

Updated: 11/10/2021

7/1/2021 COVID Medicaid Maximum Allowable

PROCEDURE CODE	MODIFIER	PROCEDURE DESCRIPTION	FACILITY RATE	NON-FACILITY RATE
33745		TIS CGEN CAR ANOMAL 1ST SHNT	\$ 830.13	\$ 830.13
71271	26	CT THORAX LUNG CANCER SCR C-	\$ 40.38	\$ 40.38
71271		CT THORAX LUNG CANCER SCR C-	\$ 114.58	\$ 114.58
80047		METABOLIC PANEL IONIZED CA	\$ 28.07	\$ 28.07
80048		METABOLIC PANEL TOTAL CA	\$ 10.37	\$ 10.37
80050		GENERAL HEALTH PANEL	\$ 11.72	\$ 11.95
80051		ELECTROLYTE PANEL	\$ 8.94	\$ 8.94
80053		COMPREHEN METABOLIC PANEL	\$ 10.94	\$ 10.94
80055		OBSTETRIC PANEL	\$ 29.20	\$ 29.20
80061		LIPID PANEL	\$ 17.36	\$ 17.36
80069		RENAL FUNCTION PANEL	\$ 10.37	\$ 10.37
80074		ACUTE HEPATITIS PANEL	\$ 60.34	\$ 60.34
80076		HEPATIC FUNCTION PANEL	\$ 10.37	\$ 10.37
80155		DRUG ASSAY CAFFEINE	\$ 17.52	\$ 17.52
80159		DRUG ASSAY CLOZAPINE	\$ 22.92	\$ 22.92
80163		ASSAY OF DIGOXIN FREE	\$ 17.72	\$ 17.72
80165		DIPROPYLACETIC ACID FREE	\$ 17.89	\$ 17.89
80169		DRUG ASSAY EVEROLIMUS	\$ 17.01	\$ 17.01
80171		DRUG SCREEN QUANT GABAPENTIN	\$ 16.43	\$ 16.43
80175		DRUG SCREEN QUAN LAMOTRIGINE	\$ 16.43	\$ 16.43
80177		DRUG SCR N QUAN LEVETIRACETAM	\$ 16.43	\$ 16.43
80180		DRUG SCR N QUAN MYCOPHENOLATE	\$ 22.38	\$ 22.38
80183		DRUG SCR N QUANT OXCARBAZEPIN	\$ 16.43	\$ 16.43
80184		ASSAY OF PHENOBARBITAL	\$ 14.84	\$ 14.84
80195		ASSAY OF SIROLIMUS	\$ 17.77	\$ 17.77
80199		DRUG SCREEN QUANT TIAGABINE	\$ 22.38	\$ 22.38
80203		DRUG SCREEN QUANT ZONISAMIDE	\$ 16.43	\$ 16.43
80299		QUANTITATIVE ASSAY DRUG	\$ 17.73	\$ 17.73
81000		URINALYSIS NONAUTO W/SCOPE	\$ 4.11	\$ 4.11
81001		URINALYSIS AUTO W/SCOPE	\$ 4.11	\$ 4.11
81002		URINALYSIS NONAUTO W/O SCOPE	\$ 3.31	\$ 3.31
81003		URINALYSIS AUTO W/O SCOPE	\$ 2.91	\$ 2.91
81005		URINALYSIS	\$ 2.81	\$ 2.81
81007		URINE SCREEN FOR BACTERIA	\$ 3.33	\$ 3.33
81015		MICROSCOPIC EXAM OF URINE	\$ 3.93	\$ 3.93
81020		URINALYSIS GLASS TEST	\$ 4.78	\$ 4.78
81025		URINE PREGNANCY TEST	\$ 8.19	\$ 8.19
81050		URINALYSIS VOLUME MEASURE	\$ 3.89	\$ 3.89
82043		UR ALBUMIN QUANTITATIVE	\$ 7.50	\$ 7.50
82044		UR ALBUMIN SEMIQUANTITATIVE	\$ 3.71	\$ 3.71
82045		ALBUMIN ISCHEMIA MODIFIED	\$ 43.96	\$ 43.96
82075		ASSAY OF BREATH ETHANOL	\$ 15.60	\$ 15.60
82107		ALPHA-FETOPROTEIN L3	\$ 83.40	\$ 83.40
82120		AMINES VAGINAL FLUID QUAL	\$ 4.87	\$ 4.87
82150		ASSAY OF AMYLASE	\$ 8.39	\$ 8.39
82239		BILE ACIDS TOTAL	\$ 21.09	\$ 21.09
82247		BILIRUBIN TOTAL	\$ 6.51	\$ 6.51
82248		BILIRUBIN DIRECT	\$ 6.51	\$ 6.51
82270		OCCULT BLOOD FECES	\$ 4.21	\$ 4.21
82271		OCCULT BLOOD OTHER SOURCES	\$ 4.21	\$ 4.21
82272		OCCULT BLD FECES 1-3 TESTS	\$ 4.21	\$ 4.21
82274		ASSAY TEST FOR BLOOD FECAL	\$ 20.59	\$ 20.59
82306		VITAMIN D 25 HYDROXY	\$ 38.34	\$ 38.34
82310		ASSAY OF CALCIUM	\$ 6.67	\$ 6.67
82340		ASSAY OF CALCIUM IN URINE	\$ 6.74	\$ 6.74
82365		CALCULUS SPECTROSCOPY	\$ 16.70	\$ 16.70
82374		ASSAY BLOOD CARBON DIOXIDE	\$ 6.33	\$ 6.33
82390		ASSAY OF CERULOPLASMIN	\$ 13.91	\$ 13.91
82465		ASSAY BLD/SERUM CHOLESTEROL	\$ 5.63	\$ 5.63
82525		ASSAY OF COPPER	\$ 16.08	\$ 16.08
82533		TOTAL CORTISOL	\$ 21.12	\$ 21.12
82542		COL CHROMOTOGRAPHY QUAL/QUAN	\$ 23.38	\$ 23.38
82550		ASSAY OF CK (CPK)	\$ 8.43	\$ 8.43
82552		ASSAY OF CPK IN BLOOD	\$ 17.35	\$ 17.35
82553		CREATINE MB FRACTION	\$ 14.95	\$ 14.95

82565		ASSAY OF CREATININE	\$ 6.64	\$ 6.64
82570		ASSAY OF URINE CREATININE	\$ 6.70	\$ 6.70
82607		VITAMIN B-12	\$ 19.52	\$ 19.52
82610		CYSTATIN C	\$ 17.61	\$ 17.61
82656		PANCREATIC ELASTASE FECAL	\$ 14.84	\$ 14.84
82664		ELECTROPHORETIC TEST	\$ 44.49	\$ 44.49
82670		ASSAY OF ESTRADIOL	\$ 30.84	\$ 30.84
82679		ASSAY OF ESTRONE	\$ 32.33	\$ 32.33
82705		FATS/LIPIDS FECES QUAL	\$ 6.59	\$ 6.59
82726		LONG CHAIN FATTY ACIDS	\$ 23.38	\$ 23.38
82728		ASSAY OF FERRITIN	\$ 17.64	\$ 17.64
82731		ASSAY OF FETAL FIBRONECTIN	\$ 83.40	\$ 83.40
82746		ASSAY OF FOLIC ACID SERUM	\$ 19.04	\$ 19.04
82784		ASSAY IGA/IGD/IGG/IGM EACH	\$ 12.04	\$ 12.04
82805		BLOOD GASES W/O2 SATURATION	\$ 36.75	\$ 36.75
82945		GLUCOSE OTHER FLUID	\$ 5.08	\$ 5.08
82947		ASSAY GLUCOSE BLOOD QUANT	\$ 5.08	\$ 5.08
82948		REAGENT STRIP/BLOOD GLUCOSE	\$ 4.11	\$ 4.11
82950		GLUCOSE TEST	\$ 6.15	\$ 6.15
82951		GLUCOSE TOLERANCE TEST (GTT)	\$ 16.67	\$ 16.67
82952		GTT-ADDED SAMPLES	\$ 5.08	\$ 5.08
82962		GLUCOSE BLOOD TEST	\$ 3.03	\$ 3.03
82977		ASSAY OF GGT	\$ 9.32	\$ 9.32
83001		ASSAY OF GONADOTROPIN (FSH)	\$ 24.07	\$ 24.07
83002		ASSAY OF GONADOTROPIN (LH)	\$ 23.98	\$ 23.98
83009		H PYLORI (C-13) BLOOD	\$ 87.22	\$ 87.22
83013		H PYLORI (C-13) BREATH	\$ 87.22	\$ 87.22
83014		H PYLORI DRUG ADMIN	\$ 10.17	\$ 10.17
83020	26	HEMOGLOBIN ELECTROPHORESIS	\$ 15.77	\$ 15.77
83020		HEMOGLOBIN ELECTROPHORESIS	\$ 16.28	\$ 16.28
83036		GLYCOSYLATED HEMOGLOBIN TEST	\$ 12.57	\$ 12.57
83050		BLOOD METHEMOGLOBIN ASSAY	\$ 9.48	\$ 9.48
83525		ASSAY OF INSULIN	\$ 14.81	\$ 14.81
83540		ASSAY OF IRON	\$ 8.39	\$ 8.39
83550		IRON BINDING TEST	\$ 11.32	\$ 11.32
83630		LACTOFERRIN FECAL (QUAL)	\$ 26.57	\$ 26.57
83655		ASSAY OF LEAD	\$ 15.68	\$ 15.68
83655	EP	ASSAY OF LEAD	\$ 15.76	\$ 15.76
83690		ASSAY OF LIPASE	\$ 8.91	\$ 8.91
83695		ASSAY OF LIPOPROTEIN(A)	\$ 16.77	\$ 16.77
83700		LIPOPRO BLD ELECTROPHORETIC	\$ 14.57	\$ 14.57
83701		LIPOPROTEIN BLD HR FRACTION	\$ 32.14	\$ 32.14
83704		LIPOPROTEIN BLD QUAN PART	\$ 35.32	\$ 35.32
83718		ASSAY OF LIPOPROTEIN	\$ 10.61	\$ 10.61
83721		ASSAY OF BLOOD LIPOPROTEIN	\$ 12.36	\$ 12.36
83735		ASSAY OF MAGNESIUM	\$ 8.67	\$ 8.67
83789		MASS SPECTROMETRY QUAL/QUAN	\$ 23.38	\$ 23.38
83874		ASSAY OF MYOGLOBIN	\$ 16.73	\$ 16.73
83876		ASSAY MYELOPEROXIDASE	\$ 17.52	\$ 17.52
83880		ASSAY OF NATRIURETIC PEPTIDE	\$ 43.96	\$ 43.96
83951		ONCOPROTEIN DCP	\$ 87.16	\$ 87.16
83970		ASSAY OF PARATHORMONE	\$ 53.46	\$ 53.46
83986		ASSAY PH BODY FLUID NOS	\$ 4.63	\$ 4.63
83993		ASSAY FOR CALPROTECTIN FECAL	\$ 25.41	\$ 25.41
84075		ASSAY ALKALINE PHOSPHATASE	\$ 6.70	\$ 6.70
84100		ASSAY OF PHOSPHORUS	\$ 6.14	\$ 6.14
84132		ASSAY OF SERUM POTASSIUM	\$ 5.94	\$ 5.94
84144		ASSAY OF PROGESTERONE	\$ 27.02	\$ 27.02
84145		PROCALCITONIN (PCT)	\$ 25.73	\$ 25.73
84146		ASSAY OF PROLACTIN	\$ 25.10	\$ 25.10
84153		ASSAY OF PSA TOTAL	\$ 23.82	\$ 23.82
84155		ASSAY OF PROTEIN SERUM	\$ 4.75	\$ 4.75
84156		ASSAY OF PROTEIN URINE	\$ 4.75	\$ 4.75
84163		PAPPA SERUM	\$ 11.33	\$ 11.33
84165	26	PROTEIN E-PHORESIS SERUM	\$ 15.48	\$ 15.48
84165		PROTEIN E-PHORESIS SERUM	\$ 13.85	\$ 13.85
84166	26	PROTEIN E-PHORESIS/URINE/CSF	\$ 15.48	\$ 15.48
84166		PROTEIN E-PHORESIS/URINE/CSF	\$ 23.10	\$ 23.10
84181	26	WESTERN BLOT TEST	\$ 15.48	\$ 15.48
84181		WESTERN BLOT TEST	\$ 15.23	\$ 15.23
84182	26	PROTEIN WESTERN BLOT TEST	\$ 15.97	\$ 15.97
84182		PROTEIN WESTERN BLOT TEST	\$ 15.23	\$ 15.23

84270		ASSAY OF SEX HORMONE GLOBUL	\$ 28.14	\$ 28.14
84295		ASSAY OF SERUM SODIUM	\$ 6.24	\$ 6.24
84300		ASSAY OF URINE SODIUM	\$ 6.29	\$ 6.29
84302		ASSAY OF SWEAT SODIUM	\$ 6.29	\$ 6.29
84311		SPECTROPHOTOMETRY	\$ 9.05	\$ 9.05
84315		BODY FLUID SPECIFIC GRAVITY	\$ 3.24	\$ 3.24
84402		ASSAY OF FREE TESTOSTERONE	\$ 32.97	\$ 32.97
84403		ASSAY OF TOTAL TESTOSTERONE	\$ 33.44	\$ 33.44
84410		TESTOSTERONE BIOAVAILABLE	\$ 33.44	\$ 33.44
84436		ASSAY OF TOTAL THYROXINE	\$ 7.47	\$ 7.47
84439		ASSAY OF FREE THYROXINE	\$ 11.69	\$ 11.69
84443		ASSAY THYROID STIM HORMONE	\$ 21.11	\$ 21.11
84450		TRANSFERASE (AST) (SGOT)	\$ 6.69	\$ 6.69
84460		ALANINE AMINO (ALT) (SGPT)	\$ 6.86	\$ 6.86
84466		ASSAY OF TRANSFERRIN	\$ 16.53	\$ 16.53
84478		ASSAY OF TRIGLYCERIDES	\$ 7.46	\$ 7.46
84479		ASSAY OF THYROID (T3 OR T4)	\$ 7.72	\$ 7.72
84480		ASSAY TRIIODOTHYRONINE (T3)	\$ 18.36	\$ 18.36
84481		FREE ASSAY (FT-3)	\$ 21.93	\$ 21.93
84520		ASSAY OF UREA NITROGEN	\$ 5.10	\$ 5.10
84550		ASSAY OF BLOOD/URIC ACID	\$ 5.85	\$ 5.85
84560		ASSAY OF URINE/URIC ACID	\$ 6.15	\$ 6.15
84630		ASSAY OF ZINC	\$ 14.75	\$ 14.75
84681		ASSAY OF C-PEPTIDE	\$ 20.57	\$ 20.57
84702		CHORIONIC GONADOTROPIN TEST	\$ 11.33	\$ 11.33
84703		CHORIONIC GONADOTROPIN ASSAY	\$ 9.72	\$ 9.72
84704		HCG FREE BETA CHAIN TEST	\$ 11.33	\$ 11.33
85004		AUTOMATED DIFF WBC COUNT	\$ 8.38	\$ 8.38
85007		BL SMEAR W/DIFF WBC COUNT	\$ 4.46	\$ 4.46
85013		SPUN MICROHEMATOCRIT	\$ 3.07	\$ 3.07
85014		HEMATOCRIT	\$ 3.07	\$ 3.07
85018		HEMOGLOBIN	\$ 3.07	\$ 3.07
85025		COMPLETE CBC W/AUTO DIFF WBC	\$ 10.06	\$ 10.06
85027		COMPLETE CBC AUTOMATED	\$ 8.38	\$ 8.38
85032		MANUAL CELL COUNT EACH	\$ 5.58	\$ 5.58
85044		MANUAL RETICULOCYTE COUNT	\$ 5.58	\$ 5.58
85048		AUTOMATED LEUKOCYTE COUNT	\$ 3.29	\$ 3.29
85049		AUTOMATED PLATELET COUNT	\$ 5.80	\$ 5.80
85055		RETICULATED PLATELET ASSAY	\$ 34.67	\$ 34.67
85300		ANTITHROMBIN III ACTIVITY	\$ 15.34	\$ 15.34
85379		FIBRIN DEGRADATION QUANT	\$ 11.93	\$ 11.93
85380		FIBRIN DEGRADJ D-DIMER	\$ 11.93	\$ 11.93
85390	26	FIBRINOLYSINS SCREEN I&R	\$ 15.77	\$ 15.77
85390		FIBRINOLYSINS SCREEN I&R	\$ 6.69	\$ 6.69
85397		CLOTTING FUNCT ACTIVITY	\$ 31.06	\$ 31.06
85576	26	BLOOD PLATELET AGGREGATION	\$ 15.77	\$ 15.77
85576		BLOOD PLATELET AGGREGATION	\$ 27.81	\$ 27.81
85610		PROTHROMBIN TIME	\$ 5.09	\$ 5.09
85651		RBC SED RATE NONAUTOMATED	\$ 4.59	\$ 4.59
85652		RBC SED RATE AUTOMATED	\$ 3.50	\$ 3.50
85730		THROMBOPLASTIN TIME PARTIAL	\$ 7.77	\$ 7.77
86000		AGGLUTININS FEBRILE ANTIGEN	\$ 9.03	\$ 9.03
86003		ALLG SPEC IGE CRUDE XTRC EA	\$ 6.76	\$ 6.76
86038		ANTINUCLEAR ANTIBODIES	\$ 15.66	\$ 15.66
86063		ANTISTREPTOLYSIN O SCREEN	\$ 7.48	\$ 7.48
86140		C-REACTIVE PROTEIN	\$ 6.70	\$ 6.70
86141		C-REACTIVE PROTEIN HS	\$ 16.77	\$ 16.77
86162		COMPLEMENT TOTAL (CH50)	\$ 26.31	\$ 26.31
86171		COMPLEMENT FIXATION EACH	\$ 12.98	\$ 12.98
86200		CCP ANTIBODY	\$ 16.77	\$ 16.77
86225		DNA ANTIBODY NATIVE	\$ 17.80	\$ 17.80
86235		NUCLEAR ANTIGEN ANTIBODY	\$ 23.23	\$ 23.23
86255	26	FLUORESCENT ANTIBODY SCREEN	\$ 15.77	\$ 15.77
86255		FLUORESCENT ANTIBODY SCREEN	\$ 15.60	\$ 15.60
86256	26	FLUORESCENT ANTIBODY TITER	\$ 15.77	\$ 15.77
86256		FLUORESCENT ANTIBODY TITER	\$ 15.60	\$ 15.60
86280		HEMAGGLUTINATION INHIBITION	\$ 10.61	\$ 10.61
86308		HETEROPHILE ANTIBODY SCREEN	\$ 6.70	\$ 6.70
86309		HETEROPHILE ANTIBODY TITER	\$ 8.38	\$ 8.38
86310		HETEROPHILE ANTIBODY ABSRBJ	\$ 9.54	\$ 9.54
86316		IMMUNOASSAY TUMOR OTHER	\$ 26.94	\$ 26.94
86317		IMMUNOASSAY INFECTIOUS AGENT	\$ 18.80	\$ 18.80

86318		IMMUNOASSAY INFECTIOUS AGENT	\$ 16.77	\$ 16.77
86320	26	SERUM IMMUNOELECTROPHORESIS	\$ 15.77	\$ 15.77
86320		SERUM IMMUNOELECTROPHORESIS	\$ 29.03	\$ 29.03
86325	26	OTHER IMMUNOELECTROPHORESIS	\$ 15.48	\$ 15.48
86325		OTHER IMMUNOELECTROPHORESIS	\$ 28.96	\$ 28.96
86327	26	IMMUNOELECTROPHORESIS ASSAY	\$ 18.15	\$ 18.15
86327		IMMUNOELECTROPHORESIS ASSAY	\$ 29.38	\$ 29.38
86329		IMMUNODIFFUSION NES	\$ 18.18	\$ 18.18
86334	26	IMMUNOFIX E-PHORESIS SERUM	\$ 15.77	\$ 15.77
86334		IMMUNOFIX E-PHORESIS SERUM	\$ 28.93	\$ 28.93
86335	26	IMMUNIFIX E-PHORSIS/URINE/CSF	\$ 15.48	\$ 15.48
86335		IMMUNIFIX E-PHORSIS/URINE/CSF	\$ 38.00	\$ 38.00
86341		ISLET CELL ANTIBODY	\$ 17.40	\$ 17.40
86355		B CELLS TOTAL COUNT	\$ 48.85	\$ 48.85
86356		MONONUCLEAR CELL ANTIGEN	\$ 34.67	\$ 34.67
86357		NK CELLS TOTAL COUNT	\$ 48.85	\$ 48.85
86367		STEM CELLS TOTAL COUNT	\$ 48.85	\$ 48.85
86376		MICROSOMAL ANTIBODY EACH	\$ 17.94	\$ 17.94
86403		PARTICLE AGGLUT ANTBODY SCRIN	\$ 13.20	\$ 13.20
86430		RHEUMATOID FACTOR TEST QUAL	\$ 7.35	\$ 7.35
86431		RHEUMATOID FACTOR QUANT	\$ 7.35	\$ 7.35
86480		TB TEST CELL IMMUN MEASURE	\$ 80.26	\$ 80.26
86486		SKIN TEST NOS ANTIGEN	\$ 3.93	\$ 3.93
86580		TB INTRADERMAL TEST	\$ 5.69	\$ 5.69
86592		SYPHILIS TEST NON-TREP QUAL	\$ 5.52	\$ 5.52
86663		EPSTEIN-BARR ANTIBODY	\$ 16.99	\$ 16.99
86664		EPSTEIN-BARR NUCLEAR ANTIGEN	\$ 18.80	\$ 18.80
86677		HELICOBACTER PYLORI ANTIBODY	\$ 18.80	\$ 18.80
86701		HIV-1ANTIBODY	\$ 11.50	\$ 11.50
86703		HIV-1/HIV-2 1 RESULT ANTBODY	\$ 15.23	\$ 15.23
86706		HEP B SURFACE ANTIBODY	\$ 13.91	\$ 13.91
86708		HEPATITIS A ANTIBODY	\$ 16.04	\$ 16.04
86711		JOHN CUNNINGHAM ANTIBODY	\$ 18.30	\$ 18.30
86756		RESPIRATORY VIRUS ANTIBODY	\$ 16.70	\$ 16.70
86780		TREPONEMA PALLIDUM	\$ 17.58	\$ 17.58
86788		WEST NILE VIRUS AB IGM	\$ 18.80	\$ 18.80
86789		WEST NILE VIRUS ANTIBODY	\$ 18.61	\$ 18.61
86800		THYROGLOBULIN ANTIBODY	\$ 20.59	\$ 20.59
86803		HEPATITIS C AB TEST	\$ 18.49	\$ 18.49
86828		HLA CLASS I&II ANTIBODY QUAL	\$ 50.42	\$ 50.42
86829		HLA CLASS I/II ANTIBODY QUAL	\$ 37.82	\$ 37.82
86830		HLA CLASS I PHENOTYPE QUAL	\$ 102.11	\$ 102.11
86831		HLA CLASS II PHENOTYPE QUAL	\$ 87.53	\$ 87.53
86832		HLA CLASS I HIGH DEFIN QUAL	\$ 160.47	\$ 160.47
86833		HLA CLASS II HIGH DEFIN QUAL	\$ 145.88	\$ 145.88
86834		HLA CLASS I SEMIQUANT PANEL	\$ 452.25	\$ 452.25
86835		HLA CLASS II SEMIQUANT PANEL	\$ 408.48	\$ 408.48
87070		CULTURE OTHR SPECIMN AEROBIC	\$ 11.15	\$ 11.15
87077		CULTURE AEROBIC IDENTIFY	\$ 10.46	\$ 10.46
87081		CULTURE SCREEN ONLY	\$ 7.47	\$ 7.47
87086		URINE CULTURE/COLONY COUNT	\$ 10.45	\$ 10.45
87101		SKIN FUNGI CULTURE	\$ 9.99	\$ 9.99
87109		MYCOPLASMA	\$ 19.93	\$ 19.93
87110		CHLAMYDIA CULTURE	\$ 25.37	\$ 25.37
87140		CULTURE TYPE IMMUNOFUORESC	\$ 7.22	\$ 7.22
87164	26	DARK FIELD EXAMINATION	\$ 15.48	\$ 15.48
87164		DARK FIELD EXAMINATION	\$ 8.20	\$ 8.20
87177		OVA AND PARASITES SMEARS	\$ 11.52	\$ 11.52
87184		MICROBE SUSCEPTIBLE DISK	\$ 8.93	\$ 8.93
87205		SMEAR GRAM STAIN	\$ 5.52	\$ 5.52
87206		SMEAR FLUORESCENT/ACID STAI	\$ 6.96	\$ 6.96
87209		SMEAR COMPLEX STAIN	\$ 23.27	\$ 23.27
87210		SMEAR WET MOUNT SALINE/INK	\$ 4.94	\$ 4.94
87220		TISSUE EXAM FOR FUNGI	\$ 5.52	\$ 5.52
87255		GENET VIRUS ISOLATE HSV	\$ 31.65	\$ 31.65
87267		ENTEROVIRUS ANTIBODY DFA	\$ 14.84	\$ 14.84
87275		INFLUENZA B AG IF	\$ 14.84	\$ 14.84
87276		INFLUENZA A AG IF	\$ 14.84	\$ 14.84
87305		ASPERGILLUS AG IA	\$ 14.84	\$ 14.84
87329		GIARDIA AG IA	\$ 14.84	\$ 14.84
87340		HEPATITIS B SURFACE AG IA	\$ 12.05	\$ 12.05
87389		HIV-1 AG W/HIV-1 & HIV-2 AB	\$ 31.09	\$ 31.09

87400		INFLUENZA A/B AG IA	\$ 14.84	\$ 14.84
87420		RESP SYNCYTIAL AG IA	\$ 14.84	\$ 14.84
87430		STREP A AG IA	\$ 14.84	\$ 14.84
87449		AG DETECT NOS IA MULT	\$ 14.84	\$ 14.84
87480		CANDIDA DNA DIR PROBE	\$ 25.98	\$ 25.98
87483		CNS DNA AMP PROBE TYPE 12-25	\$ 255.62	\$ 255.62
87490		CHYLM D TRACH DNA DIR PROBE	\$ 25.98	\$ 25.98
87491		CHYLM D TRACH DNA AMP PROBE	\$ 31.75	\$ 31.75
87498		ENTEROVIRUS PROBE&REVRS TRNS	\$ 31.75	\$ 31.75
87500		VANOMYCIN DNA AMP PROBE	\$ 31.75	\$ 31.75
87502		INFLUENZA DNA AMP PROBE	\$ 69.34	\$ 69.34
87505		NFCT AGENT DETECTION GI	\$ 94.04	\$ 94.04
87506		IADNA-DNA/RNA PROBE TQ 6-11	\$ 142.46	\$ 142.46
87507		IADNA-DNA/RNA PROBE TQ 12-25	\$ 263.53	\$ 263.53
87510		GARDNER VAG DNA DIR PROBE	\$ 25.98	\$ 25.98
87590		N.GONORRHOEAE DNA DIR PROB	\$ 25.98	\$ 25.98
87591		N.GONORRHOEAE DNA AMP PROB	\$ 31.75	\$ 31.75
87623		HPV LOW-RISK TYPES	\$ 32.74	\$ 32.74
87624		HPV HIGH-RISK TYPES	\$ 32.74	\$ 32.74
87625		HPV TYPES 16 & 18 ONLY	\$ 32.74	\$ 32.74
87631		RESP VIRUS 3-5 TARGETS	\$ 91.21	\$ 91.21
87632		RESP VIRUS 6-11 TARGETS	\$ 138.19	\$ 138.19
87633		RESP VIRUS 12-25 TARGETS	\$ 255.62	\$ 255.62
87640		STAPH A DNA AMP PROBE	\$ 31.75	\$ 31.75
87641		MR-STAPH DNA AMP PROBE	\$ 31.75	\$ 31.75
87650		STREP A DNA DIR PROBE	\$ 25.98	\$ 25.98
87651		STREP A DNA AMP PROBE	\$ 31.75	\$ 31.75
87652		STREP A DNA QUANT	\$ 42.18	\$ 42.18
87653		STREP B DNA AMP PROBE	\$ 31.75	\$ 31.75
87660		TRICHOMONAS VAGIN DIR PROBE	\$ 25.98	\$ 25.98
87661		TRICHOMONAS VAGINALIS AMPLIF	\$ 30.39	\$ 30.39
87800		DETECT AGNT MULT DNA DIREC	\$ 51.93	\$ 51.93
87802		STREP B ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87804		INFLUENZA ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87806		HIV ANTIGEN W/HIV ANTIBODIES	\$ 32.06	\$ 32.06
87807		RSV ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87808		TRICHOMONAS ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87809		ADENOVIRUS ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87880		STREP A ASSAY W/OPTIC	\$ 14.84	\$ 14.84
87900		PHENOTYPE INFECT AGENT DRUG	\$ 105.47	\$ 105.47
87905		SIALIDASE ENZYME ASSAY	\$ 17.24	\$ 17.24
87910		GENOTYPE CYTOMEGALOVIRUS	\$ 99.42	\$ 99.42
87912		GENOTYPE DNA HEPATITIS B	\$ 99.42	\$ 99.42
88720		BILIRUBIN TOTAL TRANSCUT	\$ 6.54	\$ 6.54
88738		HGB QUANT TRANSCUTANEOUS	\$ 6.66	\$ 6.66
88740		TRANSCUTANEOUS CARBOXYHB	\$ 6.79	\$ 6.79
88741		TRANSCUTANEOUS METHB	\$ 6.79	\$ 6.79
89050		BODY FLUID CELL COUNT	\$ 6.13	\$ 6.13
89051		BODY FLUID CELL COUNT	\$ 6.74	\$ 6.74
89055		LEUKOCYTE ASSESSMENT FECAL	\$ 5.52	\$ 5.52
89060		EXAM SYNOVIAL FLUID CRYSTALS	\$ 9.26	\$ 9.26
89125		SPECIMEN FAT STAIN	\$ 5.60	\$ 5.60
89190		NASAL SMEAR FOR EOSINOPHILS	\$ 6.03	\$ 6.03
90291		CMV IG IV	\$ 23.84	\$ 23.84
90371		HEP B IG IM	\$ 120.23	\$ 120.23
90375		RABIES IG IM/SC	\$ 67.98	\$ 67.98
90376		RABIES IG HEAT TREATED	\$ 78.25	\$ 78.25
90389		TETANUS IG IM	\$ 140.25	\$ 140.25
90396		VARICELLA-ZOSTER IG IM	\$ 110.65	\$ 110.65
90471	EP	IMMUNIZATION ADMIN	\$ 21.47	\$ 21.47
90471		IMMUNIZATION ADMIN	\$ 13.97	\$ 13.97
90472	EP	IMMUNIZATION ADMIN EACH ADD	\$ 21.47	\$ 21.47
90472		IMMUNIZATION ADMIN EACH ADD	\$ 13.97	\$ 13.97
90473	EP	IMMUNE ADMIN ORAL/NASAL	\$ 21.47	\$ 21.47
90473		IMMUNE ADMIN ORAL/NASAL	\$ 13.97	\$ 13.97
90474	EP	IMMUNE ADMIN ORAL/NASAL ADDL	\$ 21.47	\$ 21.47
90474		IMMUNE ADMIN ORAL/NASAL ADDL	\$ 13.97	\$ 13.97
90650		2VHPV VACCINE 3 DOSE IM	\$ 138.52	\$ 138.52
90655		IIV3 VACC NO PRSV 0.25 ML IM	\$ 16.14	\$ 16.14
90657		IIV3 VACC NO SPLT 0.25 ML IM	\$ 6.63	\$ 6.63
90963		ESRD HOME PT SERV P MO <2YRS	\$ 464.21	\$ 464.21
90964		ESRD HOME PT SERV P MO 2-11	\$ 387.37	\$ 387.37

90965		ESRD HOME PT SERV P MO 12-19	\$ 368.46	\$ 368.46
90966		ESRD HOME PT SERV P MO 20+	\$ 191.86	\$ 191.86
90967		ESRD SVC PR DAY PT <2	\$ 16.60	\$ 16.60
90968		ESRD SVC PR DAY PT 2-11	\$ 12.96	\$ 12.96
90969		ESRD SVC PR DAY PT 12-19	\$ 12.64	\$ 12.64
90970		ESRD SVC PR DAY PT 20+	\$ 6.70	\$ 6.70
93242		EXT ECG>48HR<7D RECORDING	\$ 11.61	\$ 11.61
94010	26	BREATHING CAPACITY TEST	\$ 7.07	\$ 7.07
94010		BREATHING CAPACITY TEST	\$ 26.86	\$ 26.86
94010	TC	BREATHING CAPACITY TEST	\$ 19.79	\$ 19.79
94060	26	EVALUATION OF WHEEZING	\$ 12.39	\$ 12.39
94060		EVALUATION OF WHEEZING	\$ 47.09	\$ 47.09
94060	TC	EVALUATION OF WHEEZING	\$ 34.69	\$ 34.69
94150	26	VITAL CAPACITY TEST	\$ 3.31	\$ 3.31
94150		VITAL CAPACITY TEST	\$ 18.19	\$ 18.19
94150	TC	VITAL CAPACITY TEST	\$ 14.88	\$ 14.88
94200	26	LUNG FUNCTION TEST (MBC/MVV)	\$ 4.59	\$ 4.59
94200		LUNG FUNCTION TEST (MBC/MVV)	\$ 18.19	\$ 18.19
94200	TC	LUNG FUNCTION TEST (MBC/MVV)	\$ 13.63	\$ 13.63
94450	26	HYPOXIA RESPONSE CURVE	\$ 16.04	\$ 16.04
94450		HYPOXIA RESPONSE CURVE	\$ 41.41	\$ 41.41
94450	TC	HYPOXIA RESPONSE CURVE	\$ 25.37	\$ 25.37
94610		SURFACTANT ADMIN THRU TUBE	\$ 52.94	\$ 52.94
94621	26	CARDIOPULM EXERCISE TESTING	\$ 60.10	\$ 60.10
94621		CARDIOPULM EXERCISE TESTING	\$ 132.92	\$ 132.92
94621	TC	CARDIOPULM EXERCISE TESTING	\$ 72.81	\$ 72.81
94640		AIRWAY INHALATION TREATMENT	\$ 10.69	\$ 10.69
94642		AEROSOL INHALATION TREATMENT	\$ 9.37	\$ 9.37
94644		CBT 1ST HOUR	\$ 27.43	\$ 27.43
94645		CBT EACH ADDL HOUR	\$ 10.69	\$ 10.69
94680	26	EXHALED AIR ANALYSIS O2	\$ 10.51	\$ 10.51
94680		EXHALED AIR ANALYSIS O2	\$ 46.68	\$ 46.68
94680	TC	EXHALED AIR ANALYSIS O2	\$ 36.16	\$ 36.16
94681	26	EXHALED AIR ANALYSIS O2/CO2	\$ 8.01	\$ 8.01
94681		EXHALED AIR ANALYSIS O2/CO2	\$ 50.39	\$ 50.39
94681	TC	EXHALED AIR ANALYSIS O2/CO2	\$ 42.37	\$ 42.37
94690	26	EXHALED AIR ANALYSIS	\$ 3.01	\$ 3.01
94690		EXHALED AIR ANALYSIS	\$ 40.54	\$ 40.54
94690	TC	EXHALED AIR ANALYSIS	\$ 37.53	\$ 37.53
94726	26	PULM FUNCT TST PLETHYSMOGRAP	\$ 7.41	\$ 7.41
94726		PULM FUNCT TST PLETHYSMOGRAP	\$ 31.75	\$ 31.75
94726	TC	PULM FUNCT TST PLETHYSMOGRAP	\$ 24.34	\$ 24.34
94727	26	PULM FUNCTION TEST BY GAS	\$ 7.41	\$ 7.41
94727		PULM FUNCTION TEST BY GAS	\$ 24.99	\$ 24.99
94727	TC	PULM FUNCTION TEST BY GAS	\$ 17.58	\$ 17.58
94728	26	PULM FUNCT TEST OSCILLOMETRY	\$ 7.41	\$ 7.41
94728		PULM FUNCT TEST OSCILLOMETRY	\$ 24.99	\$ 24.99
94728	TC	PULM FUNCT TEST OSCILLOMETRY	\$ 17.58	\$ 17.58
94729	26	CO/MEMBANE DIFFUSE CAPACITY	\$ 4.91	\$ 4.91
94729		CO/MEMBANE DIFFUSE CAPACITY	\$ 31.51	\$ 31.51
94729	TC	CO/MEMBANE DIFFUSE CAPACITY	\$ 26.60	\$ 26.60
94760		MEASURE BLOOD OXYGEN LEVEL	\$ 2.17	\$ 2.17
94761		MEASURE BLOOD OXYGEN LEVEL	\$ 4.15	\$ 4.15
95044		ALLERGY PATCH TESTS	\$ 4.90	\$ 4.90
95857	26	CHOLINESTERASE CHALLENGE	\$ 5.70	\$ 8.57
95857		CHOLINESTERASE CHALLENGE	\$ 22.82	\$ 34.27
96159		HLTH BHV IVNTJ INDIV EA ADDL	\$ 18.73	\$ 20.85
96160		PT-FOCUSED HLTH RISK ASSMT	\$ 3.93	\$ 3.93
96160	EP	PT-FOCUSED HLTH RISK ASSMT	\$ 3.93	\$ 3.93
96161		CAREGIVER HEALTH RISK ASSMT	\$ 3.93	\$ 3.93
96161	EP	CAREGIVER HEALTH RISK ASSMT	\$ 3.93	\$ 3.93
99051		MED SERV EVE/WKEND/HOLIDAY	\$ 27.80	\$ 27.80
99053		MED SERV 10PM-8AM 24 HR FAC	\$ 27.80	\$ 27.80
99070		SPECIAL SUPPLIES PHYS/QHP	\$ 9.89	\$ 9.89
99190		SPECIAL PUMP SERVICES	\$ 94.23	\$ 94.23
99191		SPECIAL PUMP SERVICES	\$ 60.51	\$ 60.51
99192		SPECIAL PUMP SERVICES	\$ 43.82	\$ 43.82
99202		OFFICE/OUTPATIENT VISIT NEW	\$ 42.15	\$ 58.60
99203		OFFICE/OUTPATIENT VISIT NEW	\$ 63.61	\$ 84.90
99204		OFFICE/OUTPATIENT VISIT NEW	\$ 106.81	\$ 131.66
99205		OFFICE/OUTPATIENT VISIT NEW	\$ 139.00	\$ 166.44
99211		OFFICE/OUTPATIENT VISIT EST	\$ 8.09	\$ 17.14

99212		OFFICE/OUTPATIENT VISIT EST	\$ 21.54	\$ 34.13
99213		OFFICE/OUTPATIENT VISIT EST	\$ 42.14	\$ 56.97
99214		OFFICE/OUTPATIENT VISIT EST	\$ 65.18	\$ 85.85
99215		OFFICE/OUTPATIENT VISIT EST	\$ 92.55	\$ 116.11
99241		OFFICE CONSULTATION	\$ 28.08	\$ 40.72
99242		OFFICE CONSULTATION	\$ 59.25	\$ 76.28
99243		OFFICE CONSULTATION	\$ 82.59	\$ 104.91
99244		OFFICE CONSULTATION	\$ 131.16	\$ 155.82
99245		OFFICE CONSULTATION	\$ 163.60	\$ 191.51
99251		INPATIENT CONSULTATION	\$ 41.58	\$ 41.58
99252		INPATIENT CONSULTATION	\$ 64.43	\$ 64.42
99253		INPATIENT CONSULTATION	\$ 97.81	\$ 97.80
99254		INPATIENT CONSULTATION	\$ 141.46	\$ 141.46
99255		INPATIENT CONSULTATION	\$ 172.36	\$ 172.36
99281		EMERGENCY DEPT VISIT	\$ 17.35	\$ 17.35
99282		EMERGENCY DEPT VISIT	\$ 33.75	\$ 33.75
99283		EMERGENCY DEPT VISIT	\$ 52.30	\$ 52.30
99284		EMERGENCY DEPT VISIT	\$ 97.92	\$ 97.92
99285		EMERGENCY DEPT VISIT	\$ 145.57	\$ 145.57
99288		DIRECT ADVANCED LIFE SUPPORT	\$ 45.45	\$ 45.45
99291		CRITICAL CARE FIRST HOUR	\$ 199.46	\$ 236.89
99292		CRITICAL CARE ADDL 30 MIN	\$ 99.67	\$ 107.43
99304		NURSING FACILITY CARE INIT	\$ 75.37	\$ 75.37
99305		NURSING FACILITY CARE INIT	\$ 105.38	\$ 105.38
99306		NURSING FACILITY CARE INIT	\$ 135.41	\$ 135.41
99307		NURSING FAC CARE SUBSEQ	\$ 37.19	\$ 37.19
99308		NURSING FAC CARE SUBSEQ	\$ 56.87	\$ 56.87
99309		NURSING FAC CARE SUBSEQ	\$ 75.43	\$ 75.43
99310		NURSING FAC CARE SUBSEQ	\$ 111.53	\$ 111.53
99315		NURSING FAC DISCHARGE DAY	\$ 54.42	\$ 54.42
99316		NURSING FAC DISCHARGE DAY	\$ 71.11	\$ 71.11
99318		ANNUAL NURSING FAC ASSESSMNT	\$ 78.86	\$ 78.86
99341		HOME VISIT NEW PATIENT	\$ 50.56	\$ 50.56
99342		HOME VISIT NEW PATIENT	\$ 73.64	\$ 73.64
99343		HOME VISIT NEW PATIENT	\$ 118.59	\$ 118.59
99344		HOME VISIT NEW PATIENT	\$ 155.68	\$ 155.68
99345		HOME VISIT NEW PATIENT	\$ 187.26	\$ 187.26
99347		HOME VISIT EST PATIENT	\$ 49.34	\$ 49.34
99348		HOME VISIT EST PATIENT	\$ 74.50	\$ 74.50
99349		HOME VISIT EST PATIENT	\$ 108.48	\$ 108.48
99350		HOME VISIT EST PATIENT	\$ 151.24	\$ 151.24
99354		PROLONG E&M/PSYCTX SERV O/P	\$ 81.62	\$ 86.13
99355		PROLONG E&M/PSYCTX SERV O/P	\$ 80.75	\$ 85.27
99381		INIT PM E/M NEW PAT INFANT	\$ 55.86	\$ 83.63
99381	EP	INIT PM E/M NEW PAT INFANT	\$ 81.82	\$ 81.82
99382		INIT PM E/M NEW PAT 1-4 YRS	\$ 63.74	\$ 91.17
99382	EP	INIT PM E/M NEW PAT 1-4 YRS	\$ 81.82	\$ 81.82
99383		PREV VISIT NEW AGE 5-11	\$ 63.74	\$ 90.53
99383	EP	PREV VISIT NEW AGE 5-11	\$ 81.82	\$ 81.82
99384		PREV VISIT NEW AGE 12-17	\$ 71.82	\$ 98.63
99384	EP	PREV VISIT NEW AGE 12-17	\$ 81.82	\$ 81.82
99385		PREV VISIT NEW AGE 18-39	\$ 71.82	\$ 98.63
99385	EP	PREV VISIT NEW AGE 18-39	\$ 81.82	\$ 81.82
99386		PREV VISIT NEW AGE 40-64	\$ 88.14	\$ 115.58
99387		INIT PM E/M NEW PAT 65+ YRS	\$ 96.67	\$ 126.70
99391		PER PM REEVAL EST PAT INFANT	\$ 47.78	\$ 69.73
99391	EP	PER PM REEVAL EST PAT INFANT	\$ 81.82	\$ 81.82
99392		PREV VISIT EST AGE 1-4	\$ 55.86	\$ 77.83
99392	EP	PREV VISIT EST AGE 1-4	\$ 81.82	\$ 81.82
99393		PREV VISIT EST AGE 5-11	\$ 55.86	\$ 77.50
99393	EP	PREV VISIT EST AGE 5-11	\$ 81.82	\$ 81.82
99394		PREV VISIT EST AGE 12-17	\$ 63.74	\$ 85.37
99394	EP	PREV VISIT EST AGE 12-17	\$ 81.82	\$ 81.82
99395		PREV VISIT EST AGE 18-39	\$ 63.74	\$ 85.69
99395	EP	PREV VISIT EST AGE 18-39	\$ 81.82	\$ 81.82
99396		PREV VISIT EST AGE 40-64	\$ 71.82	\$ 93.79
99397		PER PM REEVAL EST PAT 65+ YR	\$ 80.37	\$ 105.22
99406		BEHAV CHNG SMOKING 3-10 MIN	\$ 10.86	\$ 12.15
99406	EP	BEHAV CHNG SMOKING 3-10 MIN	\$ 10.86	\$ 12.15
99407		BEHAV CHNG SMOKING > 10 MIN	\$ 22.51	\$ 23.48
99407	EP	BEHAV CHNG SMOKING > 10 MIN	\$ 22.51	\$ 23.48
99417		PROLNG OFF/OP E/M EA 15 MIN	\$ 77.73	\$ 82.03

0001A	EP	IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0001A		IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0002A	EP	IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0002A		IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0003A	EP	PFIZER-BIONTECH COVID-19 VACCINE ADMINIS	\$ 40.00	\$ 40.00
0003A		PFIZER-BIONTECH COVID-19 VACCINE ADMINIS	\$ 40.00	\$ 40.00
0004A	EP	PFIZER-BIONTECH COVID-19 VACCINE ADMINIS	\$ 40.00	\$ 40.00
0004A		PFIZER-BIONTECH COVID-19 VACCINE ADMINIS	\$ 40.00	\$ 40.00
0011A	EP	IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0011A		IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0012A	EP	IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0012A		IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0013A	EP	MODERNA COVID-19 VACCINE ADMINISTRATION	\$ 40.00	\$ 40.00
0013A		MODERNA COVID-19 VACCINE ADMINISTRATION	\$ 40.00	\$ 40.00
0031A	EP	IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0031A		IMMUNIZATION ADMINISTRATION BY INTRAMUSC	\$ 40.00	\$ 40.00
0064A	EP	FEE COVID-19 VAC 7 RES	\$ 40.00	\$ 40.00
0064A		FEE COVID-19 VAC 7 RES	\$ 40.00	\$ 40.00
0034A	EP	FEE COVID-19 VAC 4 RES	\$ 40.00	\$ 40.00
0034A		FEE COVID-19 VAC 4 RES	\$ 40.00	\$ 40.00
0071A	EP	ADM SARSCV2 10MCG TRS-SUCR 1	\$ 40.00	\$ 40.00
0071A		ADM SARSCV2 10MCG TRS-SUCR 1	\$ 40.00	\$ 40.00
0072A	EP	ADM SARSCV2 10MCG TRS-SUCR 2	\$ 40.00	\$ 40.00
0072A		ADM SARSCV2 10MCG TRS-SUCR 2	\$ 40.00	\$ 40.00

3/15/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
8/12/2021	12/31/9999
8/12/2021	12/31/9999
8/24/2021	12/31/9999
8/24/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
8/12/2021	12/31/9999
8/12/2021	12/31/9999
3/15/2021	12/31/9999
3/15/2021	12/31/9999
10/20/2021	12/31/9999
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10/20/2021	12/31/9999
10/20/2021	12/31/9999
10/29/2021	12/31/9999
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10/29/2021	12/31/9999
10/29/2021	12/31/9999