTRASOUND SCAN OF GROWTH FOR MEASURING ELASTICITY, FIRST GROWTH		$73.03	$73.03		$48.81	$24.22		Effective 1/1/2019
76983	ULTRASOUND SCAN OF GROWTH FOR MEASURING ELASTICITY, EACH ADDITIONAL GROWTH		$45.33	$45.33		$24.80	$20.52		Effective 1/1/2019
76984	ULTRASOUND OF CHEST AORTA DURING SURGERY		$0.00	$0.00		$0.00	$26.25		
76987	ULTRASOUND OF HEART DURING SURGERY TO EVALUATE FOR CONGENITAL HEART DISEASE, INCLUDING PLACEMENT AND MANIPULATION OF TRANSDUCER, IMAGE ACQUISITION, AND INTERPRETATION AND REPORT OF RESULTS		$0.00	$0.00		$0.00	$80.33		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
76988	ULTRASOUND OF HEART DURING SURGERY TO EVALUATE FOR CONGENITAL HEART DISEASE, INCLUDING PLACEMENT AND MANIPULATION OF TRANSDUCER AND IMAGE ACQUISITION		$0.00	$0.00		$0.00	$51.15		
76989	ULTRASOUND OF HEART DURING SURGERY TO EVALUATE FOR CONGENITAL HEART DISEASE, INTERPRETATION AND REPORT OF RESULTS ONLY		$0.00	$0.00		$0.00	$29.99		
76998	ULTRASONIC GUIDANCE DURING SURGERY		$0.00	$0.00		$0.00	$56.67		
77001	FLUOROSCOPIC GUIDANCE FOR INSERTION OR REMOVAL OF CENTRAL VEIN ACCESS DEVICE		$57.63	$57.63		$43.14	$14.49		
77002	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT		$53.35	$53.35		$33.24	$20.11		
77003	FLUOROSCOPIC GUIDANCE FOR SPINE OR BACK MUSCLE INJECTION		$52.29	$52.29		$30.45	$21.84		
77011	CT GUIDANCE FOR NEEDLE OR TUBE LOCALIZATION		$335.49	$335.49		$289.50	$45.99		
77012	REVIEW BY RADIOLOGIST OF CT GUIDANCE FOR NEEDLE PLACEMENT		$223.45	$223.45		$179.40	$44.05		
77013	CT GUIDANCE FOR TISSUE REMOVAL		$0.00	$0.00		$0.00	$173.27		
77014	CT GUIDANCE FOR INSERTION OF RADIATION THERAPY FIELDS		$119.11	$119.11		$86.52	$32.59		Termed 12/31/2025
77021	REVIEW BY RADIOLOGIST OF MRI GUIDANCE FOR NEEDLE PLACEMENT		$340.56	$340.56		$282.66	$57.89		
77022	MRI GUIDANCE FOR TISSUE REMOVAL		$0.00	$0.00		$0.00	$182.17		
77046	MRI SCAN OF 1 BREAST WITHOUT CONTRAST	Yes	$188.29	$188.29		$129.49	$58.80		Effective 1/1/2019, Cancer or transplant DX exempts the PA
77047	MRI SCAN OF BOTH BREASTS WITHOUT CONTRAST	Yes	$193.77	$193.77		$128.70	$65.06		Effective 1/1/2019, Cancer or transplant DX exempts the PA

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77048	MRI SCAN OF 1 BREAST	Yes	$298.35	$298.35		$213.28	$85.07		Effective 1/1/2019, Cancer or transplant DX exempts the PA
77049	MRI SCAN OF BOTH BREASTS	Yes	$305.31	$305.31		$212.23	$93.07		Effective 1/1/2019, Cancer or transplant DX exempts the PA
77053	REVIEW BY RADIOLOGIST OF BREAST DUCT IMAGE, 1 DUCT		$70.50	$70.50		$56.59	$13.91		
77054	REVIEW BY RADIOLOGIST OF BREAST DUCT IMAGE, MULTIPLE DUCTS		$100.75	$100.75		$83.48	$17.27		
77061	3D BREAST MAMMOGRAPHY OF 1 BREAST		$0.00	$0.00		$0.00	$0.00		Added effective 1/1/2015
77062	3D BREAST MAMMOGRAPHY OF BOTH BREASTS		$0.00	$0.00		$0.00	$0.00		Added effective 1/1/2015
77063	SCREENING 3D BREAST MAMMOGRAPHY		$42.81	$42.81		$18.61	$24.20		Added effective 1/1/2015
77065	DIAGNOSTIC MAMMOGRAPHY OF 1 BREAST		$101.11	$101.11		$69.69	$31.41		Rate updated 1/1/2018 Added Effective 1/1/2017
77066	DIAGNOSTIC MAMMOGRAPHY OF BOTH BREASTS		$126.16	$127.99		$89.02	$38.97		Rate Updated 1/1/2018 Added Effective 1/1/2017
77067	SCREENING MAMMOGRAPHY		$103.33	$103.33		$73.61	$29.72		Rate updated 1/1/2018 Added Effective 1/1/2017
77071	APPLICATION OF STRESS BY PHYSICIAN FOR JOINT IMAGING		$21.70	$21.70					
77072	X-RAY FOR ESTIMATING BONE AGE		$16.13	$16.13		$9.13	$6.99		
77073	X-RAY FOR BONE LENGTH ASSESSMENT		$29.85	$29.85		$19.54	$10.31		
77074	X-RAY, BONE SURVEY, LIMITED		$45.43	$45.43		$28.17	$17.27		
77075	COMPLETE X-RAY OF BODY BONES		$62.74	$62.74		$42.12	$20.62		
77076	X-RAY OF INFANT BODY BONES		$52.63	$52.63		$26.13	$26.49		
77077	X-RAY OF JOINTS, MULTIPLE		$38.10	$38.10		$26.14	$11.97		
77078	CT SCAN FOR MEASURING CALCIUM AND OTHER MINERALS IN BONE		$98.03	$98.03		$88.55	$9.48		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77080	DXA BONE DENSITY MEASUREMENT OF HIP, PELVIS, SPINE		$76.05	$76.05		$67.75	$8.29		
77081	DXA BONE DENSITY MEASUREMENT OF FOREARM, FINGER, HAND, OR FOOT		$28.16	$28.16		$19.54	$8.62		
77084	MRI SCAN OF BONE MARROW	Yes	$373.37	$373.37		$312.60	$60.77		
77085	DXA BONE DENSITY MEASUREMENT OF HIP, PELVIS, SPINE INCLUDING SPINE FRACTURE ASSESSMENT		$41.97	$41.97		$29.73	$12.24		Added effective 1/1/2015
77086	FRACTURE ASSESSMENT OF SPINE BONES USING DXA		$26.47	$26.47		$19.38	$7.09		Added effective 1/1/2015
77089	CALCULATION OF TRABECULAR BONE SCORE (TBS) USING IMAGING DATA WITH INTERPRETATION AND REPORT ON FRACTURE RISK		$31.67	$31.68					Added 1/1/2022
77090	TECHNICAL PREPARATION AND TRANSMISSION OF IMAGING DATA FOR ANALYSIS OF TRABECULAR BONE SCORE (TBS) PERFORMED ELSEWHERE		$1.79	$1.79					Added 1/1/2022
77091	TECHNICAL CALCULATION OF TRABECULAR BONE SCORE (TBS)		$21.39	$21.39					Added 1/1/2022
77092	INTERPRETATION OF TRABECULAR BONE SCORE (TBS) AND REPORT ON FRACTURE RISK		$8.50	$8.50					Added 1/1/2022
77261	SIMPLE RADIATION THERAPY PLANNING		$59.60	$59.60					
77262	INTERMEDIATE RADIATION THERAPY PLANNING		$90.53	$90.53					
77263	COMPLEX RADIATION THERAPY PLANNING		$134.55	$134.55					
77280	OBTAINING DATA NEEDED TO DEVELOP THE OPTIMAL RADIATION TREATMENT, 1 TREATMENT AREA		$124.22	$124.22		$93.88	$30.34		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77285	OBTAINING DATA NEEDED TO DEVELOP THE OPTIMAL RADIATION TREATMENT, 2 TREATMENT AREAS		$195.53	$195.53		$150.69	$44.85		
77290	OBTAINING DATA NEEDED TO DEVELOP THE OPTIMAL RADIATION TREATMENT, 3 OR MORE TREATMENT AREAS OR ANY NUMBER OF TREATMENT AREAS WHERE SPECIAL TREATMENT IS INVOLVED		$243.00	$243.00		$175.77	$67.22		
77293	OBTAINING RESPIRATORY DATA NEEDED TO DEVELOP THE OPTIMAL RADIATION TREATMENT		$319.55	$319.55		$237.22	$82.33		
77295	3D RADIATION THERAPY PLANNING		$950.24	$950.24		$755.30	$194.94		
77299	OTHER MANAGEMENT OF RADIATION THERAPY OR THERAPEUTIC RADIOLOGY	Yes	$56.25	$75.00		$0.00	$0.00		
77300	CALCULATION OF RADIATION THERAPY DOSE		$62.95	$62.95		$36.28	$26.68		
77301	HIGH PRECISION RADIATION THERAPY PLANNING		$1,032.62	$1,032.62		$715.54	$317.08		
77306	SIMPLE RADIATION THERAPY PLANNING FOR DELIVERY OF EXTERNAL RADIATION		$110.46	$110.46		$53.02	$57.44		Added effective 1/1/2015
77307	COMPLEX RADIATION THERAPY PLANNING FOR DELIVERY OF EXTERNAL RADIATION		$216.83	$216.83		$97.21	$119.62		Added effective 1/1/2015
77316	SIMPLE RADIATION THERAPY PLANNING FOR DELIVERY OF INTERNAL RADIATION		$140.16	$140.16		$82.72	$57.44		Added effective 1/1/2015
77317	INTERMEDIATE RADIATION THERAPY PLANNING FOR DELIVERY OF INTERNAL RADIATION		$183.36	$183.36		$107.80	$75.56		Added effective 1/1/2015
77318	COMPLEX RADIATION THERAPY PLANNING FOR DELIVERY OF INTERNAL RADIATION		$265.94	$265.94		$146.32	$119.62		Added effective 1/1/2015
77321	SPECIAL RADIATION THERAPY PLANNING FOR DELIVERY OF EXTERNAL RADIATION		$149.96	$149.96		$109.10	$40.87		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77331	SPECIAL RADIATION THERAPY PLANNING		$51.05	$51.05		$13.60	$37.45		
77332	DESIGN AND CONSTRUCTION OF SIMPLE RADIATION TREATMENT DEVICE		$59.80	$59.80		$36.28	$23.52		
77333	DESIGN AND CONSTRUCTION OF INTERMEDIATE RADIATION TREATMENT DEVICE		$87.76	$87.76		$51.46	$36.30		
77334	DESIGN AND CONSTRUCTION OF COMPLEX RADIATION TREATMENT DEVICE		$140.58	$140.58		$87.76	$52.81		
77336	CONTINUING RADIATION THERAPY CONSULTATION PER WEEK		$80.55	$80.55					
77338	DESIGN AND CONSTRUCTION OF RADIATION TREATMENT DEVICE FOR HIGH PRECISION RADIATION THERAPY		$350.91	$350.91		$178.30	$172.62		
77370	SPECIAL MEDICAL RADIATION THERAPY CONSULTATION		$94.42	$94.42					
77371	COMPLETE SINGLE SESSION COURSE OF CRANIAL LESION SURGERY USING RADIATION		$770.69	$770.69					
77372	COMPLETE SINGLE SESSION COURSE OF CRANIAL LESION SURGERY USING RADIATION AND A MACHINE TO DELIVER EXTERNAL RADIATION		$585.00	$585.00					
77373	DELIVERY OF RADIATION THERAPY PER DOSE TO 1 OR MORE LESIONS NOT TO EXCEED 5 DOSES		$1,090.83	$1,090.83					
77385	DELIVERY OF SIMPLE HIGH PRECISION RADIATION TREATMENT		$0.00	$0.00					Added effective 1/1/2015 Termed 12/31/2025
77386	DELIVERY OF COMPLEX HIGH PRECISION RADIATION TREATMENT		$0.00	$0.00					Added effective 1/1/2015 Termed 12/31/2025
77387	IMAGING GUIDANCE FOR LOCALIZATION OF RADIATION TREATMENT		$35.21	$35.21					Added effective 1/1/2015
77399	OTHER MANAGEMENT OF RADIATION THERAPY AND MEDICAL RADIATION PHYSICS	Yes	$0.00	$0.00		$0.00	$0.00		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77401	SUPERFICIAL AND/OR LOW VOLTAGE RADIATION TREATMENT DELIVERY		$48.00	$48.00					Termed 12/31/2025, See Codes (77436, 77437, 77438, 77439)
77402	DELIVERY OF LEVEL 1 RADIATION TREATMENT		$62.78	$62.78					
77407	DELIVERY OF LEVEL 2 RADIATION TREATMENT		$250.89	$250.89					
77412	DELIVERY OF LEVEL 3 RADIATION TREATMENT		$309.19	$309.19					
77417	X-RAY DURING RADIATION THERAPY		$15.99	$15.99					
77423	DELIVERY OF SPECIALIZED EXTERNAL RADIATION TREATMENT		$61.03	$61.03					
77424	DELIVERY OF SINGLE SESSION OF INTRAOPERATIVE RADIATION TREATMENT WITH X RAY		$0.00	$0.00					
77425	DELIVERY OF SINGLE SESSION OF INTRAOPERATIVE RADIATION TREATMENT WITH ELECTRON BEAM		$0.00	$0.00					
77427	RADIATION TREATMENT MANAGEMENT, 5 TREATMENT SESSIONS		$130.64	$130.64					
77431	RADIATION TREATMENT MANAGEMENT, 1-2 TREATMENT SESSIONS		$77.75	$77.75					
77432	MANAGEMENT OF COMPLETE SINGLE SESSION COURSE OF STEREOTACTIC RADIATION TREATMENT FOR CRANIAL LESION(S)		$374.91	$374.91					
77435	MANAGEMENT OF STEREOTACTIC BODY RADIATION THERAPY FOR CRANIAL LESION(S) OVER 1-5 SESSIONS		$508.67	$508.67					
77436	TREATMENT PLANNING AND SIMULATION-AIDED FIELD SETTING FOR SUPERFICIAL OR ORTHOVOLTAGE SURFACE RADIATION THERAPY		$65.87	$65.87		$30.34	$35.53		Added effective 1/1/2026, Adding detailed complexity codes 77436, 77437, 77438, 77439 to replace codes (77401 and G6001)

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77437	DELIVERY OF SUPERFICIAL SURFACE RADIATION THERAPY		$93.91	$93.91					Added effective 1/1/2026, Adding detailed complexity codes 77436, 77437, 77438, 77439 to replace codes (77401 and G6001)
77438	DELIVERY OF ORTHOVOLTAGE SURFACE RADIATION THERAPY		$94.96	$94.96					Added effective 1/1/2026, Adding detailed complexity codes 77436, 77437, 77438, 77439 to replace codes (77401 and G6001)
77439	ULTRASOUND GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS FOR TREATMENT OF SKIN TUMORS WITH SUPERFICIAL OR ORTHOVOLTAGE SURFACE RADIATION THERAPY		$13.65	$13.65		$0.00	$13.65		Added effective 1/1/2026, Adding detailed complexity codes 77436, 77437, 77438, 77439 to replace codes (77401 and G6001)
77469	MANAGEMENT OF STEREOTACTIC BODY RADIATION THERAPY FOR LESION(S) OVER 1-5 SESSIONS		$241.26	$241.26					
77470	SPECIAL RADIATION TREATMENT		$390.56	$390.56		$300.88	$89.67		
77499	OTHER MANAGEMENT OF RADIATION THERAPY	Yes	$0.00	$0.00		$0.00	$0.00		
77522	SIMPLE PROTON BEAM RADIATION TREATMENT WITH COMPENSATION		$0.00	$0.00					
77525	COMPLEX PROTON BEAM RADIATION TREATMENT		$0.00	$0.00					
77600	USE OF EXTERNALLY GENERATED HEAT TO INCREASE TEMPERATURE OF CANCER CELL, HEATING TO DEPTHS 4.0 CM OR LESS		$149.38	$149.38		$82.16	$67.22		
77605	USE OF EXTERNALLY GENERATED HEAT TO INCREASE TEMPERATURE OF CANCER CELL, HEATING TO DEPTHS MORE THAN 4.0 CM		$199.55	$199.55		$109.87	$89.67		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77610	USE OF INTERSTITIAL PROBE GENERATED HEAT TO INCREASE TEMPERATURE OF CANCER CELL, 1-5 PROBES		$149.38	$149.38		$82.16	$67.22		
77615	USE OF INTERSTITIAL PROBE GENERATED HEAT TO INCREASE TEMPERATURE OF CANCER CELL, MORE THAN 5 PROBES		$199.55	$199.55		$109.87	$89.67		
77620	USE OF BODY CAVITY PROBE GENERATED HEAT TO INCREASE TEMPERATURE OF CANCER CELL		$149.38	$149.38		$82.16	$67.22		
77750	INFUSION OR INSTILLATION OF RADIOELEMENT SOLUTION		$232.97	$232.97		$36.01	$196.96		
77761	SIMPLE BODY CAVITY RADIATION SOURCE APPLICATION		$220.69	$220.69		$67.99	$152.70		
77762	INTERMEDIATE BODY CAVITY RADIATION SOURCE APPLICATION		$327.21	$327.21		$97.61	$229.60		
77763	COMPLEX BODY CAVITY RADIATION SOURCE APPLICATION		$464.57	$464.57		$121.36	$343.21		
77767	HIGH DOSE SKIN SURFACE RADIATION THERAPY, 1 CHANNEL OR LESION DIAMETER 2.0 CM OR LESS		$167.83	$167.83		$124.12	$43.72		Added Effective 1/1/2016
77768	HIGH DOSE SKIN SURFACE RADIATION THERAPY, 2 CHANNELS AND LESION DIAMETER MORE THAN 2.0 CM, OR MULTIPLE LESIONS		$261.98	$261.98		$204.02	$57.96		Added Effective 1/1/2016
77770	HIGH DOSE RADIATION THERAPY, 1 CHANNEL		$241.28	$241.28		$160.58	$80.70		Added Effective 1/1/2016
77771	HIGH DOSE RADIATION THERAPY, 2-12 CHANNELS		$450.11	$450.11		$292.46	$157.66		Added Effective 1/1/2016
77772	HIGH DOSE RADIATION THERAPY, MORE THAN 12 CHANNELS		$685.14	$685.14		$461.55	$223.60		Added Effective 1/1/2016
77778	COMPLEX APPLICATION OF RADIATION SOURCE		$587.70	$587.70		$138.69	$449.01		
77789	SURFACE APPLICATION OF LOW DOSE RATE SOURCE		$57.11	$57.11		$12.26	$44.85		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
77790	SUPERVISION, HANDLING, AND LOADING OF RADIATION SOURCE		$58.45	$58.45		$13.60	$44.85		
77799	OTHER ADMINISTRATION OF RADIATION THERAPY	Yes	$0.00	$0.00		$0.00	$0.00		
78012	NUCLEAR MEDICINE STUDY OF THYROID FUNCTION		$63.81	$63.81		$56.30	$7.51		
78013	NUCLEAR MEDICINE STUDY OF THYROID		$160.92	$160.92		$146.42	$14.50		
78014	NUCLEAR MEDICINE STUDY OF THYROID AND THYROID FUNCTION		$186.56	$186.56		$167.10	$19.47		
78015	NUCLEAR MEDICINE STUDY OF LIMITED AREA FOR THYROID CANCER		$98.79	$98.79		$69.60	$29.19		
78016	NUCLEAR MEDICINE STUDIES FOR THYROID CANCER, ADDITIONAL STUDIES		$129.86	$129.86		$94.15	$35.71		
78018	NUCLEAR MEDICINE STUDY OF WHOLE BODY FOR THYROID CANCER		$187.55	$187.55		$146.69	$40.87		
78020	NUCLEAR MEDICINE STUDY OF THYROID FUNCTION FOR THYROID CANCER		$23.59	$23.59		$14.98	$8.61		
78070	NUCLEAR MEDICINE STUDY OF PARATHYROID		$71.18	$71.18		$49.07	$22.11		
78071	NUCLEAR MEDICINE STUDY OF PARATHYROID WITH SPECT		$279.24	$279.24		$232.99	$46.25		
78072	NUCLEAR MEDICINE STUDY OF PARATHYROID WITH SPECT AND CT SCAN		$316.55	$316.55		$254.23	$62.32		Added Effective 1/1/2016
78075	NUCLEAR MEDICINE STUDY OF ADRENAL GLANDS		$178.74	$178.74		$146.69	$32.05		
78099	NUCLEAR MEDICINE STUDY OF ENDOCRINE ORGANS	Yes	$0.00	$0.00		$0.00	$0.00		
78102	NUCLEAR MEDICINE STUDY OF BONE MARROW LIMITED AREA		$79.01	$79.01		$55.19	$23.82		
78103	NUCLEAR MEDICINE STUDY OF BONE MARROW MULTIPLE AREAS		$117.96	$117.96		$85.62	$32.34		
78104	NUCLEAR MEDICINE STUDY OF BONE MARROW WHOLE BODY		$144.76	$144.76		$110.14	$34.61		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78110	NUCLEAR MEDICINE STUDY OF PLASMA VOLUME, 1 SAMPLING		$33.83	$33.83		$25.60	$8.23		
78111	NUCLEAR MEDICINE STUDY OF PLASMA VOLUME, MULTIPLE SAMPLINGS		$79.22	$79.22		$69.60	$9.62		
78120	NUCLEAR MEDICINE STUDY OF RED BLOOD CELL VOLUME, SINGLE SAMPLE		$57.11	$57.11		$46.93	$10.19		
78121	NUCLEAR MEDICINE STUDY OF RED BLOOD CELL VOLUME, MULTIPLE SAMPLES		$92.33	$92.33		$78.43	$13.90		
78122	NUCLEAR MEDICINE STUDY OF WHOLE BLOOD VOLUME		$143.85	$143.85		$124.55	$19.30		
78130	NUCLEAR MEDICINE STUDY OF RED BLOOD CELL SURVIVAL		$103.47	$103.47		$77.09	$26.38		
78140	NUCLEAR MEDICINE STUDY OF RADIOISOTOPE LABELED RED BLOOD CELLS		$132.79	$132.79		$106.41	$26.38		
78185	NUCLEAR MEDICINE STUDY OF SPLEEN		$81.29	$81.29		$63.99	$17.29		
78191	NUCLEAR MEDICINE STUDY OF PLATELET SURVIVAL		$224.56	$224.56		$198.18	$26.38		
78195	NUCLEAR MEDICINE STUDY OF LYMPHATIC SYSTEM		$140.48	$140.48		$110.14	$30.34		
78199	NUCLEAR MEDICINE STUDY OF BLOOD AND LYMPHATIC SYSTEMS	Yes	$0.00	$0.00		$0.00	$0.00		
78201	NUCLEAR MEDICINE STUDY OF LIVER		$82.73	$82.73		$63.99	$18.74		
78202	NUCLEAR MEDICINE STUDY OF LIVER AND BLOOD FLOW		$100.00	$100.00		$77.89	$22.11		
78215	NUCLEAR MEDICINE STUDY OF LIVER AND SPLEEN		$100.24	$100.24		$79.23	$21.01		
78216	LIVER AND SPLEEN IMAGING; WITH VASCULAR FLOW		$118.82	$118.82		$94.15	$24.67		
78226	NUCLEAR MEDICINE STUDY OF LIVER AND BILE DUCT SYSTEM		$251.33	$251.33		$255.76	$30.56		
78227	NUCLEAR MEDICINE STUDY OF LIVER AND BILE DUCT SYSTEM WITH USE OF DRUGS		$343.77	$343.77		$355.15	$36.79		
78230	NUCLEAR MEDICINE STUDY OF SALIVARY GLAND		$78.49	$78.49		$58.92	$19.57		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78231	NUCLEAR MEDICINE STUDY OF SALIVARY GLAND WITH SERIAL IMAGES		$108.29	$108.29		$85.62	$22.67		
78232	NUCLEAR MEDICINE STUDY OF SALIVARY GLAND FUNCTION		$115.91	$115.91		$95.49	$20.42		
78258	NUCLEAR MEDICINE STUDY OF ESOPHAGUS TO ASSESS MOVEMENT		$109.94	$109.94		$77.89	$32.05		
78261	NUCLEAR MEDICINE STUDY OF STOMACH LINING		$140.99	$140.99		$110.95	$30.05		
78262	NUCLEAR MEDICINE STUDY OF STOMACH AND ESOPHAGUS TO ASSESS REFLUX		$144.43	$144.43		$114.95	$29.48		
78264	NUCLEAR MEDICINE STUDY OF STOMACH TO ASSESS EMPTYING		$145.24	$145.24		$111.48	$33.76		
78265	NUCLEAR MEDICINE STUDY OF STOMACH TO ASSESS EMPTYING AND SMALL BOWEL MOVEMENT		$303.61	$303.61		$264.56	$39.05		Added Effective 1/1/2016
78266	NUCLEAR MEDICINE STUDY OF STOMACH TO ASSESS EMPTYING AND SMALL AND LARGE BOWEL MOVEMENT		$359.85	$359.85		$316.56	$43.29		Added Effective 1/1/2016
78278	NUCLEAR MEDICINE STUDY TO ASSESS BLOOD LOSS		$174.56	$174.56		$131.74	$42.82		
78282	NUCLEAR MEDICINE STUDY TO ASSESS PROTEIN LOSS INTO THE DIGESTIVE TRACT		$0.00	$0.00		$0.00	$16.44		
78290	NUCLEAR MEDICINE STUDY OF INTESTINE		$111.64	$111.64		$82.16	$29.48		
78291	NUCLEAR MEDICINE STUDY TO ASSESS THE DEGREE OF OPENNESS OF SHUNT FROM JUGULAR VEIN TO ABDOMINAL CAVITY		$120.43	$120.43		$82.69	$37.74		
78299	NUCLEAR MEDICINE STUDY OF DIGESTIVE TRACTS	Yes	$0.00	$0.00		$0.00	$0.00		
78300	NUCLEAR MEDICINE STUDY OF BONE AND/OR JOINT LIMITED AREA		$94.40	$94.40		$67.46	$26.94		
78305	NUCLEAR MEDICINE STUDY OF BONE AND/OR JOINT MULTIPLE AREAS		$134.96	$134.96		$98.95	$36.01		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78306	NUCLEAR MEDICINE STUDY OF BONE AND/OR JOINT WHOLE BODY		$152.64	$152.64		$115.48	$37.15		
78315	NUCLEAR MEDICINE STUDY OF BONE TAKEN AT DIFFERENT TIMES		$172.79	$172.79		$129.09	$43.70		
78350	NUCLEAR MEDICINE STUDY TO MEASURE BONE LOSS USING 1 PHOTON BEAM		$30.15	$30.15		$20.53	$9.62		
78351	NUCLEAR MEDICINE STUDY TO MEASURE BONE LOSS USING 2 PHOTON BEAMS		$14.39	$14.39					
78399	OTHER NUCLEAR MEDICINE STUDY OF MUSCULOSKELETAL SYSTEM	Yes	$0.00	$0.00		$0.00	$0.00		
78414	NUCLEAR MEDICINE STUDY OF CARDIOVASCULAR FUNCTION		$0.00	$0.00		$0.00	$19.88		
78428	NUCLEAR MEDICINE STUDY FOR DETECTING HEART SHUNT		$94.83	$94.83		$61.07	$33.76		
78429	NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METABOLIC EVALUATION AND CONCURRENT CT SCAN	Yes	$0.00	$0.00		$0.00	$67.16		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA
78430	NUCLEAR MEDICINE STUDY OF BLOOD FLOW IN HEART MUSCLE AT REST AND WITH STRESS WITH CONCURRENT CT SCAN	Yes	$0.00	$0.00		$0.00	$63.75		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA
78431	NUCLEAR MEDICINE STUDIES OF BLOOD FLOW IN HEART MUSCLE AT REST AND WITH STRESS WITH CONCURRENT CT SCAN	Yes	$0.00	$0.00		$0.00	$74.08		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA
78432	NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METABOLIC AND BLOOD FLOW EVALUATION REQUIRING 2 INJECTIONS	Yes	$0.00	$0.00		$0.00	$79.04		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA
78433	NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METABOLIC AND BLOOD FLOW EVALUATION REQUIRING 2 INJECTIONS AND CONCURRENT CT SCAN	Yes	$0.00	$0.00		$0.00	$86.40		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78434	NUCLEAR MEDICINE STUDY OF HEART MUSCLE BLOOD FLOW BY PET	Yes	$0.00	$0.00		$0.00	$24.86		Added Effective 01/01/2020, Cancer or transplant DX exempts the PA
78445	NUCLEAR MEDICINE STUDY OF NON-CARDIAC BLOOD FLOW		$71.93	$71.93		$50.15	$21.79		
78451	NUCLEAR MEDICINE STUDY OF HEART MUSCLE AT REST AND WITH STRESS AND SPECT	Yes	$161.53	$161.53		$109.91	$51.61		
78452	NUCLEAR MEDICINE STUDIES OF HEART MUSCLE AT REST AND WITH STRESS AND SPECT	Yes	$273.49	$273.49		$212.49	$61.00		
78453	NUCLEAR MEDICINE STUDY OF HEART MUSCLE AT REST AND WITH STRESS WITH SINGLE 2D IMAGE	Yes	$139.95	$139.95		$102.51	$37.43		
78454	NUCLEAR MEDICINE STUDIES OF HEART MUSCLE AT REST AND WITH STRESS WITH SINGLE 2D IMAGE	Yes	$135.88	$135.88		$86.18	$49.70		
78456	NUCLEAR MEDICINE STUDY TO ASSESS BLOOD CLOT IN VEIN USING RADIOLABELED PEPTIDE		$147.47	$147.47		$109.71	$37.76		
78457	NUCLEAR MEDICINE STUDY TO ASSESS BLOOD CLOT IN VEIN OF SIDE		$105.19	$105.19		$71.99	$33.20		
78458	NUCLEAR MEDICINE STUDY TO ASSESS BLOOD CLOT IN VEIN OF BOTH SIDES		$147.15	$147.15		$108.56	$38.60		
78459	NUCLEAR MEDICINE STUDY OF HEART MUSCLE WITH METABOLIC EVALUATION	Yes	$0.00	$0.00		$0.00	$63.20		
78466	NUCLEAR MEDICINE STUDY OF HEART MUSCLE FOLLOWING HEART ATTACK	Yes	$101.23	$101.23		$71.19	$30.05		
78468	NUCLEAR MEDICINE STUDY OF HEART MUSCLE FOLLOWING HEART ATTACK WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT	Yes	$133.30	$133.30		$98.95	$34.35		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78469	NUCLEAR MEDICINE STUDY OF HEART MUSCLE FOLLOWING HEART ATTACK WITH SPECT	Yes	$180.80	$180.80		$141.35	$39.45		
78472	NUCLEAR MEDICINE STUDY OF HEART PUMPING FUNCTION BY LABELING RED BLOOD CELLS WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT OVER MULTIPLE CYCLES	Yes	$191.34	$191.34		$149.08	$42.26		
78473	NUCLEAR MEDICINE STUDIES OF HEART PUMPING FUNCTION BY LABELING RED BLOOD CELLS WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT OVER MULTIPLE CYCLES	Yes	$285.99	$285.99		$222.99	$63.00		
78481	NUCLEAR MEDICINE STUDY OF HEART PUMPING FUNCTION WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT OVER A SINGLE CYCLE	Yes	$183.61	$183.61		$141.35	$42.26		
78483	NUCLEAR MEDICINE STUDIES OF HEART PUMPING FUNCTION BY FIRST PASS TECHNIQUE WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT OVER A SINGLE CYCLE	Yes	$275.58	$275.58		$212.58	$63.00		
78491	NUCLEAR MEDICINE STUDY OF BLOOD FLOW IN HEART MUSCLE AT REST AND WITH STRESS	Yes	$0.00	$0.00		$0.00	$59.26		Rate updated 1/1/2020
78492	NUCLEAR MEDICINE STUDIES OF BLOOD FLOW IN HEART MUSCLE AT REST AND WITH STRESS	Yes	$0.00	$0.00		$0.00	$69.63		Rate updated 1/1/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78494	NUCLEAR MEDICINE STUDY OF HEART PUMPING FUNCTION BY LABELING RED BLOOD CELLS WITH MEASUREMENT OF INTERNAL BLOOD VOLUME EJECTED WITH EVERY BEAT OVER MULTIPLE CYCLES WITH SPECT	Yes	$175.24	$175.24		$128.93	$46.31		Rate updated 1/1/2018
78496	NUCLEAR MEDICINE STUDY OF HEART PUMPING FUNCTION OVER SINGLE CYCLE	Yes	$34.50	$34.50		$15.13	$19.37		Rate updated 1/1/2018
78499	OTHER NUCLEAR MEDICINE STUDY OF CARDIOVASCULAR SYSTEM	Yes	$0.00	$0.00		$0.00	$0.00		
78579	NUCLEAR MEDICINE STUDY OF LUNG VENTILATION		$133.85	$133.85		$132.03	$20.18		
78580	NUCLEAR MEDICINE STUDY OF LUNG CIRCULATION		$124.86	$124.86		$92.81	$32.05		
78582	NUCLEAR MEDICINE STUDY OF LUNG VENTILATION AND CIRCULATION		$247.10	$247.10		$236.77	$43.61		
78597	NUCLEAR MEDICINE STUDY OF LUNG VENTILATION AND BLOOD FLOW TO LUNG		$151.45	$151.45		$141.53	$29.97		
78598	NUCLEAR MEDICINE STUDY OF LUNG VENTILATION AND CIRCULATION AND BLOOD FLOW TO LUNG		$231.79	$231.79		$229.35	$34.12		
78599	OTHER NUCLEAR MEDICINE STUDY OF RESPIRATORY SYSTEM	Yes	$0.00	$0.00		$0.00	$0.00		
78600	NUCLEAR MEDICINE STUDY OF BRAIN, LESS THAN 4 STATIC VIEWS		$96.90	$96.90		$77.89	$19.00		
78601	NUCLEAR MEDICINE STUDY OF BRAIN AND BLOOD FLOW		$114.14	$114.14		$91.76	$22.37		
78605	NUCLEAR MEDICINE STUDY OF BRAIN, 4 STATIC VIEWS OR MORE		$114.99	$114.99		$91.76	$23.23		
78606	NUCLEAR MEDICINE STUDY OF BRAIN AND BLOOD FLOW, 4 STATIC VIEWS OR MORE		$132.09	$132.09		$104.56	$27.53		
78608	NUCLEAR MEDICINE STUDY OF BRAIN WITH METABOLIC EVALUATION	Yes	$840.35	$840.35		$777.75	$62.60		Rate updated 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78609	NUCLEAR MEDICINE STUDY BRAIN WITH BLOOD CIRCULATION EVALUATION	Yes	$843.32	$843.32		$777.75	$65.57		Rate updated 1/1/2018
78610	BRAIN IMAGING, VASCULAR FLOW ONLY		$55.71	$55.71		$42.66	$13.04		
78630	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATER		$165.76	$165.76		$136.28	$29.48		
78635	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATER		$95.18	$95.18		$68.80	$26.38		
78645	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATER		$117.48	$117.48		$92.81	$24.67		
78650	CEREBROSPINAL FLUID LEAKAGE DETECTION AND LOCALIZATION		$151.74	$151.74		$125.36	$26.38		
78660	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	Yes	$80.57	$80.57		$57.34	$23.23		
78699	UNLISTED NERVOUS SYSTEM PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	Yes	$0.00	$0.00		$0.00	$0.00		
78700	KIDNEY IMAGING; STATIC ONLY		$101.45	$101.45		$82.16	$19.30		
78701	NUCLEAR MEDICINE STUDY OF KIDNEY AND BLOOD FLOW		$117.04	$117.04		$96.03	$21.01		
78707	NUCLEAR MEDICINE STUDY OF KIDNEY, BLOOD FLOW, AND FUNCTION		$161.13	$161.13		$120.82	$40.31		
78708	NUCLEAR MEDICINE STUDY OF KIDNEY, BLOOD, FLOW, AND FUNCTION WITH DRUG ADMINISTRATION		$163.76	$163.76		$116.60	$47.16		
78709	NUCLEAR MEDICINE STUDIES OF KIDNEY, BLOOD FLOW, AND FUNCTION		$169.52	$169.52		$116.60	$52.92		
78725	NUCLEAR MEDICINE STUDY OF KIDNEY FUNCTION		$64.71	$64.71		$48.27	$16.44		
78730	NUCLEAR MEDICINE STUDY OF REMAINING URINE IN BLADDER		$54.81	$54.81		$39.47	$15.34		
78740	NUCLEAR MEDICINE STUDY TO ASSESS URINE FLOW		$82.01	$82.01		$57.34	$24.67		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78761	NUCLEAR MEDICINE STUDY OF TESTICLE AND BLOOD FLOW		$117.32	$117.32		$86.42	$30.90		
78799	OTHER NUCLEAR MEDICINE STUDY OF UROGENITAL SYSTEM	Yes	$0.00	$0.00		$0.00	$0.00		
78800	NUCLEAR MEDICINE STUDY, 1 AREA	Yes	$193.95	$193.95		$168.32	$25.63		Updated Effective 01/01/2020
78801	NUCLEAR MEDICINE STUDY, MULTIPLE AREAS	Yes	$213.15	$213.15		$184.11	$29.04		Updated Effective 01/01/2020
78802	NUCLEAR MEDICINE STUDY, WHOLE BODY	Yes	$234.16	$234.16		$203.31	$30.85		Updated Effective 01/01/2020
78803	NUCLEAR MEDICINE STUDY, SPECT IMAGING, 1 AREA OR SINGLE ACQUISITION, SINGLE DAY IMAGING	Yes	$291.90	$291.90		$249.75	$42.15		Updated Effective 01/01/2020
78804	NUCLEAR MEDICINE STUDY, WHOLE BODY REQUIRING MULTIPLE IMAGING DAYS	Yes	$492.62	$492.62		$453.07	$39.55		Updated Effective 01/01/2020
78808	INJECTION OF RADIOACTIVE CONTRAST INTO A VEIN FOR NON-IMAGING GAMMA PROBE		$36.49	$36.49					
78811	NUCLEAR MEDICINE STUDY LIMITED AREA	Yes	$1,036.97	$1,036.97		$969.32	$67.65		Updated Effective 01/01/2019
78812	NUCLEAR MEDICINE STUDY FROM SKULL BASE TO MID-THIGH	Yes	$1,046.27	$1,046.27		$969.32	$76.95		Updated Effective 01/01/2019
78813	NUCLEAR MEDICINE STUDY WHOLE BODY	Yes	$1,031.51	$1,031.51		$969.32	$62.19		Updated Effective 01/01/2019
78814	NUCLEAR MEDICINE STUDY LIMITED AREA WITH CT SCAN	Yes	$1,037.44	$1,037.44		$969.32	$68.12		Updated Effective 01/01/2019
78815	NUCLEAR MEDICINE STUDY FROM SKULL BASE TO MID-THIGH WITH CT SCAN	Yes	$1,044.56	$1,044.56		$969.32	$75.24		Updated Effective 01/01/2019
78816	NUCLEAR MEDICINE STUDY WHOLE BODY WITH CT SCAN	Yes	$1,046.34	$1,046.34		$969.32	$77.02		Updated Effective 01/01/2019
78830	NUCLEAR MEDICINE STUDY, SPECT IMAGING WITH CONCURRENT CT SCAN, 1 AREA OR SINGLE ACQUISITION, SINGLE DAY IMAGING		$369.72	$369.72		$312.01	$57.72		Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
78831	NUCLEAR MEDICINE STUDY, SPECT IMAGING, AT LEAST 2 AREAS OR SEPARATE ACQUISITIONS, SINGLE DAY IMAGING, OR SINGLE AREA OR ACQUISITION OVER MULTIPLE DAYS		$533.63	$533.63		$463.19	$70.44		Added Effective 01/01/2020
78832	NUCLEAR MEDICINE STUDY, SPECT IMAGING WITH CONCURRENT CT SCAN, AT LEAST 2 AREAS OR SEPARATE ACQUISITIONS, SINGLE DAY IMAGING, OR SINGLE AREA OR ACQUISITION OVER MULTIPLE DAYS		$693.62	$693.62		$611.57	$82.05		Added Effective 01/01/2020
78835	QUANTIFICATION OF RADIOACTIVE MATERIALS		$78.02	$78.02		$59.91	$18.11		Added Effective 01/01/2020
78999	OTHER NUCLEAR MEDICINE STUDY	Yes	$0.00	$0.00		$0.00	$0.00		
79005	RADIOACTIVE DRUG THERAPY BY MOUTH	Yes	$141.27	$141.27		$70.48	$70.79		
79101	RADIOACTIVE DRUG THERAPY THROUGH A VEIN	Yes	$147.80	$147.80		$70.48	$77.32		
79200	RADIOACTIVE DRUG THERAPY INTO A BODY CAVITY	Yes	$156.85	$156.85		$71.19	$85.67		
79300	RADIOACTIVE DRUG THERAPY INTO A TISSUE	Yes	$0.00	$0.00		$0.00	$73.28		
79403	RADIOACTIVE DRUG THERAPY OF RADIOLABELED MONOCLONAL ANTIBODY THROUGH A VEIN	Yes	$203.02	$203.02		$112.58	$90.44		
79440	RADIOACTIVE DRUG THERAPY INTO A JOINT	Yes	$156.85	$156.85		$71.19	$85.67		
79445	RADIOACTIVE DRUG THERAPY THROUGH A TUBE INSERTED IN AN ARTERY	Yes	$166.24	$166.24		$71.00	$95.24		
79999	RADIOACTIVE DRUG THERAPY	Yes	$0.00	$0.00		$0.00	$0.00		
80050	GENERAL HEALTH PANEL		$48.45	$48.45					
80055	OBSTETRIC BLOOD TEST PANEL		$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
80081	BLOOD TEST PANEL FOR OBSTETRICS (CBC, DIFFERENTIAL WBC COUNT, HEPATITIS B, HIV, RUBELLA, SYPHILIS, ANTIBODY SCREENING, RBC, BLOOD TYPING)		$105.37	$101.97					Added Effective 1/1/2016
80503	PATHOLOGY CLINICAL CONSULTATION FOR CLINICAL PROBLEM, 5-20 MINUTES		$18.41	$21.50					Added 1/1/2022
80504	PATHOLOGY CLINICAL CONSULTATION FOR MODERATELY COMPLEX CLINICAL PROBLEM, 21-40 MINUTES		$39.31	$43.18					Added 1/1/2022
80505	PATHOLOGY CLINICAL CONSULTATION FOR COMPLEX CLINICAL PROBLEM, 41-60 MINUTES		$74.07	$78.46					Added 1/1/2022
80506	PATHOLOGY CLINICAL CONSULTATION, ADDITIONAL 30 MINUTES		$35.29	$35.29					Added 1/1/2022
81099	UNLISTED ANALYSIS OF URINE	Yes	$0.01	$0.01					
81163	GENE ANALYSIS (BREAST CANCER 1 AND 2) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019
81164	GENE ANALYSIS (BREAST CANCER 1 AND 2) FOR DUPLICATION OR DELETION VARIANTS		$0.00	$0.00					Effective 1/1/2019
81165	GENE ANALYSIS (BREAST CANCER 1) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019
81166	GENE ANALYSIS (BREAST CANCER 1) FOR DUPLICATION OR DELETION VARIANTS		$0.00	$0.00					Effective 1/1/2019
81167	GENE ANALYSIS (BREAST CANCER 2) FOR DUPLICATION OR DELETION VARIANTS		$0.00	$0.00					Effective 1/1/2019
81171	GENE ANALYSIS (FRAGILE X INTELLECTUAL DISABILITY 2) FOR DETECTION OF ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
81172	GENE ANALYSIS (FRAGILE X INTELLECTUAL DISABILITY 2) FOR CHARACTERIZATION OF ALLELES		$0.00	$0.00					Effective 1/1/2019
81173	GENE ANALYSIS (ANDROGEN RECEPTOR) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019
81174	GENE ANALYSIS (ANDROGEN RECEPTOR) FOR KNOWN FAMILIAL VARIANT		$0.00	$0.00					Effective 1/1/2019
81177	GENE ANALYSIS (ATROPIN 1) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81178	GENE ANALYSIS (ATAXIN 1) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81179	GENE ANALYSIS (ATAXIN 2) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81180	GENE ANALYSIS (ATAXIN 3) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81181	GENE ANALYSIS (ATAXIN 7) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81182	GENE ANALYSIS (ATAXIN 8 OPPOSITE STRAND [NON-PROTEIN CODING]) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81183	GENE ANALYSIS (ATAXIN 10) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81184	GENE ANALYSIS (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81185	GENE ANALYSIS (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019
81186	GENE ANALYSIS (CALCIUM VOLTAGE-GATED CHANNEL SUBUNIT ALPHA1 A) FOR KNOWN FAMILIAL VARIANT		$0.00	$0.00					Effective 1/1/2019
81187	GENE ANALYSIS (CCH-TYPE ZINC FINGER NUCLEIC ACID BINDING PROTEIN) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81188	GENE ANALYSIS (CYSTATIN B) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81189	GENE ANALYSIS (CYSTATIN B) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
81190	GENE ANALYSIS (CYSTATIN B) FOR KNOWN FAMILIAL VARIANTS		$0.00	$0.00					Effective 1/1/2019
81204	GENE ANALYSIS (ANDROGEN RECEPTOR) FOR CHARACTERIZATION OF ALLELES		$0.00	$0.00					Effective 1/1/2019
81229	GENOME-WIDE MICROARRAY ANALYSIS FOR COPY NUMBER AND SINGLE NUCLEOTIDE POLYMORPHISM (SNP) VARIANTS		$1,250.00	$1,250.00					Added Effective 1/1/2017
81233	GENE ANALYSIS (BRUTON'S TYROSINE KINASE) FOR COMMON VARIANTS		$0.00	$0.00					Effective 1/1/2019
81234	GENE ANALYSIS (DM1 PROTEIN KINASE) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81236	GENE ANALYSIS (ENHANCER OF ZESTE 2 POLYCOMB REPRESSIVE COMPLEX 2 SUBUNIT) OF FULL SEQUENCE		$0.00	$0.00					Effective 1/1/2019
81237	GENE ANALYSIS (ENHANCER OF ZESTE 2 POLYCOMB REPRESSIVE COMPLEX 2 SUBUNIT) FOR COMMON VARIANTS		$0.00	$0.00					Effective 1/1/2019
81239	GENE ANALYSIS (DM1 PROTEIN KINASE) FOR CHARACTERIZATION OF ALLELES		$0.00	$0.00					Effective 1/1/2019
81271	GENE ANALYSIS (HUNTINGTIN) FOR ABNORMAL ALLELES		$0.00	$0.00					Effective 1/1/2019
81289	GENE ANALYSIS (FRATAXIN) FOR KNOWN FAMILIAL VARIANTS		$0.00	$0.00					Effective 1/1/2019
81320	GENE ANALYSIS (PHOSPHOLIPASE C GAMMA 2) FOR COMMON VARIANTS		$0.00	$0.00					Effective 1/1/2019
81327	GENE ANALYSIS (SEPTIN9) FOR PROMOTER METHYLATION		$0.00	$0.00					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
81329	GENE ANALYSIS (SURVIVAL OF MOTOR NEURON 1, TELOMERIC) FOR DOSAGE/DELETION		$0.00	$0.00					Effective 1/1/2019
81333	GENE ANALYSIS (TRANSFORMING GROWTH FACTOR BETA-INDUCED) FOR COMMON VARIANTS		$0.00	$0.00					Effective 1/1/2019
81539	ONCOLOGY PROSTATE PROB SCORE		$0.00	$0.00					Added Effective 1/1/2017
81596	BIOCHEMICAL ASSAYS FOR EVALUATION OF CHRONIC HEPATITIS C VIRUS INFECTION		$0.00	$0.00					Effective 1/1/2019
82642	MEASUREMENT OF DIHYDROTESTOSTERONE		$0.00	$0.00					Effective 1/1/2019
83516	ANALYSIS OF SUBSTANCE USING IMMUNOASSAY TECHNIQUE, MULTIPLE STEP METHOD		$14.25	$14.25					
83698	LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE A2 (ENZYME) LEVEL		$47.43	$47.43					
83722	MEASUREMENT OF SMALL DENSE LOW DENSITY LIPOPROTEIN CHOLESTEROL		$0.00	$0.00					Effective 1/1/2019
84999	CHEMISTRY PROCEDURES	Yes	$0.00	$0.00					
85060	BLOOD SMEAR INTERPRETATION BY PHYSICIAN WITH WRITTEN REPORT		$18.61	$18.61					
85097	BONE MARROW, SMEAR INTERPRETATION		$38.90	$66.01					
85999	HEMATOLOGY AND COAGULATION PROCEDURES		$0.00	$0.00					
86077	BLOOD BANK PHYSICIAN SERVICES FOR CROSS MATCH AND/OR EVALUATION AND WRITTEN REPORT		$37.61	$39.16					
86078	BLOOD BANK PHYSICIAN SERVICES FOR INVESTIGATION OF TRANSFUSION REACTION WITH WRITTEN REPORT		$37.87	$39.93					
86079	BLOOD BANK PHYSICIAN SERVICES WITH WRITTEN REPORT		$38.13	$39.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
86485	SKIN TEST FOR CANDIDA (YEAST)		$5.68	$5.68					
86486	SKIN TEST FOR INFECTIOUS ORGANISM		$4.45	$4.45					
86510	SKIN TEST HISTOPLASMOSIS (PARASITE INFECTION)		$8.76	$8.76					
86580	SKIN TEST FOR TUBERCULOSIS		$6.95	$6.95					
86794	ANALYSIS FOR ANTIBODY TO ZIKA VIRUS		$0.00	$0.00					Added Effective 1/1/2018
86849	IMMUNOLOGY PROCEDURES		$110.00	$110.00					
86850	SCREENING TEST FOR RED BLOOD CELL ANTIBODIES		$47.17	$47.17					
86860	REMOVAL OF ANTIBODIES FROM SURFACE OF RED BLOOD CELL		$0.00	$0.00					
86870	IDENTIFICATION OF RED BLOOD CELL ANTIBODIES		$0.00	$0.00					
86890	PROCESSING AND STORAGE OF BLOOD UNIT OR COMPONENT, PREDEPOSITED		$0.00	$0.00					
86891	PROCESSING AND STORAGE OF BLOOD UNIT OR COMPONENT, INTRA- OR POSTOPERATIVE SALVAGE		$0.00	$0.00					
86910	BLOOD TYPING FOR PATERNITY TESTING (ABO, RH AND MN)		$26.06	$26.06					
86911	BLOOD TYPING FOR PATERNITY TESTING, EACH ADDITIONAL ANTIGEN SYSTEM		$0.00	$0.00					
86920	BLOOD UNIT COMPATIBILITY TEST, IMMEDIATE SPIN TECHNIQUE		$0.00	$0.00					
86921	BLOOD UNIT COMPATIBILITY TEST, INCUBATION TECHNIQUE		$21.18	$21.18					
86922	BLOOD UNIT COMPATIBILITY TEST, ANTIGLOBULIN TECHNIQUE		$31.00	$31.00					
86923	BLOOD UNIT COMPATIBILITY TEST, ELECTRONIC		$0.00	$0.00					
86927	THAWING OF FRESH FROZEN PLASMA UNIT		$31.13	$31.13					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
86930	FREEZING OF BLOOD UNIT		$0.00	$0.00					
86976	PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL ANTIBODY ANALYSIS AND MEASUREMENT, BY DILUTION		$0.00	$0.00					
86977	PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL ANTIBODY ANALYSIS AND MEASUREMENT, INCUBATION WITH INHIBITORS		$50.00	$50.00					
86978	PRETREATMENT OF SERUM FOR USE IN RED BLOOD CELL ANTIBODY ANALYSIS AND MEASUREMENT, BY DIFFERENTIAL RED CELL ABSORPTION		$0.00	$0.00					
86985	SPLITTING OF BLOOD OR BLOOD PRODUCTS		$0.00	$0.00					
86999	TRANSFUSION MEDICINE PROCEDURES	Yes	$0.00	$0.00					
87426	DETECTION TEST BY IMMUNOASSAY TECHNIQUE FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS		$26.37	$26.37					Added Effective 7/1/2020
87483	TEST FOR DETECTING NUCLEIC ACID OF ORGANISM CAUSING INFECTION OF CENTRAL NERVOUS SYSTEM		$0.00	$0.00					Added Effective 1/1/2017
87634	DETECTION TEST BY NUCLEIC ACID FOR RESPIRATORY SYNCYTIAL VIRUS, AMPLIFIED PROBE TECHNIQUE		$0.00	$0.00					Added Effective 1/1/2018
87636	DETECTION TEST BY MULTIPLEX AMPLIFIED PROBE TECHNIQUE FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (COVID-19) AND INFLUENZA VIRUS TYPES A AND B		$142.63	$142.63					Added Effective 10/6/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
87637	DETECTION TEST BY MULTIPLEX AMPLIFIED PROBE TECHNIQUE FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (COVID-19), INFLUENZA VIRUS TYPES A AND B, AND RESPIRATORY SYNCYTIAL		$142.63	$142.63					Added Effective 10/6/2020
87662	DETECTION TEST BY NUCLEIC ACID FOR ZIKA VIRUS, AMPLIFIED PROBE TECHNIQUE		$0.00	$0.00					Added Effective 1/1/2018
87999	UNLISTED MICROBIOLOGY PROCEDURE	Yes	$0.01	$0.01					
88120	CELL EXAMINATION OF URINE, MANUAL		$398.47	$398.47		$352.78	$45.69		
88121	CELL EXAMINATION OF URINE, COMPUTER-ASSISTED		$336.46	$336.46		$295.81	$40.65		
88199	CYTOPATHOLOGY PROCEDURES	Yes	$0.00	$0.00					
88299	UNLISTED CYTOGENETIC STUDY	Yes	$0.00	$0.00					
89049	TEST FOR MALIGNANT HYPERTHERMIA SUSCEPTIBILITY (GENETIC DISORDER)		$49.98	$133.93					
89220	SPUTUM SPECIMEN COLLECTION		$11.99	$11.99					
89230	SWEAT COLLECTION		$2.59	$2.59					
89240	UNLISTED MISCELLANEOUS PATHOLOGY TEST	Yes	$0.00	$0.00					
90371	HEPATITIS B IMMUNE GLOBULIN FOR INJECTION INTO MUSCLE			$152.59					Eff date 1/1/2019
90375	RABIES IMMUNE GLOBULIN FOR INJECTION			$53.06					
90376	RABIES IMMUNE GLOBULIN FOR INJECTION BENEATH THE SKIN AND/OR INTO MUSCLE, HEAT-TREATED			$285.66					Rate Eff: 07/01/19
90377	RABIES IMMUNE GLOBULIN FOR INJECTION BENEATH THE SKIN AND/OR INTO MUSCLE		$0.00	$0.00					Added Effective 01/01/2021

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90384	RHO(D) IMMUNE GLOBULIN (FULL DOSE) FOR INJECTION INTO MUSCLE			$53.06					
90385	RHO(D) IMMUNE GLOBULIN (MINI DOSE) FOR INJECTION INTO MUSCLE			$0.00					
90386	RHO(D) IMMUNE GLOBULIN FOR INFUSION INTO VEIN			$0.00					
90785	PSYCHIATRIC SERVICES COMPLICATED BY COMMUNICATION FACTOR		$10.48	$10.48					
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION		$94.84	$97.80					
90792	PSYCHIATRIC DIAGNOSTIC EVALUATION WITH MEDICAL SERVICES		$102.49	$105.30					
90832	PSYCHOTHERAPY, 30 MINUTES		$46.94	$47.41					
90833	PSYCHOTHERAPY WITH EVALUATION AND MANAGEMENT VISIT, 30 MINUTES		$48.11	$48.35					
90834	PSYCHOTHERAPY, 45 MINUTES		$62.66	$62.90					
90836	PSYCHOTHERAPY WITH EVALUATION AND MANAGEMENT VISIT, 45 MINUTES		$60.71	$61.17					
90837	PSYCHOTHERAPY, 1 HOUR		$93.67	$94.13					
90838	PSYCHOTHERAPY WITH EVALUATION AND MANAGEMENT VISIT, 1 HOUR		$80.26	$80.73					
90839	PSYCHOTHERAPY FOR CRISIS, FIRST HOUR		$107.36	$108.14					Rate updated 1/1/2016
90840	PSYCHOTHERAPY FOR CRISIS, EACH ADDITIONAL 30 MINUTES		$51.63	$51.38					Added Effective 1/1/2016
90845	PSYCHOANALYSIS		$67.22	$67.69					*From 1/1/14 to 6/27/14 use 54.35 for inpatient and outpatient rates; For 6/28/14 on, use rates listed in columns;

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90846	FAMILY PSYCHOTHERAPY WITHOUT PATIENT, 50 MINUTES		$75.73	$76.19					*From 1/1/14 to 6/27/14 use 56.93 for inpatient and 54.04 for outpatient For 6/28/14 on, use rates listed in columns;
90847	FAMILY PSYCHOTHERAPY WITH PATIENT, 50 MINUTES		$78.18	$78.65					*From 1/1/14 to 6/27/14 use 67.26 for inpatient and 64.82 for outpatient For 6/28/14 on, use rates listed in columns;
90849	MULTIPLE-FAMILY GROUP PSYCHOTHERAPY		$22.10	$24.44					*From 1/1/14 to 6/27/14 use 20.52 for inpatient and 24.08 for outpatient For 6/28/14 on, use rates listed in columns;
90853	GROUP PSYCHOTHERAPY		$18.82	$19.29					*From 1/1/14 to 6/27/14 use 17.85 for inpatient and 17.85 for outpatient For 6/28/14 on, use rates listed in columns;
90865	INJECTION OF HYPNOTIC DRUG FOR PSYCHIATRIC DIAGNOSIS OR THERAPY		$96.43	$96.43					
90867	TREATMENT USING MAGNETIC FIELD TO STIMULATE NERVE CELLS IN BRAIN, INITIAL DELIVERY AND MANAGEMENT		N/A	$329.41					Outpatient only Limit one per 365 days Effective 8/13/2019
90868	TREATMENT USING MAGNETIC FIELD TO STIMULATE NERVE CELLS IN BRAIN, SUBSEQUENT DELIVERY AND MANAGEMENT		N/A	$167.91					Outpatient only. Limit 36 visits in a 7 calendar week period. EFF: 8/13/2019
90869	TREATMENT USING MAGNETIC FIELD TO STIMULATE NERVE CELLS IN BRAIN, SUBSEQUENT MOTOR THRESHOLD REDETERMINATION WITH DELIVERY AND MANAGEMENT		$434.21	$434.21					Updated Effective 08/13/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90870	TREATMENT USING MAGNETIC FIELD TO STIMULATE NERVE CELLS IN BRAIN, SUBSEQUENT MOTOR THRESHOLD REDETERMINATION WITH DELIVERY AND MANAGEMENT		$71.86	$71.86					
90875	PSYCHOPHYSIOLOGICAL THERAPY INCORPORATING BIOFEEDBACK TRAINING WITH PSYCHOTHERAPY, 30 MINUTES		$31.67	$31.67					
90876	PSYCHOPHYSIOLOGICAL THERAPY INCORPORATING BIOFEEDBACK TRAINING WITH PSYCHOTHERAPY, 45 MINUTES		$49.28	$49.28					
90899	OTHER PSYCHIATRIC SERVICE OR PROCEDURE		$21.53	$21.53					
90901	BIOFEEDBACK TRAINING		$19.78	$19.78					
90912	BIOFEEDBACK TRAINING FOR BOWEL OR BLADDER CONTROL, INITIAL 15 MINUTES		$35.56	$61.76					Added Effective 01/01/2020
90913	BIOFEEDBACK TRAINING FOR BOWEL OR BLADDER CONTROL, EACH ADDITIONAL 15 MINUTES		$19.75	$25.46					Added Effective 01/01/2020
90935	HEMODIALYSIS PROCEDURE WITH PHYSICIAN EVALUATION		$78.19	$78.19					
90937	HEMODIALYSIS PROCEDURE REQUIRING REPEATED EVALUATION		$137.37	$137.37					
90940	HEMODIALYSIS ACCESS BLOOD FLOW STUDY		$55.62	$55.62		$32.72	$22.90		
90945	DIALYSIS PROCEDURE INCLUDING 1 EVALUATION		$73.57	$73.57					
90947	DIALYSIS PROCEDURE REQUIRING REPEAT EVALUATION		$122.84	$122.84					
90951	DIALYSIS SERVICES, 4 OR MORE VISITS PER MONTH (YOUNGER THAN 2 YEARS)		$781.51	$781.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90952	DIALYSIS SERVICES, 2-3 PHYSICIAN VISITS PER MONTH (YOUNGER THAN 2 YEARS)		$0.00	$0.00					
90953	DIALYSIS SERVICES, 1 PHYSICIAN VISIT PER MONTH (YOUNGER THAN 2 YEARS OF AGE)		$0.00	$0.00					
90954	DIALYSIS SERVICES, 4 OR MORE PHYSICIAN VISITS PER MONTH (2-11 YEARS)		$653.63	$653.63					
90955	DIALYSIS SERVICES, 2-3 PHYSICIAN VISITS PER MONTH (2-11 YEARS)		$361.08	$361.08					
90956	DIALYSIS SERVICES, 1 PHYSICIAN VISIT PER MONTH (2 11 YEARS OF AGE)		$239.73	$239.73					
90957	DIALYSIS SERVICES, 4 OR MORE PHYSICIAN VISITS PER MONTH (12-19 YEARS)		$522.49	$522.49					
90958	DIALYSIS SERVICES, 2-3 PHYSICIAN VISITS PER MONTH (12-19 YEARS)		$346.84	$346.84					
90959	DIALYSIS SERVICES, 1 PHYSICIAN VISIT PER MONTH (12-19 YEARS)		$221.93	$221.93					
90960	DIALYSIS SERVICES, 4 OR MORE PHYSICIAN VISITS PER MONTH (20 YEARS OR OLDER)		$227.27	$227.27					
90961	DIALYSIS SERVICES, 2-3 PHYSICIAN VISITS PER MONTH (20 YEARS OR OLDER)		$181.88	$181.88					
90962	DIALYSIS SERVICES, 1 PHYSICIAN VISIT PER MONTH (20 YEARS OR OLDER)		$129.06	$129.06					
90963	HOME DIALYSIS SERVICES PER MONTH (YOUNGER THAN 2 YEARS)		$417.16	$417.16					
90964	HOME DIALYSIS SERVICES PER MONTH (2-11 YEARS)		$363.75	$363.75					
90965	HOME DIALYSIS SERVICES PER MONTH (12-19 YEARS)		$346.55	$346.55					
90966	HOME DIALYSIS SERVICES PER MONTH (20 YEARS OR OLDER)		$179.21	$179.21					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
90967	DIALYSIS SERVICES, PER DAY, LESS THAN FULL MONTH SERVICE (YOUNGER THAN 2 YEARS)		$15.43	$15.43					
90968	DIALYSIS SERVICES, PER DAY, LESS THAN FULL MONTH SERVICE (2-11 YEARS)		$12.46	$12.46					
90969	DIALYSIS SERVICES, PER DAY, LESS THAN FULL MONTH SERVICE (12-19 YEARS)		$12.16	$12.16					
90970	DIALYSIS SERVICES, PER DAY, LESS THAN FULL MONTH SERVICE (20 YEARS OR OLDER)		$6.23	$6.23					
90989	DIALYSIS TRAINING COMPLETED		$394.96	$394.96					
90997	REMOVAL OF TOXINS FROM BLOOD		$120.91	$120.91					
90999	OTHER INPATIENT OR OUTPATIENT DIALYSIS PROCEDURE	Yes	$0.00	$0.00					
91010	STUDY OF ESOPHAGUS TO ASSESS MOVEMENT		$113.70	$113.70		$22.38	$91.32		
91013	STUDY OF ESOPHAGUS TO ASSESS MOVEMENT WITH STIMULATION OR TUBE		$20.18	$20.18		$11.57	$8.60		
91020	STUDY OF STOMACH TO ASSESS MOVEMENT		$126.89	$126.89		$21.04	$105.85		
91022	STUDY OF UPPER SMALL BOWEL TO ASSESS MOVEMENT		$158.62	$158.62		$101.07	$57.55		
91030	TEST FOR ESOPHAGEAL REFLUX DISEASE		$51.45	$51.45		$6.12	$45.33		
91034	MONITORING AND RECORDING OF ESOPHAGEAL FUNCTION THROUGH NASAL TUBE		$165.59	$165.59		$126.58	$39.01		
91035	MONITORING AND RECORDING OF ESOPHAGEAL FUNCTION THROUGH A CAPSULE ATTACHED TO THE ESOPHAGUS WALL		$325.86	$325.86		$262.84	$63.02		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
91037	MONITORING AND RECORDING OF ESOPHAGEAL FUNCTION THROUGH NASAL TUBE WITH ELECTRODE		$106.65	$106.65		$67.64	$39.01		
91038	PROLONGED MONITORING AND RECORDING OF ESOPHAGEAL FUNCTION THROUGH NASAL TUBE WITH ELECTRODE		$92.39	$92.39		$48.25	$44.14		
91040	STUDY OF ESOPHAGEAL SENSATION BY BALLOON DISTENSION		$315.88	$315.88		$276.87	$39.01		
91065	MEASUREMENT OF HYDROGEN IN BREATH TO TEST FOR STOMACH AND BOWEL SYMPTOMS		$36.68	$36.68		$9.61	$27.08		
91110	IMAGING OF DIGESTIVE TRACT DONE FROM THE INSIDE OF THE DIGESTIVE TRACT		$656.41	$656.41		$517.76	$138.65		
91111	IMAGING OF ESOPHAGUS DONE FROM THE INSIDE OF THE ESOPHAGUS		$584.25	$584.25		$620.70	$46.88		
91113	IMAGING OF COLON USING CAPSULE ENDOSCOPE, WITH INTERPRETATION AND REPORT		$733.25	$733.25		$632.45	$100.80		Added 1/1/2022
91120	TEST FOR TONE AND SENSATION OF RECTUM AND ANUS		$311.80	$311.80		$272.53	$39.27		Termed 12/31/2025, See Code (91124)
91122	STUDY OF RECTUM SENSITIVITY AND FUNCTION		$103.69	$103.69		$20.16	$83.53		Termed 12/31/2025, See Code (91125)
91124	TEST FOR TONE AND SENSATION OF RECTUM AND ANUS		$617.67	$617.67		$478.24	$139.43		Added effective 1/1/2026, Codes 91120 and 91122 termed effective 12/31/2025, codes 91124 and 91125 will replace previous codes.
91125	STUDY OF RECTUM SENSITIVITY AND FUNCTION		$283.60	$283.60		$162.23	$121.37		Added effective 1/1/2026, Codes 91120 and 91122 termed effective 12/31/2025, codes 91124 and 91125 will replace previous codes.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
91132	RECORDING AND INTERPRETATION OF STOMACH ELECTRICAL ACTIVITY		$9.63	$9.63		$3.35	$6.28		
91133	RECORDING AND INTERPRETATION OF STOMACH ELECTRICAL ACTIVITY WITH DRUG ADMINISTRATION		$9.63	$9.63		$3.35	$6.28		
91200	MEASUREMENT OF LIVER STIFFNESS		$27.22	$27.22		$15.50	$11.72		Added effective 1/1/2015
91299	OTHER DIAGNOSTIC PROCEDURE FOR GASTROINTESTINE	Yes	$0.00	$0.00		$0.00	$0.00		
92002	NEW PATIENT PROBLEM FOCUSED EXAM OF VISUAL SYSTEM		$51.67	$51.67					
92004	NEW PATIENT COMPLETE EXAM OF VISUAL SYSTEM		$94.51	$94.51					
92012	ESTABLISHED PATIENT PROBLEM FOCUSED EXAM OF VISUAL SYSTEM		$46.92	$46.92					
92014	ESTABLISHED PATIENT COMPLETE EXAM OF VISUAL SYSTEM		$69.80	$69.80					
92015	TEST TO DETERMINE IF PRESCRIPTION EYE WEAR IS NEEDED		$20.22	$20.22					
92018	COMPLETE EXAM OF VISUAL SYSTEM UNDER GENERAL ANESTHESIA		$57.64	$57.64					
92019	LIMITED EXAM OF VISUAL SYSTEM UNDER GENERAL ANESTHESIA		$45.47	$51.78					
92020	EXAM OF THE INTERNAL DRAINAGE SYSTEM OF EYE		$14.99	$18.88					
92025	CT SCAN OF CORNEA		$21.74	$21.74		$8.37	$13.37		
92060	EXAM TO MEASURE EYE DEVIATION AND RANGE OF MOTION		$41.60	$41.60		$13.97	$27.62		
92065	EYE TRAINING EXERCISE PERFORMED BY HEALTH CARE PROFESSIONAL		$32.71	$32.71		$18.82	$13.89		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92066	EYE TRAINING EXERCISE UNDER SUPERVISION OF HEALTH CARE PROFESSIONAL		$19.94	$19.94					
92071	FITTING OF CONTACT LENS FOR TREATMENT OF EYE SURFACE DISEASE		$27.03	$30.13					
92072	FITTING OF CONTACT LENS FOR MANAGEMENT OF CORNEAL CONDITION		$78.07	$96.16					
92081	EXAM OF VISUAL FIELD WITH LIMITED TESTING		$36.45	$36.45		$22.14	$14.31		
92082	EXAM OF VISUAL FIELD WITH INTERMEDIATE TESTING		$48.64	$48.64		$30.81	$17.82		
92083	EXAM OF VISUAL FIELD WITH EXTENDED TESTING		$55.27	$55.27		$35.15	$20.12		
92100	MULTIPLE MEASUREMENTS OF EYE FLUID PRESSURE OVER AN EXTENDED TIME PERIOD		$30.59	$33.94					
92132	IMAGING OF FRONT THIRD OF EYE		$31.75	$31.75		$13.35	$18.40		
92133	IMAGING OF OPTIC NERVE		$38.87	$38.87		$13.35	$25.52		
92134	IMAGING OF RETINA		$38.87	$38.87		$13.35	$25.52		
92136	MEASUREMENT OF CORNEAL CURVATURE AND DEPTH OF EYE		$39.72	$39.72		$14.92	$24.78		Effective 03/01/2022
92137	IMAGING OF RETINA WITH OPTICAL COHERENCE TOMOGRAPHY ANGIOGRAPHY		$47.41	$47.41		$18.75	$28.67		
92145	MEASUREMENT OF CORNEAL PRESSURE		$11.98	$11.98		$4.89	$7.09		Added effective 1/1/2015
92201	EXTENDED EXAM OF THE BACK PART OF THE EYE WITH RETINAL DRAWING		$18.14	$19.70					Added Effective 01/01/2020
92202	EXTENDED EXAM OF THE BACK PART OF THE EYE WITH OPTIC NERVE DRAWING		$11.73	$12.51					Added Effective 01/01/2020
92227	IMAGING OF RETINA WITH REMOTE REVIEW BY CLINICAL STAFF		$10.09	$10.09					
92228	IMAGING OF RETINA WITH REMOTE REVIEW BY PHYSICIAN		$26.11	$26.11		$10.98	$15.13		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92229	IMAGING OF RETINA FOR DISEASE DETECTION, WITH AUTOMATED REVIEW AND REPORT AT POINT OF CARE		$0.00	$0.00					Added Effective 01/01/2021
92230	EXAM OF RETINAL BLOOD VESSELS USING AN ENDOSCOPE AFTER INJECTION OF A DYE		$27.83	$37.09					
92235	EXAM OF RETINAL BLOOD VESSELS USING A SPECIAL CAMERA AFTER INJECTION OF A DYE		$68.33	$68.33		$28.01	$40.32		
92240	EXAM OF BLOOD VESSELS BETWEEN THE WHITE PART OF EYE AND RETINA USING A SPECIAL CAMERA AFTER INJECTION OF A DYE		$157.53	$157.53		$120.61	$36.92		Rate updated 1/1/2018
92242	EXAM OF RETINAL BLOOD VESSELS AND BLOOD VESSELS BETWEEN THE WHITE PART OF EYE AND RETINA USING A SPECIAL CAMERA AFTER INJECTION OF A DYE		$169.78	$169.78		$125.52	$44.26		Added Effective 1/1/2017
92250	PHOTOGRAPHY OF THE RETINA		$49.01	$49.01		$31.58	$17.44		
92260	MEASUREMENT OF EYE ARTERY PRESSURE		$22.64	$29.88					
92265	MEASUREMENT OF EYE MUSCLE ELECTRICAL ACTIVITY AND THEIR NERVE CELLS WITH NEEDLE ELECTRODE		$32.03	$32.03		$6.39	$25.65		
92270	MEASUREMENT OF EYE MOVEMENT		$42.95	$42.95		$8.53	$34.42		
92273	MEASUREMENT OF RETINAL AND OPTIC NERVE FUNCTION		$101.11	$101.11					
92274	MEASUREMENT OF RETINAL AND OPTIC NERVE FUNCTION TARGETING MULTIPLE SEPARATE LOCATIONS		$68.98	$68.98					
92283	EXTENDED EXAM INVOLVING COLOR VISION TESTING		$15.65	$15.65		$3.22	$12.43		
92284	EVALUATION OF EYE ADAPTATION TO LIGHT AND DARK WITH INTERPRETATION AND REPORT		$27.05	$27.05		$15.31	$11.74		Do not bill in conjunction with code 92288.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92285	PHOTOGRAPHY OF CONTENT OF EYES		$13.89	$13.89		$2.95	$10.94		
92286	IMAGING OF FRONT THIRD OF EYE USING A SPECIAL MICROSCOPE		$53.79	$53.79		$10.95	$42.84		
92287	IMAGING OF FRONT THIRD OF EYE USING A SPECIAL CAMERA AFTER INJECTION OF A DYE		$104.82	$104.82		$67.85	$36.97		Rate updated 1/1/2018
92288	SCREENING EVALUATION OF EYE ADAPTATION TO LIGHT AND DARK WITH INTERPRETATION AND REPORT		$19.29	$19.29					Added effective 1/1/2026, Do not report in conjunction with code 92284.
92310	CONTACT LENS SERVICES BOTH EYES		$69.74	$69.74					
92311	CONTACT LENS SERVICES 1 EYE WHERE NATURAL LENS IS ABSENT		$44.49	$56.56					
92312	CONTACT LENS SERVICES BOTH EYES WHERE NATURAL LENS IS ABSENT		$53.26	$68.82					
92313	CONTACT LENS SERVICES FOR LENS COVERING ENTIRE CORNEA		$39.53	$51.33					
92340	FITTING OF MONOFOCAL SPECTACLES		$33.00	$33.00					
92341	FITTING OF BIFOCAL SPECTACLES		$38.00	$38.00					
92352	FITTING OF MONOFOCAL SPECTACLES WHERE NATURAL LENS IS ABSENT		$33.00	$33.00					
92353	FITTING OF MULTIFOCAL SPECTACLES WHERE NATURAL LENS IS ABSENT		$39.00	$39.00					
92370	REPAIR AND REFITTING OF SPECTACLES		$29.00	$29.00					
92371	REPAIR AND REFITTING OF SPECTACLE WHERE NATURAL LENS IS ABSENT		$8.40	$16.31					
92499	OTHER SERVICE OR PROCEDURE ON EYE	Yes	$0.00	$0.00		$0.00	$0.00		
92502	OTHER SERVICE OR PROCEDURE ON EYE		$77.27	$77.27					
92504	EXAM OF EAR USING A MICROSCOPE		$9.25	$12.74					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92507	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR HEARING PROCESSING DISORDER		$20.41	$24.84					
92508	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR HEARING PROCESSING DISORDER IN A GROUP SETTING		$10.53	$12.94					
92511	EXAM OF THE NOSE AND THROAT USING AN ENDOSCOPE		$38.23	$49.63					
92512	STUDY OF NASAL FUNCTION		$23.66	$29.96					
92516	STUDY OF FACIAL NERVE FUNCTION		$18.82	$24.05					
92517	VEMP TESTING OF LOWER BRANCH OF INNER EAR NERVE WITH INTERPRETATION AND REPORT		$34.59	$67.08					Added Effective 01/01/2021
92518	VEMP TESTING OF UPPER BRANCH OF INNER EAR NERVE WITH INTERPRETATION AND REPORT		$34.59	$62.43					Added Effective 01/01/2021
92519	VEMP TESTING OF UPPER AND LOWER BRANCHES OF INNER EAR NERVE WITH INTERPRETATION AND REPORT		$51.75	$104.35					Added Effective 01/01/2021
92520	STUDY OF VOICE BOX FUNCTION		$30.62	$37.73					
92521	EVALUATION OF SPEECH CONTINUITY, SMOOTHNESS, RATE, AND EFFORT		$89.06	$89.06					
92522	EVALUATION OF SPEECH SOUND PRODUCTION		$72.62	$72.62					
92523	EVALUATION OF SPEECH SOUND PRODUCTION WITH EVALUATION OF LANGUAGE COMPREHENSION AND EXPRESSION		$150.38	$150.38					
92524	ANALYSIS OF VOICE AND RESONANCE PRODUCTION		$75.32	$75.32					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92526	TREATMENT OF SWALLOWING AND FEEDING DISORDER		$29.08	$29.08					Rate Effective 07/01/1996
92532	TEST FOR ABNORMAL EYE MOVEMENT USING 3 POSITIONS		$5.83	$5.83					
92533	TEST TO ASSESS BALANCE DURING IRRIGATION		$6.69	$6.69					
92534	TEST FOR ABNORMAL EYE MOVEMENT USING A MOVING TARGET		$2.76	$2.76					
92537	TEST TO ASSESS BALANCE DURING WARM AND COOL IRRIGATION IN BOTH EARS		$31.70	$31.70		$6.19	$25.52		Added Effective 1/1/2016
92538	TEST TO ASSESS BALANCE DURING WARM OR COOL IRRIGATION IN BOTH EARS		$16.10	$16.10		$3.34	$12.76		Added Effective 1/1/2016
92540	EVALUATION AND TESTING FOR BALANCE WITH RECORDING		$80.25	$80.25		$19.29	$67.94		
92541	TEST FOR ABNORMAL EYE MOVEMENT WITH RECORDING		$31.41	$31.41		$6.39	$25.02		
92542	TEST FOR ABNORMAL EYE MOVEMENT USING 3 POSITIONS WITH RECORDING		$27.75	$27.75		$7.43	$20.31		
92544	TEST FOR ABNORMAL EYE MOVEMENT USING A MOVING TARGET WITH RECORDING		$21.45	$21.45		$5.85	$15.60		
92545	TEST FOR ABNORMAL EYE MOVEMENT USING A MOVING TARGET THAT MOVES BACK AND FORTH WITH RECORDING		$18.45	$18.45		$5.85	$12.60		
92546	TEST FOR ABNORMAL EYE MOVEMENT USING A ROTATING CHAIR		$23.94	$23.94		$6.65	$17.29		
92547	USE OF ELECTRODES DURING BALANCE TESTING		$15.67	$15.67					
92548	TEST FOR BALANCE AND POSTURE		$66.72	$66.72		$10.88	$27.85		
92549	TEST FOR BALANCE AND POSTURE WITH MOTOR CONTROL AND ADAPTION TEST		$49.50	$49.50		$13.47	$36.03		Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92550	TEST FOR BALANCE AND POSTURE WITH MOTOR CONTROL AND ADAPTION TEST		$15.61	$15.61					
92551	TEST FOR SCREENING HEARING		$12.24	$12.24					
92552	TEST FOR HEARING VARIOUS PITCHES USING EARPHONE		$12.24	$12.24					
92553	TEST FOR HEARING VARIOUS PITCHES USING EARPHONE AND DEVICE PLACED AGAINST THE BONE		$18.60	$18.60					
92555	TEST FOR ABILITY TO DETECT AND REPEAT SPOKEN WORDS		$10.63	$10.63					
92556	TEST FOR ABILITY TO DETECT AND REPEAT SPOKEN WORDS WITH SPEECH RECOGNITION		$15.94	$15.94					
92557	COMPREHENSIVE HEARING AND SPEECH RECOGNITION TEST		$33.50	$33.50					
92558	TEST FOR SCREENING HEARING USING A PROBE		$6.98	$7.77					Rate updated 1/1/2018
92562	TEST TO DETECT LOUDNESS DIFFERENCES		$11.43	$11.43					
92563	TEST TO ASSESS DEFECTS IN ADAPTION TO SOUNDS		$10.63	$10.63					
92565	TEST TO ASSESS HEARING LOSS		$6.07	$11.16					
92567	TEST TO ASSESS MIDDLE EAR FUNCTION		$14.87	$14.87					
92568	TEST TO ASSESS MIDDLE EAR MUSCLE REFLEX		$10.63	$10.63					
92570	COMPREHENSIVE HEARING TEST		$22.58	$23.85					
92571	TEST TO ASSESS BY HEARING BY EXAMINING THE REPETITION OF REAL WORDS VERSUS NONSENSE WORDS		$5.93	$10.90					
92572	TEST TO ASSESS HEARING USING 2 SYLLABLE WORDS		$2.39	$2.39					
92575	TEST TO ASSESS HEARING LOSS USING DIFFERENT TONE PITCHES		$4.62	$8.51					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92576	TEST TO ASSESS HEARING LOSS USING GRAMMATICALLY INCORRECT SENTENCES		$6.85	$12.48					
92577	TEST TO ASSESS HEARING LOSS USING 2 SIMULTANEOUS WORDS AT DIFFERENT TONES IN SAME EAR		$11.06	$20.18					
92579	TEST TO ASSESS HEARING SENSITIVITY USING VISUAL AIDS		$20.21	$20.21					
92582	TEST TO ASSESS HEARING SENSITIVITY USING ACTIVITY RELATED FEEDBACK		$10.95	$20.21					
92583	TEST TO ASSESS HEARING USING PICTURES		$24.99	$24.99					
92584	TEST TO ASSESS ELECTRICAL POTENTIALS GENERATED IN THE INNER EAR AS A RESULT OF SOUND STIMULATION		$69.37	$69.37					
92587	PLACEMENT OF EAR PROBE FOR COMPUTERIZED MEASUREMENT OF SOUND WITH INTERPRETATION AND REPORT		$43.18	$43.18		$36.17	$7.01		
92588	PLACEMENT OF EAR PROBE FOR COMPUTERIZED MEASUREMENT OF REPEATED SOUNDS WITH INTERPRETATION AND REPORT		$60.05	$60.05		$40.95	$19.10		
92590	EXAM FOR HEARING AID, 1 EAR		$33.75	$45.00					Termed 12/31/2025, See Code 92628
92591	EXAM FOR HEARING AID, BOTH EARS		$23.75	$65.00					Termed 12/31/2025, See Code 92628
92592	CHECK OF HEARING AID, 1 EAR		$18.75	$25.00					Termed 12/31/2025, See Code 92636
92593	CHECK OF HEARING AID, BOTH EARS		$18.75	$25.00					Termed 12/31/2025, See Code 92636
92594	EVALUATION OF HEARING AID FUNCTION, 1 EAR		$14.17	$14.17					Termed 12/31/2025, See Code 92641
92595	EVALUATION OF HEARING AID FUNCTION, 1 EAR		$28.34	$28.34					Termed 12/31/2025, See Code 92641

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92596	MEASUREMENT OF ADEQUACY OF HEARING PROTECTION DEVICE		$16.48	$16.48					
92597	EVALUATION FOR USE OF VOICE ARTIFICIAL DEVICE TO SUPPLEMENT ORAL SPEECH		$62.33	$62.33					
92601	ANALYSIS AND PROGRAMMING OF INNER EAR IMPLANT (YOUNGER THAN 7 YEARS)		$91.49	$91.49					
92602	ANALYSIS AND REPROGRAMMING OF INNER EAR IMPLANT (YOUNGER THAN 7 YEARS)		$64.26	$64.26					
92603	ANALYSIS AND PROGRAMMING OF INNER EAR IMPLANT (7 YEARS OR OLDER)		$61.69	$61.69					
92604	ANALYSIS AND REPROGRAMMING OF INNER EAR IMPLANT (7 YEARS OR OLDER)		$42.16	$42.16					
92605	EVALUATION AND PRESCRIPTION OF NONSPEECH-GENERATING AND ALTERNATIVE COMMUNICATION DEVICE, FIRST HOUR		$70.76	$73.63					
92606	THERAPY SERVICE FOR USE OF NONSPEECH-GENERATING DEVICE WITH PROGRAMMING		$56.76	$65.12					
92607	EVALUATION WITH PRESCRIPTION OF SPEECH-GENERATING AND ALTERNATIVE COMMUNICATION DEVICE, FIRST HOUR		$76.32	$76.32					
92608	EVALUATION WITH PRESCRIPTION OF SPEECH-GENERATING AND ALTERNATIVE COMMUNICATION DEVICE, EACH ADDITIONAL 30 MINUTES		$15.17	$15.17					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92609	THERAPY SERVICE FOR USE OF SPEECH-GENERATING DEVICE WITH PROGRAMMING		$41.38	$41.38					
92610	EVALUATION OF SWALLOWING FUNCTION		$29.57	$29.57					
92611	EVALUATION OF SWALLOWING FUNCTION IMAGE		$32.14	$32.14					
92612	EVALUATION AND RECORDING OF SWALLOWING USING AN ENDOSCOPE		$51.22	$124.70					
92613	EVALUATION, RECORDING, AND INTERPRETATION OF SWALLOWING USING AN ENDOSCOPE		$32.31	$32.57					
92614	EVALUATION AND RECORDING OF VOICE BOX SENSORY FUNCTION USING AN ENDOSCOPE		$51.22	$97.21					
92615	EVALUATION, RECORDING, AND INTERPRETATION OF VOICE BOX SENSORY FUNCTION USING AN ENDOSCOPE		$28.92	$28.92					
92616	EVALUATION AND RECORDING OF SWALLOWING AND VOICE BOX SENSORY FUNCTION USING AN ENDOSCOPE		$74.68	$133.52					
92617	EVALUATION, RECORDING, AND INTERPRETATION OF SWALLOWING AND VOICE BOX SENSORY FUNCTION USING AN ENDOSCOPE		$35.96	$35.96					
92618	EVALUATION AND PRESCRIPTION OF NONSPEECH-GENERATING AND ALTERNATIVE COMMUNICATION DEVICE, EACH ADDITIONAL 30 MINUTES		$26.11	$26.63					
92620	EVALUATION OF HEARING FUNCTION BRAIN RESPONSES, FIRST HOUR		$30.64	$30.64					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92621	EVALUATION OF HEARING FUNCTION BRAIN RESPONSES, EACH ADDITIONAL 15 MINUTES		$7.93	$7.93					
92622	ANALYSIS, PROGRAMMING, AND VERIFICATION OF SOUND PROCESSOR FOR BONE-ANCHORED INNER EAR IMPLANT, FIRST HOUR		$55.59	$66.26					
92623	ANALYSIS, PROGRAMMING, AND VERIFICATION OF SOUND PROCESSOR FOR BONE-ANCHORED INNER EAR IMPLANT, EACH ADDITIONAL 15 MINUTES		$14.75	$17.09					
92625	EVALUATION OF HEARING RINGING IN EAR		$30.13	$30.13					
92626	EVALUATION OF HEARING FUNCTION RELATED TO SURGICALLY IMPLANTED HEARING DEVICE, FIRST HOUR		$60.81	$70.93					
92627	EVALUATION OF HEARING FUNCTION RELATED TO SURGICALLY IMPLANTED HEARING DEVICE, EACH ADDITIONAL 15 MINUTES		$14.30	$16.89					
92628	EVALUATION FOR HEARING AID CANDIDACY, UNILATERAL OR BILATERAL, INCLUDING REVIEW AND INTEGRATION OF AUDIOLOGIC FUNCTION TESTS, ASSESSMENT, AND INTERPRETATION OF HEARING NEEDS (THAT IS SPEECH IN NOISE, SUPRATHRESHOLD HEARING MEASURES), DISCUSSION OF CANDIDACY RESULTS, COUNSELING ON TREATMENT OPTIONS WITH REPORT, AND WHEN PERFORMED, ASSESSMENT OF COGNITIVE AND COMMUNICATION STATUS, FIRST 30 MINUTES		$65.00	$65.00					Added effective 1/1/2026 Modifier 52(reduced services) to be billed if procedure was for 1 ear only. Reimbursement-$65 for both ears, $45- for 1 ear using modifier 52. One per calendar year per patient. Do not report in conjunction with 92636, 92623, 92626, 92627 If performed on the same ear.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92630	EVALUATION OF HEARING FUNCTION RELATED TO SURGICALLY IMPLANTED HEARING DEVICE, EACH ADDITIONAL 15 MINUTES		$0.00	$0.00					
92633	THERAPY SERVICE FOR HEARING LOSS AFTER SPEECH AND LANGUAGE DEVELOPMENT		$0.00	$0.00					
92636	HEARING AID POST-FITTING FOLLOW-UP SERVICES FOR ONE OR BOTH EARS, FIRST 30 MINUTES		$25.00	$25.00					Added effective 1/1/2026, replacement code for 92593.
92640	EVALUATION OF AUDITORY BRAINSTEM IMPLANT, PER HOUR		$35.77	$35.77					
92641	HEARING DEVICE VERIFICATION THROUGH ELECTROACOUSTIC ANALYSIS		$28.34	$28.34					Added effective 1/1/2026 Modifier 52 (reduced services) to be billed if procedure was for 1 ear only. Reimbursement- $28.34 for both ears, $14.17 for 1 ear using modifier 52. Do not report in conjunction with 92628, 92636 per same patient.
92650	SCREENING EVALUATION OF BRAIN RESPONSE TO SOUND WITH AUTOMATED ANALYSIS		$22.64	$22.64					Added Effective 01/01/2021
92651	EVALUATION OF BRAIN RESPONSE TO SOUND FOR DETERMINATION OF HEARING STATUS WITH INTERPRETATION AND REPORT		$71.00	$71.00					Added Effective 01/01/2021
92652	EVALUATION OF BRAIN RESPONSE TO SOUND FOR DETERMINATION OF HEARING THRESHOLD WITH INTERPRETATION AND REPORT		$94.37	$94.37					Added Effective 01/01/2021
92653	REMOVAL OF PLAQUE AND BLOOD CLOT, INSERTION OF STENT AND/OR BALLOON DILATION OF SINGLE VESSEL		$69.32	$69.32					Added Effective 01/01/2021

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92700	OTHER PROCEDURE ON EAR, NOSE, OR THROAT	Yes	$0.00	$0.00					
92920	BALLOON DILATION OF SINGLE CORONARY ARTERY AND/OR ITS BRANCH(ES)		$333.72	$333.72					
92924	REMOVAL OF PLAQUE WITH BALLOON DILATION OF SINGLE CORONARY ARTERY AND/OR ITS BRANCH(ES)		$404.91	$404.91					
92928	INSERTION OF STENTS FOR 1 LESION, WITH BALLOON DILATION OF CORONARY ARTERY OR BRANCH, SINGLE ARTERY AND/OR ITS BRANCH(ES)		$399.72	$399.72					
92930	INSERTION OF 2 STENTS FOR 2 OR MORE LESIONS IN 2 OR MORE CORONARY SEGMENTS OR , WITH BALLOON DILATION OF CORONARY ARTERY AND/OR ITS BRANCH(ES) OR A BIFURCATION LESION REQUIRING BALLOON DILATION AND/OR STENTING IN THE MAIN		$439.26	$439.26					Added effective 1/1/2026, Adding code for detailed description and billing of 2 or more stents to 92928. .
92933	REMOVAL OF PLAQUE, INSERTION OF STENT AND BALLOON DILATION OF SINGLE CORONARY ARTERY AND/OR ITS BRANCH(ES)		$477.50	$477.50					
92937	REMOVAL OF PLAQUE, INSERTION OF STENT AND/OR BALLOON DILATION OF SINGLE CORONARY VESSEL AND/OR ITS BRANCH(ES)		$451.88	$451.88					
92941	REMOVAL OF PLAQUE AND BLOOD CLOT, INSERTION OF STENT AND/OR BALLOON DILATION OF SINGLE VESSEL DURING HEART ATTACK OF SINGLE CORONARY VESSEL AND/OR ITS BRANCH(ES) OR A SINGLE BYPASS GRAFT AND/OR ITS BRANCHES		$508.08	$508.08					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92943	REMOVAL OF PLAQUE, INSERTION OF STENT AND/OR BALLOON DILATION OF SINGLE CORONARY ARTERY, BRANCH OR BYPASS GRAFT, AND/OR SUBTENDED MAJOR CORONARY ARTERY BRANCHES OF THE BYPASS GRAFT IN THE DIRECTION OF NORMAL BLOOD FLOW		$547.00	$547.00					
92950	MANUAL ATTEMPT TO RESTORE BLOOD CIRCULATION AND BREATHING		$176.52	$176.52					
92953	TEMPORARY PACEMAKER TO REGULATE HEART BEAT		$28.10	$28.10					
92960	EXTERNAL SHOCK TO HEART TO REGULATE HEART BEAT		$120.34	$120.34					
92961	INTERNAL SHOCK TO HEART TO REGULATE HEART BEAT		$179.74	$179.74					
92970	PLACEMENT OF INTERNAL DEVICE TO ASSIST CIRCULATION		$206.32	$206.32					
92971	PLACEMENT OF EXTERNAL DEVICE TO ASSIST CIRCULATION		$83.65	$83.65					
92972	SHOCKWAVE DESTRUCTION OF CALCIFIED PLAQUE IN CORONARY ARTERY ACCESSED THROUGH SKIN USING CATHETER		$122.47	$122.47					
92973	REMOVAL OF BLOOD CLOT IN HEART ARTERY		$70.30	$70.30					
92974	INSERTION OF RADIATION DELIVERY DEVICE INTO HEART ARTERY		$148.34	$148.34					
92975	REMOVAL OF HEART ARTERY BLOOD CLOT BY DISSOLVING USING IMAGING GUIDANCE		$376.10	$376.10					Termed 12/31/2025
92977	REMOVAL OF HEART ARTERY BLOOD CLOT BY DISSOLVING		$219.11	$219.11					Termed 12/31/2025

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
92978	ULTRASOUND EVALUATION OF HEART BLOOD VESSEL OR GRAFT WITH REVIEW BY RADIOLOGIST, INITIAL VESSEL		$200.09	$200.09		$118.96	$81.13		
92979	ULTRASOUND EVALUATION OF HEART BLOOD VESSEL OR GRAFT WITH REVIEW BY RADIOLOGIST, EACH ADDITIONAL VESSEL		$124.47	$124.47		$59.61	$64.86		
92986	BALLOON DILATION REPAIR OF AORTIC VALVE		$941.65	$941.65					
92987	BALLOON DILATION REPAIR OF MITRAL VALVE		$956.46	$956.46					
92990	BALLOON DILATION REPAIR OF PULMONARY VALVE		$750.43	$750.43					
92997	BALLOON DILATION OF PULMONARY ARTERY, SINGLE VESSEL		$716.27	$716.27					
92998	BALLOON DILATION OF PULMONARY ARTERY, EACH ADDITIONAL VESSEL		$281.67	$281.67					
93000	ROUTINE ELECTROCARDIOGRAM (ECG) USING AT LEAST 12 LEADS WITH INTERPRETATION AND REPORT		$21.79	$21.79					
93005	ROUTINE ELECTROCARDIOGRAM (ECG) USING AT LEAST 12 LEADS WITH INTERPRETATION AND REPORT		$12.26	$12.26					
93010	ROUTINE ELECTROCARDIOGRAM (ECG) USING AT LEAST 12 LEADS WITH INTERPRETATION AND REPORT ONLY		$9.52	$9.52					
93015	EXERCISE OR DRUG-INDUCED HEART STRESS TEST WITH ELECTROCARDIOGRAM (ECG) WITH SUPERVISION AND REVIEW BY PHYSICIAN		$89.95	$89.95					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93016	EXERCISE OR DRUG-INDUCED HEART STRESS TEST WITH ELECTROCARDIOGRAM (ECG) WITH SUPERVISION BY PHYSICIAN		$24.39	$24.39					
93017	EXERCISE OR DRUG-INDUCED HEART STRESS TEST WITH ELECTROCARDIOGRAM (ECG)		$45.83	$45.83					
93018	EXERCISE OR DRUG-INDUCED HEART STRESS TEST WITH ELECTROCARDIOGRAM (ECG) WITH REVIEW BY PHYSICIAN		$19.72	$19.72					
93024	INFUSION OF DRUG WITH EVALUATION OF CORONARY ARTERY SPASM RESPONSE		$108.58	$108.58		$30.89	$77.70		
93025	ELECTROCARDIOGRAM (ECG) ASSESSMENT OF IRREGULAR HEART BEATS		$139.31	$139.31		$124.91	$32.64		
93040	ELECTROCARDIOGRAM (ECG) 1 TO 3 LEADS WITH REVIEW BY PHYSICIAN		$12.15	$12.15					
93041	ELECTROCARDIOGRAM (ECG) 1 TO 3 LEADS		$4.00	$4.00					
93042	ELECTROCARDIOGRAM (ECG) 1 TO 3 LEADS WITH REVIEW BY PHYSICIAN ONLY		$8.16	$8.16					
93050	ANALYSIS OF CENTRAL ARTERIAL PRESSURE WITH REVIEW BY PHYSICIAN		$13.54	$13.54		$6.45	$7.09		Added Effective 1/1/2016
93150	ACTIVATION OF IMPLANTED PHRENIC NERVE STIMULATOR		$35.95	$80.97					
93151	EVALUATION AND PROGRAMMING OF IMPLANTED PHRENIC NERVE STIMULATOR SYSTEM		$33.95	$70.90					
93152	EVALUATION AND PROGRAMMING OF IMPLANTED PHRENIC NERVE STIMULATOR SYSTEM DURING SLEEP STUDY		$79.12	$129.60					
93153	EVALUATION OF IMPLANTED PHRENIC NERVE STIMULATOR SYSTEM		$18.27	$41.94					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93224	ELECTROCARDIOGRAM (ECG) 2-DAY CONTINUOUS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$61.04	$61.04					
93225	ELECTROCARDIOGRAM (ECG) 2-DAY CONTINUOUS		$33.84	$33.84					
93226	ELECTROCARDIOGRAM (ECG) 2-DAY CONTINUOUS WITH REPORT		$59.68	$59.68					
93227	ELECTROCARDIOGRAM (ECG) 2-DAY CONTINUOUS WITH REVIEW BY HEALTH CARE PROFESSIONAL		$34.69	$34.69					
93228	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$21.07	$21.07					
93229	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH TRANSMISSION OF PATIENT TRIGGERED EVENTS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$539.05	$539.05					Rate updated 1/1/2018
93241	HEART RHYTHM RECORDING, ANALYSIS, REPORT, REVIEW, AND INTERPRETATION OF CONTINUOUS EXTERNAL EKG OVER MORE THAN 48 HOURS UP TO 7 DAYS		$0.00	$0.00					Added Effective 01/01/2021
93242	HEART RHYTHM RECORDING CONTINUOUS EXTERNAL EKG OVER MORE THAN 48 HOURS UP TO 7 DAYS		$11.59	$11.59					Added Effective 01/01/2021
93243	HEART RHYTHM ANALYSIS AND REPORT OF CONTINUOUS EXTERNAL EKG OVER MORE THAN 48 HOURS UP TO 7 DAYS		$0.00	$0.00					Added Effective 01/01/2021
93244	HEART RHYTHM REVIEW, AND INTERPRETATION OF CONTINUOUS EXTERNAL EKG OVER MORE THAN 48 HOURS UP TO 7 DAYS		$20.04	$20.04					Added Effective 01/01/2021

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93245	HEART RHYTHM RECORDING FOR MORE THAN 7 DAYS UP TO 15 DAYS BY CONTINUOUS RHYTHM RECORDING AND STORAGE, WITH REVIEW AND INTERPRETATION		$0.00	$0.00					Added Effective 01/01/2021
93246	HEART RHYTHM RECORDING OF CONTINUOUS EXTERNAL EKG OVER 8-15 DAYS		$11.59	$11.59					Added Effective 01/01/2021
93247	HEART RHYTHM ANALYSIS AND REPORT OF CONTINUOUS EXTERNAL EKG OVER 8-15 DAYS		$0.00	$0.00					Added Effective 01/01/2021
93248	HEART RHYTHM REVIEW AND INTERPRETATION OF CONTINUOUS EXTERNAL EKG OVER 8-15 DAYS		$21.99	$21.99					Added Effective 01/01/2021
93260	PROGRAMMING OF IMPLANTABLE DEFIBRILLATOR SYSTEM		$52.04	$52.04		$16.28	$35.76		Added effective 1/1/2015
93261	EVALUATION OF IMPLANTABLE DEFIBRILLATOR SYSTEM		$47.48	$47.48		$16.28	$31.20		Added effective 1/1/2015
93264	REMOTE MONITORING OF PULMONARY ARTERY PRESSURE SENSOR, UP TO 30 DAYS		$29.03	$40.00					Effective 1/1/2019
93268	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH SYMPTOM MONITORING AND REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$126.73	$126.73		$99.53	$27.20		
93270	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH SYMPTOM MONITORING		$33.84	$33.84					
93271	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH SYMPTOM MONITORING AND TRANSMISSION AND ANALYSIS		$65.69	$65.69					
93272	ELECTROCARDIOGRAM (ECG) UP TO 30 DAYS CONTINUOUS WITH SYMPTOM MONITORING AND TRANSMISSION AND ANALYSIS		$27.20	$27.20					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93278	ORDING TO EVALUATE HEIGHT AND DURATION OF HEART BEATS THROUGH DAMAGED HEART TISSUE		$56.22	$56.22		$32.42	$23.80		
93279	PROGRAMMING OF SINGLE LEAD PACEMAKER SYSTEM		$47.18	$47.18		$17.21	$29.97		
93280	PROGRAMMING OF DUAL LEAD PACEMAKER SYSTEM		$54.30	$54.30		$18.69	$35.61		
93281	PROGRAMMING OF MULTIPLE LEAD PACEMAKER SYSTEM		$63.49	$63.49		$21.96	$41.53		
93282	PROGRAMMING OF SINGLE LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM		$59.04	$59.04		$19.58	$39.46		
93283	PROGRAMMING OF DUAL LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM		$71.50	$71.50		$22.55	$48.95		
93284	PROGRAMMING OF MULTIPLE LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM		$83.67	$83.67		$25.52	$58.15		
93285	PROGRAMMING OF CARDIAC RHYTHM MONITOR SYSTEM		$39.76	$39.76		$15.43	$24.33		
93286	PROGRAMMING OF SINGLE, DUAL, OR MULTIPLE LEAD OR LEADLESS PACEMAKER SYSTEM BEFORE OR AFTER SURGERY		$22.55	$22.55		$10.09	$12.46		
93287	PROGRAMMING OF SINGLE, DUAL OR MULTIPLE LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM BEFORE OR AFTER SURGERY		$29.67	$29.67		$11.57	$18.10		
93288	EVALUATION OF SINGLE, DUAL, MULTIPLE LEAD OR LEADLESS PACEMAKER SYSTEM		$35.60	$35.60		$15.73	$19.87		
93289	EVALUATION OF SINGLE, DUAL, OR MULTIPLE LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM		$54.59	$54.59		$18.69	$35.90		
93290	EVALUATION OF IMPLANTABLE HEART AND BLOOD VESSEL MONITORING SYSTEM		$26.41	$26.41		$8.90	$17.51		
93291	EVALUATION OF CARDIAC RHYTHM MONITOR SYSTEM		$34.12	$34.12		$13.94	$20.18		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93292	EVALUATION OF WEARABLE DEFIBRILLATOR SYSTEM		$30.86	$30.86		$10.98	$19.88		
93293	TELEPHONIC RHYTHM STRIP EVALUATION OF SINGLE, DUAL, MULTIPLE LEAD OR LEADLESS PACEMAKER SYSTEM, UP TO 90 DAYS		$53.11	$53.11		$38.57	$14.54		
93294	EVALUATION OF SINGLE, DUAL, MULTIPLE LEAD OR LEADLESS PACEMAKER SYSTEM, REMOTE UP TO 90 DAYS		$30.26	$30.26					
93295	ALUATION OF SINGLE, DUAL, OR MULTIPLE LEAD IMPLANTABLE DEFIBRILLATOR SYSTEM, REMOTE UP TO 90 DAYS		$54.59	$54.59					
93296	EVALUATION OF SINGLE, DUAL, MULTIPLE LEAD OR LEADLESS PACEMAKER SYSTEM OR IMPLANTABLE DEFIBRILLATOR SYSTEM, REMOTE UP TO 90 DAYS		$29.97	$29.97					
93297	EVALUATION OF IMPLANTABLE HEART AND BLOOD VESSEL MONITORING SYSTEM, REMOTE UP TO 30 DAYS		$21.07	$21.07					
93298	EVALUATION OF CARDIAC RHYTHM MONITOR SYSTEM, REMOTE UP TO 30 DAYS		$24.33	$24.33					
93303	ULTRASOUND OF HEART FOR CONGENITAL DEFECT		$166.87	$166.87		$101.44	$65.42		
93304	ULTRASOUND OF HEART FOR CONGENITAL DEFECT, FOLLOW UP		$91.46	$91.46		$51.10	$40.35		
93306	ULTRASOUND OF HEART WITH COLOR-DEPICTED BLOOD FLOW, RATE, DIRECTION AND VALVE FUNCTION		$220.15	$220.15		$161.11	$59.04		
93307	ULTRASOUND OF HEART		$157.16	$157.16		$105.26	$51.90		
93308	ULTRASOUND OF HEART, FOLLOW-UP		$88.03	$88.03		$53.02	$35.01		
93312	ULTRASOUND OF HEART WITH PROBE IN ESOPHAGUS, WITH REPORT		$189.77	$189.77		$104.58	$85.19		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93313	INSERTION OF PROBE IN ESOPHAGUS FOR HEART ULTRASOUND		$47.30	$47.30					
93314	INTERPRETATION AND REPORT OF ULTRASOUND OF HEART		$151.88	$151.88		$104.58	$47.30		
93315	ULTRASOUND OF HEART WITH PROBE IN ESOPHAGUS FOR CONGENITAL DEFECT, WITH REPORT		$218.65	$218.65		$100.84	$117.81		
93316	INSERTION OF PROBE IN ESOPHAGUS FOR CONGENITAL HEART ULTRASOUND		$46.10	$46.10					
93317	INTERPRETATION AND REPORT OF CONGENITAL HEART ULTRASOUND		$172.29	$172.29		$100.84	$71.45		
93318	ULTRASOUND OF HEART WITH PROBE IN ESOPHAGUS TO ASSESS HEART PUMP FUNCTION		$203.83	$203.83		$109.26	$94.56		
93319	3D ULTRASOUND IMAGING OF HEART FOR EVALUATION OF HEART STRUCTURE PERFORMED DURING ULTRASOUND IMAGING OF CONGENITAL HEART DEFECTS		$20.70	$48.03					Added 1/1/2022
93320	ULTRASOUND OF HEART BLOOD FLOW, VALVES AND CHAMBERS		$72.12	$72.12		$46.88	$25.24		
93321	ULTRASOUND OF HEART BLOOD FLOW, VALVES AND CHAMBERS, FOLLOW-UP		$40.60	$40.60		$30.62	$9.98		
93325	ULTRASOUND OF HEART WITH COLOR-DEPICTED BLOOD FLOW, RATE AND VALVE FUNCTION		$83.23	$83.23		$79.86	$3.37		
93350	ULTRASOUND OF HEART DURING REST, EXERCISE AND/OR DRUG-INDUCED STRESS WITH REPORT		$126.08	$126.08		$48.46	$77.62		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93351	ULTRASOUND OF HEART WITH CONTINUOUS ELECTROCARDIOGRAM (ECG) DURING REST, EXERCISE AND/OR DRUG INDUCED STRESS WITH REVIEW AND REPORT		$178.09	$178.09		$110.13	$67.90		Rate updated 1/1/2018
93352	INJECTION OF X-RAY CONTRAST DURING ULTRASOUND OF HEART		$31.75	$31.75					
93355	ULTRASOUND OF HEART WITH PROBE IN ESOPHAGUS DURING SURGERY ON HEART OR GREAT BLOOD VESSELS WITH REPORT		$183.32	$183.32					Added effective 1/1/2015
93356	HEART MUSCLE STRAIN IMAGING		$9.58	$30.07					Added Effective 01/01/2020
93451	INSERTION OF TUBE IN RIGHT HEART CHAMBERS FOR MEASUREMENT		$666.68	$666.68		$537.03	$129.66		
93452	INSERTION OF TUBE IN LEFT HEART CHAMBERS FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$740.27	$740.27		$512.99	$227.27		
93453	INSERTION OF TUBE IN RIGHT AND LEFT HEART CHAMBERS FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$968.73	$968.73		$670.84	$297.89		
93454	INSERTION OF TUBE IN CORONARY ARTERY FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$763.41	$763.41		$534.36	$229.05		
93455	INSERTION OF TUBE IN BYPASS GRAFT FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$890.69	$890.69		$626.33	$264.36		
93456	INSERTION OF TUBE IN RIGHT HEART CHAMBERS AND CORONARY ARTERY FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$955.37	$955.37		$662.23	$293.14		
93457	INSERTION OF TUBE IN RIGHT HEART CHAMBERS, CORONARY ARTERY, AND BYPASS GRAFT FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$1,082.66	$1,082.66		$753.91	$328.74		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93458	INSERTION OF TUBE IN LEFT LOWER HEART CHAMBER AND CORONARY ARTERY FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$921.25	$921.25		$641.76	$279.49		
93459	INSERTION OF TUBE IN LEFT LOWER HEART CHAMBER, CORONARY ARTERY AND BYPASS GRAFT FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$1,017.38	$1,017.38		$702.88	$314.50		
93460	INSERTION OF TUBE IN RIGHT AND LEFT HEART CHAMBERS AND CORONARY ARTERY FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$1,088.89	$1,088.89		$738.49	$350.40		
93461	INSERTION OF TUBE IN RIGHT AND LEFT HEART CHAMBERS, CORONARY ARTERY, AND BYPASS GRAFT FOR DIAGNOSIS WITH REVIEW BY RADIOLOGIST		$1,247.62	$1,247.62		$861.02	$386.60		
93462	INSERTION OF TUBE IN LEFT HEART CHAMBER THROUGH HEART SEPTUM		$178.02	$178.02					
93463	DRUG INFUSION DURING CARDIAC CATHETERIZATION		$94.35	$94.35					
93464	DRUG INFUSION OR EXERCISE FOR HEART STIMULATION DURING DIAGNOSTIC STUDY		$220.15	$220.15		$137.08	$83.08		
93503	INSERTION OF TUBE IN PULMONARY ARTERY FOR MONITORING		$143.62	$143.62					
93505	BIOPSY OF HEART MUSCLE		$276.95	$276.95		$55.07	$221.88		
93563	INJECTION FOR IMAGING OF CORONARY BLOOD VESSEL DURING EVALUATION OF CONGENITAL ABNORMALITIES WITH REVIEW BY RADIOLOGIST		$48.96	$48.96					
93564	INJECTION FOR IMAGING OF HEART VESSEL GRAFTS DURING EVALUATION OF CONGENITAL ABNORMALITIES WITH REVIEW BY RADIOLOGIST		$49.85	$49.85					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93565	INJECTION FOR IMAGING OF LEFT HEART CHAMBERS WITH REVIEW BY RADIOLOGIST		$37.68	$37.68					
93566	INJECTION FOR IMAGING OF RIGHT HEART CHAMBERS WITH REVIEW BY RADIOLOGIST		$37.68	$147.76					
93567	INJECTION FOR IMAGING OF AORTA ABOVE HEART VALVE WITH REVIEW BY RADIOLOGIST		$42.43	$121.94					
93568	INJECTION FOR NONSELECTIVE IMAGING OF PULMONARY ARTERY DURING HEART CATHETERIZATION		$38.57	$133.52					
93569	INJECTION FOR SELECTIVE IMAGING OF PULMONARY ARTERY DURING HEART CATHETERIZATION, ON ONE SIDE OF BODY		$31.68	$31.68					
93571	ULTRASOUND EVALUATION OF HEART BLOOD VESSEL DURING DIAGNOSIS OR TREATMENT, INITIAL VESSEL		$0.00	$0.00		$0.00	$79.40		
93572	ULTRASOUND EVALUATION OF HEART BLOOD VESSEL DURING DIAGNOSIS OR TREATMENT, EACH ADDITIONAL VESSEL		$0.00	$0.00		$0.00	$62.85		
93573	INJECTION FOR SELECTIVE IMAGING OF PULMONARY ARTERY DURING HEART CATHETERIZATION, ON BOTH SIDES OF BODY		$52.81	$52.81					
93574	INJECTION FOR SELECTIVE IMAGING OF PULMONARY VEIN DURING HEART CATHETERIZATION		$58.26	$58.26					
93575	INJECTION FOR SELECTIVE IMAGING OF MAJOR AORTOPULMONARY COLLATERAL ARTERIES DURING HEART CATHETERIZATION		$77.93	$77.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93580	REPAIR OF CONGENITAL ABNORMALITY IN WALL BETWEEN UPPER HEART CHAMBERS WITH IMPLANT		$736.30	$736.30					
93581	REPAIR OF CONGENITAL ABNORMALITY IN WALL BETWEEN LOWER HEART CHAMBERS WITH IMPLANT		$985.59	$985.59					
93582	REPAIR OF CONGENITAL ABNORMALITY OF PULMONARY ARTERY TO AORTA		$543.81	$543.81					
93583	REPAIR OF WALL BETWEEN LOWER HEART CHAMBERS INCLUDING PACEMAKER INSERTION		$605.33	$605.33					
93584	REVIEW BY RADIOLOGIST OF VEIN IMAGING FOR CONGENITAL HEART DEFECT OF SUPERIOR VENA CAVA		$49.50	$49.50					
93585	REVIEW BY RADIOLOGIST OF VEIN IMAGING FOR CONGENITAL HEART DEFECT OF THE AZYGOS/HEMIAZYGOS VENOUS SYSTEM		$46.64	$46.64					
93586	REVIEW BY RADIOLOGIST OF VEIN IMAGING FOR CONGENITAL HEART DEFECT OF CORONARY SINUS		$58.95	$58.95					
93587	REVIEW BY RADIOLOGIST OF VEIN IMAGING FOR CONGENITAL HEART DEFECT OF VENOVENOUS COLLATERALS ABOVE THE HEART		$87.00	$87.00					
93588	REVIEW BY RADIOLOGIST OF VEIN IMAGING FOR CONGENITAL HEART DEFECT OF VENOVENOUS COLLATERALS BELOW THE HEART		$87.85	$87.85					
93590	REPAIR OF LEAK ADJACENT TO MITRAL VALVE, FIRST CLOSURE DEVICE		$971.38	$971.38					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93591	REPAIR OF LEAK ADJACENT TO AORTIC VALVE, FIRST CLOSURE DEVICE		$806.07	$806.07					Added Effective 1/1/2017
93592	REPAIR OF LEAD ADJACENT TO HEART VALVE, EACH ADDITIONAL CLOSURE DEVICE		$355.43	$355.43					Added Effective 1/1/2017
93593	INSERTION OF CATHETER INTO RIGHT SIDE OF HEART FOR EVALUATION OF CONGENITAL HEART DEFECT IN HEART WITH NORMAL NATIVE BLOOD VESSEL CONNECTIONS, USING IMAGING GUIDANCE		$0.00	$0.00		$0.00	$157.94		Added 1/1/2022
93594	INSERTION OF CATHETER INTO RIGHT SIDE OF HEART FOR EVALUATION OF CONGENITAL HEART DEFECT IN HEART WITH ABNORMAL NATIVE BLOOD VESSEL CONNECTIONS, USING IMAGING GUIDANCE		$0.00	$0.00		$0.00	$248.20		Added 1/1/2022
93595	INSERTION OF CATHETER INTO LEFT SIDE OF HEART FOR EVALUATION OF CONGENITAL HEART DEFECT, USING MAGING GUIDANCE		$0.00	$0.00		$0.00	$223.98		Added 1/1/2022
93596	INSERTION OF CATHETER INTO RIGHT AND LEFT SIDES OF HEART FOR EVALUATION OF CONGENITAL HEART DEFECT IN HEART WITH ABNORMAL NATIVE BLOOD VESSEL CONNECTIONS, USING IMAGING GUIDANCE		$0.00	$0.00		$0.00	$271.51		Added 1/1/2022
93597	INSERTION OF CATHETER INTO RIGHT AND LEFT SIDES OF HEART FOR EVALUATION OF CONGENITAL HEART DEFECT IN HEART WITH NORMAL NATIVE BLOOD VESSEL CONNECTIONS, USING IMAGING GUIDANCE		$0.00	$0.00		$0.00	$361.46		Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93598	MEASUREMENT OF OUTPUT OF BLOOD FROM HEART, PERFORMED DURING CARDIAC CATHETERIZATION FOR EVALUATION OF CONGENITAL HEART DEFECTS		$0.00	$0.00		$0.00	$59.13		Added 1/1/2022
93600	RECORDING OF UPPER HEART RHYTHM		$194.02	$194.02		$53.29	$140.73		
93602	RECORDING OF UPPER HEART CHAMBER RHYTHM		$143.46	$143.46		$30.37	$113.08		
93603	RECORDING OF RIGHT LOWER HEART CHAMBER RHYTHM		$170.67	$170.67		$45.83	$124.84		
93609	INSERTION OF TUBE IN UPPER AND/OR LOWER HEART CHAMBERS TO RECORD AND IDENTIFY ORIGIN OF ABNORMAL HEART RHYTHM		$479.37	$479.37		$74.09	$405.29		
93610	INSERTION OF TEMPORARY PACEMAKER ELECTRODE FOR DIAGNOSTIC UPPER HEART PACING		$191.74	$191.74		$37.03	$154.71		
93612	INSERTION OF TEMPORARY PACEMAKER ELECTRODE FOR DIAGNOSTIC LOWER HEART PACING		$199.73	$199.73		$44.22	$155.51		
93613	INSERTION OF TUBE FOR 3D MAPPING OF ELECTRICAL IMPULSES TO HEART MUSCLE		$286.47	$286.47					
93615	INSERTION OF PROBE IN ESOPHAGUS FOR RECORDING ELECTRICAL IMPULSES TO UPPER AND LOWER HEART CHAMBERS		$47.46	$47.46		$8.53	$38.92		
93616	INSERTION OF PROBE IN ESOPHAGUS FOR RECORDING ELECTRICAL IMPULSES TO UPPER AND LOWER HEART CHAMBERS, WITH PACING		$90.68	$90.68		$8.53	$82.14		
93618	INDUCTION OF ARRHYTHMIA BY ELECTRICAL PACING		$390.33	$390.33		$108.19	$282.14		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93619	INSERTION OF CATHETERS FOR RECORDING AND PACING OF RIGHT HEART CHAMBERS RHYTHM		$697.01	$697.01		$209.99	$487.01		
93620	INSERTION OF CATHETERS FOR RECORDING AND PACING OF RIGHT HEART CHAMBERS RHYTHM AND INDUCTION OF ABNORMAL RHYTHM		$969.71	$969.71		$243.64	$726.07		
93621	INSERTION OF CATHETERS FOR RECORDING AND PACING OF LEFT UPPER HEART CHAMBER RHYTHM AND INDUCTION OF ABNORMAL RHYTHM		$0.00	$0.00		$0.00	$102.06		
93622	INSERTION OF CATHETERS FOR RECORDING AND PACING OF LEFT LOWER HEART CHAMBER RHYTHM AND INDUCTION OF ABNORMAL RHYTHM		$0.00	$0.00		$0.00	$150.72		
93623	PROGRAMMING OF HEART RHYTHM STIMULATION AFTER DRUG INFUSION						$139.15		
93624	INSERTION OF CATHETERS FOR RECORDING, PACING, AND INDUCTION OF ABNORMAL HEART RHYTHM TO TEST THERAPY		$280.54	$280.54		$54.09	$226.44		
93631	INTRA-OPERATIVE HEART PACING AND MAPPING OF ABNORMAL HEART RHYTHM FOR SURGICAL CORRECTION		$567.97	$567.97		$174.18	$393.79		
93640	EVALUATION OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR AT TIME OF IMPLANTATION OR REPLACEMENT		$438.49	$438.49		$195.12	$243.37		
93641	EVALUATION OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR AND GENERATOR AT TIME OF IMPLANTATION OR REPLACEMENT		$571.97	$571.97		$195.12	$376.85		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93642	PROGRAMMING OF PACING CARDIOVERTER-DEFIBRILLATOR		$521.07	$521.07		$195.12	$325.95		
93644	PROGRAMMING OF IMPLANTABLE DEFIBRILLATOR		$230.29	$230.29		$77.31	$152.98		Added effective 1/1/2015
93650	DESTRUCTION OF HEART CONDUCTION TISSUE TO CREATE HEART BLOCK		$701.98	$701.98					
93653	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH CATHETER DESTRUCTION OF ABNORMALITY OF UPPER CHAMBER OF HEART CAUSING SUPRAVENTRICULAR TACHYCARDIA (RAPID HEART RATE)		$657.32	$657.32					
93654	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH CATHETER DESTRUCTION OF ABNORMALITY OF LOWER CHAMBER OF HEART CAUSING VENTRICULAR TACHYCARDIA (RAPID HEART RATE) OR VENTRICULAR ECTOPY (IRREGULAR HEARTBEAT)		$877.11	$877.11					
93655	INSERTION OF CATHETERS AND DESTRUCTION OF TISSUE TO TREAT ABNORMAL HEART RHYTHM		$328.68	$328.68					
93656	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH CATHETER DESTRUCTION OF ABNORMALITY CAUSING ATRIAL FIBRILLATION (UNCOORDINATED CONTRACTION OF UPPER CHAMBERS OF HEART) BY PULMONARY VEIN ISOLATION		$877.43	$877.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93657	DESTRUCTION OF TISSUE OF UPPER HEART CHAMBER THROUGH TUBE TO TREAT ABNORMAL HEART RHYTHM		$328.90	$328.90					
93660	EVALUATION OF HEART FUNCTION USING TILT TABLE		$125.57	$125.57		$43.61	$81.96		
93662	ULTRASOUND EVALUATION OF HEART BLOOD VESSEL WITH REVIEW BY RADIOLOGIST		$219.37	$219.37		$104.55	$114.82		
93668	PERIPHERAL ARTERIAL DISEASE REHABILITATION, EACH SESSION		$36.51	$36.51					
93701	MEASUREMENT OF HEART BLOOD FLOW AND RESPIRATION		$25.35	$25.53		$18.58	$6.95		
93702	MEASUREMENT OF LYMPHEDEMA EXTRACELLULAR FLUID		$82.77	$82.77					Added effective 1/1/2015
93724	ELECTRONIC ANALYSIS OF PACEMAKER TO CORRECT RAPID HEART RATE		$334.27	$334.27		$108.19	$226.08		
93740	ELECTRONIC ANALYSIS OF PACEMAKER TO CORRECT RAPID HEART RATE		$17.74	$17.74		$4.27	$13.47		
93745	MEASUREMENT OF HEART BLOOD VESSEL FUNCTION AT VARIOUS TEMPERATURES	Yes	$0.00	$0.00		$0.00	$0.00		
93750	EVALUATION OF LOWER HEART CHAMBER ASSIST DEVICE		$34.88	$39.47					
93770	MEASUREMENT OF HEART AND CIRCULATORY SYSTEM PRESSURE		$10.55	$10.55		$0.80	$9.74		
93784	AMBULATORY BLOOD PRESSURE MONITORING, 1 DAY OR LONGER, WITH RECORDING, SCANNING ANALYSIS, INTERPRETATION, AND REPORT		$35.18	$35.18					Updated Effective 01/01/2020
93786	AMBULATORY BLOOD PRESSURE MONITORING, 1 DAY OR LONGER, WITH RECORDING		$16.59	$16.59					Updated Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93788	AMBULATORY BLOOD PRESSURE MONITORING, 1 DAY OR LONGER, WITH SCANNING ANALYSIS AND REPORT		$3.62	$3.62					Updated Effective 01/01/2020
93790	AMBULATORY BLOOD PRESSURE MONITORING, 1 DAY OR LONGER, WITH REVIEW, INTERPRETATION AND REPORT		$14.98	$14.98					Updated Effective 01/01/2020
93792	PATIENT/CAREGIVER TRAINING FOR MONITORING OF ANTICOAGULANT THERAPY		$39.91	$39.91					Added Effective 1/1/2018
93793	ANTICOAGULANT MANAGEMENT OF PATIENT TAKING WARFARIN		$9.36	$9.36					Added Effective 1/1/2018
93797	OUTPATIENT HEART REHABILITATION, QUALIFIED HEALTH CARE PROFESSIONAL SERVICES		$2.06	$8.77					
93798	OUTPATIENT HEART REHABILITATION WITH ELECTROCARDIOGRAM (ECG) MONITORING, QUALITY HEALTH CARE PROFESSIONAL SERVICES		$3.09	$11.61					
93799	OUTPATIENT HEART REHABILITATION WITH ELECTROCARDIOGRAM (ECG) MONITORING, QUALITY HEALTH CARE PROFESSIONAL SERVICES	Yes	$0.00	$0.00		$0.00	$0.00		
93880	ULTRASOUND OF BOTH SIDES OF HEAD AND NECK BLOOD FLOW		$167.80	$167.80		$144.36	$23.44		
93882	ULTRASOUND OF ONE SIDE OF HEAD AND NECK BLOOD FLOW		$89.06	$89.06		$69.62	$19.44		
93886	COMPLETE ULTRASOUND OF WITHIN THE BRAIN BLOOD FLOW		$158.82	$158.82		$118.76	$40.06		
93888	ULTRASOUND OF WITHIN THE BRAIN BLOOD FLOW		$105.85	$105.85		$79.42	$26.43		
93892	ULTRASOUND OF WITHIN THE BRAIN BLOOD FLOW FOR BLOOD CLOTS		$177.44	$177.44		$130.03	$47.41		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93893	ULTRASOUND OF BLOOD FLOW WITHIN BRAIN FOR ATYPICAL BLOOD FLOW DETECTION WITH MICROBUBBLE INJECTION		$174.12	$174.12		$126.71	$47.41		
93895	EVALUATION OF NECK ARTERY THICKNESS, BOTH SIDES		$0.00	$0.00		$0.00	$0.00		Added effective 1/1/2015
93896	ULTRASOUND OF BLOOD FLOW WITHING BRAIN TO ASSESS FLEXIBILITY OF VESSELS		$141.29	$141.29		$107.75	$33.55		
93897	ULTRASOUND OF VESSELS IN BRAIN FOR DETECTION OF BLOOD CLOTS		$177.01	$177.01		$146.53	$30.48		
93898	DETECTION OF ABNORMAL BLOOD FLOW IN BRAIN VESSELS USING ULTRASOUND WITH MICROBUBBLE INJECTION		$185.64	$185.64		$149.90	$35.74		
93922	ULTRASOUND STUDY OF ARM AND LEG ARTERIES		$48.97	$48.97		$32.91	$16.06		
93923	COMPLETE ULTRASOUND STUDY OF ARM AND LEG ARTERIES		$91.18	$91.18		$62.11	$29.07		
93924	ULTRASOUND OF LEG ARTERIES AT REST AND AFTER EXERCISE		$100.05	$100.05		$67.66	$32.39		
93925	ULTRASOUND OF LEG ARTERIES OR ARTERY GRAFTS		$133.93	$133.93		$105.47	$28.45		
93926	ULTRASOUND OF ONE LEG ARTERIES OR ARTERY GRAFTS		$89.54	$89.54		$70.40	$19.15		
93930	ULTRASOUND OF ARM ARTERIES OR ARTERY GRAFTS		$137.03	$137.03		$111.86	$25.17		
93931	ULTRASOUND OF ONE ARM ARTERIES OR ARTERY GRAFTS		$91.19	$91.19		$74.39	$16.80		
93970	ULTRASOUND STUDY OF ARM OR LEG VEINS WITH COMPRESSION AND MANEUVERS		$171.77	$171.77		$145.38	$26.39		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
93971	ULTRASOUND STUDY OF ONE ARM OR LEG VEINS WITH COMPRESSION AND MANEUVERS		$98.98	$98.98		$77.81	$21.18		
93975	COMPLETE ULTRASOUND OF ABDOMEN AND PELVIS ARTERY AND VEIN BLOOD FLOW		$197.61	$197.61		$132.31	$65.30		
93976	ULTRASOUND OF ABDOMEN AND PELVIS ARTERY AND VEIN BLOOD FLOW		$132.20	$132.20		$88.46	$43.74		
93978	COMPLETE ULTRASOUND OF AORTA, VENA CAVA, GROIN VESSELS OR BYPASS GRAFTS		$139.39	$139.39		$108.64	$30.75		
93979	ULTRASOUND OF AORTA, VENA CAVA, GROIN VESSELS OR BYPASS GRAFTS		$92.86	$92.86		$72.25	$20.61		
93980	COMPLETE ULTRASOUND OF PENIS ARTERY AND VEIN BLOOD FLOW		$175.65	$175.65		$98.55	$77.10		
93981	ULTRASOUND OF PENIS ARTERY AND VEIN BLOOD FLOW		$121.33	$121.33		$91.09	$30.24		
93985	COMPLETE ULTRASOUND OF ARTERY AND VEIN BLOOD FLOW PRE-OP ASSESSMENT ON BOTH SIDES OF BODY FOR HEMODIALYSIS ACCESS		$197.78	$197.78		$166.76	$31.02		Added Effective 01/01/2020
93986	COMPLETE ULTRASOUND OF ARTERY AND VEIN BLOOD FLOW PRE-OP ASSESSMENT ON SIDE OF BODY FOR HEMODIALYSIS ACCESS		$114.85	$114.85		$94.92	$19.94		Added Effective 01/01/2020
93990	COMPLETE ULTRASOUND OF ARTERY AND VEIN BLOOD FLOW PRE-OP ASSESSMENT ON SIDE OF BODY FOR HEMODIALYSIS ACCESS		$83.31	$83.31		$70.40	$12.92		
94002	INITIAL HOSPITAL INPATIENT OR OBSERVATION VENTILATION ASSISTANCE AND MANAGEMENT		$68.19	$68.19					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
94003	FOLLOW-UP INPATIENT OR OBSERVATION VENTILATION ASSISTANCE AND MANAGEMENT		$49.33	$49.33					
94004	NURSING FACILITY VENTILATION ASSISTANCE AND MANAGEMENT		$35.89	$35.89					
94010	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME		$24.44	$24.44		$11.46	$12.98		
94011	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME (2 YEARS OR YOUNGER)		$74.48	$74.48					
94012	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME BEFORE AND AFTER MEDICATION ADMINISTRATION (2 YEARS OR YOUNGER)		$114.60	$114.60					
94013	TEST TO MEASURE REMAINING AIR OR LUNG CAPACITY AFTER EXHALATION (2 YEARS OR YOUNGER)		$24.15	$24.15					
94014	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME INITIATED BY PATIENT INCLUDING TRANSMISSION OF TRACING, ANALYSIS, RECALIBRATION OF DEVICE, AND EVALUATION BY PROVIDER		$12.62	$12.62					
94016	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME INITIATED BY PATIENT AND EVALUATED BY PROVIDER		$4.89	$4.89					
94060	TEST TO MEASURE EXPIRATORY AIRFLOW AND VOLUME CHANGES BEFORE AND AFTER MEDICATION ADMINISTRATION		$45.35	$45.35		$25.33	$20.02		
94070	TEST TO MEASURE LUNG AIRWAY SENSITIVITY		$68.24	$68.24		$39.71	$28.53		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
94150	TEST TO MEASURE THE TOTAL VOLUME OF AIR THAT CAN BE EXHALED AFTER INHALING		$9.08	$9.08		$2.39	$6.69		
94200	TEST TO MEASURE LARGEST AMOUNT OF AIR BREATHED IN AN OUT		$14.15	$14.15		$6.92	$7.23		
94375	TEST TO MEASURE LARGEST AMOUNT OF AIR BREATHED IN AN OUT		$28.04	$28.04		$13.07	$14.97		
94450	TEST TO MEASURE LUNG FUNCTION RESPONSE TO LOW OXYGEN		$29.31	$29.31		$10.65	$18.66		
94452	TEST TO MEASURE LUNG FUNCTION AT HIGH ALTITUDE		$36.26	$36.26		$24.25	$12.01		
94453	TEST TO MEASURE LUNG FUNCTION AT HIGH ALTITUDE WITH EVALUATION OF OXYGEN NEEDS AT REST AND DURING EXERCISE		$51.43	$51.43		$35.99	$15.45		
94610	ADMINISTRATION OF MEDICATION THROUGH BREATHING TUBE		$48.89	$48.89					
94617	TEST FOR EXERCISE-INDUCED SPASM OF LUNG AIRWAYS		$72.36	$72.36		$45.66	$26.70		Added Effective 1/1/2018
94618	TEST FOR EXERCISE-INDUCED LUNG STRESS		$26.61	$26.61		$8.34	$18.27		Added Effective 1/1/2018
94619	EXERCISE TEST FOR SPASM OF LUNG AIRWAYS		$57.11	$57.11		$38.39	$18.72		Added Effective 01/01/2021
94621	TEST FOR EXERCISE-INDUCED HEART AND LUNG STRESS		$126.01	$126.01		$70.98	$55.03		Rate updated 1/1/2018
94625	PROFESSIONAL SERVICES FOR OUTPATIENT PULMONARY REHABILITATION, PER SESSION		$15.52	$50.58					Added 1/1/2022
94626	PROFESSIONAL SERVICES FOR OUTPATIENT PULMONARY REHABILITATION WITH CONTINUOUS MONITORING OF BLOOD OXYGEN, PER SESSION		$22.50	$58.08					Added 1/1/2022

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
94640	INHALATION TREATMENT FOR AIRWAY OBSTRUCTION OR SPUTUM PRODUCTION		$11.19	$11.19					
94642	INHALATION TREATMENT FOR PNEUMONIA		$43.41	$43.41					
94644	INHALATION TREATMENT FOR ACUTE AIRWAY OBSTRUCTION, FIRST HOUR		$23.85	$23.85					
94645	INHALATION TREATMENT FOR ACUTE AIRWAY OBSTRUCTION, EACH ADDITIONAL HOUR		$9.13	$9.13					
94660	THERAPY PROCEDURE USING A POSITIVE PRESSURE VENTILATOR		$42.80	$42.80					
94662	THERAPY PROCEDURE USING A NEGATIVE PRESSURE VENTILATOR		$30.83	$30.83					Termed 12/31/2025
94664	EVALUATION OF USE OF BREATHING DEVICE		$12.65	$12.65					Rate change effective 7/1/2015
94667	INITIAL THERAPY SERVICE TO FACILITATE LUNG FUNCTION		$15.97	$15.97					
94668	FOLLOW-UP THERAPY SERVICE TO FACILITATE LUNG FUNCTION		$9.85	$9.85					
94669	THERAPY PROCEDURE TO CLEAR AIRWAY USING AN INFLATABLE VEST		$25.58	$25.58					
94680	TEST TO MEASURE EXHALED AIR FOR EVALUATION OF LUNG FUNCTION DURING REST AND EXERCISE		$32.05	$32.05		$14.84	$17.21		
94681	TEST TO MEASURE EXHALED AIR AND CARBON DIOXIDE FOR EVALUATION OF LUNG FUNCTION		$52.38	$52.38		$38.56	$13.81		
94690	TEST TO MEASURE EXHALED AIR FOR EVALUATION OF LUNG FUNCTION AT REST		$18.05	$18.05		$14.65	$3.40		
94726	TEST TO DETERMINE LUNG VOLUMES USING SENSORS		$41.50	$41.50		$36.20	$10.68		
94727	TEST TO DETERMINE LUNG VOLUMES USING GAS DILUTION OR WASHOUT		$32.75	$32.75		$26.11	$10.68		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
94728	TEST TO MEASURE RESISTANCE OF THE AIRWAYS AND LUNGS TO DIFFERING FREQUENCIES		$30.66	$30.66		$20.48	$10.18		Updated Effective 01/01/2020
94729	TEST TO EXAMINE HOW WELL THE LUNGS EXCHANGE GASES		$41.01	$41.01		$39.46	$7.12		
94760	TEST TO MEASURE OXYGEN LEVEL IN BLOOD USING EAR OR FINGER DEVICE		$7.19	$7.19					
94761	TEST TO MEASURE OXYGEN LEVEL IN BLOOD USING EAR OR FINGER DEVICE MULTIPLE TIMES		$18.62	$18.62					
94762	TEST TO MEASURE OXYGEN LEVEL IN BLOOD USING EAR OR FINGER DEVICE CONTINUOUSLY OVERNIGHT		$31.40	$31.40					
94772	TEST TO RECORD INFANT BREATHING PATTERN OVER 12-24 HOURS		$207.47	$207.47		$77.76	$129.71		
94775	TEST TO MONITOR PEDIATRIC BREATHING AND HEART RATE AT HOME INCLUDING RECORDING AND MONITOR ATTACHMENT		$0.00	$0.00					
94776	TEST TO MONITOR PEDIATRIC BREATHING AND HEART RATE AT HOME INCLUDING RECORDING, DOWNLOAD OF DATA, TRANSMISSION RECEIPT, AND COMPUTER ANALYSIS		$0.00	$0.00					
94777	TEST TO MONITOR PEDIATRIC BREATHING AND HEART RATE AT HOME INCLUDING RECORDING AND EVALUATION BY PROVIDER		$0.00	$0.00					
94780	TEST OF CAR SEAT OR BED (1 YEAR OR YOUNGER), 1 HOUR		$19.15	$39.82					
94781	TEST OF CAR SEAT OR BED (1 YEAR OR YOUNGER), EACH ADDITIONAL 30 MINUTES		$6.67	$15.46					
94799	OTHER SERVICE OR PROCEDURE ON LUNG	Yes	$0.00	$0.00		$0.00	$0.00		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95004	TEST FOR ALLERGY USING ALLERGENIC EXTRACT		$2.82	$2.82					
95012	TEST TO MEASURE THE LEVEL OF NITRIC OXIDE GAS		$12.43	$12.43					
95017	TEST FOR ALLERGY USING COMBINATION OF METHODS WITH VENOM		$3.02	$65.30					
95018	TEST FOR ALLERGY USING COMBINATION OF METHODS WITH DRUG OR BIOLOGICAL		$5.81	$22.60					
95024	TEST FOR ALLERGY USING ALLERGENIC EXTRACT INJECTED INTO SKIN		$4.10	$4.10					
95027	INTRACUTANEOUS (INTRADERMAL) TESTS, SEQUENTIAL AND INCREMENTAL, WITH		$4.00	$4.00					
95028	TEST FOR ALLERGY USING ALLERGENIC EXTRACT INJECTED INTO SKIN WITH DELAYED REACTION ANALYSIS		$6.14	$6.14					
95044	TEST FOR ALLERGY USING SKIN PATCH		$5.34	$5.34					
95052	TEST FOR ALLERGY USING PHOTO PATCH		$6.68	$6.68					
95056	TEST FOR ALLERGY USING ULTRAVIOLET LIGHT		$2.52	$4.80					
95060	TEST FOR ALLERGY USING ALLERGENIC EXTRACT APPLIED TO EYE		$9.34	$9.34					
95065	TEST FOR ALLERGY USING ALLERGENIC EXTRACT BY SNIFFING		$2.79	$5.34					
95070	TEST FOR ALLERGY USING DRUGS		$58.69	$58.69					
95076	TEST FOR ALLERGY USING INGESTED ITEMS, INITIAL 2 HOURS		$58.54	$92.66					
95079	TEST FOR ALLERGY USING INGESTED ITEMS, INITIAL 2 HOURS		$54.05	$66.20					
95115	PROFESSIONAL SERVICE FOR SINGLE INJECTION OF ALLERGEN		$10.54	$10.54					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95117	PROFESSIONAL SERVICE FOR MULTIPLE INJECTIONS OF ALLERGEN		$13.37	$13.37					
95144	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF SINGLE-DOSE VIAL OF ALLERGEN		$2.47	$8.41					
95145	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF 1 STINGING INSECT VENOM		$2.47	$10.47					
95146	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF 2 STINGING INSECT VENOM		$2.47	$13.27					
95147	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF 3 STINGING INSECT VENOM		$2.47	$14.76					
95148	SSIONAL SERVICE FOR PREPARATION AND PROVISION OF 4 STINGING INSECT VENOM		$2.47	$16.84					
95149	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF 5 STINGING INSECT VENOM		$2.47	$22.45					
95165	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF 1 OR MORE ANTIGENS		$2.73	$7.15					
95170	PROFESSIONAL SERVICE FOR PREPARATION AND PROVISION OF WHOLE BODY EXTRACT OF BITING INSECT OR ARTHROPOD ANTIGENS		$2.47	$8.67					
95180	INJECTION FOR RAPID DESENSITIZATION TO ALLERGEN		$82.99	$100.00					
95249	CONTINUOUS MONITORING OF BLOOD SUGAR LEVEL IN TISSUE FLUID USING SENSOR UNDER SKIN		$40.68	$40.68					Added Effective 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95250	CONTINUOUS MONITORING OF BLOOD SUGAR LEVEL IN TISSUE FLUID USING SENSOR UNDER SKIN WITH PROVIDER SUPPLIED EQUIPMENT		$37.42	$37.42		$37.42	$0.00		
95251	CONTINUOUS MONITORING OF BLOOD SUGAR LEVEL IN TISSUE FLUID USING SENSOR UNDER SKIN WITH INTERPRETATION AND REPORT		$20.79	$20.79					
95700	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), CONTINUOUS		$0.00	$0.00					Added Effective 01/01/2020
95705	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2-12 HOURS		$0.00	$0.00					Added Effective 01/01/2020
95706	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2-12 HOURS WITH INTERMITTENT MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95707	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2-12 HOURS WITH CONTINUOUS MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95708	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12-26 HOURS		$0.00	$0.00					Added Effective 01/01/2020
95709	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12-26 HOURS WITH INTERMITTENT MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95710	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12-26 HOURS WITH CONTINUOUS MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95711	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2-12 HOURS		$0.00	$0.00					Added Effective 01/01/2020
95712	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2-12 HOURS WITH INTERMITTENT MONITORING		$0.00	$0.00					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95713	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2-12 HOURS WITH CONTINUOUS MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95714	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12-26 HOURS		$0.00	$0.00					Added Effective 01/01/2020
95715	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12-26 HOURS WITH INTERMITTENT MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95716	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12-26 HOURS WITH CONTINUOUS MONITORING		$0.00	$0.00					Added Effective 01/01/2020
95717	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 2-12 HOURS WITH HEALTH CARE PROFESSIONAL REVIEW AND REPORT		$81.61	$82.64					Added Effective 01/01/2020
95718	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 2-12 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$106.76	$108.32					Added Effective 01/01/2020
95719	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 12-26 HOURS WITH HEALTH CARE PROFESSIONAL REVIEW AND REPORT		$126.26	$127.55					Added Effective 01/01/2020
95720	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 12-26 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$165.29	$167.62					Added Effective 01/01/2020
95721	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 37-60 HOURS WITH HEALTH CARE PROFESSIONAL REVIEW AND REPORT		$165.81	$168.92					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95722	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 37-60 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$201.66	$205.03					Added Effective 01/01/2020
95723	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 61-84 HOURS WITH HEALTH CARE PROFESSIONAL REVIEW AND REPORT		$205.17	$209.32					Added Effective 01/01/2020
95724	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), 61-84 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$257.15	$261.82					Added Effective 01/01/2020
95725	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), MORE THAN 84 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$233.42	$238.87					Added Effective 01/01/2020
95726	MEASUREMENT OF BRAIN WAVE ACTIVITY WITH VIDEO (VEEG), MORE THAN 84 HOURS WITH REVIEW AND REPORT BY HEALTH CARE PROFESSIONAL		$324.93	$330.89					Added Effective 01/01/2020
95782	SLEEP STUDY IN SLEEP LAB (YOUNGER THAN 6 YEARS)		$816.85	$816.85		$712.58	$104.27		
95783	SLEEP STUDY IN SLEEP LAB WITH CONTINUOUS AIRWAY PRESSURE (YOUNGER THAN 6 YEARS)		$855.64	$855.64		$741.97	$113.67		
95800	SLEEP STUDY INCLUDING HEART RATE, BREATHING, AND SLEEP TIME		$179.50	$179.50		$128.77	$50.74		
95801	SLEEP STUDY INCLUDING HEART RATE AND BREATHING		$84.56	$84.56		$39.76	$44.80		
95803	SLEEP STUDY AND WAKE PATTERNS, 3-14 DAYS WITH REPORT		$128.09	$128.09		$105.92	$38.27		
95805	SLEEP STUDY, MULTIPLE TRIALS	Yes	$213.89	$213.89		$142.00	$71.89		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95806	SLEEP STUDY INCLUDING HEART RATE, BREATHING, AIRFLOW, AND EFFORT		$246.64	$246.64		$130.92	$115.72		
95807	SLEEP STUDY INCLUDING HEART RATE AND BREATHING ATTENDED BY TECHNICIAN		$299.68	$299.68		$180.64	$119.04		
95808	SLEEP STUDY IN SLEEP LAB		$328.73	$328.73		$180.64	$148.09		
95810	SLEEP STUDY IN SLEEP LAB (6 YEARS OR OLDER)		$542.42	$542.42		$412.30	$130.12		
95811	SLEEP STUDY IN SLEEP LAB WITH CONTINUOUS AIRWAY PRESSURE (6 YEARS OR OLDER)		$597.83	$597.83		$458.16	$139.67		
95812	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 41-60 MINUTES		$84.96	$84.96		$38.88	$46.07		
95813	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), 61-119 MINUTES		$304.78	$304.78		$234.96	$69.82		Updated Effective 01/01/2020
95816	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), AWAKE AND DROWSY		$173.06	$173.06		$131.80	$41.27		
95819	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), AWAKE AND ASLEEP		$189.58	$189.58		$148.32	$41.27		
95822	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), IN COMA OR ASLEEP		$97.22	$97.22		$49.54	$47.68		
95824	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) TO EVALUATE BRAIN DEATH		$49.70	$49.70		$11.46	$38.24		
95829	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) DURING SURGERY		$199.26	$199.26		$4.24	$195.02		
95830	INSERTION OF ELECTRODES FOR MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG)		$72.51	$72.51					
95851	MEASUREMENT OF RANGE OF MOTION IN ARM, LEG OR EACH SPINE SECTION		$11.92	$15.14					
95852	MEASUREMENT OF RANGE OF MOTION OF HAND		$8.07	$10.08					
95857	INJECTION TO TEST FOR MYASTHENIA GRAVIS		$23.23	$29.93					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95860	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, 1 EXTREMITY		$59.59	$59.59		$10.38	$49.21		
95861	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, 2 EXTREMITIES		$101.92	$101.92		$20.23	$81.68		
95863	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, 3 EXTREMITIES		$120.94	$120.94		$25.57	$95.36		
95864	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, 4 EXTREMITIES		$157.49	$157.49		$48.76	$108.73		
95865	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN VOICE BOX MUSCLES		$86.43	$86.43		$18.13	$68.30		
95866	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN HALF OF DIAPHRAGM MUSCLES		$59.07	$59.07		$5.88	$53.19		
95867	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN MUSCLES ON SIDE OF BODY		$50.69	$50.69		$15.72	$34.96		
95868	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN MUSCLES ON BOTH SIDES OF BODY		$99.16	$99.16		$18.92	$80.24		
95869	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN MUSCLES ON BOTH SIDES OF BODY		$26.29	$26.29		$5.85	$20.44		
95870	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM, LEG, TRUNK OR HEAD MUSCLES, LIMITED STUDY		$25.56	$25.56		$5.65	$19.91		
95872	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN MUSCLE, INCLUDING JITTER, BLOCKING AND/OR FIBER DENSITY		$80.22	$80.22		$16.50	$63.71		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95873	ELECTRICAL STIMULATION FOR GUIDANCE WITH INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLE		$21.20	$21.20		$5.62	$15.28		
95874	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN MUSCLE WITH INJECTION OF CHEMICAL FOR PARALYSIS OF NERVE MUSCLE		$21.45	$21.45		$5.62	$15.83		
95875	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY OF MUSCLES WITH LOW BLOOD FLOW WITH SPECIMEN		$57.84	$57.84		$11.65	$46.19		
95885	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, LIMITED STUDY		$43.35	$43.35		$33.23	$15.43		
95886	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN ARM OR LEG MUSCLES, COMPLETE STUDY		$69.00	$69.00		$35.01	$41.24		
95887	NEEDLE MEASUREMENT OF ELECTRICAL ACTIVITY IN TRUNK OR HEAD MUSCLES		$61.24	$61.24		$35.60	$32.34		
95905	NERVE CONDUCTION STUDY OF ARM OR LEG MOVEMENT AND/OR FEELING WITH REVIEW AND REPORT		$51.25	$51.25		$56.37	$2.37		
95907	NERVE CONDUCTION, 1-2 STUDIES		$74.60	$74.60		$32.46	$42.14		
95908	NERVE CONDUCTION, 3-4 STUDIES		$92.10	$92.10		$39.17	$52.93		
95909	NERVE CONDUCTION, 5-6 STUDIES		$110.35	$110.35		$47.12	$63.23		
95910	NERVE CONDUCTION, 7-8 STUDIES		$145.32	$145.32		$60.78	$84.54		
95911	NERVE CONDUCTION, 9-10 STUDIES		$175.90	$175.90		$70.53	$105.37		
95912	NERVE CONDUCTION, 11-12 STUDIES		$206.48	$206.48		$79.79	$126.68		
95913	NERVE CONDUCTION, 13 OR MORE STUDIES		$239.30	$239.30		$89.29	$150.02		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95919	MEASUREMENT OF PUPIL WITH HEALTHCARE PROFESSIONAL INTERPRETATION AND REPORT		$12.59	$12.59		$4.40	$8.19		
95921	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION AND HEART RATE RESPONSE TO DEEP BREATHING		$64.30	$64.30		$28.18	$36.12		Rate updated 1/1/2018
95922	TESTING OF AUTONOMIC (SYMPATHETIC) NERVOUS SYSTEM FUNCTION, HEART RATE RESPONSE TO BREATHING EXERCISES, AND PASSIVE TILT		$74.91	$74.91		$36.27	$38.64		Rate updated 1/1/2018
95923	TESTING OF AUTONOMIC (SYMPATHETIC) NERVOUS SYSTEM FUNCTION		$98.75	$98.75		$62.12	$36.62		Rate updated 1/1/2018
95924	TESTING OF AUTONOMIC (SYMPATHETIC AND PARASYMPATHETIC) NERVOUS SYSTEM FUNCTION, AT LEAST 5 MINUTES OF TILT		$116.71	$116.71		$46.22	$70.49		
95925	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF STIMULATED SITES IN ARMS		$59.26	$59.26		$25.04	$34.23		
95926	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF STIMULATED SITES IN LEGS		$59.26	$59.26		$25.04	$34.23		
95927	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF STIMULATED SITES IN TRUNK OR HEAD		$59.26	$59.26		$25.04	$34.23		
95928	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF CENTRAL MOTOR STIMULATION IN ARMS		$123.90	$123.90		$61.25	$62.64		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95929	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF CENTRAL MOTOR STIMULATION IN LEGS		$128.74	$128.74		$66.10	$62.64		
95930	MEASUREMENT OF NERVE CONDUCTION USING VISUAL STIMULATION TESTING WITH REPORT		$33.75	$33.75		$6.95	$26.80		
95933	MEASUREMENT OF NERVE CONDUCTION PATTERNS OF EYE BLINK REFLEX		$53.27	$53.27		$21.57	$31.70		
95937	TESTING OF NERVE-MUSCLE JUNCTION		$39.96	$39.96		$9.31	$30.65		
95938	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF STIMULATED SITES ON ARMS AND LEGS		$226.88	$226.88		$219.85	$37.98		
95939	PLACEMENT OF SKIN ELECTRODES AND MEASUREMENT OF CENTRAL MOTOR STIMULATION IN ARMS AND LEGS		$357.61	$357.61		$303.52	$99.99		
95940	CONTINUOUS MONITORING OF NERVOUS SYSTEM DURING OPERATION, EACH 15 MINUTES		$25.71	$25.71					
95954	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) WITH DRUG OR ACTIVITY STIMULATION		$140.92	$140.92		$13.53	$127.39		
95955	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) OUTSIDE THE BRAIN DURING SURGERY		$114.71	$114.71		$54.77	$59.94		
95957	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG), DIGITAL ANALYSIS		$122.82	$122.82		$46.61	$76.21		
95958	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) IN SPECIFIC AREA OF BRAIN		$268.50	$268.50		$47.93	$220.58		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95961	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) WITH ELECTRODES ON BRAIN TO PROVOKE SEIZURES OR IDENTIFY BRAIN STRUCTURES, FIRST HOUR		$163.62	$163.62		$35.20	$128.42		
95962	MEASUREMENT OF BRAIN WAVE ACTIVITY (EEG) WITH ELECTRODES ON BRAIN TO PROVOKE SEIZURES OR IDENTIFY BRAIN STRUCTURES, EACH ADDITIONAL HOUR		$170.67	$170.67		$35.20	$135.46		
95965	MEASUREMENT OF BRAIN MAGNETIC FIELD FOR SPONTANEOUS BRAIN MAGNETIC ACTIVITY		$317.58	$317.58			$317.58		
95966	MEASUREMENT OF BRAIN EXTERNALLY EVOKED MAGNETIC FIELD, SINGLE LOCALIZATION		$45.80	$45.80			$45.80		
95967	MEASUREMENT OF BRAIN EXTERNALLY EVOKED MAGNETIC FIELD, EACH ADDITIONAL LOCALIZATION		$40.39	$40.39			$157.25		
95970	ELECTRONIC ANALYSIS OF IMPLANTED BRAIN, SPINAL CORD, OR PERIPHERAL NEUROSTIMULATOR GENERATOR		$17.56	$17.56					
95971	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR GENERATOR WITH SIMPLE SPINAL CORD OR PERIPHERAL NERVE STIMULATOR PROGRAMMING		$32.30	$31.43					
95972	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR GENERATOR WITH COMPLEX SPINAL CORD OR PERIPHERAL NERVE STIMULATOR PROGRAMMING		$62.88	$63.68			$61.61		

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95976	ELECTRONIC ANALYSIS OF NEUROSTIMULATOR GENERATOR WITH SIMPLE CRANIAL NERVE STIMULATOR PROGRAMMING		$32.24	$32.76					Effective 1/1/2019
95977	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR GENERATOR WITH COMPLEX CRANIAL NERVE STIMULATOR PROGRAMMING		$42.98	$43.50					Effective 1/1/2019
95980	ELECTRONIC ANALYSIS OF IMPLANTED GASTRIC NEUROSTIMULATOR GENERATOR DURING SURGERY WITH PROGRAMMING		$26.57	$29.52					
95981	ELECTRONIC ANALYSIS OF IMPLANTED GASTRIC NEUROSTIMULATOR GENERATOR		$13.05	$22.55					
95982	ELECTRONIC ANALYSIS OF IMPLANTED GASTRIC NEUROSTIMULATOR GENERATOR WITH PROGRAMMING		$26.11	$34.71					
95983	ELECTRONIC ANALYSIS OF IMPLANTED BRAIN, SPINAL CORD, OR PERIPHERAL NEUROSTIMULATOR GENERATOR WITH BRAIN STIMULATOR PROGRAMMING, FIRST 15 MINUTES WITH QUALIFIED HEALTH		$40.66	$41.18					Effective 1/1/2019
95984	ELECTRONIC ANALYSIS OF IMPLANTED BRAIN, SPINAL CORD, OR PERIPHERAL NEUROSTIMULATOR GENERATOR WITH BRAIN STIMULATOR PROGRAMMING, EACH ADDITIONAL 15 MINUTES WITH QUALIFIED HEALTH PROFESSIONAL		$35.60	$35.86					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
95990	MAINTENANCE OF SPINAL CANAL OR BRAIN DRUG INFUSION PUMP		$39.59	$39.59					
95991	MAINTENANCE OF SPINAL CANAL OR BRAIN DRUG INFUSION PUMP BY HEALTH CARE PROFESSIONAL		$28.60	$62.00					
95992	REPOSITIONING EXERCISES OF HEAD FOR TREATMENT OF DIZZINESS, EACH DAY		$30.26	$33.53					
95999	OTHER DIAGNOSTIC NEUROLOGICAL OR NEUROMUSCULAR PROCEDURE	Yes	$0.00	$0.00					
96020	TEST OF NEUROLOGICAL FUNCTION DURING FUNCTIONAL MRI						$124.86		
96041	COUNSELING FOR GENETIC TESTING PROVIDED BY A GENETIC COUNSELOR, EACH 30 MINUTES OF TOTAL TIME ON THE DATE OF ENCOUNTER		$40.37	$40.37					
96105	COUNSELING FOR GENETIC TESTING PROVIDED BY A GENETIC COUNSELOR, EACH 30 MINUTES OF TOTAL TIME ON THE DATE OF ENCOUNTER		$72.45	$72.45					
96110	DEVELOPMENTAL SCREENING		$32.19	$32.19					
96112	ADMINISTRATION OF DEVELOPMENTAL TEST, FIRST HOUR		$108.86	$108.86					Updated Effective 01/01/2019
96113	ADMINISTRATION OF DEVELOPMENTAL TEST, EACH ADDITIONAL 30 MINUTES		$48.65	$48.65					Updated Effective 1/1/2019
96116	EXAM OF NEUROBEHAVIORAL STATUS, FIRST HOUR		$64.24	$68.22					
96121	EXAM OF NEUROBEHAVIORAL STATUS, EACH ADDITIONAL HOUR		$63.65	$66.52					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96125	TEST TO ASSESS THE ABILITY TO COMPLETE SPECIFIC FUNCTIONAL TASKS APPLICABLE TO ENVIRONMENT		$80.63	$80.63					
96127	ASSESSMENT OF EMOTIONAL OR BEHAVIORAL PROBLEMS		$3.86	$3.86					Added effective 1/1/2015
96130	EVALUATION OF PSYCHOLOGICAL TEST, FIRST HOUR		$89.87	$95.10					Effective 1/1/2019
96131	EVALUATION OF PSYCHOLOGICAL TEST, EACH ADDITIONAL HOUR		$68.47	$72.39					Effective 1/1/2019
96132	EVALUATION OF NEUROPSYCHOLOGICAL TEST, FIRST HOUR		$88.32	$105.82					Effective 1/1/2019
96133	EVALUATION OF NEUROPSYCHOLOGICAL TEST, EACH ADDITIONAL HOUR		$67.69	$80.74					Effective 1/1/2019
96136	ADMINISTRATION OF PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST, FIRST 30 MINUTES		$20.18	$36.63					Effective 1/1/2019
96137	ADMINISTRATION OF PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST, EACH ADDITIONAL 30 MINUTES		$15.96	$33.72					Effective 1/1/2019
96138	ADMINISTRATION OF PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST BY TECHNICIAN, FIRST 30 MINUTES		$28.18	$28.18					Effective 1/1/2019
96139	ADMINISTRATION OF PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST BY TECHNICIAN, EACH ADDITIONAL 30 MINUTES		$28.18	$28.18					Effective 1/1/2019
96146	ADMINISTRATION OF PSYCHOLOGICAL OR NEUROPSYCHOLOGICAL TEST BY SINGLE STANDARDIZED INSTRUMENT VIA ELECTRONIC PLATFORM WITH AUTOMATED RESULT		$1.55	$1.55					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96156	ASSESSMENT OF HEALTH BEHAVIOR		$71.86	$78.61					Added Effective 01/01/2020
96158	TREATMENT OF BEHAVIOR IMPACTING HEALTH, INITIAL 30 MINUTES		$49.04	$53.71					Added Effective 01/01/2020
96159	TREATMENT OF BEHAVIOR IMPACTING HEALTH, EACH ADDITIONAL 15 MINUTES		$16.91	$18.73					Added Effective 01/01/2020
96160	ADMINISTRATION AND INTERPRETATION OF PATIENT-FOCUSED HEALTH RISK ASSESSMENT		$3.38	$3.38					Added Effective 1/1/2017
96161	ADMINISTRATION AND INTERPRETATION OF CAREGIVER-FOCUSED HEALTH RISK ASSESSMENT		$3.38	$3.38					Added Effective 1/1/2017
96164	TREATMENT OF BEHAVIOR IMPACTING HEALTH IN GROUP SETTING, INITIAL 30 MINUTES		$7.16	$7.94					Added Effective 01/01/2020
96165	TREATMENT OF BEHAVIOR IMPACTING HEALTH IN GROUP SETTING, EACH ADDITIONAL 15 MINUTES		$3.18	$3.70					Added Effective 01/01/2020
96167	TREATMENT OF BEHAVIOR IMPACTING HEALTH WITH FAMILY AND PATIENT, INITIAL 30 MINUTES		$52.46	$57.65					Added Effective 01/01/2020
96168	TREATMENT OF BEHAVIOR IMPACTING HEALTH WITH FAMILY AND PATIENT, EACH ADDITIONAL 30 MINUTES		$18.64	$20.45					Added Effective 01/01/2020
96170	TREATMENT OF BEHAVIOR IMPACTING HEALTH WITH FAMILY, INITIAL 30 MINUTES		$61.56	$64.42					Added Effective 01/01/2020
96171	TREATMENT OF BEHAVIOR IMPACTING HEALTH WITH FAMILY, EACH ADDITIONAL 30 MINUTES		$22.45	$23.49					Added Effective 01/01/2020
96202	MULTIPLE-FAMILY GROUP BEHAVIOR MANAGEMENT/MODIFICATION TRAINING, FACE-TO-FACE, INITIAL 60 MINUTES		$18.19	$19.75					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96203	MULTIPLE-FAMILY GROUP BEHAVIOR MANAGEMENT/MODIFICATION TRAINING, FACE-TO-FACE, EACH ADDITIONAL 15 MINUTES		$5.11	$5.11					
96360	INFUSION INTO A VEIN FOR HYDRATION, 31-60 MINUTES		$45.40	$45.40					
96361	INFUSION INTO A VEIN FOR HYDRATION, EACH ADDITIONAL HOUR		$13.05	$13.05					
96365	INFUSION INTO A VEIN FOR THERAPY, PREVENTION, OR DIAGNOSIS, 1 HOUR OR LESS		$55.19	$55.19					
96366	INFUSION INTO A VEIN FOR THERAPY, PREVENTION, OR DIAGNOSIS, EACH ADDITIONAL HOUR		$17.51	$17.51					
96367	INFUSION INTO A VEIN FOR THERAPY, PREVENTION, OR DIAGNOSIS, ADDITIONAL SEQUENTIAL INFUSION, 1 HOUR OR LESS		$27.00	$27.00					
96368	INFUSION INTO A VEIN FOR THERAPY, PREVENTION, OR DIAGNOSIS CONCURRENT WITH ANOTHER INFUSION		$16.32	$16.32					
96369	INFUSION INTO TISSUE FOR THERAPY OR PREVENTION, 1 HOUR OR LESS		$122.54	$122.54					
96370	INFUSION INTO TISSUE FOR THERAPY OR PREVENTION, EACH ADDITIONAL HOUR		$13.05	$13.05					
96371	ESTABLISHMENT OF NEW INFUSION SITE INTO TISSUE WITH PUMP SET UP		$60.82	$60.82					
96372	ESTABLISHMENT OF NEW INFUSION SITE INTO TISSUE WITH PUMP SET UP		$18.10	$18.10					
96373	INJECTION OF DRUG OR SUBSTANCE INTO ARTERY		$14.54	$14.54					
96374	INJECTION OF DRUG OR SUBSTANCE INTO VEIN		$44.51	$44.51					
96375	INJECTION OF ADDITIONAL NEW DRUG OR SUBSTANCE INTO VEIN		$18.99	$18.99					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96377	APPLICATION OF ON-BODY INJECTOR FOR UNDER SKIN INJECTION		$15.60	$15.60		$0.00	$0.00		Rate updated 1/1/2018 Added Effective 1/1/2017
96379	INJECTION OR INFUSION INTO A VEIN OR ARTERY FOR THERAPY, PREVENTION, OR DIAGNOSIS		$0.00	$0.00					
96401	ADMINISTRATION OF NON-HORMONAL ANTI-NEOPLASTIC CHEMOTHERAPY UNDER SKIN OR INTO MUSCLE		$56.43	$56.43					
96402	ADMINISTRATION OF HORMONAL ANTI-NEOPLASTIC CHEMOTHERAPY UNDER SKIN OR INTO MUSCLE		$35.81	$35.81					
96405	ADMINISTRATION OF CHEMOTHERAPY INTO GROWTH, 1-7		$23.22	$118.26					
96406	ADMINISTRATION OF CHEMOTHERAPY INTO GROWTH, MORE THAN 7		$37.64	$135.56					
96409	ADMINISTRATION OF CHEMOTHERAPY INTO VEIN USING PUSH TECHNIQUE		$103.07	$103.07					
96411	ADMINISTRATION OF ADDITIONAL NEW DRUG OR SUBSTANCE INTO VEIN USING PUSH TECHNIQUE		$59.17	$59.17					
96413	ADMINISTRATION OF CHEMOTHERAPY INTO VEIN, 1 HOUR OR LESS		$139.44	$139.44					
96415	ADMINISTRATION OF CHEMOTHERAPY INTO VEIN, EACH ADDITIONAL HOUR		$31.66	$31.66					
96416	ADMINISTRATION OF PROLONGED CHEMOTHERAPY INTO VEIN		$150.81	$150.81					
96417	ADMINISTRATION OF ADDITIONAL NEW DRUG OR SUBSTANCE INTO VEIN, 1 HOUR OR LESS		$68.92	$68.92					
96420	ADMINISTRATION OF CHEMOTHERAPY INTO ARTERY USING PUSH TECHNIQUE		$96.79	$96.79					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96422	ADMINISTRATION OF CHEMOTHERAPY INTO ARTERY, 1 HOUR OR LESS		$160.12	$160.12					
96423	ADMINISTRATION OF CHEMOTHERAPY INTO ARTERY, EACH ADDITIONAL HOUR		$69.61	$69.61					
96425	ADMINISTRATION OF PROLONGED CHEMOTHERAPY INTO ARTERY		$157.18	$157.18					
96440	ADMINISTRATION OF CHEMOTHERAPY INTO CHEST CAVITY		$120.39	$307.75					
96446	ADMINISTRATION OF CHEMOTHERAPY INTO CHEST CAVITY		$18.69	$154.58					
96450	ADMINISTRATION OF CHEMOTHERAPY INTO FLUID-FILLED SPACE BETWEEN THE TISSUE THAT COVER THE BRAIN AND SPINAL CORD		$88.60	$248.87					
96521	REFILLING AND MAINTENANCE OF PORTABLE PUMP		$121.52	$121.52					
96522	REFILLING AND MAINTENANCE OF IMPLANTABLE PUMP OR RESERVOIR FOR DRUG DELIVERY		$97.03	$97.03					
96523	IRRIGATION OF IMPLANTED VENOUS ACCESS DRUG DELIVERY DEVICE		$23.68	$23.68					
96542	INJECTION OF CHEMOTHERAPY VIA RESERVOIR UNDER SKIN		$43.14	$154.45					
96547	INTRAOPERATIVE HEATED INTRAPERITONEAL CHEMOTHERAPY, FIRST 60 MINUTES		$0.00	$0.00					
96548	INTRAOPERATIVE HEATED INTRAPERITONEAL CHEMOTHERAPY, EACH ADDITIONAL 30 MINUTES		$0.00	$0.00					
96549	OTHER CHEMOTHERAPY PROCEDURE	Yes	$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96567	APPLICATION OF LIGHT TO DESTROY PRECANCER SKIN GROWTH		$94.17	$94.17					
96570	APPLICATION OF LIGHT TO DESTROY PRECANCER SKIN GROWTH USING AN ENDOSCOPE, INITIAL 30 MINUTES		$56.77	$56.77					
96571	APPLICATION OF LIGHT TO DESTROY PRECANCER SKIN GROWTH USING AN ENDOSCOPE, EACH ADDITIONAL 15 MINUTES		$30.57	$30.57					
96573	APPLICATION OF LIGHT BY QUALIFIED HEALTH CARE PROFESSIONAL TO DESTROY PRECANCER SKIN GROWTH		$141.49	$141.49					Added Effective 1/1/2018
96574	APPLICATION OF LIGHT WITH DEBRIDEMENT TO DESTROY PRECANCER SKIN GROWTH		$183.40	$183.40					Added Effective 1/1/2018
96900	APPLICATION OF ULTRAVIOLET LIGHT TO SKIN		$10.92	$10.92					
96910	THERAPY PROCEDURE USING ULTRAVIOLET RADIATION WITH TAR OR PETROLEUM JELLY APPLICATION		$15.72	$15.72					
96912	THERAPY PROCEDURE USING ULTRAVIOLET RADIATION		$18.11	$18.11					
96913	THERAPY PROCEDURE USING ULTRAVIOLET RADIATION, 4-8 HOURS		$37.03	$37.03					
96920	TREATMENT OF INFLAMMATORY SKIN DISEASE USING LASER, LESS THAN 250.0 SQ CM	Yes	$47.00	$109.44					
96921	TREATMENT OF INFLAMMATORY SKIN DISEASE USING LASER, 250.0-500.0 SQ CM	Yes	$47.83	$112.07					
96922	TREATMENT OF INFLAMMATORY SKIN DISEASE USING LASER, MORE THAN 500.0 SQ CM	Yes	$85.67	$156.07					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
96931	IMAGING OF SKIN GROWTH USING MICROSCOPE WITH INTERPRETATION AND REPORT, FIRST GROWTH		$126.94	$126.94					Rate updated 1/1/2018 Added Effective 1/1/2016
96932	IMAGING OF SKIN GROWTH USING MICROSCOPE, FIRST GROWTH		$90.56	$90.56					Rate updated 1/1/2018 Added Effective 1/1/2016
96933	INTERPRETATION AND REPORT OF IMAGING OF SKIN GROWTH USING MICROSCOPE, FIRST GROWTH		$32.43	$32.43					Rate updated 1/1/2018 Added Effective 1/1/2016
96934	IMAGING OF SKIN GROWTH USING MICROSCOPE WITH INTERPRETATION AND REPORT, EACH ADDITIONAL GROWTH		$56.86	$56.86					Rate updated 1/1/2018 Added Effective 1/1/2016
96935	IMAGING OF SKIN GROWTH USING MICROSCOPE, EACH ADDITIONAL GROWTH		$25.83	$25.83					Rate updated 1/1/2018 Added Effective 1/1/2016
96936	INTERPRETATION AND REPORT OF IMAGING OF SKIN GROWTH USING MICROSCOPE, EACH ADDITIONAL GROWTH		$31.01	$31.01					Rate updated 1/1/2018 Added Effective 1/1/2016
96999	OTHER SPECIAL SERVICE OR PROCEDURE ON SKIN	Yes	$0.00	$0.00					
97010	APPLICATION OF HOT OR COLD PACKS		$9.35	$9.35					
97012	APPLICATION OF MECHANICAL TRACTION		$12.92	$12.92					
97014	APPLICATION OF ELECTRICAL STIMULATION		$11.13	$11.13					
97016	APPLICATION OF BLOOD VESSEL COMPRESSION DEVICE		$12.47	$12.47					
97018	APPLICATION OF HOT WAX BATH		$10.39	$10.39					
97022	APPLICATION OF WHIRLPOOL THERAPY		$12.92	$12.92					
97024	APPLICATION OF HEAT WAVE THERAPY		$9.35	$9.35					
97026	APPLICATION OF LOW ENERGY HEAT		$8.81	$8.81					
97028	APPLICATION OF ULTRAVIOLET LIGHT		$11.21	$11.21					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
97032	APPLICATION OF ELECTRICAL STIMULATION WITH THERAPIST PRESENT, EACH 15 MINUTES		$11.33	$11.33					
97033	APPLICATION OF MEDICATION USING ELECTRICAL CURRENT, EACH 15 MINUTES		$11.87	$11.87					
97034	APPLICATION OF HOT AND COLD BATHS, EACH 15 MINUTES		$9.09	$9.09					
97035	APPLICATION OF ULTRASOUND, EACH 15 MINUTES		$9.36	$9.36					
97036	APPLICATION OF WATER THERAPY USING A SPECIAL TANK, EACH 15 MINUTES		$17.27	$17.27					
97037	LOW-LEVEL LASER THERAPY APPLICATION FOR PAIN MANAGEMENT AFTER SURGERY		$0.00	$0.00					
97039	OTHER PHYSICAL MEDICINE SERVICE OR PROCEDURE	Yes	$15.68	$15.68					
97110	THERAPY PROCEDURE USING EXERCISE TO DEVELOP STRENGTH, ENDURANCE, RANGE OF MOTION, AND FLEXIBILITY, EACH 15 MINUTES		$20.90	$20.90					
97112	THERAPY PROCEDURE TO RE-EDUCATE BRAIN-TO-NERVE-TO-MUSCLE FUNCTION, EACH 15 MINUTES		$21.66	$21.66					
97113	THERAPY PROCEDURE USING WATER POOL TO EXERCISES, EACH 15 MINUTES		$18.76	$18.76					
97116	THERAPY PROCEDURE FOR WALKING TRAINING, EACH 15 MINUTES		$14.93	$14.93					
97124	THERAPY PROCEDURE USING MASSAGE, EACH 15 MINUTES		$13.46	$13.46					
97129	THERAPY PROCEDURE FOR A RANGE OF MENTAL PROCESSES, INITIAL 15 MINUTES		$18.99	$19.25					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
97130	THERAPY PROCEDURE FOR A RANGE OF MENTAL PROCESSES, EACH ADDITIONAL 15 MINUTES		$18.41	$18.41					Added Effective 01/01/2020
97139	OTHER THERAPEUTIC PROCEDURE	Yes	$0.00	$0.00					
97140	THERAPY PROCEDURE USING MANUAL TECHNIQUE, EACH 15 MINUTES		$13.89	$17.52					
97150	THERAPY PROCEDURE IN A GROUP SETTING		$13.77	$13.77					
97151	BEHAVIOR IDENTIFICATION ASSESSMENT BY PROFESSIONAL, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97152	BEHAVIOR IDENTIFICATION ASSESSMENT BY TECHNICIAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97153	ADAPTIVE BEHAVIOR TREATMENT BY TECHNICIAN USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97154	ADAPTIVE BEHAVIOR TREATMENT BY TECHNICIAN WITH MULTIPLE PATIENTS USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97155	ADAPTIVE BEHAVIOR TREATMENT BY PROFESSIONAL USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97156	ADAPTIVE BEHAVIOR TREATMENT BY PROFESSIONAL WITH FAMILY USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97157	ADAPTIVE BEHAVIOR TREATMENT BY PROFESSIONAL WITH MULTIPLE FAMILY GROUP MEMBERS USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
97158	ADAPTIVE BEHAVIOR TREATMENT BY PROFESSIONAL WITH GROUP USING AN ESTABLISHED PLAN, EACH 15 MINUTES		$0.00	$0.00					Effective 1/1/2019
97161	EVALUATION FOR PHYSICAL THERAPY, TYPICALLY 20 MINUTES		$63.47	$63.47					Added Effective 1/1/2017
97162	EVALUATION FOR PHYSICAL THERAPY, TYPICALLY 30 MINUTES		$63.47	$63.47					Added Effective 1/1/2017
97163	EVALUATION FOR PHYSICAL THERAPY, TYPICALLY 45 MINUTES		$63.47	$63.47					Added Effective 1/1/2017
97164	RE-EVALUATION FOR PHYSICAL THERAPY, TYPICALLY 20 MINUTES		$42.90	$42.90					Added Effective 1/1/2017
97165	EVALUATION FOR OCCUPATIONAL THERAPY, TYPICALLY 30 MINUTES		$61.65	$61.65					Added Effective 1/1/2017
97166	EVALUATION FOR OCCUPATIONAL THERAPY, TYPICALLY 45 MINUTES		$61.65	$61.65					Added Effective 1/1/2017
97167	LUATION FOR OCCUPATIONAL THERAPY, TYPICALLY 1 HOUR		$61.65	$61.65					Added Effective 1/1/2017
97168	RE-EVALUATION FOR OCCUPATIONAL THERAPY, TYPICALLY 30 MINUTES		$40.58	$40.58					Added Effective 1/1/2017
97169	EVALUATION FOR ATHLETIC TRAINING, TYPICALLY 15 MINUTES		$0.00	$0.00		$0.00	$0.00		Added Effective 1/1/2017
97170	EVALUATION FOR ATHLETIC TRAINING, TYPICALLY 30 MINUTES		$0.00	$0.00		$0.00	$0.00		Added Effective 1/1/2017
97171	EVALUATION FOR ATHLETIC TRAINING, TYPICALLY 45 MINUTES		$0.00	$0.00		$0.00	$0.00		Added Effective 1/1/2017
97172	RE-EVALUATION FOR ATHLETIC TRAINING, TYPICALLY 20 MINUTES		$0.00	$0.00		$0.00	$0.00		Added Effective 1/1/2017
97530	THERAPY PROCEDURE USING FUNCTIONAL ACTIVITIES		$21.61	$21.61					
97533	THERAPY PROCEDURE USING SENSORY EXPERIENCES		$14.98	$20.40					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
97535	TRAINING FOR SELF-CARE OR HOME MANAGEMENT, EACH 15 MINUTES		$14.73	$14.73					
97542	EVALUATION FOR WHEELCHAIR, EACH 15 MINUTES		$12.38	$12.38					
97550	CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT'S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY, INITIAL 30 MINUTES		$45.05	$45.05					
97551	CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT'S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY, EACH ADDITIONAL 15 MINUTES		$20.98	$22.54					
97552	GROUP CAREGIVER TRAINING IN STRATEGIES AND TECHNIQUES TO FACILITATE THE PATIENT'S FUNCTIONAL PERFORMANCE IN THE HOME OR COMMUNITY		$18.28	$18.28					
97597	REMOVAL OF TISSUE FROM WOUND, 20.0 SQ CM OR LESS		$35.34	$35.34					
97598	REMOVAL OF TISSUE FROM WOUND, EACH ADDITIONAL 20.0 SQ CM		$45.19	$45.19					
97602	REMOVAL OF TISSUE FROM WOUND GRADUALLY		$8.26	$8.26					
97605	THERAPY PROCEDURE USING A SPECIAL BANDAGE AND VACUUM PUMP, SURFACE AREA 50.0 SQ CM OR LESS		$21.77	$32.36					
97606	THERAPY PROCEDURE USING A SPECIAL BANDAGE AND VACUUM PUMP, SURFACE AREA MORE THAN 50.0 SQ CM		$23.91	$29.07					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
97607	THERAPY PROCEDURE USING A SPECIAL BANDAGE, VACUUM PUMP AND DISPOSABLE MEDICAL EQUIPMENT, SURFACE AREA 50.0 SQ CM OR LESS		$18.08	$247.67					Effective 01/01/2020
97608	THERAPY PROCEDURE USING A SPECIAL BANDAGE, VACUUM PUMP AND DISPOSABLE MEDICAL EQUIPMENT, SURFACE AREA MORE THAN 50.0 SQ CM		$20.31	$248.60					Effective 01/01/2020
97610	THERAPY PROCEDURE USING ULTRASOUND		$12.95	$87.98					Added Effective 1/1/2016
97750	TEST OR MEASUREMENT FOR FUNCTIONAL CAPACITY, EACH 15 MINUTES		$20.37	$20.37					
97760	TRAINING IN THE USE OF ORTHOPEDIC DEVICE FOR ARM, LEG AND/OR TRUNK, EACH 15 MINUTES		$19.23	$22.80					
97761	TRAINING IN THE USE OF ARTIFICIAL ARM AND/OR LEG, EACH 15 MINUTES		$18.72	$21.01					
97763	FOLLOW-UP TRAINING IN THE USE OF ORTHOPEDIC DEVICE OR ARTIFICIAL ARM, LEG AND/OR TRUNK, EACH 15 MINUTES		$37.07	$37.07					Added Effective 1/1/2018
97799	OTHER PHYSICAL MEDICINE OR REHABILITATION SERVICE OR PROCEDURE	Yes	$0.00	$0.00					
97802	THERAPY PROCEDURE FOR NUTRITION MANAGEMENT, EACH 15 MINUTES		$11.87	$11.87					
97803	THERAPY PROCEDURE REASSESSMENT FOR NUTRITION MANAGEMENT, EACH 15 MINUTES		$11.87	$11.87					
97804	THERAPY PROCEDURE FOR NUTRITION MANAGEMENT WITH GROUP, EACH 30 MINUTES		$4.64	$4.64					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98000	NEW PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TIME 15 MINUTES OR MORE		$37.50	$42.44					
98001	NEW PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH LOW MEDICAL DECISION MAKING, IF USING TIME 30 MINUTES OR MORE		$64.72	$70.19					
98002	NEW PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH MODERATE MEDICAL DECISION MAKING, IF USING TIME 45 MINUTES OR MORE		$105.01	$112.03					
98003	NEW PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH HIGH MEDICAL DECISION MAKING, IF USING TIME 60 MINUTES OR MORE		$141.13	$148.68					
98004	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TIME 10 MINUTES OR MORE		$28.07	$32.75					
98005	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH LOW MEDICAL DECISION MAKING, IF USING TIME 20 MINUTES OR MORE		$52.23	$57.44					
98006	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH MODERATE MEDICAL DECISION MAKING, IF USING TIME 30 MINUTES OR MORE		$77.78	$84.81					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98007	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-VIDEO VISIT WITH HIGH MEDICAL DECISION MAKING, IF USING TIME 40 MINUTES OR MORE		$105.01	$112.55					
98008	NEW PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 15 MINUTES OR MORE		$35.85	$40.28					
98009	NEW PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 15 MINUTES OR MORE		$62.23	$66.92					
98010	NEW PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH MODERATE MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 45 MINUTES OR MORE		$98.05	$104.30					
98011	NEW PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH HIGH MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 60 MINUTES OR MORE		$128.90	$135.67					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98012	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 10 MINUTES OR MORE		$26.38	$30.03					
98013	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH LOW MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 20 MINUTES OR MORE		$48.07	$52.49					
98014	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH MODERATE MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 30 MINUTES OR MORE		$71.10	$76.83					
98015	ESTABLISHED PATIENT SYNCHRONOUS AUDIO-ONLY VISIT WITH HIGH MEDICAL DECISION MAKING AND 10 MINUTES OR MORE OF MEDICAL DISCUSSION, IF USING TIME 40 MINUTES OR MORE		$105.01	$111.77					
98016	ESTABLISHED PATIENT BRIEF COMMUNICATION TECHNOLOGY-BASED SERVICE WITH 5-10 MINUTES OF MEDICAL DISCUSSION		$12.48	$13.52					
98925	OSTEOPATHIC MANIPULATIVE TREATMENT, 1-2 BODY REGIONS		$20.40	$20.40					
98926	OSTEOPATHIC MANIPULATIVE TREATMENT, 3-4 BODY REGIONS		$30.53	$30.53					
98927	OSTEOPATHIC MANIPULATIVE TREATMENT, 5-6 BODY REGIONS		$36.45	$36.45					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98928	OSTEOPATHIC MANIPULATIVE TREATMENT, 7-8 BODY REGIONS		$42.46	$42.46					
98929	OSTEOPATHIC MANIPULATIVE TREATMENT, 9-10 BODY REGIONS		$46.11	$46.11					
98940	CHIROPRACTIC MANIPULATIVE TREATMENT, 1-2 SPINAL REGIONS		$17.06	$20.68					
98941	CHIROPRACTIC MANIPULATIVE TREATMENT, 3 TO 4 SPINAL REGIONS		$25.08	$26.45					
98942	CHIROPRACTIC MANIPULATIVE TREATMENT, 5 SPINAL REGIONS		$33.23	$32.78					
98943	CHIROPRACTIC MANIPULATIVE TREATMENT TO REGIONS OTHER THAN SPINE		$0.00	$19.24					
98960	EDUCATION AND TRAINING FOR PATIENT SELF-MANAGEMENT, EACH 30 MINUTES		$22.53	$22.53					Community Health Workers (CHW) - Effective July 1, 2023. No more than 104 units per calendar year. Rendering provider must be Physician, APRN, Physician Assistant, Dentist UB modifier identifies service provided by CHW
98961	EDUCATION AND TRAINING FOR PATIENT SELF-MANAGEMENT, 2-4 PATIENTS, EACH 30 MINUTES		$10.88	$10.88					Community Health Workers (CHW) - Effective July 1, 2023. No more than 104 units per calendar year. Rendering provider must be Physician, APRN, Physician Assistant, Dentist UB modifier identifies service provided by CHW

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98962	EDUCATION AND TRAINING FOR PATIENT SELF-MANAGEMENT, 5-8 PATIENTS, EACH 30 MINUTES		$8.03	$8.03					Community Health Workers (CHW) - Effective July 1, 2023. No more than 104 units per calendar year. Rendering provider must be Physician, APRN, Physician Assistant, Dentist UB modifier identifies service provided by CHW
98966	TELEPHONE DISCUSSION PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL, 5-10 MINUTES		$10.39	$11.17					Added Effective 02/04/2020
98967	TELEPHONE DISCUSSION PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL, 11-20 MINUTES		$20.76	$21.80					Added Effective 02/04/2020
98968	TELEPHONE DISCUSSION PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL, 21-30 MINUTES		$30.90	$31.94					Added Effective 02/04/2020
98970	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL FOR UP TO 7 DAYS, TOTAL TIME 5-10 MINUTES		$9.25	$9.25					Updated Effective 01/01/2021
98971	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL FOR UP TO 7 DAYS, TOTAL TIME 11-20 MINUTES		$16.51	$16.51					Updated Effective 01/01/2021

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98972	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE PROVIDED TO AN ESTABLISHED PATIENT BY NONPHYSICIAN PROFESSIONAL FOR UP TO 7 DAYS, TOTAL TIME 21 MINUTES OR MORE		$25.75	$26.01					Updated Effective 01/01/2021
98975	SET-UP AND PATIENT EDUCATION ON USE OF EQUIPMENT FOR REMOTE THERAPEUTIC MONITORING		$14.41	$14.41					Added 1/1/2022
98976	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF RESPIRATORY SYSTEM, 16-30 DAYS IN A 30-DAY PERIOD		$37.46	$37.46					Added 1/1/2022
98977	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF MUSCULOSKELETAL SYSTEM, 16-30 DAYS IN A 30-DAY PERIOD		$31.66	$31.66					Added 1/1/2022
98978	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF COGNITIVE BEHAVIORAL THERAPY, 16-30 DAYS IN A 30-DAY PERIOD		$0.00	$0.00					
98979	REMOTE THERAPEUTIC MONITORING TREATMENT MANAGEMENT SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, FIRST 10 MINUTES PER CALENDAR MONTH		$10.00	$21.87					Added effective 1/1/2026, Adding code to assist in detailed description and billing purposes, to 98980 for the break down of the first 10 minutes.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
98980	REMOTE THERAPEUTIC MONITORING TREATMENT MANAGEMENT SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, FIRST 20 MINUTES PER CALENDAR MONTH		$22.08	$34.74					Added 1/1/2022
98981	REMOTE THERAPEUTIC MONITORING TREATMENT MANAGEMENT SERVICES BY PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, EACH ADDITIONAL 20 MINUTES PER CALENDAR MONTH		$22.08	$34.74					Added 1/1/2022
98984	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF RESPIRATORY SYSTEM, 2-15 DAYS IN A 30-DAY PERIOD		$37.46	$37.46					Added effective 1/1/2026, Updated description of codes 98976, 98977, 98978 to be more specific based on days and added 3 new codes (98984, 98985, 98986)
98985	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF MUSCULOSKELETAL SYSTEM, 2-15 DAYS IN A 30-DAY PERIOD		$31.66	$31.66					Added effective 1/1/2026, Updated description of codes 98976, 98977, 98978 to be more specific based on days and added 3 new codes (98984, 98985, 98986)
98986	DEVICE SUPPLY FOR DATA ACCESS OR DATA TRANSMISSIONS TO SUPPORT MONITORING OF COGNITIVE BEHAVIORAL THERAPY, 2-15 DAYS IN A 30-DAY PERIOD		$0.00	$0.00					Added effective 1/1/2026, Updated description of codes 98976, 98977, 98978 to be more specific based on days and added 3 new codes (98984, 98985, 98986)
99050	SERVICE PROVIDED IN THE OFFICE WHEN THE OFFICE IS NORMALLY CLOSED		$7.50	$10.00					
99080	PREPARATION OF SPECIAL REPORTS BEYOND WHAT IS FOUND IN THE MEDICAL RECORD		Zero	Zero					Effective 7/1/2023

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99082	UNUSUAL TRAVEL	Yes	$0.00	$1.00					
99100	AGE COMPLICATING ANESTHESIA (YOUNGER THAN 1 YEAR AND OLDER THAN 70 YEARS)		$25.00	$25.00					
99151	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN PERFORMING A PROCEDURE (YOUNGER THAN 5 YEARS), INITIAL 15 MINUTES		$19.15	$58.40					Added Effective 1/1/2017
99152	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN PERFORMING A PROCEDURE (5 YEARS OR OLDER), INITIAL 15 MINUTES		$9.98	$38.57					Added Effective 1/1/2017
99153	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN PERFORMING A PROCEDURE, EACH ADDITIONAL 15 MINUTES		$8.04	$8.04					Added Effective 1/1/2017
99155	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN NOT PERFORMING A PROCEDURE (YOUNGER THAN 5 YEARS), INITIAL 15 MINUTES		$75.00	$75.00					Added Effective 1/1/2017
99156	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN NOT PERFORMING A PROCEDURE (5 YEARS OR OLDER), INITIAL 15 MINUTES		$61.64	$61.64					Added Effective 1/1/2017
99157	USE OF A DRUG TO INDUCE DEPRESSION OF CONSCIOUSNESS BY PHYSICIAN NOT PERFORMING A PROCEDURE, EACH ADDITIONAL 15 MINUTES		$46.74	$46.74					Added Effective 1/1/2017

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99170	EXAM OF GENITAL AND ANAL REGION FOR SUSPECTED TRAUMA USING AN ENDOSCOPE, CHILD		$100.19	$100.19					
99172	SCREENING OF VISUAL FUNCTION		$15.64	$15.64		$12.37	$3.27		
99173	SCREENING FOR VISUAL SHARPNESS		$45.00	$60.00					
99174	SCREENING OF EYE WITH SPECIAL INSTRUMENT WITH REMOTE ANALYSIS		$21.93	$21.93					
99175	SCREENING OF EYE WITH SPECIAL INSTRUMENT WITH REMOTE ANALYSIS		$38.10	$38.10					
99177	SCREENING OF EYE WITH SPECIAL INSTRUMENT ONSITE ANALYSIS		$3.64	$3.64					Added Effective 1/1/2018
99183	MANAGEMENT OF OXYGEN CHAMBER THERAPY		$116.13	$116.13					
99184	TREATMENT BY LOWERING HEAD OR TOTAL BODY TEMPERATURE IN NEONATE		$187.45	$187.45					Added effective 1/1/2015
99188	APPLICATION OF TOPICAL FLUORIDE		$18.75	$18.75					Added effective 1/1/2015 New rate effective 9/1/2023
99190	ASSEMBLY AND OPERATION OF HEART-LUNG MACHINE, EACH HOUR		$88.74	$88.74					
99191	ASSEMBLY AND OPERATION OF HEART-LUNG MACHINE, 45 MINUTES		$54.76	$54.76					
99192	ASSEMBLY AND OPERATION OF HEART-LUNG MACHINE, 30 MINUTES		$40.41	$40.41					
99195	DRAWING OF BLOOD FOR A MEDICAL PROBLEM		$11.99	$11.99					
99202	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TIME, 15 MINUTES OR MORE		$39.73	$53.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99203	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH LOW LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 30 MINUTES OR MORE		$60.57	$79.04					
99204	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 45 MINUTES OR MORE		$102.79	$112.27					
99205	NEW PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH A HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 60 MINUTES OR MORE		$131.98	$143.29					
99211	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF ESTABLISHED PATIENT THAT MAY NOT REQUIRE PRESENCE OF HEALTHCARE PROFESSIONAL		$7.48	$16.98					
99212	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TIME, 10 MINUTES OR MORE		$20.41	$31.08					
99213	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH LOW LEVEL OF DECISION MAKING, IF USING TIME, 20 MINUTES OR MORE		$40.36	$42.63					
99214	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH MODERATE LEVEL OF DECISION MAKING, IF USING TIME, 30 MINUTES OR MORE		$61.98	$67.10					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99215	ESTABLISHED PATIENT OFFICE OR OTHER OUTPATIENT VISIT WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 40 MINUTES OR MORE		$87.17	$98.39					
99221	INITIAL HOSPITAL CARE WITH STRAIGHTFORWARD OR LOW LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 40 MINUTES		$51.66	$51.66					
99222	INITIAL HOSPITAL INPATIENT OR OBSERVATION CARE WITH MODERATE LEVEL OF MEDICAL DECISION MAKING. IF USING TIME, 55 MINUTES OR MORE		$85.60	$85.60					
99223	INITIAL HOSPITAL INPATIENT OR OBSERVATION CARE WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 75 MINUTES OR MORE		$119.25	$119.25					
99231	SUBSEQUENT HOSPITAL CARE WITH STRAIGHTFORWARD OR LOW LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 25 MINUTES		$25.89	$25.89					
99232	SUBSEQUENT HOSPITAL INPATIENT OR OBSERVATION CARE WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 35 MINUTES OR MORE		$42.24	$42.24					
99233	SUBSEQUENT HOSPITAL INPATIENT OR OBSERVATION CARE WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 50 MINUTES OR MORE		$60.07	$60.07					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99234	HOSPITAL INPATIENT OR OBSERVATION CARE WITH ADMISSION AND DISCHARGE ON THE SAME DATE WITH STRAIGHTFORWARD OR LOW LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 45 MINUTES OR MORE		$102.79	$102.79					
99235	HOSPITAL INPATIENT OR OBSERVATION CARE WITH ADMISSION AND DISCHARGE ON THE SAME DATE WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 70 MINUTES OR MORE		$135.67	$135.67					
99236	HOSPITAL INPATIENT OR OBSERVATION CARE WITH ADMISSION AND DISCHARGE ON THE SAME DATE WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 85 MINUTES OR MORE		$169.32	$169.32					
99238	HOSPITAL INPATIENT OR OBSERVATION DISCHARGE DAY MANAGEMENT, 30 MINUTES OR LESS		$53.44	$53.44					
99239	HOSPITAL INPATIENT OR OBSERVATION DISCHARGE DAY MANAGEMENT, MORE THAN 30 MINUTES		$72.89	$72.89					
99242	OFFICE OR OTHER OUTPATIENT CONSULTATION WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TOTAL TIME, 20 MINUTES OR MORE		$54.91	$67.83					
99243	OFFICE OR OTHER OUTPATIENT CONSULTATION WITH LOW LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 30 MINUTES OR MORE		$76.53	$90.43					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99244	OFFICE OR OTHER OUTPATIENT CONSULTATION WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 40 MINUTES OR MORE		$121.37	$128.22					
99245	OFFICE OR OTHER OUTPATIENT CONSULTATION WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 55 MINUTES OR MORE		$150.75	$166.18					
99252	INPATIENT OR OBSERVATION CONSULTATION WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, IF USING TIME, 35 MINUTES OR MORE		$55.73	$55.73					
99253	INPATIENT OR OBSERVATION CONSULTATION WITH LOW LEVEL OF MEDICAL DECISION MAKING, IF USING TOTAL TIME, 45 MINUTES OR MORE		$74.75	$74.75					
99254	INPATIENT OR OBSERVATION CONSULTATION WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 60 MINUTES OR MORE		$107.50	$107.50					
99255	INPATIENT OR OBSERVATION CONSULTATION WITH HIGH LEVEL OF MEDICAL DECISION MAKING, IF USING TIME, 80 MINUTES OR MORE		$148.20	$148.20					
99281	EMERGENCY DEPARTMENT VISIT FOR PROBLEM THAT MAY NOT REQUIRE HEALTH CARE PROFESSIONAL		$15.97	$15.97					
99282	EMERGENCY DEPARTMENT VISIT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING		$24.71	$24.71					
99283	EMERGENCY DEPARTMENT VISIT WITH LOW LEVEL OF MEDICAL DECISION MAKING		$47.40	$47.40					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99284	EMERGENCY DEPARTMENT VISIT WITH MODERATE LEVEL OF MEDICAL DECISION MAKING		$74.05	$74.05					
99285	EMERGENCY DEPARTMENT VISIT WITH HIGH LEVEL OF MEDICAL DECISION MAKING		$116.04	$116.04					
99288	PHYSICIAN DIRECTION OF EMERGENCY ADVANCED LIFE SUPPORT PARAMEDIC SERVICES		$0.00	$0.00					
99291	CRITICAL CARE, FIRST 30-74 MINUTES		$157.68	$215.02					
99292	CRITICAL CARE, EACH ADDITIONAL 30 MINUTES		$88.74	$96.75					
99304	INITIAL NURSING FACILITY CARE WITH STRAIGHTFORWARD OR LOW LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 25 MINUTES		$49.40	$49.40					
99305	INITIAL NURSING FACILITY CARE WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 35 MINUTES		$65.66	$65.66					
99306	INITIAL NURSING FACILITY CARE WITH HIGH LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, 50 MINUTES OR MORE		$130.50	$130.50					
99307	SUBSEQUENT NURSING FACILITY CARE WITH STRAIGHTFORWARD LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 10 MINUTES		$34.42	$34.42					
99308	SUBSEQUENT NURSING FACILITY CARE WITH STRAIGHTFORWARD LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, 20 MINUTES OR MORE		$42.19	$42.19					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99309	SUBSEQUENT NURSING FACILITY CARE WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 30 MINUTES		$59.51	$59.51					
99310	SUBSEQUENT NURSING FACILITY CARE WITH HIGH LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 45 MINUTES		$74.49	$74.49					
99315	NURSING FACILITY DISCHARGE DAY MANAGEMENT, 30 MINUTES OR LESS		$46.70	$46.70					
99316	NURSING FACILITY DISCHARGE DAY MANAGEMENT; MORE THAN 30 MINUTES		$81.26	$81.26					
99341	RESIDENCE VISIT FOR NEW PATIENT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 15 MINUTES		$74.38	$74.38					
99342	RESIDENCE VISIT FOR NEW PATIENT WITH LOW LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 30 MINUTES		$98.05	$98.05					
99344	RESIDENCE VISIT FOR NEW PATIENT WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 60 MINUTES		$171.60	$171.60					
99345	RESIDENCE VISIT FOR NEW PATIENT WITH HIGH LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 75 MINUTES		$203.79	$203.79					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99347	RESIDENCE VISIT FOR ESTABLISHED PATIENT WITH STRAIGHTFORWARD MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 15 MINUTES		$53.11	$53.11					
99348	RESIDENCE VISIT FOR ESTABLISHED PATIENT WITH LOW LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 30 MINUTES		$78.48	$78.48					
99349	RESIDENCE VISIT FOR ESTABLISHED PATIENT WITH MODERATE LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 40 MINUTES		$115.76	$115.76					
99350	RESIDENCE VISIT FOR ESTABLISHED PATIENT WITH HIGH LEVEL OF MEDICAL DECISION MAKING, PER DAY, IF USING TIME, AT LEAST 60 MINUTES		$167.27	$167.27					
99358	EXTENDED PATIENT SERVICE WITHOUT DIRECT PATIENT CONTACT, FIRST HOUR		$105.00	$105.00					Added Effective 4/1/2022
99359	EXTENDED PATIENT SERVICE WITHOUT DIRECT PATIENT CONTACT, EACH ADDITIONAL 30 MINUTES		$51.32	$51.32					Added Effective 4/1/2022
99367	MEDICAL TEAM CONFERENCE WITH PHYSICIAN, 30 MINUTES OR MORE		$45.72	$45.72					Added Effective Date 9/1/2024
99381	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION INFANT YOUNGER THAN 1 YEAR		$60.43	$78.58					
99382	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (1-4 YEARS)		$64.38	$89.90					
99383	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (5-11 YEARS)		$68.26	$89.90					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99384	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (12-17 YEARS)		$80.42	$101.22					
99385	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (18-39 YEARS)		$77.60	$95.21					
99386	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (40-64 YEARS)		$93.99	$116.70					
99387	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (65 YEARS OR OLDER)		$101.40	$127.74					
99391	INITIAL NEW PATIENT PREVENTIVE MEDICINE EVALUATION (65 YEARS OR OLDER)		$55.17	$67.57					
99392	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION (1-4 YEARS)		$60.43	$78.58					
99393	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION (5-11 YEARS)		$60.43	$78.58					
99394	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION (12-17 YEARS		$68.26	$89.90					
99395	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION (18-39 YEARS)		$70.22	$84.80					
99396	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION AGE 40-64		$76.54	$100.83					
99397	ESTABLISHED PATIENT PERIODIC PREVENTIVE MEDICINE EXAMINATION AGE 65 YEARS AND OLDER		$81.19	$106.26					
99401	PREVENTIVE MEDICINE COUNSELING, TYPICALLY 15 MINUTES		$25.64	$25.64					Effective 11/1/2016
99402	PREVENTIVE MEDICINE COUNSELING, TYPICALLY 30 MINUTES		$44.48	$44.48					Effective 1/1/2014

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99403	PREVENTIVE MEDICINE COUNSELING, TYPICALLY 45 MINUTES		$62.34	$62.34					Effective 1/1/2014
99404	PREVENTIVE MEDICINE COUNSELING, TYPICALLY 1 HOUR		$80.29	$80.29					Effective 1/1/2014
99406	SMOKING AND TOBACCO USE INTERMEDIATE COUNSELING 3 - 10 MINUTES		$9.77	$11.34					Added Effective 1/1/2018
99407	SMOKING AND TOBACCO USE INTENSIVE COUNSELING, MORE THAN 10 MINUTES		$20.38	$21.95					Rate updated 1/1/2018
99408	ALCOHOL AND/OR SUBSTANCE ABUSE SCREENING AND INTERVENTION, 15-30 MINUTES		$20.00	$20.98					Added Effective 1/1/2014
99409	ALCOHOL AND/OR SUBSTANCE ABUSE SCREENING AND INTERVENTION, MORE THAN 30 MINUTES		$53.20	$53.20					Added Effective 7/1/2016
99415	EXTENDED OFFICE OR OTHER OUTPATIENT SERVICE BY CLINICAL STAFF, FIRST HOUR		$7.46	$7.46					Added Effective 1/1/2016 Rate updated 4/1/2021
99416	EXTENDED OFFICE OR OTHER OUTPATIENT SERVICE BY CLINICAL STAFF, EACH ADDITIONAL 30 MINUTES		$3.87	$3.87					Added Effective 1/1/2016 Rate updated 4/1/2021
99417	PROLONGED OUTPATIENT SERVICE, EACH 15 MINUTES OF TOTAL TIME BEYOND REQUIRED TIME OF PRIMARY SERVICE		$25.74	$26.52					Rate Updated Effective 4/1/21
99418	PROLONGED INPATIENT OR OBSERVATION SERVICE, EACH 15 MINUTES OF TOTAL TIME BEYOND REQUIRED TIME OF PRIMARY SERVICE		$33.09	$33.09					
99421	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 5-10 MINUTES		$10.39	$11.94					Added Effective 01/01/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99422	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 5-10 MINUTES		$21.28	$23.87					Added Effective 01/01/2020
99423	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 21 OR MORE MINUTES		$33.89	$38.56					Added Effective 01/01/2020
99424	PRINCIPAL CARE MANAGEMENT SERVICES FOR A SINGLE HIGH-RISK DISEASE, FIRST 30 MINUTES PROVIDED PERSONALLY BY QUALIFIED HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH.		$61.72	$67.65					Added 1/1/2022
99425	PRINCIPAL CARE MANAGEMENT SERVICES FOR A SINGLE HIGH-RISK DISEASE, EACH ADDITIONAL 30 MINUTES PROVIDED PERSONALLY BY QUALIFIED HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$42.98	$48.65					Added 1/1/2022
99426	PRINCIPAL CARE MANAGEMENT SERVICES FOR A SINGLE HIGH-RISK DISEASE, FIRST 30 MINUTES OF CLINICAL STAFF TIME DIRECTED BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$41.43	$50.97					Added 1/1/2022
99427	PRINCIPAL CARE MANAGEMENT SERVICES FOR A SINGLE HIGH-RISK DISEASE, EACH ADDITIONAL 30 MINUTES OF CLINICAL STAFF TIME DIRECTED BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$29.25	$38.79					Added 1/1/2022
99429	OTHER PREVENTIVE MEDICINE SERVICE	Yes	$0.00	$0.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99437	CHRONIC CARE MANAGEMENT SERVICES FOR TWO OR MORE CHRONIC CONDITIONS, ADDITIONAL 30 MINUTES PROVIDED PERSONALLY BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$42.72	$49.42					Added 1/1/2022
99439	CHRONIC CARE MANAGEMENT SERVICES FOR TWO OR MORE CHRONIC CONDITIONS, ADDITIONAL 20 MINUTES OF CLINICAL STAFF TIME DIRECTED BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$22.45	$29.93					Added Effective 01/01/2021
99445	REMOTE MONITORING OF PHYSIOLOGIC PARAMETERS, INITIAL SUPPLY OF DEVICES WITH DAILY RECORDINGS OR PROGRAMMED ALERTS TRANSMISSION, MONITORING OF 2-15 DAYS IN A 30-DAY PERIOD		$37.46	$37.46					Added Effective 1/1/2026, Adding codes to fix the monitoring times to include 2-15 days in a 30 day period (99445) and detailed description for the first 10 minutes for billing purposes. (99470)
99446	TELEPHONE, INTERNET, OR ELECTRONIC HEALTH RECORD ASSESSMENT AND MANAGEMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 5-10 MINUTES		$14.53	$14.53					Effective 1/1/2019
99447	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 11-20 MINUTES		$28.79	$28.79					Effective 1/1/2019
99448	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 21-30 MINUTES		$43.32	$43.32					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99449	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, MORE THAN 30 MINUTES		$57.58	$57.58					Effective 1/1/2019
99451	TELEPHONE, INTERNET, OR ELECTRONIC HEALTH RECORD ASSESSMENT AND MANAGEMENT WITH WRITTEN REPORT BY CONSULTING PHYSICIAN, AT LEAST 5 MINUTES		$29.56	$29.56					Effective 1/1/2019
99452	TELEPHONE OR INTERNET REFERRAL SERVICE, 30 MINUTES		$29.56	$29.56					Effective 1/1/2019
99453	REMOTE MONITORING OF PHYSIOLOGIC PARAMETERS, INITIAL SET-UP AND PATIENT EDUCATION ON USE OF EQUIPMENT		$17.16	$17.16					Effective 1/1/2019
99454	REMOTE MONITORING OF PHYSIOLOGIC PARAMETERS, INITIAL SUPPLY OF DEVICES WITH DAILY RECORDINGS OR PROGRAMMED ALERTS TRANSMISSION, MONITORING OF 16-30 DAYS IN A 30-DAY PERIOD		$37.46	$37.46					Effective 1/1/2019
99457	MANAGEMENT USING THE RESULTS OF REMOTE PHYSIOLOGIC MONITORING DURING THE CALENDAR MONTH, FIRST 20 MINUTES		$22.88	$42.92					Rate Change Effective 01/01/2020
99458	MANAGEMENT USING THE RESULTS OF REMOTE PHYSIOLOGIC MONITORING DURING THE CALENDAR MONTH, EACH ADDITIONAL 20 MINUTES		$22.88	$34.75					Added Effective 01/01/2020
99459	PELVIC EXAMINATION		$17.69	$17.69					
99460	INITIAL EVALUATION AND MANAGEMENT OF NEWBORN PER DAY		$45.99	$45.99					
99461	INITIAL EVALUATION AND MANAGEMENT OF NEWBORN NOT IN HOSPITAL OR BIRTHING CENTER PER DAY		$51.92	$75.36					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99462	FOLLOW-UP HOSPITAL CARE OF NEWBORN PER DAY		$24.63	$24.63					
99463	INITIAL INPATIENT HOSPITAL OR BIRTHING CENTER SAME DATE CARE AND DISCHARGE OF NEWBORN		$61.12	$61.12					
99464	PHYSICIAN ATTENDANCE AT DELIVERY AND STABILIZATION OF NEWBORN		$57.26	$57.26					
99465	REVIVING NEWBORN AT DELIVERY		$119.57	$119.57					
99466	CRITICAL CARE DURING TRANSPORT BETWEEN FACILITIES, FIRST 30-74 MINUTES (2 YEARS OR YOUNGER)		$190.18	$190.18					
99467	CRITICAL CARE DURING TRANSPORT BETWEEN FACILITIES, EACH ADDITIONAL 30 MINUTES (2 YEARS OR YOUNGER)		$94.05	$94.05					
99468	INITIAL INPATIENT HOSPITAL CRITICAL CARE OF NEWBORN PER DAY (28 DAYS OR YOUNGER)		$707.33	$707.33					
99469	FOLLOW-UP INPATIENT HOSPITAL CRITICAL CARE OF NEWBORN PER DAY (28 DAYS OR YOUNGER)		$308.57	$308.57					
99470	MANAGEMENT USING THE RESULTS OF REMOTE PHYSIOLOGIC MONITORING DURING THE CALENDAR MONTH, FIRST 10 MINUTES		$11.59	$21.61					Added Effective 1/1/2026, Adding codes to fix the monitoring times to include 2-15 days in a 30 day period (99445) and detailed description for the first 10 minutes for billing purposes. (99470)
99471	FOLLOW-UP INPATIENT HOSPITAL CRITICAL CARE OF NEWBORN PER DAY (28 DAYS OR YOUNGER)		$636.72	$636.72					
99472	FOLLOW-UP INPATIENT HOSPITAL CRITICAL CARE OF INFANT OR YOUNG CHILD PER DAY (29 DAYS TO 2 YEARS)		$313.91	$313.91					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99473	EDUCATION AND TRAINING TO SELF MEASURE BLOOD PRESSURE		$8.03	$8.03					Added Effective 01/01/2020
99474	SELF MEASURED BLOOD PRESSURE MEASUREMENTS		$7.06	$11.47					Added Effective 01/01/2020
99475	INITIAL INPATIENT HOSPITAL CRITICAL CARE OF INFANT OR YOUNG CHILD PER DAY (2-5 YEARS)		$441.19	$441.19					
99476	FOLLOW-UP INPATIENT HOSPITAL CRITICAL CARE OF INFANT OR YOUNG CHILD PER DAY (2-5 YEARS)		$261.99	$261.99					
99477	INITIAL INTENSIVE CARE OF NEWBORN PER DAY (28 DAYS OR YOUNGER)		$275.93	$275.93					
99478	FOLLOW-UP INTENSIVE CARE OF RECOVERING VERY LOW BIRTH WEIGHT INFANT PER DAY		$113.34	$113.34					
99479	FOLLOW-UP INTENSIVE CARE OF RECOVERING LOW BIRTH WEIGHT INFANT PER DAY		$98.50	$98.50					
99480	FOLLOW-UP INTENSIVE CARE OF RECOVERING MEDIUM BIRTH WEIGHT INFANT PER DAY		$94.65	$94.65					
99483	FOLLOW-UP INTENSIVE CARE OF RECOVERING MEDIUM BIRTH WEIGHT INFANT PER DAY		$139.00	$184.69					Added Effective 1/1/2018
99484	CARE MANAGEMENT SERVICES FOR BEHAVIORAL HEALTH CONDITIONS, 20 MINUTES OR MORE CLINICAL STAFF TIME DIRECTED BY HEALTH CARE PROFESSIONAL		$25.39	$36.88					Added Effective 1/1/2018
99485	SUPERVISION OF INTERFACILITY TRANSPORT CARE OF CRITICAL PATIENT, FIRST 30 MINUTES (2 YEARS OR YOUNGER)		$60.50	$60.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99486	SUPERVISION OF INTERFACILITY TRANSPORT CARE OF CRITICAL PATIENT, EACH ADDITIONAL 30 MINUTES (2 YEARS OR YOUNGER)		$52.68	$52.68					
99487	COMPLEX CHRONIC CARE MANAGEMENT SERVICES FOR TWO OR MORE CHRONIC CONDITIONS, FIRST 60 MINUTES OF CLINICAL STAFF TIME DIRECTED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE		$41.76	$71.39					Added Effective 1/1/2017
99489	COMPLEX CHRONIC CARE MANAGEMENT SERVICES FOR TWO OR MORE CHRONIC CONDITIONS, EACH ADDITIONAL 30 MINUTES OF CLINICAL STAFF TIME DIRECTED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE		$21.01	$35.83					Added Effective 1/1/2017
99490	CHRONIC CARE MANAGEMENT SERVICES, FIRST 20 MINUTES OF CLINICAL STAFF TIME DIRECTED BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$26.00	$33.25					Added Effective 1/1/2015
99491	CHRONIC CARE MANAGEMENT SERVICES FOR TWO OR MORE CHRONIC CONDITIONS, FIRST 30 MINUTES PROVIDED PERSONALLY BY HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH		$65.84	$65.84					Effective 1/1/2019
99492	INITIAL PSYCHIATRIC COLLABORATIVE CARE MANAGEMENT, FIRST CALENDAR MONTH, FIRST 70 MINUTES		$70.08	$121.51					Added Effective 1/1/2018

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
99493	FOLLOW-UP PSYCHIATRIC COLLABORATIVE CARE MANAGEMENT, SUBSEQUENT CALENDAR MONTH, FIRST 60 MINUTES		$63.35	$97.56					Added Effective 1/1/2018
99494	PSYCHIATRIC COLLABORATIVE CARE MANAGEMENT PER CALENDAR MONTH, EACH ADDITIONAL 30 MINUTES		$33.79	$50.50					Added Effective 1/1/2018
99495	TRANSITIONAL CARE MANAGEMENT SERVICES FOR PROBLEM OF AT LEAST MODERATE COMPLEXITY		$117.43	$167.42					
99496	TRANSITIONAL CARE MANAGEMENT SERVICES FOR PROBLEM OF HIGH COMPLEXITY		$160.09	$226.91					
99497	ADVANCE CARE PLANNING, FIRST 30 MINUTES		$62.90	$67.56					Added Effective 1/1/2016
99498	ADVANCE CARE PLANNING, EACH ADDITIONAL 30 MINUTES		$58.90	$59.16					Added Effective 1/1/2016
A4264	PERMANENT IMPLANTABLE CONTRACEPTIVE INTRATUBAL OCCLUSION DEVICE(S) AND DELIVERY SYSTEM	Yes		$1,400.00					POS 11 to pay $1,400 effective 1/1/2011
A9500	TECHNETIUM TC-99M SESTAMIBI, DIAGNOSTIC, PER STUDY DOSE		$103.45	$103.45					Added Effective 07/01/2020
G0101	CERVICAL OR VAGINAL CANCER SCREENING; PELVIC AND CLINICAL BREAST EXAMINATION		$22.93	$31.99					Effective 4/15/2023
G0104	COLORECTAL CANCER SCREENING; FLEXIBLE SIGMOIDOSCOPY			$124.52					Effective 01/01/2014
G0105	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL AT HIGH RISK		$270.86	$270.86					Effective 01/01/2015
G0108	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, INDIVIDUAL, PER 30 MINUTES		$50.50	$50.50					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G0109	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, GROUP SESSION (2 OR MORE), PER 30 MINUTES		$13.92	$13.92					
G0121	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL NOT MEETING CRITERIA FOR HIGH RISK		$150.28	$243.75					Rate updated 1/1/2018
G0127	TRIMMING OF DYSTROPHIC NAILS, ANY NUMBER		$19.88	$19.88					
G0248	DEMONSTRATION, PRIOR TO INITIATION OF HOME INR MONITORING, FOR PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA, UNDER THE DIRECTION OF A PHYSICIAN; INCLUDES: FACE-TO-FACE DEMONSTRATION OF USE AND CARE OF THE INR MONITOR, OBTAINING AT LEAST ONE BLOOD SAMPLE, PROVISION OF INSTRUCTIONS FOR REPORTING HOME INR TEST RESULTS, AND DOCUMENTATION OF PATIENT'S ABILITY TO PERFORM TESTING AND REPORT RESULTS		$78.10	$78.10					Effective 4/1/2024

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G0249	PROVISION OF TEST MATERIALS AND EQUIPMENT FOR HOME INR MONITORING OF PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA; INCLUDES: PROVISION OF MATERIALS FOR USE IN THE HOME AND REPORTING OF TEST RESULTS TO PHYSICIAN; TESTING NOT OCCURRING MORE FREQUENTLY THAN ONCE A WEEK; TESTING MATERIALS, BILLING UNITS OF SERVICE INCLUDE 4 TESTS		$51.27	$51.27					Effective 4/1/2024
G0250	PHYSICIAN REVIEW, INTERPRETATION, AND PATIENT MANAGEMENT OF HOME INR TESTING FOR PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA; TESTING NOT OCCURRING MORE FREQUENTLY THAN ONCE A WEEK; BILLING UNITS OF SERVICE INCLUDE 4 TESTS		$7.43	$7.43					Effective 4/1/2024
G0279	DIAGNOSTIC DIGITAL BREAST TOMOSYNTHESIS, UNILATERAL OR BILATERAL (LIST SEPARATELY IN ADDITION TO 77065 OR 77066)		$43.04	$43.04		$18.61	$24.44		Added Effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G0296	COUNSELING VISIT TO DISCUSS NEED FOR LUNG CANCER SCREENING USING LOW DOSE CT SCAN (LDCT) (SERVICE IS FOR ELIGIBILITY DETERMINATION AND SHARED DECISION MAKING)		$42.85	$42.85					Added Effective 1/1/2016
G0453	CONTINUOUS INTRAOPERATIVE NEUROPHYSIOLOGY MONITORING, FROM OUTSIDE THE OPERATING ROOM (REMOTE OR NEARBY), PER PATIENT, (ATTENTION DIRECTED EXCLUSIVELY TO ONE PATIENT) EACH 15 MINUTES (LIST IN ADDITION TO PRIMARY PROCEDURE)		$21.28	$21.28					
G0455	PREPARATION WITH INSTILLATION OF FECAL MICROBIOTA BY ANY METHOD, INCLUDING ASSESSMENT OF DONOR SPECIMEN		$94.27	$94.27					
G0463	HOSPITAL OUTPATIENT CLINIC VISIT FOR ASSESSMENT AND MANAGEMENT OF A PATIENT		$102.79	$112.79					ADDED EFFECTIVE 1/1/2015
G0561	TYMPANOSTOMY WITH LOCAL OR TOPICAL ANESTHESIA AND INSERTION OF A VENTILATING TUBE WHEN PERFORMED WITH TYMPANOSTOMY TUBE DELIVERY DEVICE, UNILATERAL (LIST SEPARATELY IN ADDITION TO 69433) (DO NOT USE IN CONJUNCTION WITH 0583T)			$623.66					Added effective 1/1/2026, updated to outpatient services only.

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G2010	REMOTE EVALUATION OF RECORDED VIDEO AND/OR IMAGES SUBMITTED BY AN ESTABLISHED PATIENT (E.G., STORE AND FORWARD), INCLUDING INTERPRETATION WITH FOLLOW-UP WITH THE PATIENT WITHIN 24 BUSINESS HOURS, NOT ORIGINATING FROM A RELATED E/M SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS NOR LEADING TO AN E/M SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT		$7.32	$9.40					Added Effective 2/4/2020
G2066	INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE CARDIOVASCULAR PHYSIOLOGIC MONITOR SYSTEM, IMPLANTABLE LOOP RECORDER SYSTEM, OR SUBCUTANEOUS CARDIAC RHYTHM MONITOR SYSTEM, REMOTE DATA ACQUISITION(S), RECEIPT OF TRANSMISSIONS AND TECHNICIAN REVIEW, TECHNICAL SUPPORT AND DISTRIBUTION OF RESULTS		$25.25	$25.25					Added Effective 1/1/2020
G6001	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS		$39.39	$39.39		$15.76	$23.63		Added effective 1/1/2015 Termed 12/31/2025, See Codes (77436, 77437, 77438, 77439)
G6002	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVERY OF RADIATION THERAPY		$55.74	$55.74		$39.56	$16.18		Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G6003	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: UP TO 5 MEV		$116.92	$116.92					Added effective 1/1/2015
G6004	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 6-10 MEV		$90.53	$90.53					Added effective 1/1/2015
G6005	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 11-19 MEV		$101.14	$101.14					Added effective 1/1/2015
G6006	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 20 MEV OR GREATER		$100.62	$100.62					Added effective 1/1/2015
G6007	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: UP TO 5 MEV		$186.00	$186.00					Added effective 1/1/2015
G6008	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 6-10 MEV		$125.20	$125.20					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G6009	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 11-19 MEV		$138.65	$138.65					Added effective 1/1/2015
G6010	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 20 MEV OR GREATER		$138.65	$138.65					Added effective 1/1/2015
G6011	RADIATION TREATMENT DELIVERY, 3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; UP TO 5 MEV		$198.93	$198.93					Added effective 1/1/2015
G6012	RADIATION TREATMENT DELIVERY, 3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 6-10 MEV		$164.78	$164.78					Added effective 1/1/2015
G6013	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 11-19 MEV		$185.48	$185.48					Added effective 1/1/2015

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
G6014	RADIATION TREATMENT DELIVERY, 3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 20 MEV OR GREATER		$185.48	$185.48					Added effective 1/1/2015
G6015	RADIATION TREATMENT DELIVERY, 3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 20 MEV OR GREATER		$289.42	$289.42					Added effective 1/1/2015
G6016	COMPENSATOR-BASED BEAM MODULATION TREATMENT DELIVERY OF INVERSE PLANNED TREATMENT USING 3 OR MORE HIGH RESOLUTION (MILLED OR CAST) COMPENSATOR, CONVERGENT BEAM MODULATED FIELDS, PER TREATMENT SESSION		$288.71	$288.71					Added effective 1/1/2015
G6017	INTRA-FRACTION LOCALIZATION AND TRACKING OF TARGET OR PATIENT MOTION DURING DELIVERY OF RADIATION THERAPY (EG,3D POSITIONAL TRACKING, GATING, 3D SURFACE TRACKING), EACH FRACTION OF TREATMENT		$0.00	$0.00					Added effective 1/1/2015
H0049	ALCOHOL AND/OR DRUG SCREENING		$24.06	$24.06					Added Effective 7/1/2016
J7321	HYALURONAN OR DERIVATIVE, HYALGAN, SUPARTZ OR VISCO-3, FOR INTRA-ARTICULAR INJECTION, PER DOSE			$130.50					Joint cushioning agents - device not a drug

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
J7323	HYALURONAN OR DERIVATIVE, EUFLEXXA, FOR INTRA-ARTICULAR INJECTION, PER DOSE			$131.21					Joint cushioning agents - device not a drug
J7324	HYALURONAN OR DERIVATIVE, ORTHOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE			$225.00					Joint cushioning agents - device not a drug
M0201	ADMINISTRATION OF PNEUMOCOCCAL, INFLUENZA, HEPATITIS B, AND/OR COVID-19 VACCINE INSIDE A PATIENT'S HOME; REPORTED ONLY ONCE PER INDIVIDUAL HOME PER DATE OF SERVICE WHEN SUCH VACCINE ADMINISTRATION(S) ARE PERFORMED AT THE PATIENT'S HOME		$35.50	$35.50					Added Effective 1/1/2022
M0220	INJECTION, TIXAGEVIMAB AND CILGAVIMAB, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND PEDIATRIC INDIVIDUALS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, WHO EITHER HAVE MODERATE TO SEVERELY COMPROMISED IMMUNE SYSTEMS OR FOR WHOM VACCINATION WITH ANY AVAILABLE COVID-19 VACCINE IS NOT RECOMMENDED DUE TO A HISTORY OF SEVERE ADVERSE REACTION TO A COVID-19 VACCINE(S) AND/OR COVID-19 VACCINE COMPONENT(S), INCLUDES INJECTION AND POST ADMINISTRATION MONITORING			$150.50					eff 12/8/21 end dated 11/22/2023

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
M0221	INJECTION, TIXAGEVIMAB AND CILGAVIMAB, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND PEDIATRIC INDIVIDUALS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, WHO EITHER HAVE MODERATE TO SEVERELY COMPROMISED IMMUNE SYSTEMS OR FOR WHOM VACCINATION WITH ANY AVAILABLE COVID-19 VACCINE IS NOT RECOMMENDED DUE TO A HISTORY OF SEVERE ADVERSE REACTION TO A COVID-19 VACCINE(S) AND/OR COVID-19 VACCINE COMPONENT(S), INCLUDES INJECTION AND POST ADMINISTRATION MONITORING IN THE HOME OR RESIDENCE; THIS INCLUDES A BENEFICIARY'S HOME THAT HAS BEEN MADE PROVIDER-BASED TO THE HOSPITAL DURING THE COVID-19 PUBLIC HEALTH EMERGENCY			$250.50					eff 12/8/21 end dated 11/22/2023
M0240	INTRAVENOUS INFUSION OR SUBCUTANEOUS INJECTION, CASIRIVIMAB AND IMDEVIMAB INCLUDES INFUSION OR INJECTION, AND POST ADMINISTRATION MONITORING, SUBSEQUENT REPEAT DOSES			$450.00					eff 10/1/21 end dated 11/22/2023

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
M0241	INTRAVENOUS INFUSION OR SUBCUTANEOUS INJECTION, CASIRIVIMAB AND IMDEVIMAB INCLUDES INFUSION OR INJECTION, AND POST ADMINISTRATION MONITORING IN THE HOME OR RESIDENCE; THIS INCLUDES A BENEFICIARY'S HOME THAT HAS BEEN MADE PROVIDER-BASED TO THE HOSPITAL DURING THE COVID-19 PUBLIC HEALTH EMERGENCY, SUBSEQUENT REPEAT DOSES			$750.00					eff 10/1/21 end dated 11/22/2023
M0243	INTRAVENOUS INFUSION OR SUBCUTANEOUS INJECTION, CASIRIVIMAB AND IMDEVIMAB INCLUDES INFUSION OR INJECTION, AND POST ADMINISTRATION MONITORING			$450.00					eff 11/21/20, new Rate effective 10/1/21 end dated 11/22/2023
M0244	INTRAVENOUS INFUSION OR SUBCUTANEOUS INJECTION, CASIRIVIMAB AND IMDEVIMAB INCLUDES INFUSION OR INJECTION, AND POST ADMINISTRATION MONITORING IN THE HOME OR RESIDENCE; THIS INCLUDES A BENEFICIARY'S HOME THAT HAS BEEN MADE PROVIDER-BASED TO THE HOSPITAL DURING THE COVID-19 PUBLIC HEALTH EMERGENCY			$750.00					eff 5/6/21, new rate effective 10/1/21 end dated 11/22/2023
M0245	INTRAVENOUS INFUSION, BAMLANIVIMAB AND ETESEVIMAB, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING			$450.00					eff 2/9/21 end dated 11/22/2023

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
M0246	INTRAVENOUS INFUSION, BAMLANIVIMAB AND ETESEVIMAB, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING IN THE HOME OR RESIDENCE; THIS INCLUDES A BENEFICIARY'S HOME THAT HAS BEEN MADE PROVIDER BASED TO THE HOSPITAL DURING THE COVID 19 PUBLIC HEALTH EMERGENCY			$750.00					eff 5/6/21, new rate effective 10/1/21 end dated 11/22/2023
M0247	INTRAVENOUS INFUSION, SOTROVIMAB, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING			$450.00					eff 10/1/21 end dated 11/22/2023
M0249	INTRAVENOUS INFUSION, TOCILIZUMAB, FOR HOSPITALIZED ADULTS AND PEDIATRIC PATIENTS (2 YEARS OF AGE AND OLDER) WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, FIRST DOSE			$450.00					eff 10/1/21

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
M0250	INTRAVENOUS INFUSION, TOCILIZUMAB, FOR HOSPITALIZED ADULTS AND PEDIATRIC PATIENTS (2 YEARS OF AGE AND OLDER) WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, SECOND DOSE			$450.00					eff 10/1/21
Q0091	SCREENING PAPANICOLAOU SMEAR; OBTAINING, PREPARING AND CONVEYANCE OF CERVICAL OR VAGINAL SMEAR TO LABORATORY		$0.00	$0.00					Effective 4/15/2023
Q0220	INJECTION, TIXAGEVIMAB AND CILGAVIMAB, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND PEDIATRIC INDIVIDUALS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, WHO EITHER HAVE MODERATE TO SEVERELY COMPROMISED IMMUNE SYSTEMS OR FOR WHOM VACCINATION WITH ANY AVAILABLE COVID-19 VACCINE IS NOT RECOMMENDED DUE TO A HISTORY OF SEVERE ADVERSE REACTION TO A COVID-19 VACCINE(S) AND/OR COVID-19 VACCINE COMPONENT(S), 300 MG			$0.00					eff 12/8/21 end dated 11/22/2023

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
Q0221	INJECTION, TIXAGEVIMAB AND CILGAVIMAB, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND PEDIATRIC INDIVIDUALS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, WHO EITHER HAVE MODERATE TO SEVERELY COMPROMISED IMMUNE SYSTEMS OR FOR WHOM VACCINATION WITH ANY AVAILABLE COVID-19 VACCINE IS NOT RECOMMENDED DUE TO A HISTORY OF SEVERE ADVERSE REACTION TO A COVID-19 VACCINE(S) AND/OR COVID-19 VACCINE COMPONENT(S), 600 MG			$0.00					eff 2/24/22 end dated 11/22/2023
Q4101	APLIGRAF, PER SQUARE CENTIMETER		$28.56	$28.56					
Q4106	DERMAGRAFT, PER SQUARE CENTIMETER		$34.99	$34.99					
Q4117	HYALOMATRIX, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019
Q4121	THERASKIN, PER SQUARE CENTIMETER		$23.21	$23.21					
Q4132	GRAFIX CORE AND GRAFIXPL CORE, PER SQUARE CENTIMETER		$0.00	$0.00					Effective 1/1/2015
Q4133	GRAFIX PRIME, GRAFIXPL PRIME, STRAVIX AND STRAVIXPL, PER SQUARE CENTIMETER		$0.00	$0.00					Effective 1/1/2015
Q4158	KERECIS OMEGA3, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE)		$100.49	$100.49					Added effective 1/1/2026
Q4160	NUSHIELD, PER SQUARE CENTIMETER		$110.62	$110.62					Effective 11/1/2019
Q4186	EPIFIX, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
Q4187	EPICORD, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019
Q4195	PURAPLY, PER SQUARE CENTIMETER		$140.00	$140.00					Effective 7/1/2020
Q4196	PURAPLY AM, PER SQUARE CENTIMETER		$140.00	$140.00					Effective 7/1/2020
Q4197	PURAPLY XT, PER SQUARE CENTIMETER		$121.63	$121.63					Effective 4/1/2024
V2020	FRAMES, PURCHASES		$19.00	$50.00					
V2100	SPHERE, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00, PER LENS		$0.00	$50.00					
V2101	SPHERE, SINGLE VISION, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER		$0.00	$50.00					
V2102	SPHERE, SINGLE VISION, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS		$0.00	$50.00					
V2103	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2104	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2105	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2106	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2107	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00 SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2108	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25D TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2109	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2110	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2111	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$50.00					
V2112	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25D TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2113	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2114	SPHEROCYLINDER, SINGLE VISION, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS		$0.00	$50.00					
V2115	LENTICULAR, (MYODISC), PER LENS, SINGLE VISION		$0.00	$50.00					
V2118	ANISEIKONIC LENS, SINGLE VISION		$0.00	$50.00					
V2121	LENTICULAR LENS, PER LENS, SINGLE		$0.00	$50.00					
V2199	NOT OTHERWISE CLASSIFIED, SINGLE VISION LENS		$0.00	$50.00					
V2200	SPHERE, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS		$0.00	$50.00					
V2201	SPHERE, BIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS		$0.00	$50.00					
V2202	SPHERE, BIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2203	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2204	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2205	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2206	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2207	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE,.12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2208	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2209	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2210	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2211	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$50.00					
V2212	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2213	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2214	SPHEROCYLINDER, BIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS		$0.00	$50.00					
V2215	LENTICULAR (MYODISC), PER LENS, BIFOCAL		$0.00	$50.00					
V2218	ANISEIKONIC, PER LENS, BIFOCAL		$0.00	$50.00					
V2219	BIFOCAL SEG WIDTH OVER 28MM		$0.00	$50.00					
V2220	BIFOCAL ADD OVER 3.25D		$0.00	$50.00					
V2221	LENTICULAR LENS, PER LENS, BIFOCAL		$0.00	$50.00					
V2299	SPECIALTY BIFOCAL (BY REPORT)	Yes	$0.00	$50.00					
V2300	SPHERE, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS		$0.00	$56.00					
V2301	SPHERE, TRIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS		$0.00	$56.00					
V2302	SPHERE, TRIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00, PER LENS		$0.00	$56.00					
V2303	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12-2.00D CYLINDER, PER LENS		$0.00	$56.00					
V2304	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.25-4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2305	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00 CYLINDER, PER LENS		$0.00	$56.00					
V2306	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$56.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2307	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$56.00					
V2308	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2309	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2310	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2311	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$56.00					
V2312	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2313	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2314	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2315	LENTICULAR, (MYODISC), PER LENS, TRIFOCAL		$0.00	$56.00					
V2318	ANISEIKONIC LENS, TRIFOCAL		$0.00	$56.00					
V2319	TRIFOCAL SEG WIDTH OVER 28 MM		$0.00	$56.00					
V2320	TRIFOCAL ADD OVER 3.25D		$0.00	$56.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2321	LENTICULAR LENS, PER LENS, TRIFOCAL		$0.00	$56.00					
V2399	SPECIALTY TRIFOCAL (BY REPORT)		$0.00	$56.00					
V2410	VARIABLE ASPHERICITY LENS, SINGLE VISION, FULL FIELD, GLASS OR PLASTIC, PER LENS		$0.00	$50.00					
V2430	VARIABLE ASPHERICITY LENS, BIFOCAL, FULL FIELD, GLASS OR PLASTIC, PER LENS		$0.00	$50.00					
V2499	VARIABLE SPHERICITY LENS, OTHER TYPE		$0.00	$50.00					
V2500	CONTACT LENS, PMMA, SPHERICAL, PER LENS		$0.00	$58.24					
V2501	CONTACT LENS, PMMA, TORIC OR PRISM BALLAST, PER LENS		$0.00	$90.05					
V2502	CONTACT LENS, PMMA, BIFOCAL, PER LENS		$0.00	$106.04					
V2503	CONTACT LENS, PMMA, COLOR VISION DEFICIENCY, PER LENS		$0.00	$102.58					
V2510	CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS		$0.00	$83.42					
V2511	CONTACT LENS, GAS PERMEABLE, TORIC, PRISM BALLAST, PER LENS		$0.00	$121.44					
V2512	CONTACT LENS, GAS PERMEABLE, BIFOCAL, PER LENS		$0.00	$149.20					
V2513	CONTACT LENS, GAS PERMEABLE, EXTENDED WEAR, PER LENS		$0.00	$133.32					
V2520	CONTACT LENS, HYDROPHILIC, SPHERICAL, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2521	CONTACT LENS, HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2522	CONTACT LENS, HYDROPHILIC, BIFOCAL, PER LENS		$0.00	See the Vision Contact lens fee schedule					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2523	CONTACT LENS, HYDROPHILIC, EXTENDED WEAR, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2524	CONTACT LENS, HYDROPHILIC, SPHERICAL, PHOTOCHROMIC ADDITIVE, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2530	CONTACT LENS, SCLERAL, GAS IMPERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)		$0.00	$148.26					
V2531	CONTACT LENS, SCLERAL, GAS PERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)		$0.00	$506.52					
V2630	ANTERIOR CHAMBER INTRAOCULAR LENS		$180.00	$234.00					
V2632	POSTERIOR CHAMBER INTRAOCULAR LENS		$137.50	$178.75					
V2700	BALANCE LENS, PER LENS		$0.00	$46.04					
V2744	TINT, PHOTOCHROMATIC, PER LENS		$0.00	$104.00					
V2750	ANTI-REFLECTIVE COATING, PER LENS		$0.00	$26.74					
V2755	U-V LENS, PER LENS		$0.00	$19.33					
V2760	SCRATCH RESISTANT COATING, PER LENS		$0.00	$14.40					
V2770	OCCLUDER LENS, PER LENS		$0.00	$21.73					
V2781	PROGRESSIVE LENS, PER LENS		$0.00	$60.00					
V2782	LENS, INDEX 1.54 TO 1.65 PLASTIC OR 1.60 TO 1.79 GLASS, EXCLUDES POLYCARBONATE, PER LENS		$0.00	$60.41					
V2783	LENS, INDEX GREATER THAN OR EQUAL TO 1.66 PLASTIC OR GREATER THAN OR EQUAL TO 1.80 GLASS, EXCLUDES POLYCARBONATE, PER LENS		$0.00	$77.14					
V2784	LENS, POLYCARBONATE OR EQUAL, ANY INDEX, PER LENS		$0.00	$32.00					
V2799	VISION ITEM OR SERVICE, MISCELLANEOUS		$0.00	$15.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
J9202	GOSERELIN ACETATE IMPLANT, PER 3.6 MG			$422.99					
J9219	LEUPROLIDE ACETATE IMPLANT, 65 MG			$5,115.60					
M0201	ADMINISTRATION OF PNEUMOCOCCAL, INFLUENZA, HEPATITIS B, AND/OR COVID-19 VACCINE INSIDE A PATIENT'S HOME; REPORTED ONLY ONCE PER INDIVIDUAL HOME PER DATE OF SERVICE WHEN SUCH VACCINE ADMINISTRATION(S) ARE PERFORMED AT THE PATIENT'S HOME		$35.50	$35.50					Added Effective 1/1/2022
M0249	INTRAVENOUS INFUSION, TOCILIZUMAB, FOR HOSPITALIZED ADULTS AND PEDIATRIC PATIENTS (2 YEARS OF AGE AND OLDER) WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, FIRST DOSE			$450.00					eff 10/1/21

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
M0250	INTRAVENOUS INFUSION, TOCILIZUMAB, FOR HOSPITALIZED ADULTS AND PEDIATRIC PATIENTS (2 YEARS OF AGE AND OLDER) WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, SECOND DOSE			$450.00					eff 10/1/21
Q0091	SCREENING PAPANICOLAOU SMEAR; OBTAINING, PREPARING AND CONVEYANCE OF CERVICAL OR VAGINAL SMEAR TO LABORATORY		$0.00	$0.00					Effective 4/15/2023
Q4101	APLIGRAF, PER SQUARE CENTIMETER		$28.56	$28.56					
Q4106	DERMAGRAFT, PER SQUARE CENTIMETER		$34.99	$34.99					
Q4117	HYALOMATRIX, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019
Q4121	THERASKIN, PER SQUARE CENTIMETER		$23.21	$23.21					
Q4132	GRAFIX CORE AND GRAFIXPL CORE, PER SQUARE CENTIMETER		$0.00	$0.00					Effective 1/1/2015
Q4133	GRAFIX PRIME, GRAFIXPL PRIME, STRAVIX AND STRAVIXPL, PER SQUARE CENTIMETER		$0.00	$0.00					Effective 1/1/2015
Q4160	NUSHIELD, PER SQUARE CENTIMETER		$110.62	$110.62					Effective 11/1/2019
Q4186	EPIFIX, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019
Q4187	EPICORD, PER SQUARE CENTIMETER		$216.23	$216.23					Effective 1/1/2019
Q4195	PURAPLY, PER SQUARE CENTIMETER		$140.00	$140.00					Effective 7/1/2020

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
Q4196	PURAPLY AM, PER SQUARE CENTIMETER		$140.00	$140.00					Effective 7/1/2020
Q4197	PURAPLY XT, PER SQUARE CENTIMETER		$121.63	$121.63					Effective 4/1/2024
V2020	FRAMES, PURCHASES		$19.00	$50.00					
V2100	SPHERE, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00, PER LENS		$0.00	$50.00					
V2101	SPHERE, SINGLE VISION, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER		$0.00	$50.00					
V2102	SPHERE, SINGLE VISION, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS		$0.00	$50.00					
V2103	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2104	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2105	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2106	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2107	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00 SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2108	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25D TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2109	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2110	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2111	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$50.00					
V2112	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25D TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2113	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2114	SPHEROCYLINDER, SINGLE VISION, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS		$0.00	$50.00					
V2115	LENTICULAR, (MYODISC), PER LENS, SINGLE VISION		$0.00	$50.00					
V2118	ANISEIKONIC LENS, SINGLE VISION		$0.00	$50.00					
V2121	LENTICULAR LENS, PER LENS, SINGLE		$0.00	$50.00					
V2199	NOT OTHERWISE CLASSIFIED, SINGLE VISION LENS		$0.00	$50.00					
V2200	SPHERE, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS		$0.00	$50.00					
V2201	SPHERE, BIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS		$0.00	$50.00					
V2202	SPHERE, BIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2203	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2204	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2205	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2206	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2207	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE,.12 TO 2.00D CYLINDER, PER LENS		$0.00	$50.00					
V2208	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					
V2209	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2210	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2211	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$50.00					
V2212	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS		$0.00	$50.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2213	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$50.00					
V2214	SPHEROCYLINDER, BIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS		$0.00	$50.00					
V2215	LENTICULAR (MYODISC), PER LENS, BIFOCAL		$0.00	$50.00					
V2218	ANISEIKONIC, PER LENS, BIFOCAL		$0.00	$50.00					
V2219	BIFOCAL SEG WIDTH OVER 28MM		$0.00	$50.00					
V2220	BIFOCAL ADD OVER 3.25D		$0.00	$50.00					
V2221	LENTICULAR LENS, PER LENS, BIFOCAL		$0.00	$50.00					
V2299	SPECIALTY BIFOCAL (BY REPORT)	Yes	$0.00	$50.00					
V2300	SPHERE, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS		$0.00	$56.00					
V2301	SPHERE, TRIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS		$0.00	$56.00					
V2302	SPHERE, TRIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00, PER LENS		$0.00	$56.00					
V2303	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12-2.00D CYLINDER, PER LENS		$0.00	$56.00					
V2304	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.25-4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2305	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00 CYLINDER, PER LENS		$0.00	$56.00					
V2306	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$56.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2307	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS		$0.00	$56.00					
V2308	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2309	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2310	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2311	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS		$0.00	$56.00					
V2312	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS		$0.00	$56.00					
V2313	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2314	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS		$0.00	$56.00					
V2315	LENTICULAR, (MYODISC), PER LENS, TRIFOCAL		$0.00	$56.00					
V2318	ANISEIKONIC LENS, TRIFOCAL		$0.00	$56.00					
V2319	TRIFOCAL SEG WIDTH OVER 28 MM		$0.00	$56.00					
V2320	TRIFOCAL ADD OVER 3.25D		$0.00	$56.00					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2321	LENTICULAR LENS, PER LENS, TRIFOCAL		$0.00	$56.00					
V2399	SPECIALTY TRIFOCAL (BY REPORT)		$0.00	$56.00					
V2410	VARIABLE ASPHERICITY LENS, SINGLE VISION, FULL FIELD, GLASS OR PLASTIC, PER LENS		$0.00	$50.00					
V2430	VARIABLE ASPHERICITY LENS, BIFOCAL, FULL FIELD, GLASS OR PLASTIC, PER LENS		$0.00	$50.00					
V2499	VARIABLE SPHERICITY LENS, OTHER TYPE		$0.00	$50.00					
V2500	CONTACT LENS, PMMA, SPHERICAL, PER LENS		$0.00	$58.24					
V2501	CONTACT LENS, PMMA, TORIC OR PRISM BALLAST, PER LENS		$0.00	$90.05					
V2502	CONTACT LENS, PMMA, BIFOCAL, PER LENS		$0.00	$106.04					
V2503	CONTACT LENS, PMMA, COLOR VISION DEFICIENCY, PER LENS		$0.00	$102.58					
V2510	CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS		$0.00	$83.42					
V2511	CONTACT LENS, GAS PERMEABLE, TORIC, PRISM BALLAST, PER LENS		$0.00	$121.44					
V2512	CONTACT LENS, GAS PERMEABLE, BIFOCAL, PER LENS		$0.00	$149.20					
V2513	CONTACT LENS, GAS PERMEABLE, EXTENDED WEAR, PER LENS		$0.00	$133.32					
V2520	CONTACT LENS, HYDROPHILIC, SPHERICAL, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2521	CONTACT LENS, HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2522	CONTACT LENS, HYDROPHILIC, BIFOCAL, PER LENS		$0.00	See the Vision Contact lens fee schedule					

90381	RESPIRATORY SYNCYTIAL VIRUS ANTIBODY, 1.0 ML DOSAGE FOR INJECTION INTO MUSCLE			$485.10	ZERO				Birth to 24 months
V2523	CONTACT LENS, HYDROPHILIC, EXTENDED WEAR, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2524	CONTACT LENS, HYDROPHILIC, SPHERICAL, PHOTOCHROMIC ADDITIVE, PER LENS		$0.00	See the Vision Contact lens fee schedule					
V2530	CONTACT LENS, SCLERAL, GAS IMPERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)		$0.00	$148.26					
V2531	CONTACT LENS, SCLERAL, GAS PERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)		$0.00	$506.52					
V2630	ANTERIOR CHAMBER INTRAOCULAR LENS		$180.00	$234.00					
V2632	POSTERIOR CHAMBER INTRAOCULAR LENS		$137.50	$178.75					
V2700	BALANCE LENS, PER LENS		$0.00	$46.04					
V2744	TINT, PHOTOCHROMATIC, PER LENS		$0.00	$104.00					
V2750	ANTI-REFLECTIVE COATING, PER LENS		$0.00	$26.74					
V2755	U-V LENS, PER LENS		$0.00	$19.33					
V2760	SCRATCH RESISTANT COATING, PER LENS		$0.00	$14.40					
V2770	OCCLUDER LENS, PER LENS		$0.00	$21.73					
V2781	PROGRESSIVE LENS, PER LENS		$0.00	$60.00					
V2782	LENS, INDEX 1.54 TO 1.65 PLASTIC OR 1.60 TO 1.79 GLASS, EXCLUDES POLYCARBONATE, PER LENS		$0.00	$60.41					
V2783	LENS, INDEX GREATER THAN OR EQUAL TO 1.66 PLASTIC OR GREATER THAN OR EQUAL TO 1.80 GLASS, EXCLUDES POLYCARBONATE, PER LENS		$0.00	$77.14					
V2784	LENS, POLYCARBONATE OR EQUAL, ANY INDEX, PER LENS		$0.00	$32.00					
V2799	VISION ITEM OR SERVICE, MISCELLANEOUS		$0.00	$15.00					

KY Medicaid Physician Fee Schedule Updates		
Effective Date	**Add/Delete/Change**	**Date Fee schedule updated**
7/1/2023	Add Certified Community Health Workers 98960, 98961, 98962 - UB Modifier - to be billed by rendering Physician, APRN, Physician Assistant. 2 units per week. No more than 104 units per calendar year.	7/11/2023
7/1/2023	Add procedure code as payable 89264	7/20/2023
1/1/1993	Add procedure codes: 88371 $31.38; 88372 $32.00 These codes were payable in the system and were not showing on the fee schedule	7/21/2023
7/1/2023	Increase price for physicians to match CHW pricing on CPT 98960 price $22.53 effective 7/1/2023	8/24/2023
Various	Added the following codes effective 4/18/2023: 0121A $40.00, 0141A $40.00, 0142A $40.00, 0151A $40.00, 0171A $40.00, 0172A $40.00 Add the following codes effective 3/14/2023: 0174A $40.00 End date the following codes with date 4/17/2023: 91300, 91301, 91305, 91306, 91307, 91308, 91309, 91311, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0091A, 0092A, 0093A, 0094A, 0111A, 0112A, 0113A.	9/8/2023
9/1/2023	Update rate for code 99188 from $15.00 to $18.75	9/13/2023
Various	The following codes have been end dated 6/1/2023: 91303, 0031A, 0034A The following codes have been end dated 9/12/2023: 0121A, 0124A, 0134A, 0141A, 0142A, 0144A, 0151A, 0154A, 0164A, 0171A, 0172A, 0173A, 0174A, 91312, 91313, 91314, 91315, 91316, 91317 Added the following codes effective 9/11/2023: 90480 - $40.00, 91318 - $65.36, 91319 - $87.78, 91320 - $131.10, 91321 - $145.92, 91322 - $145.92 Pricing had "fallen off" on 61 codes on last posted fee schedule. Pricing was re-added back on: 33267, 33268, 33269, 33370, 33509, 33894, 33895, 33897, 42975, 43497, 53451, 53452, 53454, 61736, 61737, 63052, 63053, 64582, 64583, 64584, 64628, 64629, 66989, 66991, 68841, 69716, 69719, 69726, 69727, 77089, 77090, 77091, 77092, 80503, 80504, 80505, 80506, 90626, 90627, 90758, 91113, 93319, 93593, 93594, 93595, 93596, 93597, 93598, 94625, 94626, 98975, 98976, 98977, 98980, 98981, 99072, 99424, 99425, 99426, 99427, 99437 The following statement was updated at the top of the fee schedule to add PT 86 is reimbursed at 60%: Codes listed as "$0.00" pay 45% of billed amount (PT-86 Radiology and X-ray are reimbursed at 60%) not to exceed provider's usual and customary charge	9/26/2023

KY Medicaid Physician Fee Schedule Updates		
N/A	Moved vaccine, immunization codes, and administration codes to the preventive fee schedule. Pricing was changed to the higher of the two. 90384 90460 90461 90471 90472 90473 90474 90480 90611 90619 90620 90621 90622 90632 90633 90634 90636 90647 90648 90649 90650 90651 90653 90654 90655 90656 90657 90658 90660 90661 90662 90670 90671 90672 90673 90674 90677 90680 90681 90682 90685 90686 90687 90688 90689 90694 90696 90697 90698 90700 90702 90707 90710 90713 90714 90715 90716 90723 90732 90733 90734 90736 90739 90744 90746 90748 90750 90756 90759 91300 91301 91303 91304 91305 91306 91307 91308 91311 91312 91313 91314 91315 91316 91317 91318 91319 91320 91321 91322 0001A 0002A 0003A 0004A 0011A 0012A 0013A 0031A 0034A 0041A 0042A 0044A 0051A 0052A 0053A 0054A 0064A 0071A 0072A 0073A 0074A 0081A 0082A 0083A 0091A 0092A 0093A 0094A 0111A 0112A 0113A 0124A 0134A 0144A 0154A 0164A 0173A 90626 90627 90630 90644 90740 90743 90747 90758 91309 0104A 0121A 0141A 0142A 0151A 0171A 0172A 0174A	10/23/2023
N/A	Moved COVID 19 Antibody Infusion Therapy codes to physician fee schedule and removed COVID infusion fee schedule. M0220 M0221 M0240 M0241 M0243 M0244 M0245 M0246 M0247 M0248 M0249 M0250 Q0220 Q0221	10/23/2023
N/A	Removed Dental codes from physician fee schedule. Physicians to see dental fee schedule for codes and pricing: D1206; D1208; D1356; D1526; D1527 All injectables ("J" codes) notated on the Physician Adminstered Drug List (PAD) have been removed from Physician Fee Schedule and PAD to be used. Added the following notes at the top of the physician fee schedule: -Path codes billed by OP Hosp will be reimbursed at rates from the Physician Fee Schedule. Any injectable not payable on PAD are listed on this fee schedule -See Physician Adminstered Drug List (PAD) for injectables	11/8/2023
11/22/2023	The following codes have been end dated effective 11/22/2023: M0220 M0221 M0240 M0241 M0243 M0244 M0245 M0246 M0247 M0248 M0249 M0250 Q0220 Q0221	11/22/2023
N/A	The above note should not list M0249 and M0250 as they are still active. Updated fee schedule to show active	12/19/2023
1/1/2023	Added codes: 93890-$166.36; 93886-$158.82, 93892-$177.44, 93888-$105.85 Changed price for code 68841 to $30.47	12/19/2023
1/1/2023	Added codes 92274 $68.98; 92273 $101.11; 83516 $14.25 effective 1/1/2023	12/20/2023
N/A	The following codes were duplicated on the fee schedule: 93886, 93888, 93892 Duplicate was removed	1/5/2024
7/1/2023	Added code 99080 $Zero effective 7/1/2023	1/9/2024

KY Medicaid Physician Fee Schedule Updates		
Various	**Removed the following codes due to CMS terminated 12/31/2021:** 01935, 01936, 21310, 33470, 33722, 43850, 43855, 63194, 63195, 63196, 63198, 63199, 69715, 69718, 72275, 76101, 80500, 80502, 92559, 92560, 92561, 92564, 93530, 93531, 93532, 93533, 93561, 93562, 95943 **Removed teh following codes due to CMS terminated 12/31/2022:** 15850, 49560, 49561, 49565, 49566, 49568, 49570, 49572, 49580, 49582, 49585, 49587, 49590, 49652, 49653, 49654, 49655, 49656, 49657, 99217, 99218, 99219, 99220, 99224, 99225, 99226, 99251, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99343, 99354, 99355, 99356, 99357 **Added the following codes as payable effective 1/1/2024:** 99459, 22836, 22837, 22838, 27278, 31242, 31243, 33276, 33277, 33278, 33279, 33280, 33281, 33287, 33288, 52284, 58580, 61889, 61891, 61892, 64596, 64597, 64598, 67516, 75580, 76984, 76987, 76988, 76989, 92622, 92623, 92972, 93150, 93151, 93152, 93153, 93584, 93585, 93586, 93587, 93588, 96547, 96548, 97037, 97550, 97551, 97552	1/23/2024
N/A	Medicaid was mispelled. Corrected	2/12/2024
1/1/2024	Changed pricing for 99072 from $0 to zero. Corrected codes 43845 and 58575 to require prior auth.	3/14/2024
9/1/2021	Corrected pricing for code 93224 effective 9/1/2021	3/19/2024
1/1/2024	Added the following codes: V2300, V2301, V2302, V2303, V2304, V2305, V2306, V2307, V2308, V2309, V2310, V2311, V2312, V2313, V2314, V2315, V2318, V2319, V2320, V2321, V2399, V2500, V2501, V2502, V2503, V2510, V2511, V2512, V2513, V2520, V2521, V2522, V2523, V2524, V2530, V2531, V2700, V2750, V2755, V2760, V2770, V2781, V2782, V2783, V2784, V2744, V2799	3/21/2024
4/1/2024	Add code Q4197 effective 4/1/2024 $122.98	4/4/2024
Various	Correct pricing on code Q4197 to show as $121.63; Add notation on codes V2520, V2521, V2522, V2523, V2524 that states see vision contact lens fee schedule; Add the following codes effective 4/1/2024 G0248, G0249, G0250	5/14/2024
Various	Added vaccines back onto physician fee schedule. Removed the 2 per week limit for CHW codes: 98960 UB, 98961 UB, 98962 UB	5/29/2024
N/A	Corrected the vaccine rates which were originally entered under the inpatient column instead of outpatient column.	6/6/2024
Various	Removed Prior Auth (PA) requirement for the following codes: 95806, 95807, 95808, 95810, 95811. System shows PA was removed in 2006. Updated rates on the following codes effective 8/1/2024: 90653 $83.49 was 46.21, 90656 $22.35 was 18.40, 90658 $21.86 was 18.40, 90661 $36.85 was 20.66, 90662 $83.49 was 73.40, 90673 $83.49 was 36.48. Added code 99367 $45.72 Effective 9/1/2024 all ages Added the following codes showing payable in the system but was not on the fee schedule: 89300 $12.18 Code Eff 1/1/2017, 89321 $12.05 Code Eff 1/1/2017, Rate Eff 1/1/2020, 89322 $15.50 Code Eff 1/1/2008, Rate Eff 1/1/2020, 89329 Rate $29.67 Eff 1/1/2017, 89330 $29.67 Code Eff 1/1/2017, Added 89331 19.59, Code Eff 1/1/2008, Rate Eff 1/1/2020, 89350 $11.08 Code Eff: 1/1/1990, Rate Eff: 1/1/1995, 89355 $4.73 Code Eff: 1/1/1990, Rate Eff: 1/1/1995, 37500 $550.53 Eff date 1/1/2003, 33500 $1620.55 Eff date 7/1/1996, 33501 $913.86 Eff date 7/1/1996, 33502 $1021.25 Eff date 7/1/1996, 33503 $1510.21 Eff date 7/1/1996, 33504 $1598.54 Eff date 7/1/1996, 33505 $1809.64 Eff date 7/1/1996, 90371 $152.59 Eff date 1/1/2019.	10/15/2024

KY Medicaid Physician Fee Schedule Updates		
	99415 corrected from $6.45 to $7.46 effective 4/1/2021 99416 Corrected from $.49 to $3.87 effective 4/1/2021 Added 64620 - payable in system since 7/1/1996 was not on fee schedule. Description updated: 99415, 99416, 25447, 77435, 90480, 90661, 91304, 91318, 91319, 91320, 91321, 91322, 93241, 93242, 93243, 93244, 93245, 93246, 93247, 93248, 93893, 96380, 96381, 98966, 98967, 98968, 98970, 98971, 98972, 98975, 98976, 98977, 98978, 98980, 98981, 99221, 99222, 99223, 99231, 99232, 99233, 99234, 99235, 99236, 0104A, 90375, 90376, 90378, 90380, 90381, 90384, 90460, 90461, 90471, 90472, 90473, 90474, 90611, 90619, 90620, 90621, 90622 Removed/End dated by AMA: 99072, 15819, 21632, 33471, 33737, 33813, 47802, 49203, 49204, 49205, 50135, 51030, 54438, 58957, 90630, 90654, 93890, 99441, 99442, 99443, 86490, 01180, 01190, 01682, 13150, 19102, 19103, 19260, 19271, 19272, 19304, 20926, 22851, 23331, 23332, 29582, 32201, 33010, 33011, 33015, 33860, 33870, 34806, 35721, 35741, 35761, 36515, 36870, 37204, 37205, 37206, 37207, 37208, 37210, 42802, 43228, 43256, 43258, 43267, 43268, 43269, 43271, 43272, 43401, 43456, 43458, 44901, 48511, 49021, 49041, 49061, 58823, 62310, 64402, 64410, 64413, 64613, 64614, 74241, 74245, 74247, 74249, 74260, 75960, 76930, 78205, 78206, 78320, 78607, 78647, 78710, 78805, 78806, 78807, 90911, 91309, 92140, 92225, 92226, 92506, 93965, 94620, 95827, 95831, 95832, 95833, 95834, 95950, 95951, 95953, 95956, 96150, 96151, 96152, 96153, 97127, 97532, 99241, 99420, 99444, G0202, G0204, G0206, G0365, G2061, G2062, G2063, J9031, J9300 Moved to Clinical Lab Fee Schedule: 80503, 80504, 80505, 80506, 88120, 88121, 88172, 88173, 88177, 88300, 88302, 88304, 88305, 88307, 88309, 88311, 88312, 88313, 88314, 88319, 88321, 88323, 88325, 88329, 88331, 88332, 88333, 88334, 88342, 88346, 88348, 88355, 88356, 88358, 88360, 88361, 88362, 88363, 88365, 88367, 88368, 88380, 88381, 88387, 88388 Added Codes effective 1/1/2025:	
Various	98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 15011, 15012,	5/27/2025
Various	**Added note:** Advanced Practice Registered Nurse's (APRN) and Physician Assistant's (PA) receive 75% of physician rate. **Removed duplicated codes:** 91318 91319 91320 91321 91322 **Updated description:** 99406 **Added back to physician fee schedule (was moved to lab):** 80503, 80504, 80505, 80506, 88120, 88121, 88172, 88173, 88177 **Removed:** J9150 is on PAD **Removed:** J9160 discontinued by AMA 12/31/2023; M0248 discontinued 11/22/2023; 89355 discontinued 3/31/2004 **Added notes for age limitations**: 90655 90656 90658 90672 90682 90685 90686 90687 90688 90696 **Moved to Clinical Lab Fee Schedule:** 88104 88106 88108 88112 88125 88141 88160 88161 88162 88182 88184 88185 88187 88188 88189 88291 88341 88344 88350 88364 88366 88369 88371 88372 88375 88377 88399 89264 89300 89310 89320 89321 89322 89325 89329 89330 89331 89350	7.1.2025

KY Medicaid Physician Fee Schedule Updates		
Various	**Updated pricing:** 90653 price updated from 83.49 to 98.16 effective 8/1/2025 90661 price updated from 36.85 to 49.50 effective 8/1/2025 90656 price updated from 22.35 to 23.22 effective 8/1/2025 **Removed from fee schedule:** J9015, J9020, J9098, J9165, J9212, J9213, J9214, J9215, J9230, J9270, J9600 effective 9/30/2025 CMS end dated: 0104A **Corrected:** 90899 System does not require a PA since 1/1/2014 90385 and 90386 System price shows $0.00 effective 1/1/1999, price was not on fee schedule. Removed 26 modifier: 62368 85060 85060 93015 90385 90386 93613 93650 95971 **Added notations for age limitations effective 1/1/2025:** 90632 added Age 18 and older 90633 added Age 12 months to 18 years old 90634 Age 12 months to 18 years old 90636 Age 18 and older 90649 Ages 9 to 26 years old 90651 Ages 9 to 26 years old 90653 Age 65 years and older 90657 Age 6 months and older 90660 Ages 2 to 49 years old 90661 Age 6 months and older 90662 Age 65 and older 90678 60 & older, preg women 32-36 weeks 90683 Age 60 years and older 90687-Age 6 months to 35 months 90700 Ages 0 to 7 years old 90702 Ages 0 to 7 years old 90714 Age 7 years and older 90715 Age 7 years and older 90732 Age 2 years and older 90744 Age 0 to 20 years old 91318 Age 6 months to 4 years old	10/20/2025
Various	Updated procedure descriptions on the fee schedule All VFC vaccine codes were corrected to state ZERO instead of $0.00.	11/3/2025

KY Medicaid Physician Fee Schedule Updates		
1/1/2026	**Addition, Replacement, and Extension codes added effective 1/1/2026:** 33882, 37254, 37255, 37256, 37257, 37258, 37259, 37260, 37261, 37262, 37263, 37264, 37265, 37266, 37267, 37268, 37269, 37270, 37271, 37272, 37273, 37274, 37275, 37276, 37277, 37278, 37279, 37280, 37281, 37282, 37283, 37284, 37285, 37286, 37287, 37288, 37289, 37290, 37291, 37292, 37293, 37294, 37295, 37296, 37297, 37298, 37299, 52597, 55707, 55709, 55710, 55711, 55712, 55713, 55714, 55715, 55868, 55869, 55877, 77436, 77437, 77438, 77439, 90382, 91124, 91125, 91323, 92288, 92628, 92636, 92641, 92930, 98979, 98984, 98985, 98986, 99445, 99470, G0561, Q4158. ***(33882)*** **-** Extension code to 33880, 33881, 33883, and 33886, ***(37254-37299)*** **-** Replacement codes of CMS terms 37220-37235, ***(52597)*** **-** New Code by CMS - Can't be reported in conjunction with 52500, 52601, 52630 or 76872, ***(55707-55725)*** **-** Extension code to 55705, ***(55868-55869)*** **-** Extension codes to 55866, ***(55877)*** **-** Replacement code of CMS term 55707, ***(7436-77439)*** **-** Replacement codes of CMS termed codes 77401 and G6001, ***(90382)*** **-** Added for detailed description, dosage, and age, ***(91124-91125)*** **-** Replacement codes of CMS terms 91120-91122, ***(91323)*** **-** Added for detailed description and dosage, ***(92288)*** **-** New Code by CMS - Can't be reported in conjunction with 92284, ***(92628)*** **-** Replacement code of CMS terms 92590 and 92591, ***(92636)*** **-** Replacement code of CMS terms 92592 and 92593, ***(92641)*** **-** Replacement code of CMS terms 92594 and 92595, **(92930) -** Extension code to 92928, ***(98979)*** **-** Extension code to 98980, ***(98984-98986)*** **-** Extension codes to 98976, 98977, and 98978, **(99445 and 99470) -** CMS Adding codes to fix the monitoring times to include 2-15 days in a 30 day period 99445 and detailed description for the first 10 minutes for billing purposes. 99470, ***(G0561)*** **-** Update for outpatient services only, ***(Q4158)*** **-** Adding code for detailed description and inclusion of KERECIS OMEGA3 - Add on procedure. **Rate Changes effective 1/1/2026:** 10040, 27278, 27279, 33880, 33881, 33883, 33886, 55705, 55866, 61624, 61626, 62287, 77387, 77402, 77407, 77412, 90472, 90474, 90480, 90620, 90624, 90626, 90627, 90684, 91304, 92284, 92920, 92924, 92928, 92933, 92937, 92941, 92943, 92973, 93571, 93572, 98976, 98977, 98980, 98981, 99453, 99454, 99457, 99458. **CMS Termed Codes as of 12/31/2025:** 27445, 27468, 33884, 33889, 33891, 37220, 37221, 37222, 37223, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 37232, 37233, 37234, 37235, 37500, 52647, 55700, 75842, 75956, 75957, 75958, 75959, 77014, 77401, 77385, 77386, 91120, 90589, 91122, 92590, 92591, 92592, 92593, 92594, 92595, 92975, 92977, 94662, 99091, G6001, G2012 **Prior Authorization Requirement Removed: 41899** **Removed Codes J9202 and J9219 from Physicians Fee Schedule, paid under PAD fee schedule.** **Added notation to codes: J7321, J7323, J7324, identifying codes as a device, not a drug.** **Adding code 76512 to the fee schedule only. Effective 1/1/2017 in KYMMIS.**	4/22/2026
1/1/2026	**Updates:** Adding code 70471 for code addition to already reimbursed codes 70496 and 70498, effective 1/1/2026. **Adding Limitations to codes,** 70471, 70496, and 70498, stating that these codes are not to be reported in conjunction with each other for same day, same service, effective 1/1/2026.	5/18/2026
1/1/2026	Pathology codes 88172, 88173, and 88177 have been updated. These three codes have been changed from the Physicians Fee Schedule to Clinical Lab as they were overlooked in the 2025 annual fee schedule revisions. For information regarding these codes, please reference the Clinical Lab Fee Schedule. Effective 1/1/2025	5/21/2026