Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
10022		3	FINE NEEDLE ASPIRATION; WITH IMAGING GUIDANCE	132.03	61.48	7/1/2006
10040		3	ACNE SURGERY	77.09	69.80	7/1/2006
10060		3	DRAINAGE OF ABSCESS	84.97	75.69	7/1/2006
10061		3	DRAINAGE OF ABSCESS	153.01	142.08	7/1/2006
10080		3	DRAINAGE OF PILONIDAL CYST	147.67	81.42	7/1/2006
10081		3	DRAINAGE OF PILONIDAL CYST	228.88	143.42	7/1/2006
10120		3	FOREIGN BODY REMOVAL, SKIN	118.90	78.82	7/1/2006
10121		3	FOREIGN BODY REMOVAL, SKIN	221.04	163.50	7/1/2006
10140		3	DRAINAGE OF BLOOD EFFUSION	118.41	102.19	7/1/2006
10160		3	PUNCTURE DRAINAGE OF LESION	99.42	82.20	7/1/2006
10180		3	INCISION AND DRAINAGE, COMPLEX	187.85	154.55	7/1/2006
11000		3	SURGICAL CLEANSING OF SKIN	42.43	30.50	7/1/2006
11001		3	DEBRIDEMENT OF EXTENSIVE ECZEMATOUS OR INFECTED SKIN; EACH ADDITIONAL 10% OF	19.15	15.16	7/1/2006
11004		3	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING	516.13	516.13	7/1/2006
11005		3	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING	701.98	701.98	7/1/2006
11006		3	DEBRIDEMENT OF SKIN, SUBCUTANEOUS TISSUE, MUSCLE AND FASCIA FOR NECROTIZING	644.46	644.46	7/1/2006
11008		3	REMOVAL OF PROSTHETIC MATERIAL OR MESH, ABDOMINAL WALL FOR NECROTIZING SOFT	261.31	261.31	7/1/2006
11010		3	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL ASSOC.W/OPEN FR	393.46	251.93	7/1/2006
11011		3	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL ASSOC.W/OPEN FR	465.73	271.91	7/1/2006
11012		3	DEBRIDEMENT INCLUDING REMOVAL OF FOREIGN MATERIAL ASSOC.W/OPEN FX	676.10	401.03	7/1/2006
11040		3	DEBRIDEMENT OF ABRASIONS	36.61	26.34	7/1/2006
11041		3	DEBRIDEMENT SKIN FULL THICKNESS	53.69	42.76	7/1/2006
11042		3	DEBRIDEMENT SKIN AND SUBCUTANEOUS TISSUE	75.45	57.89	7/1/2006
11043		3	DEBRIDEMENT SKIN SUBCUTANEOUS AND MUSCLE	204.93	178.62	7/1/2006
11044		3	DEBRIDEMENT SKIN SUBCUTANEOUS TISSUE MUSCLE BONE	267.58	244.27	7/1/2006
11055		3	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); SINGLE	35.18	22.26	7/1/2006
11056		3	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); TWO TO	44.77	31.19	7/1/2006
11057		3	PARING OR CUTTING OF BENIGN HYPERKERATOTIC LESION (EG, CORN OR CALLUS); MORE	55.26	40.68	7/1/2006
11100		3	BIOPSY OF SKIN LESION	71.26	42.11	7/1/2006
11101		3	BIOPSY OF SKIN, SUBCUTANEOUS TISSUE AND/OR MUCOUS MEMBRANE (INCLU	26.15	21.52	7/1/2006
11200		3	REMOVAL OF SKIN TAGS	63.09	53.82	7/1/2006
11201		3	REMOVAL OF SKIN TAGS, MULTIPLE FIBROCUTANEOUS TAGS, ANY AREA; EACH ADDITIONAL	16.20	14.88	7/1/2006
11300		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	51.84	26.01	7/1/2006
11301		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	68.29	44.11	7/1/2006
11302		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	82.01	54.19	7/1/2006
11303		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, TRUNK, ARMS OR LEGS;	98.59	63.48	7/1/2006
11305		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP,	53.89	34.68	7/1/2006
11306		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP,	73.69	51.17	7/1/2006
11307		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP,	85.38	58.89	7/1/2006
11308		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, SCALP,	101.79	73.30	7/1/2006
11310		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE,	63.97	37.80	7/1/2006
11311		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE,	79.70	55.18	7/1/2006
11312		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE,	91.62	62.80	7/1/2006
11313		3	SHAVING OF EPIDERMAL OR DERMAL LESION, SINGLE LESION, FACE,	120.57	84.48	7/1/2006
11400		3	REMOVAL OF SKIN LESION	98.23	61.13	7/1/2006
11401		3	REMOVAL OF SKIN LESION	114.82	80.37	7/1/2006
11402		3	REMOVAL OF SKIN LESION	131.22	93.13	7/1/2006
11403		3	REMOVAL SKIN LESION	147.86	112.08	7/1/2006
11404		3	REMOVAL SKIN LESION	168.77	125.38	7/1/2006
11406		3	EXCISION BENIGN SKINLESION OVER 4 CM	208.43	161.39	7/1/2006
11420		3	REMOVAL OF SKIN LESION	95.98	68.16	7/1/2006
11421		3	REMOVAL OF SKIN LESION	122.68	90.89	7/1/2006
11422		3	REMOVAL OF SKIN LESION	137.07	106.42	7/1/2006
11423		3	EXCISION BENIGN LESION DIAMETER 2 TO 3 CM	162.76	125.00	7/1/2006
11424		3	EXCISION BENIGN LESION DIAMETER 3 TO 4 CM	186.32	146.24	7/1/2006
11426		3	EX BEN LES EX SK TAG SC NE HA FE GEN OVER 4 CM	261.30	215.34	7/1/2006
11440		3	REMOVAL OF SKIN LESION	113.21	83.40	7/1/2006
11441		3	REMOVAL OF SKIN LESION	133.79	105.63	7/1/2006
11442		3	REMOVAL OF SKIN LESION	149.97	117.61	7/1/2006
11443		3	EX OT BEN LE FACE EARS EYELIDS NOSE LIPS MUCUS MEM	184.19	147.56	7/1/2006
11444		3	EX OTH BEN LE FACE EARS EYELID NOSE LIPS MUCUS MEM	235.23	192.33	7/1/2006
11446		3	EXCISION OTHER BENIGN LESION OVER 4 CM	305.35	263.22	7/1/2006
11450		3	EXC SKIN FOR HIDRADENITIS PRIMARY SUTURE/AXILLARY	273.06	173.36	7/1/2006
11451		3	EXC SKIN FOR HIDRADENITIS W OTHER CLOSURE/AXILLARY	373.33	238.19	7/1/2006
11462		3	EXC SKIN FOR HIDRADENITIS W PRIM SUTURE/INGUINAL	267.33	164.22	7/1/2006
11463		3	EXC SKIN FOR HIDRADENITIS W OTH CLOSURE/INGUINAL	380.72	242.85	7/1/2006
11470		3	EXC SKIN FOR HIDRADENITIS W PRIMARY CLOSURE	294.16	201.26	7/1/2006
11471		3	EXC SKIN FOR HIDRADENITIS WITH OTHER CLOSURE	394.21	263.00	7/1/2006
11600		3	REMOVAL OF SKIN LESION	136.91	81.60	7/1/2006
11601		3	REMOVAL OF SKIN LESION	157.33	107.98	7/1/2006

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11602		3	REMOVAL OF SKIN LESION	166.71	114.70	7/1/2006
11603		3	EXCISION MALIGNANT LESION TRUNK ARMS OR LEGS DIAME	184.55	126.59	7/1/2006
11604		3	EXCISION MALIGNANT LESION TRUNK ARMS OR LEGS DIAME	202.97	137.05	7/1/2006
11606		3	EXC MALIGNANT LESION ON TRUNK ARMS LEGS OVER 4 CM	266.23	189.04	7/1/2006
11620		3	REMOVAL OF SKIN LESION	131.04	76.38	7/1/2006
11621		3	REMOVAL OF SKIN LESION	155.89	107.20	7/1/2006
11622		3	REMOVAL OF SKIN LESION	176.84	124.51	7/1/2006
11623		3	EXCISION MALIGNANT LESION DIAMETER 2 TO 3 CM	209.20	150.91	7/1/2006
11624		3	EXCISION MALIGNANT LESION DIAMETER 3 TO 4 CM	240.60	175.33	7/1/2006
11626		3	EXCISION MALIGNANT LESION OVER 4 CM	318.51	244.18	7/1/2006
11640		3	REMOVAL OF SKIN LESION	139.16	87.87	7/1/2006
11641		3	REMOVAL OF SKIN LESION	181.81	132.13	7/1/2006
11642		3	REMOVAL OF SKIN LESION	210.57	154.26	7/1/2006
11643		3	EXCISION MALIGNANT LESION DIAMETER 2 TO 3 CM	243.80	182.64	7/1/2006
11644		3	EXCISION MALIGNANT LESION DIAMETER 3 TO 4 CM	308.60	234.74	7/1/2006
11646		3	EXC MALIGNANT LESION OF FACE EARS EYELIDS NOSE LIP	419.03	343.18	7/1/2006
11720		3	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); ONE TO FIVE	23.70	16.42	7/1/2006
11721		3	DEBRIDEMENT OF NAIL(S) BY ANY METHOD(S); SIX OR MORE	35.63	28.01	7/1/2006
11730		3	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE;	78.02	58.15	7/1/2006
11732		3	AVULSION OF NAIL PLATE, PARTIAL OR COMPLETE, SIMPLE; EACH ADDITIONAL NAIL PLATE	36.71	29.42	7/1/2006
11740		3	EVACUATION OF SUBUNGUAL HEMATOMA	32.46	25.84	7/1/2006
11750		3	REMOVAL OF NAIL BED	143.91	130.31	7/1/2006
11752		3	EXC NAIL WITH AMPUTATION OF TUFT OF DISTAL PHALANX	203.56	203.56	7/1/2006
11755		3	BIOPSY OF NAIL UNIT (EG, PLATE, BED, MATRIX, HYPONYCHIUM, PROXIMAL AND LATERAL	102.39	75.89	7/1/2006
11760		3	RECONSTRUCTION OF NAIL BED	148.74	120.77	7/1/2006
11762		3	RECONSTRUCTION OF NAIL BED	208.07	190.18	7/1/2006
11765		3	WEDGE EXCISION OF SKIN OF NAIL FOLD (EG, FOR INGROWN TOENAIL)	85.96	51.86	7/1/2006
11770		3	REMOVAL OF PILONIDAL LESION	217.00	151.06	7/1/2006
11771		3	REMOVAL OF PILONIDAL LESION	410.82	333.31	7/1/2006
11772		3	REMOVAL OF PILONIDAL LESION	520.53	439.71	7/1/2006
11900		3	INJECTION INTO SKIN LESIONS	40.71	26.14	7/1/2006
11901		3	INJECTION INTO SKIN LESIONS	51.35	41.09	7/1/2006
11921		3	CORRECT SKIN COLOR DEFECTS	207.66	118.23	7/1/2006
11950		3	THERAPY FOR CONTOUR DEFECTS	69.38	44.54	7/1/2006
11951		3	THERAPY FOR CONTOUR DEFECTS	94.73	62.27	7/1/2006
11952		3	SUBCUTANEOUS INJECTION OF FILLING MATERIAL 5 TO 10	126.14	87.05	7/1/2006
11954		3	THERAPY FOR CONTOUR DEFECTS	153.39	102.11	7/1/2006
11960		3	INSERTION OF TISSUE EXPENDER	701.86	701.86	7/1/2006
11970		3	REPLACEMENT OF TISSUE EXPANDER	481.70	481.70	7/1/2006
11971		3	TISSUE EXPANDER REMOVAL	386.80	209.81	7/1/2006
11975		3	INSERT/REINSERT IMPLANTABLE CONTRACEPTIVE CAPSULE	104.23	76.08	7/1/2006
11976		3	REMOVE W/O REINSERT- CONTRACEPTIVE CAPSULE IMPLANT	125.89	91.45	7/1/2006
11977		3	REMOVAL WITH REINSERTION, IMPLANTABLE CONTRACEPTIVE CAPSULES	202.85	169.07	7/1/2006
11980		3	SUBCUTANEOUS HORMONE PELLET IMPLANTATION (IMPLANTATION OF ESTRADIOL AND/OR	92.05	74.17	7/1/2006
11981		3	INSERTION, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	112.36	78.57	7/1/2006
11982		3	REMOVAL, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	132.59	95.49	7/1/2006
11983		3	REMOVAL WITH REINSERTION, NON-BIODEGRADABLE DRUG DELIVERY IMPLANT	199.96	172.80	7/1/2006
12001		3	REPAIR OF RECENT WOUND	130.57	90.16	7/1/2006
12002		3	SIMPLE REP SUPERF WDS SCA NECK AXIL EXT GEN TRU/EX	138.78	100.69	7/1/2006
12004		3	SIMPLE REP SUPERF WDS SCA NECK AXIL EXT GEN TRU/EX	162.66	118.94	7/1/2006
12005		3	SIMPLE REP SUPERF WDS SCA NECK AXIL EXT GEN TRU/EX	202.93	148.94	7/1/2006
12006		3	SIMPLE REP SUPERF WDS SCA NECK AXIL EXT GEN TRU/EX	252.45	189.85	7/1/2006
12007		3	SIMPLE REP SUPERF WDS SCA NECK AXIL EXT GEN TRU/EX	285.20	218.39	7/1/2006
12011		3	SIMP REP SUPERF WDS OF FACE EA EYEL NO LI MUC MEMB	137.93	92.89	7/1/2006
12013		3	SIMP REP SUPERF WDS OF FACE EA EYEL NO LI MUC MEMB	151.31	106.60	7/1/2006
12014		3	SIMP REP SUPERF WDS OF FACE EA EYEL NO LI MUC MEMB	179.32	128.98	7/1/2006
12015		3	SIMPLE REP SUPERF WDS OF FACE EARS EYE NOSE LIP 7.	225.53	162.93	7/1/2006
12016		3	SIMPLE REPAIR SUPERFICIAL WOUND 12.5 TO 20.0 CM.	267.57	200.00	7/1/2006
12017		3	SIMPLE REPAIR SUPERFICIAL WOUND 20.0 TO 30.0 CM.	242.97	242.97	7/1/2006
12018		3	SIMPLE REPAIR SUPERIFCIAL WOUND OVER 30.0 CM.	287.72	287.72	7/1/2006
12020		3	TREATMENT OF SUPERFICIAL WOUND DEHISCENCE	228.10	165.17	7/1/2006
12021		3	TREATMENT OF SUPERFICIAL WOUND WITH PACKING	132.15	118.48	7/1/2006
12031		3	LAYER CLOSURE OF WOUNDS UP TO 2.5 CM.	157.17	113.12	7/1/2006
12032		3	LAYER CLOSURE OF WOUNDS 2.5 TO 7.5 CM.	220.13	152.23	7/1/2006
12034		3	LAYER CLOSURE OF WOUNDS 7.5 TO 12.5 CM.	216.88	158.92	7/1/2006
12035		3	LAYER CLOSURE OF WOUNDS 12.5 TO 20.0 CM.	304.68	203.49	7/1/2006
12036		3	LAYER CLOSURE OF WOUNDS 20.0 TO 30.0 CM.	342.26	242.02	7/1/2006
12037		3	LAYER CLOSURE WOUNDS OVER 30.0 CM.	384.87	280.63	7/1/2006
12041		3	LAYER CLOSURE OF WOUNDS UP TO 2.5 CM.	174.17	127.13	7/1/2006
12042		3	LAYER CLOSURE OF WOUNDS 2.5 TO 7.5 CM.	210.87	150.92	7/1/2006

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Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
12044		3	LAYER CLOSURE OF WOUNDS 7.5 TO 12.5 CM.	225.92	172.27	7/1/2006
12045		3	LAYER CLOSURE OF WOUNDS 12.5 TO 20.0 CM.	315.02	215.84	7/1/2006
12046		3	LAYER CLOSURE WOUNDS 20.0 TO 30.0 CM.	380.87	255.98	7/1/2006
12047		3	LAYER CLOSURE OF WOUNDS OVER 30.0 CM.	391.07	282.53	7/1/2006
12051		3	LAYER CLOSURE OF WOUNDS UP TO 2.5 CM.	202.18	141.56	7/1/2006
12052		3	LAYER CLOSURE OF WOUNDS 2.5 TO 5.0 CM.	210.63	151.01	7/1/2006
12053		3	LAYER CLOSURE OF WOUNDS 5.0 TO 7.5 CM.	225.28	168.31	7/1/2006
12054		3	LAYER CLOSURE OF WOUNDS 7.5 TO 12.5 CM.	249.37	185.11	7/1/2006
12055		3	LAYER CLOSURE OF WOUNDS 12.5 TO 20.0 CM.	318.22	240.05	7/1/2006
12056		3	LAYER CLOSURE OF WOUNDS 20.0 TO 30.0 CM.	426.13	303.00	7/1/2006
12057		3	LAYER CLOSURE OF WOUNDS OVER 30.0 CM.	430.80	351.54	7/1/2006
13100		3	REPAIR OF WOUND OR LESION	252.80	194.83	7/1/2006
13101		3	REPAIR COMPLEX TRUNK 2.5 TO 7.5 CM.	301.44	235.86	7/1/2006
13102		3	COMPLEX REPAIR TRUNK EACH ADDITIONAL	86.39	66.52	7/1/2006
13120		3	REPAIR OF WOUND OR LESION	262.26	202.64	7/1/2006
13121		3	REPAIR COMPLEX SCALP ARMS AND/OR LEGS 2.5 TO 7.5 C	322.27	254.03	7/1/2006
13122		3	EACH ADDITIONAL -COMPLEX REPAIR TO SCALP,ARMS AND / OR LEGS	105.31	76.17	7/1/2006
13131		3	REPAIR OF WOUND OR LESION	286.83	231.18	7/1/2006
13132		3	REPAIR COMPLEX 2.5 TO 7.5 CM.	417.31	359.35	7/1/2006
13133		3	EACH ADDITIONAL-COMPLEX REPAIR TO FOREHEAD,CHEEKS,CHIN,MOUTH,NECK,AXILLAE,GENIT	137.98	117.11	7/1/2006
13150		3	REPAIR COMPLEX EYE NOSE EARS AND/OR LIPS UP TO 1.0	306.28	236.39	7/1/2006
13151		3	REPAIR OF WOUND OR LESION	326.31	271.33	7/1/2006
13152		3	REPAIR COMPLEX EYE NOSE EAR AND LIPS 2.5 TO 7.5 CM	437.14	370.90	7/1/2006
13153		3	EACH ADDITIONAL -COMPLEX REPAIR TO EYELIDS,NOSE,EARS AND /OR LIPS	155.47	128.98	7/1/2006
13160		3	SECONDARY CLOSURE OF SURGICAL WOUND DEHISCENCE	649.36	649.36	7/1/2006
14000		3	ADJACENT TISSUE TRANSFER OR REARRANGEMENT TRUNK UP	485.96	406.80	7/1/2006
14001		3	ADJACENT TISSUE TRANSFER OR REARRAN TRUNK DEFECT 1	636.15	558.31	7/1/2006
14020		3	SKIN TISSUE REARRANGEMENT SCALP ARMS AND/OR LEGS U	537.49	468.60	7/1/2006
14021		3	ADJACENT TISSUE TRANSF/REARRANG SCALP ARMS LEGS DE	711.69	655.05	7/1/2006
14040		3	SKIN TISSUE REARRANGEMENT DEFECT UP TO 10 SQ CM	589.74	536.41	7/1/2006
14041		3	ADJACENT TISSUE TRANS/REARRANGE 10 SQ CM TO 30 SQ	781.53	717.94	7/1/2006
14060		3	SKIN TISSUE REARRANGEMENT DEFECT UP TO 10 SQ CM	613.14	568.09	7/1/2006
14061		3	ADJACENT TISSUE TRANSF/REARRANGE EYE NOSE EAR LIP	844.48	774.92	7/1/2006
14300		3	SKIN TISSUE REARRANGEMENT MORE THAN 30 SQ CM ANY A	819.05	754.13	7/1/2006
14350		3	FILLETED FINGER OR TOE FLAP INCLUDING PREP OF RECI	613.66	613.66	7/1/2006
15000		3	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF OPEN WOUNDS,	280.93	227.31	7/1/2006
15001		3	SURGICAL PREPARATION OR CREATION OF RECIPIENT SITE BY EXCISION OF	83.94	52.81	7/1/2006
15040		3	HARVEST OF SKIN FOR TISSUE CULTURED SKIN AUTOGRAFT, 100 SQ CM OR LESS	228.90	114.96	7/1/2006
15050		3	PINCH GRAFT SINGLE OR MULTIPLE TO COVE SM ULCER UP	397.12	337.17	7/1/2006
15100		3	SPLIT GRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PERCENT OF BODY	772.96	614.64	7/1/2006
15101		3	SPLIT GRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITIONAL	191.33	106.21	7/1/2006
15110		3	EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PERC	726.62	604.73	7/1/2006
15111		3	EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH A	115.32	98.76	7/1/2006
15115		3	EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITA	686.07	623.80	7/1/2006
15116		3	EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITA	149.94	134.71	7/1/2006
15120		3	SPLIT GRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS,	736.34	638.63	7/1/2006
15121		3	SPLIT GRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS,	253.80	165.47	7/1/2006
15130		3	DERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR ONE PERCENT	601.95	485.03	7/1/2006
15131		3	DERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR EACH ADDI	94.28	80.04	7/1/2006
15135		3	DERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA	734.28	676.32	7/1/2006
15136		3	DERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA	88.09	80.80	7/1/2006
15150		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; FIRST 25 SQ CM OR LE	604.17	537.26	7/1/2006
15151		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; ADDITIONAL 1 SQ CM T	121.85	106.61	7/1/2006
15152		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100	149.74	133.18	7/1/2006
15155		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS	607.90	579.41	7/1/2006
15156		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS	158.97	148.37	7/1/2006
15157		3	TISSUE CULTURED EPIDERMAL AUTOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS	175.95	161.71	7/1/2006
15170		3	ACELLULAR DERMAL REPLACEMENT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR	319.88	271.19	7/1/2006
15171		3	ACELLULAR DERMAL REPLACEMENT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM,	82.71	80.72	7/1/2006
15175		3	ACELLULAR DERMAL REPLACEMENT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBIT	451.10	403.73	7/1/2006
15176		3	ACELLULAR DERMAL REPLACEMENT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBIT	131.65	127.68	7/1/2006
15200		3	SKIN GRAFT PROCEDURE	623.67	517.34	7/1/2006
15201		3	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, TRUNK; EACH	136.93	72.32	7/1/2006
15220		3	SKIN GRAFT PROCEDURE	607.39	524.26	7/1/2006
15221		3	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, SCALP,	123.71	65.08	7/1/2006
15240		3	SKIN GRAFT PROCEDURE	685.14	610.29	7/1/2006
15241		3	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, FOREHEAD,	153.29	102.34	7/1/2006
15260		3	SKIN GRAFT PROCEDURE	716.54	662.22	7/1/2006
15261		3	FULL THICKNESS GRAFT, FREE, INCLUDING DIRECT CLOSURE OF DONOR SITE, NOSE, EARS,	174.56	131.50	7/1/2006
15300		3	ALLOGRAFT SKIN FOR TEMPORARY WOUND CLOSURE, TRUNK, ARMS, LEGS; FIRST 100 SQ	261.26	229.14	7/1/2006

Physician Fee Schedule

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
15301		3	ALLOGRAFT SKIN FOR TEMPORARY WOUND CLOSURE, TRUNK, ARMS, LEGS; EACH ADDITION	54.80	52.48	7/1/2006
15320		3	ALLOGRAFT SKIN FOR TEMPORARY WOUND CLOSURE, FACE, SCALP, EYELIDS, MOUTH, NEC	302.81	266.71	7/1/2006
15321		3	ALLOGRAFT SKIN FOR TEMPORARY WOUND CLOSURE, FACE, SCALP, EYELIDS, MOUTH, NEC	81.70	78.38	7/1/2006
15330		3	ACELLULAR DERMAL ALLOGRAFT, TRUNK, ARMS, LEGS; FIRST 100 SQ CM OR LESS, OR O	260.93	228.80	7/1/2006
15331		3	ACELLULAR DERMAL ALLOGRAFT, TRUNK, ARMS, LEGS; EACH ADDITIONAL 100 SQ CM, OR	54.46	52.48	7/1/2006
15335		3	ACELLULAR DERMAL ALLOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS,	289.95	255.83	7/1/2006
15336		3	ACELLULAR DERMAL ALLOGRAFT, FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS,	78.95	74.97	7/1/2006
15340		3	TISSUE CULTURED ALLOGENEIC SKIN SUBSTITUTE; FIRST 25 SQ CM OR LESS	276.20	234.79	7/1/2006
15341		3	TISSUE CULTURED ALLOGENEIC SKIN SUBSTITUTE; EACH ADDITIONAL 25 SQ CM	39.59	26.01	7/1/2006
15360		3	TISSUE CULTURED ALLOGENEIC DERMAL SUBSTITUTE; TRUNK, ARMS, LEGS; FIRST 100 S	297.63	251.59	7/1/2006
15361		3	TISSUE CULTURED ALLOGENEIC DERMAL SUBSTITUTE; EACH ADDITIONAL 100 SQ CM, OR	63.84	59.87	7/1/2006
15365		3	TISSUE CULTURED ALLOGENEIC DERMAL SUBSTITUTE, FACE, SCALP, EYELIDS, MOUTH, N	311.05	266.00	7/1/2006
15366		3	TISSUE CULTURED ALLOGENEIC DERMAL SUBSTITUTE, FACE, SCALP, EYELIDS, MOUTH, N	79.31	75.33	7/1/2006
15400		3	APPLICATION OF XENOGRAFT, SKIN; 100 SQ CM OR LESS	287.63	287.63	7/1/2006
15401		3	APPLICATION OF XENOGRAFT, SKIN; EACH ADDITIONAL 100 SQ CM (LIST	102.16	53.80	7/1/2006
15420		3	XENOGRAFT SKIN (DERMAL), FOR TEMPORARY WOUND CLOSURE, FACE, SCALP, EYELIDS,	332.65	299.86	7/1/2006
15421		3	XENOGRAFT SKIN (DERMAL), FOR TEMPORARY WOUND CLOSURE, FACE, SCALP, EYELIDS,	102.56	79.38	7/1/2006
15430		3	ACELLULAR XENOGRAFT IMPLANT; FIRST 100 SQ CM OR LESS, OR ONE PERCENT OF BODY	451.43	441.82	7/1/2006
15431		3	ACELLULAR XENOGRAFT IMPLANT; EACH ADDITIONAL 100 SQ CM, OR EACH ADDITIONAL O	143.64	140.58	7/1/2006
15570		3	PEDICLE FLAP GRAFT; TRUNK	736.80	585.61	7/1/2006
15572		3	PEDICLE FLAP GRAFT; SCALP, ARMS, OR LEGS	676.36	575.34	7/1/2006
15574		3	PEDICLE FLAP-FACE,NECK,AXILLA,GENITALIA,HANDS,FEET	737.74	641.68	7/1/2006
15576		3	PEDICLE FLAP; EYELIDS,NOSE,EARS,LIPS,INTRAORAL	656.49	561.09	7/1/2006
15600		3	SKIN GRAFT PROCEDURE	327.38	176.66	7/1/2006
15610		3	SKIN GRAFT PROCEDURE	250.87	208.80	7/1/2006
15620		3	SKIN GRAFT PROCEDURE	372.27	242.76	7/1/2006
15630		3	SKIN GRAFT PROCEDURE	359.41	263.35	7/1/2006
15650		3	SKIN GRAFT PROCEDURE	389.40	292.02	7/1/2006
15732		3	MUSCLE, MYOCUTANEOUS, OR FASCIOCUTANEOUS FLAP; HEAD AND NECK (EG, TEMPORALIS,	1,286.24	1,092.81	7/1/2006
15734		3	MUSCLE FLAP TRUNK	1,301.04	1,109.88	7/1/2006
15736		3	MUSCLE FLAP UPPER EXTREMITY	1,246.97	1,013.54	7/1/2006
15738		3	MUSCLE FLAP LOWER EXTREMITY	1,302.01	1,094.34	7/1/2006
15740		3	SKIN GRAFT PROCEDURE	719.35	657.08	7/1/2006
15750		3	SKIN GRAFT PROCEDURE	743.21	743.21	7/1/2006
15756		3	FREE MUSCLE FLAP WITH OR WITHOUT SKIN WITH MICROVASCULAR ANASTOMOSIS	2,055.78	2,055.78	7/1/2006
15757		3	FREE SKIN FLAP WITH MICROVASCULAR ANASTOMOSIS	2,073.30	2,073.30	7/1/2006
15758		3	FREE FASCIAL FLAP WITH MICROVASCULAR ANASTOMOSIS	2,075.80	2,075.80	7/1/2006
15760		3	SKIN GRAFT PROCEDURE	666.77	575.02	7/1/2006
15770		3	SKIN GRAFT PROCEDURE	516.49	516.49	7/1/2006
15780		3	ABRASION TREATMENT OF SKIN	660.10	551.46	7/1/2006
15781		3	ABRASION SKIN REMOVAL TATTOOS LESS TOTAL FACE	411.63	360.29	7/1/2006
15782		3	ABRASION SKIN REMOVAL TATTOOS REGIONAL NOT FACE	490.25	380.62	7/1/2006
15783		3	SUPERFICIAL DERMABRASION	388.76	299.33	7/1/2006
15786		3	ABRASION SINGLE LESION EG KERATOSIS SCAR	186.91	119.34	7/1/2006
15787		3	ABRASION; EACH ADDITIONAL FOUR LESIONS OR LESS (LIST SEPARATELY IN ADDITION TO	48.91	18.10	7/1/2006
15788		3	CHEMICAL PEEL, FACIAL;	300.69	180.13	7/1/2006
15789		3	CHEMICAL PEEL, FACIAL;	450.00	340.70	7/1/2006
15792		3	CHEMICAL PEEL, NONFACIAL;	305.46	217.69	7/1/2006
15793		3	CHEMICAL PEEL, NONFACIAL;	347.34	284.08	7/1/2006
15819		3	CERVICOPLASTY	598.18	598.18	7/1/2006
15820		3	REMOVAL OF SKIN FURROWS	425.80	379.09	7/1/2006
15821		3	REMOVAL OF SKIN FURROWS	460.06	405.74	7/1/2006
15822		3	BLEPHAROPLASTY, UPPER EYELID;	362.14	317.43	7/1/2006
15823		3	BLEPHAROPLASTY, UPPER EYELID; W/EXCESSIVE SKIN WEIGHTING LID	525.65	478.62	7/1/2006
15831		3	REMOVAL OF SKIN FURROWS	756.86	756.86	7/1/2006
15832		3	REMOVAL OF SKIN FURROWS	731.70	731.70	7/1/2006
15833		3	REMOVAL OF SKIN FURROWS	688.48	688.48	7/1/2006
15834		3	REMOVAL OF SKIN FURROWS	682.38	682.38	7/1/2006
15835		3	REMOVAL OF SKIN FURROWS	706.70	706.70	7/1/2006
15836		3	REMOVAL OF SKIN FURROWS	592.01	592.01	7/1/2006
15837		3	REMOVAL OF SKIN FURROWS	614.19	575.11	7/1/2006
15838		3	EXCISION EXCESS SKIN SUBMENTAL FAT PAD	471.09	471.09	7/1/2006
15839		3	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE OTHER AREA	658.26	577.34	7/1/2006
15840		3	SKIN REPAIR FOR NERVE PALSY	838.31	838.31	7/1/2006
15841		3	FACIAL NERVE PARALYSIS FREE MUSCLE GRAFT	1,392.70	1,392.70	7/1/2006
15842		3	GRAFT FOR FACIAL NERVE PARALYSIS; FREE MUSCLE FLAP BY MICROSURGICAL TECHNIQUE	2,239.25	2,239.25	7/1/2006
15845		3	SKIN AND MUSCLE REPAIR, FACE	779.53	779.53	7/1/2006
15850		3	REMOVAL OF SUTURES W/ ANESTHESIA, SAME SURGEON	80.91	39.17	7/1/2006
15851		3	REMOVAL SUTURES IN HOSP ER UNDER ANESTHESIA	87.99	42.61	7/1/2006
15852		3	DRESSING CHANGE W/ ANESTHESIA, EXCLUDES BURNS	94.31	43.97	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
15860		3	INTRAVENOUS INJECTION OF AGENT (EG, FLUORESCEIN) TO TEST VASCULAR FLOW IN FLAP	103.61	101.94	7/1/2006
15920		3	REMOVAL OF TAIL BONE	494.32	494.32	7/1/2006
15922		3	REMOVAL OF TAIL BONE	628.26	628.26	7/1/2006
15931		3	EXCISION SACRAL DECUBITUS ULCER PRIMARY SUTURE	549.80	549.80	7/1/2006
15933		3	EXC SACRAL DECUBITUS ULCER WITH OSTECTOMY/PRIMARY	685.61	685.61	7/1/2006
15934		3	EXCISION SACRAL DECUBITUS ULCER SKIN FLAP CLOSUR	764.13	764.13	7/1/2006
15935		3	EXC SACRAL PRESSURE ULCER LOCAL SKIN FLAP	914.75	914.75	7/1/2006
15936		3	EXCISION, SACRAL PRESSURE ULCER, IN PREPARATION FOR MUSCLE OR MYOCUTANEOUS FLAP	758.47	758.47	7/1/2006
15937		3	EXC SACRAL PRESSURE ULCER WITH OSTECTOMY	884.45	884.45	7/1/2006
15940		3	REMOVAL OF PRESSURE SORE	571.10	571.10	7/1/2006
15941		3	EXCISION SACRAL DECUBITUS ULCER WITH OSTECTOMY	763.04	763.04	7/1/2006
15944		3	EXC ISCHIAL PRESSURE ULCER LOCAL SKIN FLAP CLOSURE	735.40	735.40	7/1/2006
15945		3	EXC ISCHIAL PRESSURE ULCER WITH OSTECTOMY	818.43	818.43	7/1/2006
15946		3	EXCISION, ISCHIAL PRESSURE ULCER, WITH OSTECTOMY, IN PREPARATION FOR MUSCLE OR	1,325.48	1,325.48	7/1/2006
15950		3	REMOVAL OF PRESSURE SORE	474.54	474.54	7/1/2006
15951		3	EXCISION TROCHANTERIC DECUBITUS ULCER W OSTECTOMY	680.40	680.40	7/1/2006
15952		3	REMOVAL OF PRESSURE SORE	703.58	703.58	7/1/2006
15953		3	REMOVAL OF PRESSURE SORE	794.00	794.00	7/1/2006
15956		3	EXCISION, TROCHANTERIC PRESSURE ULCER, IN PREPARATION FOR MUSCLE OR	966.48	966.48	7/1/2006
15958		3	EXC TROCHANTERIC ULCER MYOCUTAN FLAP W OSTECTOMY	975.11	975.11	7/1/2006
16000		3	INITIAL TREATMENT, FIRST DEGREE BURN, WHEN NO MORE THAN LOCAL	62.37	42.50	7/1/2006
16020		3	DRESSINGS AND/OR DEBRIDEMENT, INITIAL OR SUBSEQUENT;	73.37	49.86	7/1/2006
16025		3	DRESSINGS AND/OR DEBRIDEMENT, INITIAL OR SUBSEQUENT;	129.60	102.78	7/1/2006
16030		3	DRESSINGS AND/OR DEBRIDEMENT, INITIAL OR SUBSEQUENT;	152.62	117.51	7/1/2006
16035		3	ESCHAROTOMY; INITIAL INCISION	197.58	197.58	7/1/2006
16036		3	ESCHAROTOMY; EACH ADDITIONAL INCISION (LIST SEPARATELY IN ADDITION TO CODE FOR	78.49	78.49	7/1/2006
17000		3	DESTRUCTION ANY METHOD PREMALIGNANT LESIONS ONE LE	54.42	40.18	7/1/2006
17003		3	DESTRUCTION BY ANY METHOD, INCLUDING LASER, WITH OR WITHOUT SURGI	9.27	7.95	7/1/2006
17004		3	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY,	179.49	155.65	7/1/2006
17106		3	DESTRUCTION OF VASCULAR PROLIFERATIVE LESIONS	325.65	283.59	7/1/2006
17107		3	DESTRUCTION VASCULAR PROLIFERATIVE LESION 10SQ LES	583.08	525.12	7/1/2006
17108		3	DESTRUCTION VASCULAR LESIONS OVER 50.0 SQ CM	794.66	741.34	7/1/2006
17110		3	DESTRUCTION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY, CHEMOSURGERY,	78.21	47.74	7/1/2006
17111		3	DESTRUCTION BY ANY METHOD OF FLAT WARTS, MOLLUSCUM CONTAGIOSUM	89.59	61.10	7/1/2006
17250		3	CHEMICAL CAUTERIZATION OF WOUND	59.78	30.48	7/1/2006
17260		3	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	76.08	55.88	7/1/2006
17261		3	DESTRUCT.MALIG. LESION-TRUNK,ARMS,LEGS; 0.6-1.0 CM	96.60	70.77	7/1/2006
17262		3	DESTRUCT.MALIG. LESION-TRUNK,ARMS,LEGS; 1.1-2.0 CM	120.87	92.05	7/1/2006
17263		3	DESTRUCT.MALIG. LESION-TRUNK,ARMS,LEGS; 2.1-3.0 CM	134.29	102.16	7/1/2006
17264		3	DESTRUCT.MALIG. LESION-TRUNK,ARMS,LEGS; 3.1-4.0 CM	145.55	108.79	7/1/2006
17266		3	DESTRUCT.MALIG. LESION-TRUNK,ARMS,LEGS; OVER 4. CM	169.46	126.73	7/1/2006
17270		3	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	104.98	77.49	7/1/2006
17271		3	DESTRUCTION MALIGNANT LESION SCALP,NECK-0.6-1.0 CM	113.97	87.49	7/1/2006
17272		3	DESTRUCTION MALIGNANT LESION SCALP,NECK-1.1-2.0 CM	131.58	102.10	7/1/2006
17273		3	DESTRUCTION MALIGNANT LESION SCALP,NECK-2.1-3.0 CM	148.85	115.73	7/1/2006
17274		3	DESTRUCTION MALIGNANT LESION SCALP,NECK-3.1-4.0 CM	180.68	143.25	7/1/2006
17276		3	DESTRUCTION MALIGNANT LESION SCALP,NECK OVER 4. CM	216.61	174.54	7/1/2006
17280		3	DESTRUCTION, MALIGNANT LESION (EG, LASER SURGERY, ELECTROSURGERY, CRYOSURGERY,	96.60	70.10	7/1/2006
17281		3	DESTRUCTION MALIGNANT LESION FACE 0.6-1.0 CM	126.80	99.64	7/1/2006
17282		3	DESTRUCTION MALIGNANT LESION FACE 1.1-2.0 CM	146.83	116.36	7/1/2006
17283		3	DESTRUCTION MALIGNANT LESION FACE 2.1-3.0 CM	182.04	146.93	7/1/2006
17284		3	DESTRUCTION MALIGNANT LESION FACE 3.1-4.0 CM	215.61	176.86	7/1/2006
17286		3	DESTRUCTION MALIGNANT LESION FACE OVER 4.0 CM	286.68	245.94	7/1/2006
17304		3	CHEMOSURGERY (MOHS' MICROGRAPHIC TECHNIQUE), INCLUDING REMOVAL OF ALL GROSS	553.76	398.42	7/1/2006
17305		3	CHEMOSURGERY (MOHS' MICROGRAPHIC TECHNIQUE), INCLUDING	234.32	149.53	7/1/2006
17306		3	CHEMOSURGERY (MOHS' MICROGRAPHIC TECHNIQUE), INCLUDING	234.98	149.86	7/1/2006
17307		3	CHEMOSURGERY (MOHS' MICROGRAPHIC TECHNIQUE), INCLUDING	223.39	150.19	7/1/2006
17310		3	CHEMOSURGERY (MOHS' MICROGRAPHIC TECHNIQUE), INCLUDING	88.55	50.13	7/1/2006
17340		3	CRYOTHERAPY (CO2 SLUSH, LIQUID N2) FOR ACNE	40.77	40.44	7/1/2006
17360		3	ACNE THERAPY	100.56	81.68	7/1/2006
19000		3	PUNCTURE ASPIRATION OF CYST OF BREAST;	98.00	42.35	7/1/2006
19001		3	PUNCTURE ASPIRATION OF CYST OF BREAST; EACH ADDITIONAL CYST (LIST SEPARATELY IN	24.32	20.68	7/1/2006
19020		3	INCISION OF BREAST LESION	348.87	227.23	7/1/2006
19030		3	INJECTION PROCEDURE ONLY FOR MAMMARY DUCTOGRAM OR GALACTOGRAM	152.22	73.72	7/1/2006
19100		3	BIOPSY OF BREAST; PERCUTANEOUS, NEEDLE CORE, NOT USING IMAGING GUIDANCE	118.64	63.32	7/1/2006
19101		3	BIOPSY OF BREAST; OPEN, INCISIONAL	272.86	186.85	7/1/2006
19102		3	BIOPSY OF BREAST; PERCUTANEOUS, NEEDLE CORE, USING IMAGING GUIDANCE	202.42	97.09	7/1/2006
19103		3	BIOPSY OF BREAST; PERCUTANEOUS, AUTOMATED VACUUM ASSISTED OR ROTATING BIOPSY	521.33	180.50	7/1/2006
19110		3	NIPPLE EXPLORATION W/ OR W/O EXCISION	360.03	262.60	7/1/2006
19112		3	EXCISION OF LACTIFEROUS DUCT FISTULA	344.21	231.93	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
19120		3	EXCISION OF CYST, FIBROADENOMA, OR OTHER BENIGN OR MALIGNANT TUMOR, ABERRANT	367.34	318.31	7/1/2006
19125		3	EXCISION OF BREAST LESION IDENTIFIED BY PREOPERATIVE PLACEMENT OF RADIOLOGICAL	394.91	345.22	7/1/2006
19126		3	EXCISION OF BREAST LESION IDENTIFIED BY PREOPERATIVE PLACEMENT OF RADIOLOGICAL	147.37	147.37	7/1/2006
19140		3	MASTECTOMY FOR GYNECOMASTIA	437.75	313.21	7/1/2006
19160		3	REMOVAL OF BREAST TISSUE	347.11	347.11	7/1/2006
19162		3	MASTECTOMY PARTIAL WITH AXILLARY LYMPHADENECTOMY	737.97	737.97	7/1/2006
19180		3	REMOVAL OF BREAST	510.26	510.26	7/1/2006
19182		3	REMOVAL OF BREAST TISSUE	459.57	459.57	7/1/2006
19200		3	EXTENSIVE BREAST SURGERY	865.52	865.52	7/1/2006
19220		3	MASTECTOMY RADICAL INC INT MAMMARY LYMPH NODES	885.86	885.86	7/1/2006
19240		3	EXTENSIVE BREAST SURGERY	896.44	896.44	7/1/2006
19260		3	REMOVAL OF CHEST WALL LESION	974.18	974.18	7/1/2006
19271		3	REMOVAL OF CHEST WALL LESION	1,335.94	1,335.94	7/1/2006
19272		3	REMOVAL OF CHEST WALL LESION	1,472.33	1,472.33	7/1/2006
19290		3	PRE-OP PLACEMENT OF NEEDLE LOCALIZATION, BREAST	142.07	61.25	7/1/2006
19291		3	PREOPERATIVE PLACEMENT OF NEEDLE LOCALIZATION WIRE, BREAST; EACH ADDITIONAL	63.68	30.56	7/1/2006
19295		3	IMAGE GUIDED PLACEMENT, METALLIC LOCALIZATION CLIP, PERCUTANEOUS, DURING BREAST	89.66	89.66	7/1/2006
19296		3	PLACEMENT OF RADIOTHERAPY AFTERLOADING BALLOON CATHETER INTO THE BREAST FOR	4,304.13	189.66	7/1/2006
19297		3	PLACEMENT OF RADIOTHERAPY AFTERLOADING BALLOON CATHETER INTO THE BREAST FOR	87.04	87.04	7/1/2006
19298		3	PLACEMENT OF RADIOTHERAPY AFTERLOADING BRACHYTHERAPY CATHETERS (MULTIPLE TUBE	1,626.34	306.08	7/1/2006
19316		3	MASTOPEXY	671.12	671.12	7/1/2006
19318		3	REDUCTION MAMMAPLASTY	999.53	999.53	7/1/2006
19324		3	MAMMAPLASTY AUGMENTATION W/O PROSTHETIC IMPLANT	391.91	391.91	7/1/2006
19325		3	MAMMAPLASTY AUGMENTATION WITH PROSTHETIC IMPLANT	550.95	550.95	7/1/2006
19328		3	REMOVAL OF INTACT MAMMARY IMPLANT	391.71	391.71	7/1/2006
19330		3	REMOVAL OF IMPLANT MATERIAL	501.59	501.59	7/1/2006
19340		3	IMMEDIATE INSERTION OF BREAST PROTHESIS FOLLOWING MASTECTOMY OR	355.07	355.07	7/1/2006
19342		3	DELAYED INSERTION BREAST PROSTHESIS FOLLOWING MASTECTOMY OR IN RE	740.81	740.81	7/1/2006
19350		3	NIPPLE/AREOLA RECONSTRUCTION	813.01	591.42	7/1/2006
19355		3	CORRECTION OF INVERTED NIPPLES	633.88	449.38	7/1/2006
19357		3	BREAST RECONSTRUCTION, IMMEDIATE OR DELAYED, WITH TISSUE EXPANDER,	1,238.48	1,238.48	7/1/2006
19361		3	BREAST RECONSTRUCTION WITH LATISSIMUS DORSI FLAP, WITH OR W/O IMP	1,172.18	1,172.18	7/1/2006
19364		3	BREAST RECONSTRUCTION WITH FREE FLAP	2,399.13	2,399.13	7/1/2006
19366		3	BREAST RECONSTRUCTION WITH OTHER TECHNIQUE	1,224.26	1,224.26	7/1/2006
19367		3	BREAST RECONSTRUCTION WITH TRAM SINGLE PEDICLE,INCLUDING CLOSURE	1,571.74	1,571.74	7/1/2006
19368		3	BREAST RECONSTRUCTION TRAM SINGLE PEDICLE,INCLUDING CLOSURE OF DO	1,920.93	1,920.93	7/1/2006
19369		3	BREAST RECONSTRUCTION TRAM DOUBLE PEDICLE,INCLUDING CLOSURE DONOR	1,786.95	1,786.95	7/1/2006
19370		3	OPEN PERIPROSTHETIC CAPSULOTOMY BREAST	548.39	548.39	7/1/2006
19371		3	PERIPROSTHETIC CAPSULECTOMY BREAST	633.27	633.27	7/1/2006
19380		3	REVISION OF RECONSTRUCTED BREAST	617.59	617.59	7/1/2006
20000		3	INCISION OF ABSCESS	171.44	139.47	7/1/2006
20005		3	INCISION OF ABSCESS	249.13	207.84	7/1/2006
20100		3	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); NECK	538.12	538.12	7/1/2006
20101		3	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); CHEST	322.76	179.56	7/1/2006
20102		3	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); ABDOMEN/FLANK/BACK	400.54	216.04	7/1/2006
20103		3	EXPLORATION OF PENETRATING WOUND (SEPARATE PROCEDURE); EXTREMITY	492.55	319.71	7/1/2006
20150		3	EXCISION OF EPIPHYSEAL BAR, WITH OR WITHOUT AUTOGENOUS SOFT TISSUE GRAFT	772.44	772.44	7/1/2006
20200		3	MUSCLE BIOPSY	158.31	82.38	7/1/2006
20205		3	MUSCLE BIOPSY	221.39	131.61	7/1/2006
20206		3	BIOPSY, MUSCLE, PERCUTANEOUS NEEDLE	253.21	58.12	7/1/2006
20220		3	BONE BIOPSY	198.94	73.73	7/1/2006
20225		3	BIOPSY, BONE, TROCAR, OR NEEDLE; DEEP (EG, VERTEBRAL BODY, FEMUR)	884.56	109.82	7/1/2006
20240		3	BIOPSY, BONE, EXCISIONAL; SUPERFICIAL (EG, ILIUM, STERNUM, SPINOUS PROCESS,	210.89	210.89	7/1/2006
20245		3	BONE BIOPSY	526.88	526.88	7/1/2006
20250		3	BONE BIOPSY	319.87	319.87	7/1/2006
20251		3	BONE BIOPSY	363.70	363.70	7/1/2006
20500		3	INJECTION OF SINUS TRACT;	122.24	97.73	7/1/2006
20501		3	INJECTION OF SINUS TRACT DIAGNOSTIC SINOGRAM	125.00	36.56	7/1/2006
20520		3	REMOVAL OF FOREIGN BODY	168.16	130.06	7/1/2006
20525		3	REMOVAL OF FOREIGN BODY	441.13	224.19	7/1/2006
20526		3	INJECTION, THERAPEUTIC (EG, LOCAL ANESTHETIC, CORTICOSTEROID), CARPAL TUNNEL	68.91	53.92	7/1/2006
20550		3	INJECTION; TENDON SHEATH, LIGAMENT, GANGLION CYST	52.49	36.50	7/1/2006
20551		3	INJECTION; TENDON ORIGIN/INSERTION	51.37	39.78	7/1/2006
20552		3	INJECTION; SINGLE OR MULTIPLE TRIGGER POINT(S), ONE OR TWO MUSCLE GROUP(S)	48.76	31.54	7/1/2006
20553		3	INJECTION; SINGLE OR MULTIPLE TRIGGER POINT(S), THREE OR MORE MUSCLE GROUPS	55.08	35.21	7/1/2006
20600		3	DRAINAGE OF JOINT	47.13	37.20	7/1/2006
20605		3	DRAINAGE OF JOINT OR BURSA	51.50	38.25	7/1/2006
20610		3	DRAINAGE OF JOINT OR BURSA	62.38	44.73	7/1/2006
20612		3	ASPIRATION AND/OR INJECTION OF GANGLION CYST(S) ANY LOCATION	50.92	39.26	7/1/2006
20615		3	ASPIRATION AND INJECTION FOR TREATMENT OF BONE CYST	203.29	147.97	7/1/2006

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20650		3	INSERTION & REMOVAL BONE PIN	165.93	138.77	7/1/2006
20660		3	APPLICATION OF TONGS OR CALIPER INCLUDING REMOVAL	204.61	156.66	7/1/2006
20661		3	FIXATION PROCEDURE	364.78	364.78	7/1/2006
20662		3	APPLICATION OF HALO PELVIC	414.58	414.58	7/1/2006
20663		3	FIXATION PROCEDURE	377.11	377.11	7/1/2006
20664		3	APPLICATION OF HALO, INCLUDING REMOVAL, CRANIAL, 6 OR MORE PINS PLACED, FOR	562.98	562.98	7/1/2006
20665		3	REMOVAL OF FIXATION DEVICE	122.91	96.26	7/1/2006
20670		3	REMOVAL OF IMPLANT SUPERFICIAL EG BURIED WIRE PIN	452.32	138.80	7/1/2006
20680		3	REMOVAL OF BURIED SUPPORT	424.96	256.58	7/1/2006
20690		3	APPLICATION EXT FIXATION STANDARD CONFIGURATION	223.32	223.32	7/1/2006
20692		3	APPLICATION OF MULTIPLANE UNILATERAL EXTERNAL FIX	379.70	379.70	7/1/2006
20693		3	ADJUSTMENT OR REVISION EXTERNAL FIXATION REQ ANEST	414.04	414.04	7/1/2006
20694		3	REMOVAL UNDER ANESTHESIA EXTERNAL FIXATION SYSTEM	402.93	299.85	7/1/2006
20802		3	REPLANTATION OF ARM	2,263.04	2,263.04	7/1/2006
20805		3	REPLANTATION FOREARM, COMPLETE AMPUTATION	3,048.88	3,048.88	7/1/2006
20808		3	REIMPLANTATION OF HAND	3,776.79	3,776.79	7/1/2006
20816		3	REIMPLANTATION OF DIGIT	2,471.61	2,471.61	7/1/2006
20822		3	REPLANTATION DIGIT EXCL THUMB, COMPLETE AMPUTATION	2,153.60	2,153.60	7/1/2006
20824		3	REPLANTATION THUMB, COMPLETE AMPUTATION	2,432.28	2,432.28	7/1/2006
20827		3	REPLANTATION THUMB, COMPLETE AMPUTATION	2,245.34	2,245.34	7/1/2006
20838		3	REPLANTATION FOOT COMPLETE	2,254.47	2,254.47	7/1/2006
20900		3	REMOVAL OF BONE FOR GRAFT	502.08	410.56	7/1/2006
20902		3	REMOVAL OF BONE FOR GRAFT	529.96	529.96	7/1/2006
20910		3	REMOVE CARTILAGE FOR GRAFT	378.92	378.92	7/1/2006
20912		3	CARTILAGE GRAFT COSTOCHONDRAL NASAL SEPTUM	436.60	436.60	7/1/2006
20920		3	REMOVAL OF TISSUE FOR GRAFT	345.87	345.87	7/1/2006
20922		3	REMOVAL OF TISSUE FOR GRAFT	504.15	415.38	7/1/2006
20924		3	REMOVAL OF TENDON FOR GRAFT	452.26	452.26	7/1/2006
20926		3	REMOVAL OF TISSUE FOR GRAFT	375.58	375.58	7/1/2006
20931		3	ALLOGRAFT FOR SPINE SURGERY ONLY; STRUCTURAL	105.81	105.81	7/1/2006
20937		3	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); MORSELIZED	160.92	160.92	7/1/2006
20938		3	AUTOGRAFT FOR SPINE SURGERY ONLY (INCLUDES HARVESTING THE GRAFT); STRUCTURAL,	174.97	174.97	7/1/2006
20950		3	MONITOR INTERSTITIAL PRESSURE	277.19	82.71	7/1/2006
20955		3	FIBULA GRAFT W/MICROVASCULAR ANASTOMOSIS	2,328.38	2,328.38	7/1/2006
20956		3	BONE GRAFT WITH MICROVASCULAR ANASTOMOSIS; ILIAC CREST	2,392.48	2,392.48	7/1/2006
20957		3	BONE GRAFT WITH MICROVASCULAR ANASTOMOSIS; METATARSAL	2,252.79	2,252.79	7/1/2006
20962		3	BONE GRAFT WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN FIBULA, ILIAC CREST, OR	2,436.78	2,436.78	7/1/2006
20969		3	FREE OSTEOCUTANEOUS FLAP WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN ILIAC	2,573.78	2,573.78	7/1/2006
20970		3	FREE OSTEOCUTANEOUS FLAP WITH MICROVASCULAR ANASTOMOSIS; ILIAC CREST	2,543.15	2,543.15	7/1/2006
20972		3	OSTEOCUTANEOUS FLAP MICROVASCULAR ANASTOMO METARSA	2,351.36	2,351.36	7/1/2006
20973		3	FREE OSTEOCUTANEOUS FLAP GREAT TOE WEB SPACE	2,608.29	2,608.29	7/1/2006
20974		3	BIO-OSTEGEN SYSTEM	47.60	42.61	7/1/2006
20975		3	INVASIVE ELECTRICAL STIMULATION TO AID BONE HEALING	162.00	162.00	7/1/2006
20979		3	LOW INTENSITY ULTRASOUND STIMULATION TO AID BONE HEALING, NONINVASIVE	50.89	35.66	7/1/2006
20982		3	ABLATION, BONE TUMOR(S) (EG, OSTEOID OSTEOMA, METASTASIS) RADIOFREQUENCY,	3,916.47	376.34	7/1/2006
21010		3	ARTHROTOMY, TEMPOROMANDIBULAR JOINT	624.65	624.65	7/1/2006
21015		3	RADICAL RESECTION OF TUMOR SOFT FACE OR SCALP	372.50	372.50	7/1/2006
21025		3	EXCISION OF BONE, MANDIBLE	798.62	702.57	7/1/2006
21026		3	EXCISION OF BONE, FACIAL BONES	449.08	398.07	7/1/2006
21029		3	REMOVAL BY CONTOURING BENIGN TUMOR FACIAL BONE	610.23	531.73	7/1/2006
21030		3	EXCISION BENIGN TUMOR OR CYST OF FACIAL BONE OTHER	384.21	340.91	7/1/2006
21031		3	EXCISION OF TORUS MANDIBULARIS	299.28	247.94	7/1/2006
21032		3	EXCISION OF MAXILLARY TORUS PALATINUS	305.01	244.07	7/1/2006
21034		3	EXC MALIGNANT TUMOR FACIAL BONE TOHER THAN MANDIBL	1,149.81	1,041.50	7/1/2006
21040		3	REMOVAL OF BONE LESION	386.41	330.76	7/1/2006
21044		3	EXCISION MALIGNANT TUMOR MANDIBLE	763.43	763.43	7/1/2006
21045		3	EXC MALIGNANCY MANDIBLE RADICAL	1,026.85	1,026.85	7/1/2006
21046		3	EXCISION OF BENIGN TUMOR OR CYST OF MANDIBLE; REQUIRING INTRA-ORAL OSTEOTOMY	905.09	905.09	7/1/2006
21047		3	EXCISION OF BENIGN TUMOR OR CYST OF MANDIBLE; REQUIRING EXTRA-ORAL OSTEOTOMY	1,169.31	1,169.31	7/1/2006
21048		3	EXCISION OF BENIGN TUMOR OR CYST OF MAXILLA; REQUIRING INTRA-ORAL OSTEOTOMY	928.97	928.97	7/1/2006
21049		3	EXCISION OF BENIGN TUMOR OR CYST OF MAXILLA; REQUIRING EXTRA-ORAL OSTEOTOMY AND	1,116.18	1,116.18	7/1/2006
21050		3	ARTHRECTOMY TEMPOROMANDIBULAR JOINT UNILATERAL	733.89	733.89	7/1/2006
21060		3	MENISECTOMY TEMPOROMANDIBULAR JOINT UNILATERAL	685.23	685.23	7/1/2006
21070		3	CORONOIDECTOMY	559.96	559.96	7/1/2006
21100		3	MAXILLOFACIAL FIXATION	542.30	316.74	7/1/2006
21110		3	APPLICA INTERDENTAL FIXATION DEVICE COND OTH THAN	520.56	480.60	7/1/2006
21116		3	INJECTION PROCEDURE FOR TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	174.30	41.48	7/1/2006
21120		3	GENIOPLASTY; AUGMENTATION	542.39	439.71	7/1/2006
21121		3	GENIOPLASTY; AUGMENTATION SLIDING OSTEOTOMY SINGLE	618.71	555.12	7/1/2006
21122		3	GENIOPLASTY; AUGMENTATION 2 OR MORE OSTEOTOMIES	617.21	617.21	7/1/2006

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21123		3	GENIOPLASTY; AUGMENTATION SLIDING INTERPOSITIONAL	792.04	792.04	7/1/2006
21125		3	AUGMENTATION MANDIBULAR BODY OR ANGLE PROSTHETIC	2,234.15	676.07	7/1/2006
21127		3	AUGMENTATION MANDIBULAR BODY ANGLE W/ BONE GRAFT	1,856.27	748.65	7/1/2006
21137		3	REDUCTION FOREHEAD; CONTOURING ONLY	640.30	640.30	7/1/2006
21138		3	REDUCTION FOREHEAD-CONTOURING & APPLICATION GRAFT	794.89	794.89	7/1/2006
21139		3	REDUCTION FOREHEAD CONTOURING, SETBACK SINUS WALL	919.80	919.80	7/1/2006
21141		3	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY	1,158.16	1,158.16	7/1/2006
21142		3	RECONSTRUCTION MIDFACE, LEFORT I; TWO PIECES, SEGMENT MOVEMENT IN ANY	1,156.92	1,156.92	7/1/2006
21143		3	RECONSTRUCTION MIDFACE, LEFORT I; THREE OR MORE PIECES, SEGMENT MOVEMENT IN ANY	1,217.41	1,217.41	7/1/2006
21145		3	RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY	1,243.98	1,243.98	7/1/2006
21146		3	RECONSTRUCTION MIDFACE, LEFORT I; TWO PIECES, SEGMENT MOVEMENT IN ANY	1,324.82	1,324.82	7/1/2006
21147		3	RECONSTRUCTION MIDFACE, LEFORT I; THREE OR MORE PIECES, SEGMENT MOVEMENT IN ANY	1,324.91	1,324.91	7/1/2006
21150		3	RECONSTRUCTION MIDFACE ANTERIOR INTRUSION	1,522.81	1,522.81	7/1/2006
21151		3	RECONSTRUCT MIDFACE ANY DIRECTION REQ BONE GRAFT	1,832.91	1,832.91	7/1/2006
21154		3	RECONSTRUCTION MIDFACE ANY TYPE REQ BONE GRAFT	1,922.25	1,922.25	7/1/2006
21155		3	RECONSTRUCT MIDFACE ANY TYPE W GRAFT, W LEFORT I	2,185.10	2,185.10	7/1/2006
21159		3	RECONSTRUCT MIDFACE, LEFORT III, W BONE GRAFTS	2,677.96	2,677.96	7/1/2006
21160		3	RECONSTRUCT MIDFACE, LEFORT III W/ LEFORT I, GRAFT	2,677.13	2,677.13	7/1/2006
21172		3	RECONSTRUCT ORBITAL RIM/FOREHEAD W/WO GRAFTS	1,537.99	1,537.99	7/1/2006
21175		3	RECONSTRUCT BIFRONTAL ORBITAL RIMS/FOREHEAD, GRAFT	1,894.60	1,894.60	7/1/2006
21179		3	RECONSTRUCT FOREHEAD/ORBITAL RIMS WITH GRAFTS	1,333.84	1,333.84	7/1/2006
21180		3	RECONSTRUCT FOREHEAD/ORBITAL RIMS WITH AUTOGRAFT	1,496.40	1,496.40	7/1/2006
21181		3	REMOVAL BY CONTOURING OF BENIGN TUMOR CRANIAL BONE	634.24	634.24	7/1/2006
21182		3	RECONSTRUCTION OF ORBITAL WALLS, RIMS, FOREHEAD, NASOETHMOID COMPLEX FOLLOWING	1,856.60	1,856.60	7/1/2006
21183		3	RECONSTRUCTION OF ORBITAL WALLS, RIMS, FOREHEAD, NASOETHMOID COMPLEX FOLLOWING	2,064.38	2,064.38	7/1/2006
21184		3	RECONSTRUCTION OF ORBITAL WALLS, RIMS, FOREHEAD, NASOETHMOID COMPLEX FOLLOWING	2,234.61	2,234.61	7/1/2006
21188		3	RECONSTR. MIDFACE, OSTEOTOMIES, W BONE GRAFTS	1,473.16	1,473.16	7/1/2006
21193		3	RECONSTRUCTION OF MANDIBULAR RAMI, HORIZONTAL, VERTICAL, "C", OR "L"	1,088.07	1,088.07	7/1/2006
21194		3	RECONSTR. MANDIBULAR RAMUS, OSTEOTOMY W BONE GRAFT	1,216.51	1,216.51	7/1/2006
21195		3	RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITHOUT INTERNAL	1,149.59	1,149.59	7/1/2006
21196		3	RECONSTR. MANDIBULAR RAMUS W INTER. RIGID FIXATION	1,248.77	1,248.77	7/1/2006
21198		3	OSTEOTOMY, MANDIBLE, SEGMENTAL	964.24	964.24	7/1/2006
21199		3	OSTEOTOMY, MANDIBLE, SEGMENTAL; WITH GENIOGLOSSUS ADVANCEMENT	910.09	910.09	7/1/2006
21206		3	OSTEOTOMY, MAXILLA, SEGMENTAL	957.22	957.22	7/1/2006
21208		3	AUGMENTATION OSTEOPLASTY OF FACIAL BONES	1,134.31	711.01	7/1/2006
21209		3	REDUCTION OSTEOPLASTY OF FACIAL BONES	621.03	530.28	7/1/2006
21210		3	BONE GRAFT	1,223.61	708.23	7/1/2006
21215		3	BONE GRAFT	1,813.42	733.30	7/1/2006
21230		3	CARTILAGE GRAFT	683.72	683.72	7/1/2006
21235		3	CARTILAGE GRAFT	582.55	468.61	7/1/2006
21240		3	ARTHROPLASTY, TEMPOROMANDIBULAR JOINT W/WO GRAFT	956.85	956.85	7/1/2006
21242		3	ARTHROPLASTY TEMPOROMANDIBULAR JOINT W ALLOPLASTIC	888.76	888.76	7/1/2006
21243		3	ARTHROPLASTY, TEMPOROMANDIBULAR JOINT	1,401.15	1,401.15	7/1/2006
21244		3	RECONSTRUCTION OF MANDIBLE	856.85	856.85	7/1/2006
21247		3	RECONST. MANDIBULAR CONDYLE W BONE/CARTILAGE GRAFT	1,455.20	1,455.20	7/1/2006
21255		3	RECONST. ZYGOMATIC ARCH, GLENOID FOSSA W BONE/CART	1,191.64	1,191.64	7/1/2006
21256		3	RECONST. ORBIT W OSTEOTOMIES AND BONE GRAFTS	1,009.23	1,009.23	7/1/2006
21260		3	ORBITAL HYPERTELORISM CORRECTION OSTEOTOMIES	1,040.36	1,040.36	7/1/2006
21261		3	ORBITAL HYPERTELORISM COMB WITH INTRA AND EXTRACRANIAL APPROACH	2,015.60	2,015.60	7/1/2006
21263		3	ORBITAL HYPERTELORISM WITH FOREHEAD ADVANCEMENT	1,715.76	1,715.76	7/1/2006
21267		3	ORBITAL REPOSITIONING	1,375.36	1,375.36	7/1/2006
21268		3	ORBITAL REPOSITIONING INTRA AND EXTERNAL APPROACH	1,635.40	1,635.40	7/1/2006
21270		3	MALAR AUGMENTATION, BONE OR ALLOPLASTIC MATERIAL.	771.05	624.98	7/1/2006
21275		3	SECONDARY REV ORBITOCRANIOFACIAL RECONOSTRUCTION	704.61	704.61	7/1/2006
21280		3	MEDIAL CANTHOPLASTY	423.16	423.16	7/1/2006
21282		3	LATERAL CANTHOPEXY	280.00	280.00	7/1/2006
21295		3	REDUCTION MASSETER MUSCLE EXTRAORAL APPROACH	142.90	142.90	7/1/2006
21296		3	REDUCTION MASSETER MUSCLE INTRAORAL APPROACH	323.45	323.45	7/1/2006
21300		3	TREATMENT OF CLOSED SKULL FRACTURE WITHOUT OPERATI	107.28	37.35	7/1/2006
21310		3	TREATMENT OF CLOSED OR OPEN NASAL FRACTURE MANIPUL	97.88	27.00	7/1/2006
21315		3	TREATMENT OF NOSE FRACTURE	198.03	120.19	7/1/2006
21320		3	MANIPULATION INSTRUMENTAL COMPLICATED NASAL FRACTU	200.59	124.41	7/1/2006
21325		3	REPAIR OF NOSE FRACTURE	428.69	428.69	7/1/2006
21330		3	REPAIR OF NOSE FRACTURE	528.52	528.52	7/1/2006
21335		3	REPAIR OF NOSE FRACTURE	646.30	646.30	7/1/2006
21336		3	OPEN TX NASAL SEPTAL FX, W/WO STABILIZATION	537.55	537.55	7/1/2006
21337		3	CLOSED TREATMENT OF NASAL SEPTAL FRACTURE,W/WO STABILIZATION	307.03	222.24	7/1/2006
21338		3	OPEN TREATMENT NASOETHMOID FRACTURE WITHOUT EXTERN	716.81	716.81	7/1/2006
21339		3	OPEN TREATMENT NASOETHMOID FRACTURE WITH EXTERNAL	774.75	774.75	7/1/2006
21340		3	TR CLOSED/OPEN NASOETH COM FR W SPLINT WIRE HEADCA	692.42	692.42	7/1/2006

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21343		3	OPEN TREATMENT OF DEPRESSED FRONTAL SINUS	1,013.11	1,013.11	7/1/2006
21344		3	OPEN TX OF FRONTAL SINUS FRACTURE	1,312.30	1,312.30	7/1/2006
21345		3	TR NASOMAX COMP FR WITH INTERDENTAL WIRE FIX OR FI	641.54	552.77	7/1/2006
21346		3	OP TR NASOMAX COM FR W WIRING A/O LOCAL FIXATION	814.57	814.57	7/1/2006
21347		3	OP TR NASOMAC COM FR W WIR A/O LO FI W MUL APROACH	1,027.93	1,027.93	7/1/2006
21348		3	OPEN TX NASOMAXILLARY FX WITH BONE GRAFTING	1,025.93	1,025.93	7/1/2006
21355		3	REPAIR CHEEK BONE FRACTURE	350.22	258.80	7/1/2006
21356		3	OPEN TX DEPRESSED ZYGOMATIC ARCH FRACTURE	396.14	310.69	7/1/2006
21360		3	OPEN TREATMENT OF CLOSED OR OPEN DEPRESSED FX INC	446.29	446.29	7/1/2006
21365		3	REPAIR CHEEK BONE FRACTURE	936.17	936.17	7/1/2006
21366		3	OPEN TX MALAR AREA FX INC ZYGOMATIC ARCH W/GRAFT	1,072.33	1,072.33	7/1/2006
21385		3	REPAIR EYE SOCKET FRACTURE	626.69	626.69	7/1/2006
21386		3	REPAIR EYE SOCKET FRACTURE	586.61	586.61	7/1/2006
21387		3	REPAIR EYE SOCKET FRACTURE	671.19	671.19	7/1/2006
21390		3	REPAIR EYE SOCKET FRACTURE	643.74	643.74	7/1/2006
21395		3	REPAIR EYE SOCKET FRACTURE	788.73	788.73	7/1/2006
21400		3	TREAT EYE SOCKET FRACTURE	140.55	115.91	7/1/2006
21401		3	REPAIR EYE SOCKET FRACTURE	391.43	242.05	7/1/2006
21406		3	REPAIR EYE SOCKET FRACTURE	470.89	470.89	7/1/2006
21407		3	REPAIR EYE SOCKET FRACTURE	559.16	559.16	7/1/2006
21408		3	OPEN TX OF FX ORBIT EXCEPT "BLOWOUT" W/BONE GRAFT	773.29	773.29	7/1/2006
21421		3	TR PAL/ALV RI FR CL MAN W INTERD WI FI OFFI DE DE	511.30	477.34	7/1/2006
21422		3	TR PA/AL RI FR CL MAN W INTD WI FI O FI DE/SP OP T	590.28	590.28	7/1/2006
21423		3	OPEN TX OF PALATAL OR MAXILLARY FX, MULT APPROACH	712.66	712.66	7/1/2006
21431		3	REPAIR UPPER JAW FRACTURE	585.91	585.91	7/1/2006
21432		3	OPEN RX CRANIOFACIAL SEPARATION	595.92	595.92	7/1/2006
21433		3	DP TR CRANIOE SEP W WI/LOC FIX COMPLICATED	1,520.15	1,520.15	7/1/2006
21435		3	REPAIR UPPER JAW FRACTURE	1,087.57	1,087.57	7/1/2006
21436		3	OPEN TX CRANIOFACIAL SEPARATION W/BONE GRAFT	1,684.42	1,684.42	7/1/2006
21440		3	REPAIR DENTAL RIDGE FRACTURE	341.79	310.66	7/1/2006
21445		3	REPAIR DENTAL RIDGE FRACTURE	535.24	489.20	7/1/2006
21450		3	TREAT LOWER JAW FRACTURE	359.64	342.74	7/1/2006
21451		3	TREATMENT CLOSED OR OPEN MANDIBULAR FRACTURE WITH	500.18	468.38	7/1/2006
21452		3	TREATMENT OF OPEN MANDIBULAR FRACTURE WITHOUT MANI	510.09	230.53	7/1/2006
21453		3	RX OPEN MANDIBULAR FRACTURE WITH MANIPULATION	572.87	572.54	7/1/2006
21454		3	OPEN RX CLOSED OR OPEN MANDIBULAR FX WITH EXTERNAL	459.12	459.12	7/1/2006
21461		3	OP TR O CLOS O OP MAND FR WITHO INTERDENFIXATION	1,125.97	734.14	7/1/2006
21462		3	OP TR CLOS O OP MANDFRACT W INTERDENTAL FIXATION	1,298.53	803.68	7/1/2006
21465		3	OPEN TREATMENT MANDIBULAR CONDYLAR FRACTURE	788.56	788.56	7/1/2006
21470		3	REPAIR LOWER JAW FRACTURE	995.85	995.85	7/1/2006
21480		3	RESET DISLOCATED JAW	82.29	29.64	7/1/2006
21485		3	COMPLICATED MANIPULATIVE TREATMENT OF TEMPOROMANDI	427.97	409.42	7/1/2006
21490		3	RESET DISLOCATED JAW	793.38	793.38	7/1/2006
21495		3	REPAIR HYOID BONE FRACTURE	494.65	494.65	7/1/2006
21497		3	INTERDENTAL WIRING F CONDITION O THAN FRACTURE	430.68	403.85	7/1/2006
21501		3	INCISION / DRAINAGE DEEP ABSCESS OR HEMATOMA	360.03	273.58	7/1/2006
21502		3	DRAINAGE OF RIB ABSCESS	465.47	465.47	7/1/2006
21510		3	INC DEEP OPENING OF BONE CORTEX OSTEOMYELITIS BONE	412.53	412.53	7/1/2006
21550		3	EXCISIONAL BIOPSY SOFT TISSUES	196.76	134.82	7/1/2006
21555		3	EXCISION BENIGN TUMOR SUBCUTANEOUS	352.19	274.93	7/1/2006
21556		3	EXCISION DEEP SUBFACIAL INTRAMUSCULAR	351.28	351.28	7/1/2006
21557		3	RADICAL RESECTION OF SOFT TISSUE TUMOR	522.10	522.10	7/1/2006
21600		3	EXCISION OF RIB PARTIAL	460.64	460.64	7/1/2006
21610		3	PARTIAL REMOVAL OF RIB	883.93	883.93	7/1/2006
21615		3	EXCISION FIRST AND/OR CERVICAL RIB;	610.32	610.32	7/1/2006
21616		3	EXC FIRST A/O CERV RIB F OUTLET COMP SYND OTH CAUS	741.91	741.91	7/1/2006
21620		3	PARTIAL REMOVAL OF STERNUM	465.03	465.03	7/1/2006
21627		3	STERNAL DEBRIDEMENT	477.43	477.43	7/1/2006
21630		3	RADICAL RESECTION OF STERNUM;	1,077.01	1,077.01	7/1/2006
21632		3	RADICAL RESECTION OF STERNUM W MEDIASTINAL LYMPHAD	1,080.98	1,080.98	7/1/2006
21685		3	HYOID MYOTOMY AND SUSPENSION	822.96	822.96	7/1/2006
21700		3	REVISION OF NECK MUSCLE	377.26	377.26	7/1/2006
21705		3	REVISION OF NECK MUSCLE	563.70	563.70	7/1/2006
21720		3	DIVISION STERNOCLEIDOMASTOID FOR TORTICOLLIS OPEN	306.34	306.34	7/1/2006
21725		3	REVISION OF NECK MUSCLE	460.03	460.03	7/1/2006
21740		3	RECONSTRUCTIVE REPAIR OF PECTUS EXCAVATUM OR CARIN	930.57	930.57	7/1/2006
21750		3	CLOSURE OF MEDIAN STERNOTOMY SEPARATION WITH OR WITHOUT DEBRIDEMENT (SEPARATE	626.22	626.22	7/1/2006
21800		3	TREATMENT OF RIB FRACTURE(S)	81.02	81.02	7/1/2006
21805		3	TREATMENT OF RIB FRACTURE(S)	214.09	214.09	7/1/2006
21810		3	TREATMENT OF RIB FRACTURE(S)	433.23	433.23	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
21820		3	TREATMENT, STERNUM FRACTURE	110.15	108.15	7/1/2006
21825		3	TREATMENT OF STERNUM FRACTURE OPEN	503.88	503.88	7/1/2006
21920		3	BIOPSY, SOFT TISSUE, BACK, SUPERFICIAL	186.36	126.08	7/1/2006
21925		3	DEEP BIOPSY, SOFT TISSUE, BACK, DEEP	346.69	282.76	7/1/2006
21930		3	EXCISION TUMOR, SOFT TISSUE OF BACK	384.56	307.63	7/1/2006
21935		3	RADICAL RESECTION OF TUMOR, SOFT TISSUE OF BACK	1,020.97	1,020.97	7/1/2006
22010		3	INCISION AND DRAINAGE, OPEN, OF DEEP ABSCESS (SUBFASCIAL), POSTERIOR SPINE;	732.81	732.81	7/1/2006
22015		3	INCISION AND DRAINAGE, OPEN, OF DEEP ABSCESS (SUBFASCIAL), POSTERIOR SPINE;	726.40	726.40	7/1/2006
22100		3	PARTIAL EXCISION OF POSTERIOR VERTEBRAL COMPONENT (EG, SPINOUS PROCESS, LAMINA	648.41	648.41	7/1/2006
22101		3	REMOVAL PART OF VERTEBRA	649.86	649.86	7/1/2006
22102		3	REMOVAL PART OF VERTEBRA	661.62	661.62	7/1/2006
22103		3	PARTIAL EXCISION OF POSTERIOR VERTEBRAL COMPONENT (EG, SPINOUS PROCESS, LAMINA	133.99	133.99	7/1/2006
22110		3	PARTIAL EXCISION OF VERTEBRAL BODY, FOR INTRINSIC BONY LESION, WITHOUT	825.22	825.22	7/1/2006
22112		3	REMOVAL PART OF VERTEBRA	825.41	825.41	7/1/2006
22114		3	REMOVAL PART OF VERTEBRA	825.89	825.89	7/1/2006
22116		3	PARTIAL EXCISION OF VERTEBRAL BODY, FOR INTRINSIC BONY LESION, WITHOUT	133.32	133.32	7/1/2006
22210		3	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL	1,492.61	1,492.61	7/1/2006
22212		3	POSTERIOR APPROACH OSTEOTOMY SPINE, THORACIC	1,225.96	1,225.96	7/1/2006
22214		3	POSTERIOR APPROACH OSTEOTOMY SPINE, LUMBAR	1,247.10	1,247.10	7/1/2006
22216		3	OSTEOTOMY OF SPINE, POSTERIOR OR POSTEROLATERAL APPROACH, ONE VERTEBRAL	350.82	350.82	7/1/2006
22220		3	OSTEOTOMY OF SPINE, INCLUDING DISKECTOMY, ANTERIOR APPROACH, SINGLE VERTEBRAL	1,337.34	1,337.34	7/1/2006
22222		3	ANTERIOR APPOACH OSTEOTOMY SPINE, THORACIC	1,223.39	1,223.39	7/1/2006
22224		3	ANTERIOR APPROACH OSTEOTOMY SPINE, LUMBAR	1,340.35	1,340.35	7/1/2006
22226		3	OSTEOTOMY OF SPINE, INCLUDING DISKECTOMY, ANTERIOR APPROACH, SINGLE VERTEBRAL	348.34	348.34	7/1/2006
22305		3	CLOSED TREATMENT OF VERTEBRAL PROCESS FRACTURE(S)	158.80	145.81	7/1/2006
22310		3	CLOSED TREATMENT OF VERTEBRAL BODY FRACTURE(S), WITHOUT MANIPULATION, REQUIRING	198.27	183.29	7/1/2006
22315		3	CLOSED TREATMENT OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S) REQUIRING	681.52	603.25	7/1/2006
22318		3	OPEN TREATMENT AND/OR REDUCTION OF ODONTOID FRACTURE (CERVICAL) AND/OR	1,337.00	1,337.00	7/1/2006
22319		3	OPEN TREATMENT AND/OR REDUCTION OF ODONTOID FRACTURE (CERVICAL) AND/OR	1,489.14	1,489.14	7/1/2006
22325		3	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/ OR	1,146.36	1,146.36	7/1/2006
22326		3	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/ OR	1,225.08	1,225.08	7/1/2006
22327		3	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/ OR	1,191.19	1,191.19	7/1/2006
22328		3	OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S),	262.30	262.30	7/1/2006
22505		3	MANIPULATION OF SPINE	105.54	105.54	7/1/2006
22520		3	PERCUTANEOUS VERTEBROPLASTY, ONE VERTEBRAL BODY, UNILATERAL OR BILATERAL	2,406.57	522.98	7/1/2006
22521		3	PERCUTANEOUS VERTEBROPLASTY, ONE VERTEBRAL BODY, UNILATERAL OR BILATERAL	2,194.48	495.39	7/1/2006
22522		3	PERCUTANEOUS VERTEBROPLASTY, ONE VERTEBRAL BODY, UNILATERAL OR BILATERAL	226.66	226.66	7/1/2006
22532		3	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	1,449.94	1,449.94	7/1/2006
22533		3	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	1,351.39	1,351.39	7/1/2006
22534		3	ARTHRODESIS, LATERAL EXTRACAVITARY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	343.75	343.75	7/1/2006
22548		3	ARTHRODESIS, ANTERIOR TRANSORAL OR EXTRAORAL TECHNIQUE, CLIVUS-C1-C2	1,581.94	1,581.94	7/1/2006
22554		3	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	1,180.01	1,180.01	7/1/2006
22556		3	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	1,427.51	1,427.51	7/1/2006
22558		3	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	1,311.16	1,311.16	7/1/2006
22585		3	ARTHRODESIS, ANTERIOR INTERBODY TECHNIQUE, INCLUDING MINIMAL DISKECTOMY TO	318.84	318.84	7/1/2006
22590		3	ARTHRODESIS, POSTERIOR TECHNIQUE, CRANIOCERVICAL (OCCIPUT-C2)	1,287.61	1,287.61	7/1/2006
22595		3	ARTHRODESIS, POSTERIOR TECHNIQUE, ATLAS-AXIS (C1-C2)	1,222.67	1,222.67	7/1/2006
22600		3	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; CERVICAL	1,036.66	1,036.66	7/1/2006
22610		3	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; THORACIC	1,035.06	1,035.06	7/1/2006
22612		3	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; LUMBAR (WITH	1,328.33	1,328.33	7/1/2006
22614		3	ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; EACH	374.40	374.40	7/1/2006
22630		3	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR	1,307.89	1,307.89	7/1/2006
22632		3	ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, SINGLE INTERSPACE; EACH ADDITIONAL	302.79	302.79	7/1/2006
22800		3	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; UP TO 6	1,165.34	1,165.34	7/1/2006
22802		3	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 7 TO 12	1,902.45	1,902.45	7/1/2006
22804		3	ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 13 OR MORE	2,218.71	2,218.71	7/1/2006
22808		3	ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 2 TO 3	1,597.32	1,597.32	7/1/2006
22810		3	ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 4 TO 7	1,809.34	1,809.34	7/1/2006
22812		3	ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 8 OR MORE	1,963.57	1,963.57	7/1/2006
22818		3	KYPHECTOMY, CIRCUMFERENTIAL EXPOSURE OF SPINE AND RESECTION OF VERTEBRAL	1,917.51	1,917.51	7/1/2006
22819		3	KYPHECTOMY, CIRCUMFERENTIAL EXPOSURE OF SPINE AND RESECTION OF VERTEBRAL	2,152.50	2,152.50	7/1/2006
22830		3	EXPLORATION OF SPINAL FUSION	706.61	706.61	7/1/2006
22840		3	POSTERIOR NON-SEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD TECHNIQUE), PEDICLE	729.33	729.33	7/1/2006
22842		3	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH	729.72	729.72	7/1/2006
22843		3	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH	767.96	767.96	7/1/2006
22844		3	POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH	954.68	954.68	7/1/2006
22845		3	ANTERIOR INSTRUMENTATION; 2 TO 3 VERTEBRAL SEGMENTS	695.61	695.61	7/1/2006
22846		3	ANTERIOR INSTRUMENTATION; 4 TO 7 VERTEBRAL SEGMENTS	723.37	723.37	7/1/2006
22847		3	ANTERIOR INSTRUMENTATION; 8 OR MORE VERTEBRAL SEGMENTS	798.10	798.10	7/1/2006
22848		3	PELVIC FIXATION (ATTACHMENT OF CAUDAL END OF INSTRUMENTATION TO PELVIC BONY	347.81	347.81	7/1/2006

Physician Fee Schedule

Provider Specialty 001

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
22849		3	REINSERTION OF SPINAL FIXATION DEVICE	1,143.52	1,143.52	7/1/2006
22850		3	HARRINGTON ROD REMOVAL	621.25	621.25	7/1/2006
22851		3	APPLICATION OF INTERVERTEBRAL BIOMECHANICAL DEVICE(S) (EG, SYNTHETIC CAGE(S),	386.75	386.75	7/1/2006
22852		3	REMOVAL OF SEGMENTAL INSTRUMENTATION	592.77	592.77	7/1/2006
22855		3	DWYER INSTRUMENT REMOVAL	944.04	944.04	7/1/2006
22900		3	EXCISION ABDOMINAL WALL TUMOR SUBFASCIAL	332.95	332.95	7/1/2006
23000		3	REMOVAL OF SUBDELTOID CALCAREOUS DEPOSITS, OPEN	455.48	318.79	7/1/2006
23020		3	CAPSULAR CONTRACTURE RELEASE (EG, SEVER TYPE PROCEDURE)	607.70	607.70	7/1/2006
23030		3	INCISION AND DRAINAGE DEEP ABSCESS OR HEMATOMA	381.45	231.92	7/1/2006
23031		3	INCISION AND DRAINAGE INFECTED BURSA	370.25	199.37	7/1/2006
23035		3	INCISION, BONE CORTEX (EG, OSTEOMYELITIS OR BONE ABSCESS), SHOULDER AREA	618.08	618.08	7/1/2006
23040		3	ARTHROTOMY, GLENOHUMERAL JOINT, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF	628.57	628.57	7/1/2006
23044		3	ARTHROTOMY, ACROMIOCLAVICULAR, STERNOCLAVICULAR JOINT, INCLUDING EXPLORATION,	497.76	497.76	7/1/2006
23065		3	BIOPSY SOFT TISSUES SUPERFICIAL	168.81	139.99	7/1/2006
23066		3	BIOPSY SOFT TISSUES DEEP	418.64	296.01	7/1/2006
23075		3	EXCISION, SOFT TISSUE TUMOR, SHOULDER AREA; SUBCUTANEOUS	215.31	152.70	7/1/2006
23076		3	EXC YUMOR SUBFASCIAL/INTRAMUSCULAR	484.51	484.51	7/1/2006
23077		3	RADICAL RESECTION SOFT TISSUE TUMOR, SHOULDER	971.12	971.12	7/1/2006
23100		3	ARTHROTOMY, GLENOHUMERAL JOINT, INCLUDING BIOPSY	428.50	428.50	7/1/2006
23101		3	ARTHROTOMY, ACROMIOCLAVICULAR JOINT OR STERNOCLAVICULAR JOINT, INCLUDING BIOPSY	399.70	399.70	7/1/2006
23105		3	ARTHROTOMY; GLENOHUMERAL JOINT, WITH SYNOVECTOMY, WITH OR WITHOUT BIOPSY	565.15	565.15	7/1/2006
23106		3	ARTHROTOMY; STERNOCLAVICULAR JOINT, WITH SYNOVECTOMY, WITH OR WITHOUT BIOPSY	426.39	426.39	7/1/2006
23107		3	ARTHROTOMY, GLENOHUMERAL JOINT, W/ JOINT EXPLOR.	589.75	589.75	7/1/2006
23120		3	PARTIAL REMOVAL, COLLARBONE	498.59	498.59	7/1/2006
23125		3	REMOVAL OF COLLARBONE	626.10	626.10	7/1/2006
23130		3	ACROMIOPLASTY OR ACROMIONECTOMY, PARTIAL, WITH OR WITHOUT CORACOACROMIAL	538.24	538.24	7/1/2006
23140		3	REMOVAL BONE LESION	445.50	445.50	7/1/2006
23145		3	REMOVAL BONE LESION	608.33	608.33	7/1/2006
23146		3	REMOVAL BONE LESION	548.81	548.81	7/1/2006
23150		3	REMOVAL BONE LESION	564.66	564.66	7/1/2006
23155		3	REMOVAL BONE LESION	689.95	689.95	7/1/2006
23156		3	REMOVAL BONE LESION	591.81	591.81	7/1/2006
23170		3	SEQUESTRECTOMY FOR OSTEOMYELITIS BONE ABCESS CLAVI	471.29	471.29	7/1/2006
23172		3	SEQUESTRECTOMY FOR OSTEOMYELITIS OF BONE ABCESS SC	480.00	480.00	7/1/2006
23174		3	SEQUESTREC FOR OSTEOMYELITIS OR BONE ABCESS HUMER	657.61	657.61	7/1/2006
23180		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	639.31	639.31	7/1/2006
23182		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	607.98	607.98	7/1/2006
23184		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	684.03	684.03	7/1/2006
23190		3	PARTIAL REMOVAL OF SHOULDER	492.29	492.29	7/1/2006
23195		3	REMOVAL OF HEAD OF HUMERUS	648.70	648.70	7/1/2006
23200		3	REMOVAL OF COLLARBONE	765.60	765.60	7/1/2006
23210		3	REMOVAL OF SHOULDERBLADE	793.73	793.73	7/1/2006
23220		3	RADICAL RESECTION OF BONE TUMOR, PROXIMAL HUMERUS;	939.80	939.80	7/1/2006
23221		3	PARTIAL REMOVAL OF HUMERUS	1,097.07	1,097.07	7/1/2006
23222		3	PARTIAL REMOVAL OF HUMERUS	1,474.85	1,474.85	7/1/2006
23330		3	REMOVAL OF FOREIGN BODY SUBCUTANEOUS	194.36	134.51	7/1/2006
23331		3	REMOVAL OF FOREIGN BODY, SHOULDER; DEEP (EG, NEER HEMIARTHROPLASTY REMOVAL)	520.03	520.03	7/1/2006
23332		3	REMOVAL OF FOREIGN BODY, SHOULDER; COMPLICATED (EG, TOTAL SHOULDER)	773.40	773.40	7/1/2006
23350		3	INJECTION PROCEDURE FOR SHOULDER ARTHROGRAPHY OR ENHANCED CT/MRI SHOULDER	152.32	48.32	7/1/2006
23395		3	MUSCLE TRANSFER, ANY TYPE, SHOULDER OR UPPER ARM; SINGLE	1,098.35	1,098.35	7/1/2006
23397		3	MUSCLE TRANSFERS	1,019.71	1,019.71	7/1/2006
23400		3	FIXATION OF SCAPULA	874.06	874.06	7/1/2006
23405		3	TENOTOMY, SHOULDER AREA; SINGLE TENDON	564.15	564.15	7/1/2006
23406		3	TENOTOMY, SHOULDER AREA; MULTIPLE TENDONS THROUGH SAME INCISION	707.43	707.43	7/1/2006
23410		3	REPAIR OF RUPTURED MUSCULOTENDINOUS CUFF (EG, ROTATOR CUFF); ACUTE	809.17	809.17	7/1/2006
23412		3	REPAIR OF TENDON(S)	859.91	859.91	7/1/2006
23415		3	RELEASE OF SHOULDER LIGAMENT	663.76	663.76	7/1/2006
23420		3	RECONSTRUCTION OF COMPLETE SHOULDER (ROTATOR) CUFF AVULSION, CHRONIC (INCLUDES	891.38	891.38	7/1/2006
23430		3	TENODESIS OF LONG TENDON OF BICEPS	667.76	667.76	7/1/2006
23440		3	RESECTION OR TRANSPLANTATION OF LONG TENDON OF BICEPS	692.78	692.78	7/1/2006
23450		3	CAPSULORRHAPHY, ANTERIOR; PUTTI-PLATT PROCEDURE OR MAGNUSON TYPE OPERATION	862.09	862.09	7/1/2006
23455		3	CAPSULORRHAPHY, ANTERIOR; WITH LABRAL REPAIR (EG, BANKART PROCEDURE)	920.77	920.77	7/1/2006
23460		3	CAPSULORRHAPHY, ANTERIOR, ANY TYPE; WITH BONE BLOCK	991.53	991.53	7/1/2006
23462		3	CAPSULORRHAPHY F RECUR DISLOC POSTER W/W BN BLOCK	966.86	966.86	7/1/2006
23465		3	CAPSULORRHAPHY, GLENOHUMERAL JOINT, POSTERIOR, WITH OR WITHOUT BONE BLOCK	1,004.69	1,004.69	7/1/2006
23466		3	CAPSULORRHAPHY, GLENOHUMERAL JOINT, ANY TYPE MULTI-DIRECTIONAL INSTABILITY	945.52	945.52	7/1/2006
23470		3	ARTHROPLASTY, GLENOHUMERAL JOINT; HEMIARTHROPLASTY	1,091.60	1,091.60	7/1/2006
23472		3	ARTHROPLASTY, GLENOHUMERAL JOINT; TOTAL SHOULDER (GLENOID AND PROXIMAL HUMERAL	1,321.18	1,321.18	7/1/2006
23480		3	REVISION OF COLLARBONE	737.97	737.97	7/1/2006
23485		3	REVISION OF COLLARBONE	865.06	865.06	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
23490		3	PROPHYLACTIC TREATMENT CLAVICLE	748.97	748.97	7/1/2006
23491		3	PROPHYLACTIC TREATMENT (NAILING, PINNING, PLATING OR WIRING) WITH OR WITHOUT	923.29	923.29	7/1/2006
23500		3	TREATMENT CLAVICLE FRACTURE	177.15	165.49	7/1/2006
23505		3	TREATMENT CLAVICLE FRACTURE	292.95	273.97	7/1/2006
23515		3	REPAIR CLAVICLE FRACTURE	513.53	513.53	7/1/2006
23520		3	TREAT CLAVICLE DISLOCATION	180.05	176.39	7/1/2006
23525		3	REPAIR CLAVICLE DISLOCATION	290.56	270.60	7/1/2006
23530		3	REPAIR CLAVICLE DISLOCATION	487.55	487.55	7/1/2006
23532		3	OPEN TREAT OF CLOSED/OPEN STERNOCLAV DISLOCATION W	551.34	551.34	7/1/2006
23540		3	TREAT CLAVICLE DISLOCATION	181.75	165.10	7/1/2006
23545		3	REPAIR CLAVICLE DISLOCATION	264.19	236.70	7/1/2006
23550		3	REPAIR CLAVICLE DISLOCATION	500.55	500.55	7/1/2006
23552		3	REPAIR CLAVICLE DISLOCATION	580.62	580.62	7/1/2006
23570		3	TREAT SCAPULA FRACTURE	188.59	184.59	7/1/2006
23575		3	REPAIR SCAPULA FRACTURE	321.23	302.25	7/1/2006
23585		3	REPAIR SCAPULA FRACTURE	611.43	611.43	7/1/2006
23600		3	TREAT HUMERUS FRACTURE	267.59	234.31	7/1/2006
23605		3	REPAIR HUMERUS FRACTURE	398.22	363.58	7/1/2006
23615		3	REPAIR HUMERUS FX W/WO TUBEROSITY	667.06	667.06	7/1/2006
23616		3	OPEN TX PROXIMAL HUMERAL FX; W PROSTHETICE REPLACE	1,319.23	1,319.23	7/1/2006
23620		3	CLOSED TREATMENT OF GREATER HUMERAL TUBEROSITY FRACTURE; WITHOUT MANIPULATION	215.38	194.40	7/1/2006
23625		3	REPAIR HUMERUS FRACTURE	319.93	297.95	7/1/2006
23630		3	OPEN TREATMENT OF GREATER HUMERAL TUBEROSITY FRACTURE, WITH OR WITHOUT INTERNA	513.79	513.79	7/1/2006
23650		3	REPAIR SHOULDER DISLOCATION	253.80	220.35	7/1/2006
23655		3	REPAIR SHOULDER DISLOCATION	318.02	318.02	7/1/2006
23660		3	REPAIR SHOULDER DISLOCATION	511.01	511.01	7/1/2006
23665		3	CLOSED TREATMENT OF SHOULDER DISLOCATION, WITH FRACTURE OF GREATER HUMERAL	353.97	333.60	7/1/2006
23670		3	OPEN TREATMENT OF SHOULDER DISLOCATION, WITH FRACTURE OF GREATER HUMERAL	542.29	542.29	7/1/2006
23675		3	REPAIR DISLOCATION/FRACTURE	467.03	433.73	7/1/2006
23680		3	REPAIR DISLOCATION/FRACTURE	670.72	670.72	7/1/2006
23700		3	FIXATION OF SHOULDER	172.90	172.90	7/1/2006
23800		3	ARTHRODESIS, GLENOHUMERAL JOINT;	907.37	907.37	7/1/2006
23802		3	ARTHRODESIS, GLENOHUMERAL JOINT; WITH AUTOGENOUS GRAFT (INCLUDES OBTAINING	996.98	996.98	7/1/2006
23900		3	AMPUTATION OF ARM	1,170.52	1,170.52	7/1/2006
23920		3	AMPUTATION OF ARM	909.79	909.79	7/1/2006
23921		3	DISARTICULATION OF SHOULDER SECONDARY CLOSURE	383.86	383.86	7/1/2006
23930		3	INCISION AND DRAINAGE DEEP ABSCESS OR HEMATOMA	325.75	192.22	7/1/2006
23931		3	INCISION AND DRAINAGE, UPPER ARM OR ELBOW AREA; BURSA	267.25	142.70	7/1/2006
23935		3	INCISION DEEP W/OPENING OF CORTEX FOR OSTEOMYELITI	439.22	439.22	7/1/2006
24000		3	ARTHROTOMY, ELBOW, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY	411.23	411.23	7/1/2006
24006		3	ARTHROTOMY ELBOW W/CAPSULAR RELEASE	626.75	626.75	7/1/2006
24065		3	BIOPSY SOFT TISSUES SUPERFICIAL	185.46	136.75	7/1/2006
24066		3	BIOPSY, SOFT TISSUE OF UPPER ARM OR ELBOW AREA; DEEP (SUBFASCIAL OR	502.12	342.26	7/1/2006
24075		3	EXCISION, TUMOR, SOFT TISSUE OF UPPER ARM OR ELBOW AREA; SUBCUTANEOUS	397.79	266.44	7/1/2006
24076		3	EXCISION BENIGN TUMOR DEEP SUBFASCIAL OR INTRAMUSC	409.50	409.50	7/1/2006
24077		3	RADICAL RESECTION SOFT TISSUE TUMOR, ARM/ELBOW	718.45	718.45	7/1/2006
24100		3	ARTHROTOMY ELBOW WITH SYNOVIAL BIOPSY ONLY	345.63	345.63	7/1/2006
24101		3	EXPLORATION OF ELBOW JOINT	441.15	441.15	7/1/2006
24102		3	ARTHROTOMY, ELBOW; WITH SYNOVECTOMY	546.69	546.69	7/1/2006
24105		3	REMOVAL OF ELBOW BURSA	289.40	289.40	7/1/2006
24110		3	REMOVAL OF BONE LESION	516.07	516.07	7/1/2006
24115		3	REMOVAL OF BONE LESION/GRAFT	624.30	624.30	7/1/2006
24116		3	REMOVAL OF BONE LESION/GRAFT	773.12	773.12	7/1/2006
24120		3	REMOVAL OF BONE LESION	461.15	461.15	7/1/2006
24125		3	REMOVAL OF BONE LESION/GRAFT	512.82	512.82	7/1/2006
24126		3	REMOVAL OF BONE LESION/GRAFT	558.73	558.73	7/1/2006
24130		3	REMOVAL OF HEAD OF RADIUS	448.68	448.68	7/1/2006
24134		3	SEQUESTRECTOMY FOR OSTEOMYELITIS OR BONE ABSCESS S	681.86	681.86	7/1/2006
24136		3	SEQUES FOR OSTEO/BONE ABSCESS RADIAL HEAD OR NECK	558.90	558.90	7/1/2006
24138		3	SEQUES FOR OSTEO/BONE ABSCESS OLECRANON PROCESS	578.69	578.69	7/1/2006
24140		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	667.34	667.34	7/1/2006
24145		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	568.97	568.97	7/1/2006
24147		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	586.57	586.57	7/1/2006
24149		3	RADICAL RESECTION OF CAPSULE, SOFT TISSUE, AND HETEROTOPIC BONE, ELBOW, WITH	950.31	950.31	7/1/2006
24150		3	REMOVAL OF HUMERUS LESION	861.57	861.57	7/1/2006
24151		3	REMOVAL OF HUMERUS LESION	1,002.11	1,002.11	7/1/2006
24152		3	REMOVAL OF RADIUS LESION	652.27	652.27	7/1/2006
24153		3	RADICAL RESECTION TUMOR RADIAL HEAD/NECK GRAFT	616.96	616.96	7/1/2006
24155		3	REMOVAL OF ELBOW JOINT	744.72	744.72	7/1/2006
24160		3	REMOVAL OF PROSTHETIC DEVICE	540.26	540.26	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
24164		3	IMPLANT REMOVAL RADIAL HEAD	439.45	439.45	7/1/2006
24200		3	REMOVAL OF FOREIGN BODY SUBCUTANEOUS	181.25	121.96	7/1/2006
24201		3	REMOVAL OF FOREIGN BODY, UPPER ARM OR ELBOW AREA; DEEP (SUBFASCIAL OR	505.72	319.89	7/1/2006
24220		3	INJECTION PROCEDURE FOR ELBOW ARTHROGRAPHY	169.57	63.58	7/1/2006
24300		3	MANIPULATION, ELBOW, UNDER ANESTHESIA	339.09	339.09	7/1/2006
24301		3	MUSCLE OR TENDON TRANSFER ANY TYPE SINGLE	675.33	675.33	7/1/2006
24305		3	TENDON LENGTHENING, UPPER ARM OR ELBOW, EACH TENDON	517.27	517.27	7/1/2006
24310		3	TENOTOMY, OPEN, ELBOW TO SHOULDER, EACH TENDON	422.42	422.42	7/1/2006
24320		3	REPAIR OF ARM TENDON	669.40	669.40	7/1/2006
24330		3	REVISION OF ARM MUSCLES	643.80	643.80	7/1/2006
24331		3	REVISION OF ARM MUSCLES	711.66	711.66	7/1/2006
24332		3	TENOLYSIS, TRICEPS	521.10	521.10	7/1/2006
24340		3	TENODESIS OF BICEPS TENDON AT ELBOW (SEPARATE PROCEDURE)	546.80	546.80	7/1/2006
24341		3	REPAIR, TENDON OR MUSCLE, UPPER ARM OR ELBOW, EACH TENDON OR MUSCLE, PRIMARY OR	578.39	578.39	7/1/2006
24342		3	REINSERTION OF RUPTURED BICEPS OR TRICEPS TENDON, DISTAL, WITH OR WITHOUT	706.38	706.38	7/1/2006
24343		3	REPAIR LATERAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE	614.62	614.62	7/1/2006
24344		3	RECONSTRUCTION LATERAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES	940.26	940.26	7/1/2006
24345		3	REPAIR MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH LOCAL TISSUE	610.18	610.18	7/1/2006
24346		3	RECONSTRUCTION MEDIAL COLLATERAL LIGAMENT, ELBOW, WITH TENDON GRAFT (INCLUDES	933.61	933.61	7/1/2006
24350		3	REVISION OF TENNIS ELBOW	394.19	394.19	7/1/2006
24351		3	REVISION OF TENNIS ELBOW	432.61	432.61	7/1/2006
24352		3	REVISION OF TENNIS ELBOW	461.84	461.84	7/1/2006
24354		3	REVISION OF TENNIS ELBOW	461.96	461.96	7/1/2006
24356		3	FASCIOTOMY LATERAL OR MEDICAL W/PARTIAL OSTERCTOMY	475.38	475.38	7/1/2006
24360		3	ARTHROPLASTY, ELBOW; WITH MEMBRANE (EG, FASCIAL)	805.24	805.24	7/1/2006
24361		3	ARTHROPLASTY, ELBOW W/ HUMERAL PROSTHETIC REPLACE.	907.86	907.86	7/1/2006
24362		3	REPAIR OF ELBOW JOINT	932.41	932.41	7/1/2006
24363		3	ARTHROPLASTY, ELBOW; WITH DISTAL HUMERUS AND PROXIMAL ULNAR PROSTHETIC	1,189.39	1,189.39	7/1/2006
24365		3	REPAIR OF HEAD OF RADIUS	573.33	573.33	7/1/2006
24366		3	REPAIR OF HEAD OF RADIUS	613.77	613.77	7/1/2006
24400		3	REVISION OF HUMERUS	735.05	735.05	7/1/2006
24410		3	REVISION OF HUMERUS	934.54	934.54	7/1/2006
24420		3	REPAIR OF HUMERUS	883.26	883.26	7/1/2006
24430		3	REPAIR OF HUMERUS	834.84	834.84	7/1/2006
24435		3	REPAIR/GRAFT OF HUMERUS	886.92	886.92	7/1/2006
24470		3	HEMIEPIPHYSEAL ARREST (EG, CUBITUS VARUS OR VALGUS, DISTAL HUMERUS)	604.77	604.77	7/1/2006
24495		3	DECOMPRESSION OF FOREARM	609.65	609.65	7/1/2006
24498		3	PROPHYLACTIC TREATMENT (NAILING, PINNING, PLATING OR WIRING), WITH OR WITHOUT	783.36	783.36	7/1/2006
24500		3	TREATMENT HUMERUS FRACTURE	288.06	249.18	7/1/2006
24505		3	TREATMENT HUMERUS FRACTURE	425.15	384.86	7/1/2006
24515		3	REPAIR HUMERUS FRACTURE	776.71	776.71	7/1/2006
24516		3	OPEN TX HUMERAL SHAFT FX W/INTRAMEDULLARY IMPLANT	767.95	767.95	7/1/2006
24530		3	TREATMENT HUMERUS FX W/WO INTERCONDYLAR EXTENSION	311.49	272.86	7/1/2006
24535		3	REPAIR HUMERUS FRACTURE	534.51	493.94	7/1/2006
24538		3	FIXATION HUMERAL FX W/WO INTERCONDYLAR EXTENSION	665.05	665.05	7/1/2006
24545		3	REPAIR HUMERUS FX WITH WITHOUT INTERCONDYLAR	698.35	698.35	7/1/2006
24546		3	OPEN TX HUMERAL SUPRALTRANSCONDYLAR FX; W/WO FIX.	1,002.67	1,002.67	7/1/2006
24560		3	TREAT HUMERUS FRACTURE	259.45	216.49	7/1/2006
24565		3	REPAIR HUMERUS FRACTURE	440.68	404.38	7/1/2006
24566		3	PERCUTANEOUS SKELETAL FIXATION OF HUMERAL EPICONDYLAR FRACTURE,	581.00	581.00	7/1/2006
24575		3	REPAIR HUMERUS FRACTURE	704.74	704.74	7/1/2006
24576		3	TREAT HUMERUS FRACTURE	271.56	236.66	7/1/2006
24577		3	REPAIR HUMERUS FRACTURE	460.19	424.08	7/1/2006
24579		3	REPAIR HUMERUS FRACTURE	756.59	756.59	7/1/2006
24582		3	PERCUTANEOUS SKELETAL FIXATION OF HUMERAL CONDYLAR FRACTURE,	644.30	644.30	7/1/2006
24586		3	REPAIR ELBOW FRACTURE	980.31	980.31	7/1/2006
24587		3	REPAIR ELBOW FRACTURE	969.15	969.15	7/1/2006
24600		3	TREAT ELBOW DISLOCATION	324.61	279.32	7/1/2006
24605		3	TREAT ELBOW DISLOCATION	393.32	393.32	7/1/2006
24615		3	REPAIR ELBOW DISLOCATION	635.33	635.33	7/1/2006
24620		3	TREAT ELBOW FRACTURE	482.81	482.81	7/1/2006
24635		3	REPAIR ELBOW FRACTURE	993.38	993.38	7/1/2006
24640		3	TREAT ELBOW DISLOCATION	107.24	72.47	7/1/2006
24650		3	TREAT RADIUS FRACTURE	211.25	176.95	7/1/2006
24655		3	TREAT RADIUS FRACTURE	371.87	333.17	7/1/2006
24665		3	REPAIR RADIUS FRACTURE	574.60	574.60	7/1/2006
24666		3	REPAIR RADIUS FRACTURE	646.59	646.59	7/1/2006
24670		3	TREAT ULNA FRACTURE	237.31	202.67	7/1/2006
24675		3	TREAT ULNA FRACTURE	387.13	352.83	7/1/2006
24685		3	REPAIR ULNA FRACTURE	601.23	601.23	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
24800		3	ARTHRODESIS, ELBOW JOINT; LOCAL	730.55	730.55	7/1/2006
24802		3	ARTHRODESIS, ELBOW JOINT; WITH AUTOGENOUS GRAFT (INCLUDES OBTAINING GRAFT)	889.91	889.91	7/1/2006
24900		3	AMPUTATION OF ARM	614.71	614.71	7/1/2006
24920		3	AMPUTATION OF ARM	610.63	610.63	7/1/2006
24925		3	AMPUTATION ARM, W SECONDARY CLOSURE	482.49	482.49	7/1/2006
24930		3	AMPUTATION FOLLOW-UP SURGERY	646.74	646.74	7/1/2006
24931		3	AMPUTATION FOLLOW-UP SURGERY	690.90	690.90	7/1/2006
24935		3	REVISION OF AMPUTATION	874.86	874.86	7/1/2006
24940		3	AMPUTATION OF ARM	940.78	940.78	7/1/2006
25000		3	INCISION, EXTENSOR TENDON SHEATH, WRIST (EG, DEQUERVAIN S DISEASE)	362.22	362.22	7/1/2006
25001		3	INCISION, FLEXOR TENDON SHEATH, WRIST (EG, FLEXOR CARPI RADIALIS)	274.18	274.18	7/1/2006
25020		3	DECOMPRESSION FASCIOTOMY, FOREARM AND/OR WRIST, FLEXOR OR EXTENSOR COMPARTME	551.85	551.85	7/1/2006
25023		3	DECOMP FASCIOTOMY FLEX/EXTEN COMP W DEBR NONVIABLE	1,008.57	1,008.57	7/1/2006
25024		3	DECOMPRESSION FASCIOTOMY, FOREARM AND/OR WRIST, FLEXOR AND EXTENSOR	620.62	620.62	7/1/2006
25025		3	DECOMPRESSION FASCIOTOMY, FOREARM AND/OR WRIST, FLEXOR AND EXTENSOR	966.42	966.42	7/1/2006
25028		3	INCISION AND DRAINAGE DEEP ABSCESS OR HEMATOMA	478.14	478.14	7/1/2006
25031		3	INCISION AND DRAINAGE, FOREARM AND/OR WRIST; BURSA	426.20	426.20	7/1/2006
25035		3	INCISION, DEEP, BONE CORTEX, FOREARM AND/OR WRIST (EG, OSTEOMYELITIS OR BONE	744.65	744.65	7/1/2006
25040		3	ARTHROTOMY, RADIOCARPAL OR MIDCARPAL JOINT, WITH EXPLORATION, DRAINAGE, OR	527.09	527.09	7/1/2006
25065		3	BIOPSY SOFT TISSUES SUPERFICIAL	182.09	138.37	7/1/2006
25066		3	BIOPSY, SOFT TISSUE OF FOREARM AND/OR WRIST; DEEP (SUBFASCIAL OR INTRAMUSCULAR)	397.58	397.58	7/1/2006
25075		3	EXCISION, TUMOR, SOFT TISSUE OF FOREARM AND/OR WRIST AREA; SUBCUTANEOUS	342.19	342.19	7/1/2006
25076		3	REMOVAL OF FOREARM LESION	510.81	510.81	7/1/2006
25077		3	RADICAL RESECTION SOFT TISSUE TUMOR, FOREARM/WRIST	784.66	784.66	7/1/2006
25085		3	CAPSULOTOMY, WRIST (EG, CONTRACTURE)	453.73	453.73	7/1/2006
25100		3	ARTHROTOMY, WRIST JOINT; WITH BIOPSY	328.86	328.86	7/1/2006
25101		3	ARTHROTOMY WITH JOINT EXPLORATION	381.53	381.53	7/1/2006
25105		3	ARTHROTOMY, WRIST JOINT; WITH SYNOVECTOMY	473.91	473.91	7/1/2006
25107		3	ARTHROTOMY, DISTAL RADIOULNAR JOINT INCLUDING REPAIR OF TRIANGULAR CARTILAGE,	530.85	530.85	7/1/2006
25110		3	EXCISION LESION OF TENDON SHEATH	389.23	389.23	7/1/2006
25111		3	EXICSION OF GANGLION WRIST DORSAL OR VOLAR PRIMARY	289.91	289.91	7/1/2006
25112		3	EXCISION GANGLION WRIST RECURRENT	353.42	353.42	7/1/2006
25115		3	REMOVAL WRIST/FOREARM LESION	813.40	813.40	7/1/2006
25116		3	REMOVAL WRIST/FOREARM LESION	717.75	717.75	7/1/2006
25118		3	EXPLORE WRIST TENDON SHEATH	363.42	363.42	7/1/2006
25119		3	SYNOVECTOMY WRIST W RESECTION ULNA	491.61	491.61	7/1/2006
25120		3	REMOVAL OF FOREARM LESION	643.74	643.74	7/1/2006
25125		3	REMOVAL OF FOREARM LESION	719.98	719.98	7/1/2006
25126		3	REMOVAL OF FOREARM LESION	732.97	732.97	7/1/2006
25130		3	REMOVAL OF WRIST LESION	420.76	420.76	7/1/2006
25135		3	REMOVAL OF WRIST LESION	520.61	520.61	7/1/2006
25136		3	REMOVAL OF WRIST LESION	457.25	457.25	7/1/2006
25145		3	SEQUESTRECTOMY FOR OSTEOMYELITIS OR BONE ABSCESS	652.70	652.70	7/1/2006
25150		3	PARTIAL EXC BONE FOR OSTEOMYELITIS ULNA	553.76	553.76	7/1/2006
25151		3	PARTIAL REMOVAL RADIUS/ULNA	715.53	715.53	7/1/2006
25170		3	REMOVAL RADIUS/ULNA LESION	942.02	942.02	7/1/2006
25210		3	REMOVAL OF WRIST BONE	459.70	459.70	7/1/2006
25215		3	REMOVAL OF WRIST BONES	601.94	601.94	7/1/2006
25230		3	PARTIAL REMOVAL OF RADIUS	410.17	410.17	7/1/2006
25240		3	EXCISION DISTAL ULNA PARTIAL OR COMPLETE (EG, DARRACH TYPE OR MATCHED RESECTION)	435.30	435.30	7/1/2006
25246		3	INJECTION PROCEDURE FOR WRIST ARTHROGRAPHY	168.55	70.18	7/1/2006
25248		3	EXPLORATION WITH REMOVAL OF DEEP FOREIGN BODY, FOREARM OR WRIST	484.15	484.15	7/1/2006
25250		3	REMOVAL OF WRIST PROSTHESIS SEPARATE PROCEDURE	462.98	462.98	7/1/2006
25251		3	REMOVAL WRIST PROSTHESIS COMPLICATED TOTAL WRIST	636.21	636.21	7/1/2006
25259		3	MANIPULATION, WRIST, UNDER ANESTHESIA	338.96	338.96	7/1/2006
25260		3	REPAIR TENDON OR MUSCLE FLEXOR PRIMARY SINGLE EACH	750.06	750.06	7/1/2006
25263		3	REPAIR ADDITIONAL TENDON	748.90	748.90	7/1/2006
25265		3	REPAIR TENDON OR MUSCLE SECONDARY WITH FREE GRAFT	864.52	864.52	7/1/2006
25270		3	REPAIR TENDON OR MUSCLE EXTENSOR PRIMARY SINGLE EA	637.00	637.00	7/1/2006
25272		3	REPAIR ADDITIONAL TENDON	703.64	703.64	7/1/2006
25274		3	REPAIR, TENDON OR MUSCLE, EXTENSOR, FOREARM AND/OR WRIST; SECONDARY, WITH FREE	798.45	798.45	7/1/2006
25275		3	REPAIR, TENDON SHEATH, EXTENSOR, FOREARM AND/OR WRIST, WITH FREE GRAFT	587.58	587.58	7/1/2006
25280		3	LENGTHENING OR SHORTENING OF FLEXOR OR EXTENSOR TE	704.12	704.12	7/1/2006
25290		3	TENOTOMY OPEN SINGLE FLEXOR OR EXTENSOR TENDON EAC	706.82	706.82	7/1/2006
25295		3	TENOLYSIS SING FLEXOR OR EXTENSOR TENDON EACH TEND	662.26	662.26	7/1/2006
25300		3	FUSION OF WRIST TENDONS	626.04	626.04	7/1/2006
25301		3	FUSION OF WRIST TENDONS	599.41	599.41	7/1/2006
25310		3	TRANSPLANT WRIST TENDON	753.49	753.49	7/1/2006
25312		3	TRANSPLANT WRIST TENDON	839.73	839.73	7/1/2006
25315		3	FLEXOR ORIGIN SLIDE (EG, FOR CEREBRAL PALSY, VOLKMANN CONTRACTURE), FOREARM	881.20	881.20	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
25316		3	REVISE PALSY HAND	1,022.19	1,022.19	7/1/2006
25320		3	CAPSULORRHAPHY OR RECONSTRUCTION, WRIST, ANY METHOD (EG, CAPSULODESIS, LIGAMENT	802.38	802.38	7/1/2006
25332		3	ARTHROPLASTY, WRIST, WITH OR WITHOUT INTERPOSITION, WITH OR WITHOUT EXTERNAL OR	756.96	756.96	7/1/2006
25335		3	REALIGNMENT OF HAND	892.12	892.12	7/1/2006
25337		3	RECONSTRUCTION FOR STABILIZATION OF UNSTABLE DISTAL ULNA	770.51	770.51	7/1/2006
25350		3	REVISION OF RADIUS	813.43	813.43	7/1/2006
25355		3	REVISION OF RADIUS	890.53	890.53	7/1/2006
25360		3	REVISION OF ULNA	796.36	796.36	7/1/2006
25365		3	REVISION RADIUS & ULNA	1,014.94	1,014.94	7/1/2006
25370		3	REVISION RADIUS OR ULNA	1,066.74	1,066.74	7/1/2006
25375		3	REVISION RADIUS & ULNA	1,066.35	1,066.35	7/1/2006
25390		3	REVISE RADIUS OR ULNA	895.98	895.98	7/1/2006
25391		3	REVISE RADIUS OR ULNA	1,091.47	1,091.47	7/1/2006
25392		3	REVISE RADIUS & ULNA	1,080.19	1,080.19	7/1/2006
25393		3	REVISE/GRAFT RADIUS/ULNA	1,218.18	1,218.18	7/1/2006
25394		3	OSTEOPLASTY, CARPAL BONE, SHORTENING	677.97	677.97	7/1/2006
25400		3	REPAIR RADIUS OR ULNA	938.82	938.82	7/1/2006
25405		3	REPAIR OF NONUNION OR MALUNION, RADIUS OR ULNA; WITH AUTOGRAFT (INCLUDES	1,144.13	1,144.13	7/1/2006
25415		3	REPAIR RADIUS & ULNA	1,078.42	1,078.42	7/1/2006
25420		3	REPAIR OF NONUNION OR MALUNION, RADIUS AND ULNA; WITH AUTOGRAFT (INCLUDES	1,254.14	1,254.14	7/1/2006
25425		3	REPAIR/GRAFT RADIUS OR ULNA	1,228.69	1,228.69	7/1/2006
25426		3	REPAIR/GRAFT RADIUS & ULNA	1,177.20	1,177.20	7/1/2006
25430		3	INSERTION OF VASCULAR PEDICLE INTO CARPAL BONE (EG, HARII PROCEDURE)	605.71	605.71	7/1/2006
25431		3	REPAIR OF NONUNION OF CARPAL BONE (EXCLUDING CARPAL SCAPHOID (NAVICULAR))	697.82	697.82	7/1/2006
25440		3	REPAIR OF NONUNION, SCAPHOID CARPAL (NAVICULAR) BONE, WITH OR WITHOUT RADIAL	725.05	725.05	7/1/2006
25441		3	ARTHROPLASTY PROSTHETIC REPL DISTAL RADIUS	843.05	843.05	7/1/2006
25442		3	ARTHROPLASTY WITH PROSTHETIC REPLACEMENT DISTAL UL	720.28	720.28	7/1/2006
25443		3	ARTHROPLASTY WITH PROSTHETIC REPLACEMENT; SCAPHOID CARPAL (NAVICULAR)	696.39	696.39	7/1/2006
25444		3	ARTHROPLASTY WITH PROSTHETIC REPLACEMENT LUNATE	740.20	740.20	7/1/2006
25445		3	ARTHROPLASTY WITH PROTHETIC REPLACEMENT TRAPEZIUM	649.53	649.53	7/1/2006
25446		3	ARTHROPLASTY W PROST REPLA DISTAL RADIUS A PART OR	1,047.85	1,047.85	7/1/2006
25447		3	ARTHROPLASTY, INTERPOSITION, INTERCARPAL OR CARPOMETACARPAL JOINTS	697.23	697.23	7/1/2006
25449		3	ARTHROPLASTY WITH REMOVAL OF IMPLANT	926.29	926.29	7/1/2006
25450		3	REVISION OF WRIST JOINT	652.83	652.83	7/1/2006
25455		3	REVISION OF WRIST JOINT	724.13	724.13	7/1/2006
25490		3	PROPHYLACTIC TREATMENT RADIUS	832.15	832.15	7/1/2006
25491		3	PROPHYLACTIC TREATMENT ULNA	875.37	875.37	7/1/2006
25492		3	PROPHYLACTIC TREATMENT RADIUS AND ULNA	1,000.60	1,000.60	7/1/2006
25500		3	TREAT FRACTURE OF RADIUS	214.70	186.06	7/1/2006
25505		3	REPAIR FRACTURE OF RADIUS	423.68	386.38	7/1/2006
25515		3	REPAIR FRACTURE OF RADIUS	614.29	614.29	7/1/2006
25520		3	CLOSED TREATMENT OF RADIAL SHAFT FRACTURE AND CLOSED TREATMENT OF DISLOCATION	476.97	450.33	7/1/2006
25525		3	OPEN TX RADIAL SHAFT FX & CLOSED TX RADIOULNAR JNT	818.73	818.73	7/1/2006
25526		3	OPEN TREATMENT OF RADIAL SHAFT FRACTURE, WITH INTERNAL AND/OR EXTERNAL FIXATION	965.26	965.26	7/1/2006
25530		3	TREAT FRACTURE OF ULNA	207.84	177.86	7/1/2006
25535		3	REPAIR FRACTURE OF ULNA	404.20	380.22	7/1/2006
25545		3	REPAIR FRACTURE OF ULNA	609.49	609.49	7/1/2006
25560		3	TREAT FRACTURE RADIUS & ULNA	218.34	182.04	7/1/2006
25565		3	REPAIR FRACTURE RADIUS/ULNA	445.97	403.34	7/1/2006
25574		3	OPEN TX RADIAL/ULNAR SHAFT FXS	519.04	519.04	7/1/2006
25575		3	REPAIR FRACTURE RADIUS/ULNA	732.77	732.77	7/1/2006
25600		3	TREAT FRACTURE RADIUS/ULNA	240.11	202.81	7/1/2006
25605		3	REPAIR FRACTURE RADIUS/ULNA	471.48	437.85	7/1/2006
25611		3	RX CLOSED DISTAL RADIAL FX W/EXTERNAL SKELETAL FI	608.03	608.03	7/1/2006
25620		3	REPAIR FRACTURE RADIUS/ULNA	581.31	581.31	7/1/2006
25622		3	RX CLOSED CARPAL SCAPHOID FX WITHOUT MANIPULATION	245.15	206.19	7/1/2006
25624		3	RX CLOSED CARPAL SCAPHOID FX WITH MANIPULATION	389.36	348.40	7/1/2006
25628		3	OPEN RX CLOSEF OR OPEN CARPAL SCAPHOID FRACTURE	594.39	594.39	7/1/2006
25630		3	TREAT WRIST FRACTURE(S)	252.80	211.50	7/1/2006
25635		3	REPAIR WRIST FRACTURE(S)	371.87	303.93	7/1/2006
25645		3	OPEN TREATMENT OF CARPAL BONE FRACTURE (OTHER THAN CARPAL SCAPHOID	508.57	508.57	7/1/2006
25650		3	TREATMENT OF CLOSED ULNAR STYLOID FRACTURE	263.25	225.28	7/1/2006
25651		3	PERCUTANEOUS SKELETAL FIXATION OF ULNAR STYLOID FRACTURE	394.01	394.01	7/1/2006
25652		3	OPEN TREATMENT OF ULNAR STYLOID FRACTURE	533.66	533.66	7/1/2006
25660		3	REPAIR WRIST DISLOCATION	340.71	340.71	7/1/2006
25670		3	OPEN RX OF CLOSED OR OPEN RADIOCARPAL OR INTERCARP	546.46	546.46	7/1/2006
25671		3	PERCUTANEOUS SKELETAL FIXATION OF DISTAL RADIOULNAR DISLOCATION	443.05	443.05	7/1/2006
25675		3	REPAIR WRIST DISLOCATION	369.30	335.99	7/1/2006
25676		3	REPAIR WRIST DISLOCATION	562.43	562.43	7/1/2006
25680		3	REPAIR WRIST FRACTURE	390.20	390.20	7/1/2006

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25685		3	REPAIR WRIST FRACTURE	647.45	647.45	7/1/2006
25690		3	REPAIR WRIST DISLOCATION	400.63	400.63	7/1/2006
25695		3	REPAIR WRIST DISLOCATION	565.82	565.82	7/1/2006
25800		3	ARTHRODESIS, WRIST; COMPLETE, WITHOUT BONE GRAFT (INCLUDES RADIOCARPAL AND/ OR	689.23	689.23	7/1/2006
25805		3	FUSION/GRAFT OF WRIST	787.36	787.36	7/1/2006
25810		3	FUSION/GRAFT OF WRIST	747.21	747.21	7/1/2006
25820		3	ARTHRODESIS, WRIST; LIMITED, WITHOUT BONE GRAFT (EG, INTERCARPAL OR RADIOCARPAL)	556.64	556.64	7/1/2006
25825		3	INTERCARPAL FUSION, W/ AUTOGENOUS BONE GRAFT	672.59	672.59	7/1/2006
25830		3	ARTHRODESIS, DISTAL RADIOULNAR JOINT WITH SEGMENTAL RESECTION OF ULNA, WITH OR	875.80	875.80	7/1/2006
25900		3	AMPUTATION FOREARM THROUGH RADIUS AND ULNA	771.32	771.32	7/1/2006
25905		3	AMPUTATION OF FOREARM	768.64	768.64	7/1/2006
25907		3	AMPUTATION FOREARM, W SECONDARY CLOSURE	696.32	696.32	7/1/2006
25909		3	AMPUTATION FOLLOW-UP SURGERY	762.64	762.64	7/1/2006
25915		3	AMPUTATION OF FOREARM	1,308.36	1,308.36	7/1/2006
25920		3	DISARTICULATION THROUGH WRIST	603.92	603.92	7/1/2006
25922		3	AMPUTATION SECONDARY CLOSURE OR SCAR REVISION	526.76	526.76	7/1/2006
25924		3	REAMPUTATION	603.26	603.26	7/1/2006
25927		3	TRANSMETACARPAL AMPUTATION	733.59	733.59	7/1/2006
25929		3	TRANSMETACARP AMPUT SEC CLOSURE OR SCAR REVISION	494.26	494.26	7/1/2006
25931		3	TRANSMETACARPAL REAMPUTATION	687.89	687.89	7/1/2006
26010		3	DRAINAGE OF FINGER ABSCESS	244.41	113.58	7/1/2006
26011		3	DRAINAGE OF FINGER ABSCESS COMPLICATED	379.25	163.48	7/1/2006
26020		3	DRAINAGE OF TENDON SHEATH, DIGIT AND/OR PALM, EACH	362.46	362.46	7/1/2006
26025		3	DRAINAGE OF PALMAR BURSA; SINGLE, BURSA	360.60	360.60	7/1/2006
26030		3	DRAINAGE OF PALMAR BURSA; MULTIPLE BURSA	424.46	424.46	7/1/2006
26034		3	INCISION, BONE CORTEX, HAND OR FINGER (EG, OSTEOMYELITIS OR BONE ABSCESS)	457.76	457.76	7/1/2006
26035		3	DECOMPRESSION FINGER/HAND	636.83	636.83	7/1/2006
26037		3	DECOMPRESSIVE FASCIOTOMY HAND	496.69	496.69	7/1/2006
26040		3	FASCIOTOMY, PALMAR (EG, DUPUYTREN S CONTRACTURE); PERCUTANEOUS	266.58	266.58	7/1/2006
26045		3	RELEASE PALM CONTRACTURE	408.72	408.72	7/1/2006
26055		3	TENDON SHEATH INCISION (EG, FOR TRIGGER FINGER)	583.39	237.59	7/1/2006
26060		3	TENOTOMY, PERCUTANEOUS, SINGLE, EACH DIGIT	228.13	228.13	7/1/2006
26070		3	ARTHROTOMY, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN BODY;	254.98	254.98	7/1/2006
26075		3	ARTHROTOMY, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN BODY;	273.72	273.72	7/1/2006
26080		3	EXPLORATION OF FINGER JOINT	328.47	328.47	7/1/2006
26100		3	ARTHROTOMY WITH BIOPSY; CARPOMETACARPAL JOINT, EACH	280.83	280.83	7/1/2006
26105		3	ARTHROTOMY WITH BIOPSY; METACARPOPHALANGEAL JOINT, EACH	287.24	287.24	7/1/2006
26110		3	ARTHROTOMY WITH SYNOVIAL BIOPSY; INTERPHALANGEAL JOINT, EACH	273.09	273.09	7/1/2006
26115		3	EXCISION, TUMOR OR VASCULAR MALFORMATION, SOFT TISSUE OF HAND OR FINGER;	587.10	310.53	7/1/2006
26116		3	EXCISION, TUMOR OR VASCULAR MALFORMATION, SOFT TISSUE OF HAND OR FINGER; DEEP	417.49	417.49	7/1/2006
26117		3	RADICAL RESECTION SOFT TISSUE TUMOR, HAND/FINGER	571.00	571.00	7/1/2006
26121		3	FASCIECTOMY, PALM ONLY, WITH OR WITHOUT Z-PLASTY, OTHER LOCAL TISSUE	529.25	529.25	7/1/2006
26123		3	FASCIECTOMY, PARTIAL PALMAR WITH RELEASE OF SINGLE DIGIT INCLUDING PROXIMAL	661.18	661.18	7/1/2006
26125		3	FASCIECTOMY, PARTIAL PALMAR WITH RELEASE OF SINGLE DIGIT INCLUDING PROXIMAL	262.89	262.89	7/1/2006
26130		3	EXPLORATION HAND JOINT	393.97	393.97	7/1/2006
26135		3	EXPLORATION FINGER JOINT	489.51	489.51	7/1/2006
26140		3	EXPLORATION FINGER JOINT	443.70	443.70	7/1/2006
26145		3	SYNOVECTOMY, TENDON SHEATH, RADICAL (TENOSYNOVECTOMY), FLEXOR TENDON, PALM	450.58	450.58	7/1/2006
26160		3	EXCISION OF LESION OF TENDON SHEATH OR JOINT CAPSULE (EG, CYST, MUCOUS CYST, OR	535.75	261.49	7/1/2006
26170		3	REMOVAL OF PALM TENDON	351.23	351.23	7/1/2006
26180		3	EXCISION OF TENDON, FINGER, FLEXOR (SEPARATE PROCEDURE), EACH TENDON	383.96	383.96	7/1/2006
26185		3	SESAMOIDECTOMY, THUMB OR FINGER (SEPARATE PROCEDURE)	407.67	407.67	7/1/2006
26200		3	REMOVAL OF JOINT LESION	395.77	395.77	7/1/2006
26205		3	REMOVAL/GRAFT JOINT LESION	533.39	533.39	7/1/2006
26210		3	REMOVAL OF FINGER LESION	383.29	383.29	7/1/2006
26215		3	REMOVAL/GRAFT FINGER LESION	487.50	487.50	7/1/2006
26230		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	447.17	447.17	7/1/2006
26235		3	PARTIAL REMOVAL FINGER BONE	437.49	437.49	7/1/2006
26236		3	PARTIAL REMOVAL FINGER BONE	386.55	386.55	7/1/2006
26250		3	RADICAL RESECTION, METACARPAL; (EG, TUMOR)	509.75	509.75	7/1/2006
26255		3	REMOVAL/GRAFT OF HAND BONE	796.85	796.85	7/1/2006
26260		3	RADICAL RESECTION, PROXIMAL OR MIDDLE PHALANX OF FINGER (EG, TUMOR);	481.13	481.13	7/1/2006
26261		3	PARTIAL REMOVAL/GRAFT FINGER	558.20	558.20	7/1/2006
26262		3	RADICAL RESECTION, DISTAL PHALANX OF FINGER (EG, TUMOR)	401.26	401.26	7/1/2006
26320		3	REMOVAL OF IMPLANT FROM HAND	299.61	299.61	7/1/2006
26340		3	MANIPULATION, FINGER JOINT, UNDER ANESTHESIA, EACH JOINT	260.96	260.96	7/1/2006
26350		3	REPAIR OR ADVANCEMENT, FLEXOR TENDON, NOT IN ZONE 2 DIGITAL FLEXOR TENDON	721.97	721.97	7/1/2006
26352		3	REPAIR/GRAFT TENDON	812.26	812.26	7/1/2006
26356		3	REPAIR OR ADVANCEMENT, FLEXOR TENDON, IN ZONE 2 DIGITAL FLEXOR TENDON SHEATH	928.18	928.18	7/1/2006
26357		3	FLEXOR TENDON REPAIR,SECONDARY,EACH TENDON	858.55	858.55	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
26358		3	REPAIR/GRAFT TENDON	913.31	913.31	7/1/2006
26370		3	REPAIR OR ADVANCEMENT OF PROFUNDUS TENDON, WITH INTACT SUPERFICIALIS TENDON;	783.23	783.23	7/1/2006
26372		3	REPAIR OR ADVANCEMENT OF PROFUNDUS TENDON, WITH INTACT SUPERFICIALIS TENDON;	896.45	896.45	7/1/2006
26373		3	REPAIR OR ADVANCEMENT OF PROFUNDUS TENDON, WITH INTACT SUPERFICIALIS TENDON;	854.70	854.70	7/1/2006
26390		3	EXCISION FLEXOR TENDON, WITH IMPLANTATION OF SYNTHETIC ROD FOR DELAYED TENDON	803.95	803.95	7/1/2006
26392		3	REMOVAL OF SYNTHETIC ROD AND INSERTION OF FLEXOR TENDON GRAFT, HAND OR FINGER	960.31	960.31	7/1/2006
26410		3	REPAIR, EXTENSOR TENDON, HAND, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH	579.63	579.63	7/1/2006
26412		3	REPAIR/GRAFT TENDON	690.03	690.03	7/1/2006
26415		3	EXCISION OF EXTENSOR TENDON, WITH IMPLANTATION OF SYNTHETIC ROD FOR DELAYED	713.66	713.66	7/1/2006
26416		3	REMOVAL OF SYNTHETIC ROD AND INSERTION OF EXTENSOR TENDON GRAFT (INCLUDES	839.77	839.77	7/1/2006
26418		3	REPAIR, EXTENSOR TENDON, FINGER, PRIMARY OR SECONDARY; WITHOUT FREE GRAFT, EACH	577.48	577.48	7/1/2006
26420		3	REPAIR/GRAFT TENDON	720.82	720.82	7/1/2006
26426		3	REPAIR OF EXTENSOR TENDON, CENTRAL SLIP, SECONDARY (EG, BOUTONNIERE DEFORMITY);	680.16	680.16	7/1/2006
26428		3	REPAIR OF EXTENSOR TENDON, CENTRAL SLIP, SECONDARY (EG, BOUTONNIERE DEFORMITY);	744.74	744.74	7/1/2006
26432		3	CLOSED TREATMENT OF DISTAL EXTENSOR TENDON INSERTION, WITH OR WITHOUT	499.95	499.95	7/1/2006
26433		3	REPAIR OF EXTENSOR TENDON, DISTAL INSERTION, PRIMARY OR SECONDARY; WITHOUT	538.79	538.79	7/1/2006
26434		3	REPAIR/GRAFT TENDON	623.55	623.55	7/1/2006
26437		3	REALIGNMENT OF EXTENSOR TENDON, HAND, EACH TENDON	613.90	613.90	7/1/2006
26440		3	TENOLYSIS, FLEXOR TENDON; PALM OR FINGER; EACH TENDON	643.81	643.81	7/1/2006
26442		3	RELEASE TENDON PALM & FINGER	850.70	850.70	7/1/2006
26445		3	TENOLYSIS, EXTENSOR TENDON, HAND OR FINGER; EACH TENDON	606.34	606.34	7/1/2006
26449		3	TENOLYSIS, COMPLEX, EXTENSOR TENDON, FINGER, INCLUDING FOREARM, EACH TENDON	800.08	800.08	7/1/2006
26450		3	TENOTOMY, FLEXOR, PALM, OPEN, EACH TENDON	388.81	388.81	7/1/2006
26455		3	TENOTOMY, FLEXOR, FINGER, OPEN, EACH TENDON	385.85	385.85	7/1/2006
26460		3	TENOTOMY, EXTENSOR, HAND OR FINGER, OPEN, EACH TENDON	374.04	374.04	7/1/2006
26471		3	TENODESIS; OF PROXIMAL INTERPHALANGEAL JOINT, EACH JOINT	599.50	599.50	7/1/2006
26474		3	TENODESIS; OF DISTAL JOINT, EACH JOINT	586.94	586.94	7/1/2006
26476		3	LENGTHENIG OF TENDON, EXTENSOR, HAND OR FINGER, EACH TENDON	567.36	567.36	7/1/2006
26477		3	SHORTENING OF TENDON, EXTENSOR, HAND OR FINGER, EACH TENDON	571.04	571.04	7/1/2006
26478		3	LENGTHENING OF TENDON, FLEXOR, HAND OR FINGER, EACH TENDON	622.36	622.36	7/1/2006
26479		3	SHORTENING OF TENDON, FLEXOR, HAND OR FINGER, EACH TENDON	611.38	611.38	7/1/2006
26480		3	TRANSFER OR TRANSPLANT OF TENDON, CARPOMETACARPAL AREA OR DORSUM OF HAND;	763.49	763.49	7/1/2006
26483		3	TENDON TRANSPLANT	841.86	841.86	7/1/2006
26485		3	TRANSFER OR TRANSPLANT OF TENDON, PALMAR; WITHOUT FREE TENDON GRAFT, EACH TEND(	813.44	813.44	7/1/2006
26489		3	TENDON TRANSPLANT & GRAFT	772.51	772.51	7/1/2006
26490		3	OPPONENSPLASTY; SUPERFICIALIS TENDON TRANSFER TYPE, EACH TENDON	756.26	756.26	7/1/2006
26492		3	OPPONENSPLASTY; TENDON TRANSFER WITH GRAFT (INCLUDES OBTAINING GRAFT), EACH	830.03	830.03	7/1/2006
26494		3	TENDON/MUSCLE TRANSFER	765.00	765.00	7/1/2006
26496		3	REPAIR THUMB TENDON	817.85	817.85	7/1/2006
26497		3	TRANSFER OF TENDON TO RESTORE INTRINSIC FUNCTION; RING AND SMALL FINGER	827.47	827.47	7/1/2006
26498		3	SUBLIMIS TRANSFER TO CORRECT CLAW FINGER 2/3/4/5	1,088.62	1,088.62	7/1/2006
26499		3	CORRECTION CLAW FINGER, OTHER METHODS	787.29	787.29	7/1/2006
26500		3	RECONSTRUCTION OF TENDON PULLEY, EACH TENDON; WITH LOCAL TISSUES (SEPARATE	614.87	614.87	7/1/2006
26502		3	TENDON RECONSTRUCTION/GRAFT	681.86	681.86	7/1/2006
26504		3	TENDON RECONSTRUCTION W/TENDON PROSTHESIS	715.16	715.16	7/1/2006
26508		3	RELEASE OF THENAR MUSCLE(S) (EG, THUMB CONTRACTURE)	626.46	626.46	7/1/2006
26510		3	CROSS INTRINSIC TRANSFER, EACH TENDON	589.94	589.94	7/1/2006
26516		3	CAPSULODESIS, METACARPOPHALANGEAL JOINT; SINGLE DIGIT	688.82	688.82	7/1/2006
26517		3	FUSION OF KNUCKLE JOINTS	798.51	798.51	7/1/2006
26518		3	FUSION OF KNUCKLE JOINTS	800.32	800.32	7/1/2006
26520		3	CAPSULECTOMY OR CAPSULOTOMY; METACARPOPHALANGEAL JOINT, EACH JOINT	670.28	670.28	7/1/2006
26525		3	CAPSULECTOMY OR CAPSULOTOMY; INTERPHALANGEAL JOINT, EACH JOINT	674.24	674.24	7/1/2006
26530		3	ARTHROPLASTY, METACARPOPHALANGEAL JOINT; EACH JOINT	468.49	468.49	7/1/2006
26531		3	ARTHROPLASTY, METACARPOPHALANGEAL JOINT; WITH PROSTHETIC IMPLANT, EACH JOINT	547.87	547.87	7/1/2006
26535		3	ARTHROPLASTY, INTERPHALANGEAL JOINT; EACH JOINT	328.86	328.86	7/1/2006
26536		3	ARTHROPLASTY, INTERPHALANGEAL JOINT; WITH PROSTHETIC IMPLANT, EACH JOINT	571.72	571.72	7/1/2006
26540		3	REPAIR OF COLLATERAL LIGAMENT, METACARPOPHALANGEAL OR INTERPHALANGEAL JOINT	648.10	648.10	7/1/2006
26541		3	RECONSTRUCTION, COLLATERAL LIGAMENT, METACARPOPHALANGEAL JOINT, SINGLE, WITH	784.31	784.31	7/1/2006
26542		3	PRIM REPAIR COLLATERAL LIGAMENT W/ LOCAL TISSUE	666.70	666.70	7/1/2006
26545		3	RECONSTRUCT FINGER JOINT	676.07	676.07	7/1/2006
26546		3	REPAIR NON-UNION, METACARPAL OR PHALANX, (INCLUDES OBTAINING BONE GRAFT WITH OR	853.12	853.12	7/1/2006
26548		3	REPAIR/RECONSTRUCT FINGER VOLAR PLATE	743.34	743.34	7/1/2006
26550		3	CONSTRUCT THUMB REPLACEMENT	1,404.02	1,404.02	7/1/2006
26551		3	TRANSFER, TOE-TO-HAND WITH MICROVASCULAR ANASTOMOSIS; GREAT TOE WRAP-AROUND	2,935.37	2,935.37	7/1/2006
26553		3	TOE-TO-HAND TRANSFER WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN GREAT TOE,	2,472.39	2,472.39	7/1/2006
26554		3	TOE-TO-HAND TRANSFER WITH MICROVASCULAR ANASTOMOSIS; OTHER THAN GREAT TOE,	3,439.01	3,439.01	7/1/2006
26555		3	TRANSFER, FINGER TO ANOTHER POSITION WITHOUT MICROVASCULAR ANASTOMOSIS	1,258.97	1,258.97	7/1/2006
26556		3	TRANSFER, FREE TOE JOINT, WITH MICROVASCULAR ANASTOMOSIS	2,865.13	2,865.13	7/1/2006
26560		3	REPAIR OF WEB FINGER	538.51	538.51	7/1/2006
26561		3	REPAIR OF WEB FINGER	835.89	835.89	7/1/2006

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26562		3	REPAIR OF WEB FINGER	1,160.08	1,160.08	7/1/2006
26565		3	OSTEOTOMY; METACARPAL, EACH	664.13	664.13	7/1/2006
26567		3	OSTEOTOMY; PHALANX OF FINGER, EACH	665.95	665.95	7/1/2006
26568		3	OSTEOPLASTY, LENGTHENING, METACARPAL OR PHALANX	873.28	873.28	7/1/2006
26580		3	REPAIR HAND DEFORMITY	1,159.10	1,159.10	7/1/2006
26587		3	RECONSTRUCTION OF POLYDACTYLOUS DIGIT, SOFT TISSUE AND BONE	846.42	846.42	7/1/2006
26590		3	REPAIR MACRODACTYLIA, EACH DIGIT	1,172.40	1,172.40	7/1/2006
26591		3	REPAIR, INTRINSIC MUSCLES OF HAND, EACH MUSCLE	447.70	447.70	7/1/2006
26593		3	RELEASE, INTRINSIC MUSCLES OF HAND, EACH MUSCLE	578.43	578.43	7/1/2006
26596		3	EXCISION OF CONSTRICTING RING W/ Z-PLASTIES	647.39	647.39	7/1/2006
26600		3	TREAT METACARPAL FRACTURE	197.38	165.50	7/1/2006
26605		3	REPAIR METACARPAL FRACTURE	264.84	234.53	7/1/2006
26607		3	CLOSED TREATMENT OF METACARPAL FRACTURE, WITH MANIPULATION, WITH EXTERNAL	421.00	421.00	7/1/2006
26608		3	PERCUTANEOUS FIX. METACARPAL FX, EACH BONE	420.57	420.57	7/1/2006
26615		3	REPAIR METACARPAL FRACTURE	387.56	387.56	7/1/2006
26641		3	TREATMENT CARPOMETACARP DISLOC THUMB W/MANIPULATIO	302.18	267.73	7/1/2006
26645		3	REPAIR THUMB DISLOCATION	345.10	312.46	7/1/2006
26650		3	REPAIR THUMB DISLOCATION	449.49	449.49	7/1/2006
26665		3	REPAIR THUMB DISLOCATION	513.60	513.60	7/1/2006
26670		3	CLOSED TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB, WITH	282.91	239.15	7/1/2006
26675		3	REPAIR HAND DISLOCATION	366.14	332.82	7/1/2006
26676		3	PERCUTANEOUS SKELETAL FIXATION OF CARPOMETACARPAL DISLOCATION, OTHER THAN	441.44	441.44	7/1/2006
26685		3	OPEN TREATMENT OF CARPOMETACARPAL DISLOCATION, OTHER THAN THUMB; WITH OR	480.07	480.07	7/1/2006
26686		3	OPEN TREAT CLO/OPEN CARPOMETACA DISLO CMPL/MUL/DEL	543.28	543.28	7/1/2006
26700		3	REPAIR FINGER DISLOCATION	265.43	235.62	7/1/2006
26705		3	REPAIR FINGER DISLOCATION	342.05	307.75	7/1/2006
26706		3	TREATMENT OF CLOSED METACARPOPHALANGEAL DISLOCATIO	371.46	371.46	7/1/2006
26715		3	REPAIR FINGER DISLOCATION	410.43	410.43	7/1/2006
26720		3	TREAT FINGER FRACTURES	157.41	133.10	7/1/2006
26725		3	RX CLOSED PHALANGEAL SHAFT FX PROX OR MID PHALANX	290.03	247.74	7/1/2006
26727		3	REPAIR FINGER FRACTURES	414.30	414.30	7/1/2006
26735		3	REPAIR FINGER FRACTURES	421.19	421.19	7/1/2006
26740		3	CLOSED TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR	180.76	166.44	7/1/2006
26742		3	TREAT CLSD ART FX W/MANIPULATION	317.23	280.37	7/1/2006
26746		3	OPEN TREATMENT OF ARTICULAR FRACTURE, INVOLVING METACARPOPHALANGEAL OR	414.61	414.61	7/1/2006
26750		3	TREAT FINGER FRACTURE	148.63	132.98	7/1/2006
26755		3	REPAIR FINGER FRACTURE	268.02	220.73	7/1/2006
26756		3	TREATMENT OF CLOSED DISTAL PHALANGEAL FX W/ PINNIN	364.17	364.17	7/1/2006
26765		3	OPEN RX CLOSED OR OPEN DISTAL PHALANGEAL FX FINGER	310.48	310.48	7/1/2006
26770		3	REPAIR FINGER DISLOCATION	228.89	195.11	7/1/2006
26775		3	REPAIR FINGER DISLOCATION	318.03	272.07	7/1/2006
26776		3	TREATMENT OF CLOSED INTERPHALANGEAL JOINT DISLOCAT	389.59	389.59	7/1/2006
26785		3	OPEN RX CLOSED OR OPEN INTERPHALANGEAL JOINT DISLO	317.05	317.05	7/1/2006
26820		3	THUMB FUSION WITH GRAFT	767.17	767.17	7/1/2006
26841		3	THUMB FUSION	723.06	723.06	7/1/2006
26842		3	THUMB FUSION WITH GRAFT	770.89	770.89	7/1/2006
26843		3	ARTHRODESIS, CARPOMETACARPAL JOINT, DIGIT, OTHER THAN THUMB, EACH;	710.50	710.50	7/1/2006
26844		3	FUSION/GRAFT OF HAND JOINT	788.43	788.43	7/1/2006
26850		3	FUSION OF KNUCKLE	680.42	680.42	7/1/2006
26852		3	FUSION OF KNUCKLE WITH GRAFT	760.61	760.61	7/1/2006
26860		3	FINGER JOINT FUSION	556.95	556.95	7/1/2006
26861		3	ARTHRODESIS, INTERPHALANGEAL JOINT, WITH OR WITHOUT INTERNAL FIXATION; EACH	99.61	99.61	7/1/2006
26862		3	FUSION/GRAFT OF FINGER JOINT	700.38	700.38	7/1/2006
26863		3	ARTHRODESIS, INTERPHALANGEAL JOINT, WITH OR WITHOUT INTERNAL FIXATION; WITH	223.17	223.17	7/1/2006
26910		3	AMPUTATION METACARPAL BONE	672.62	672.62	7/1/2006
26951		3	AMPUTATION OF FINGER	518.44	518.44	7/1/2006
26952		3	AMPUTATION OF FINGER	635.91	635.91	7/1/2006
26990		3	INCISION/DRAINAGE ABSCESS OR HEMATOMA	536.01	536.01	7/1/2006
26991		3	INCISON/DRAINAGE INFECTED BURSA	636.35	445.85	7/1/2006
26992		3	INCISION, BONE CORTEX, PELVIS AND/OR HIP JOINT (EG, OSTEOMYELITIS OR BONE	862.61	862.61	7/1/2006
27000		3	TENOTOMY, ADDUCTOR OF HIP, PERCUTANEOUS (SEPARATE PROCEDURE)	399.93	399.93	7/1/2006
27001		3	TENOTOMY, ADDUCTOR OF HIP, OPEN	480.42	480.42	7/1/2006
27003		3	INCISION OF HIP TENDON	505.00	505.00	7/1/2006
27005		3	TENOTOMY, HIP FLEXOR(S), OPEN (SEPARATE PROCEDURE)	646.10	646.10	7/1/2006
27006		3	TENOTOMY, ABDUCTORS AND/OR EXTENSOR(S) OF HIP, OPEN (SEPARATE PROCEDURE)	652.07	652.07	7/1/2006
27025		3	INCISION OF HIP FASCIA	727.05	727.05	7/1/2006
27030		3	ARTHROTOMY, HIP, WITH DRAINAGE (EG, INFECTION)	839.86	839.86	7/1/2006
27033		3	ARTHROTOMY, HIP, INCLUDING EXPLORATION OR REMOVAL OF LOOSE OR FOREIGN BODY	864.38	864.38	7/1/2006
27035		3	DENERVATION, HIP JOINT, INTRAPELVIC OR EXTRAPELVIC INTRA-ARTICULAR BRANCHES OF	1,022.18	1,022.18	7/1/2006
27036		3	CAPSULECTOMY OR CAPSULOTOMY, HIP, WITH OR WITHOUT EXCISION OF HETEROTOPIC BONE,	846.94	846.94	7/1/2006

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27040		3	BIOPSY SOFT TISSUE SUPERFICIAL	283.44	176.46	7/1/2006
27041		3	BIOPSY, SOFT TISSUE OF PELVIS AND HIP AREA; DEEP, SUBFASCIAL OR INTRAMUSCULAR	606.79	606.79	7/1/2006
27047		3	EXCISION, TUMOR, PELVIS AND HIP AREA; SUBCUTANEOUS TISSUE	527.68	449.75	7/1/2006
27048		3	EXCISION BENIGN TUMOR DEEP	405.17	405.17	7/1/2006
27049		3	RADICAL RESECTION OF TUMOR, SOFT TISSUE OF PELVIS AND HIP AREA (EG, MALIGNANT	817.13	817.13	7/1/2006
27050		3	ARTHROTOMY, WITH BIOPSY; SACROILIAC JOINT	317.17	317.17	7/1/2006
27052		3	BIOPSY OF HIP JOINT	443.95	443.95	7/1/2006
27054		3	ARTHROTOMY WITH SYNOVECTOMY, HIP JOINT	584.75	584.75	7/1/2006
27060		3	REMOVAL OF ISCHIAL BURSA	358.64	358.64	7/1/2006
27062		3	REMOVAL OF FEMUR LESION	386.97	386.97	7/1/2006
27065		3	REMOVAL OF HIP BONE LESION	415.11	415.11	7/1/2006
27066		3	EXCISION OF BONE CYST OR TUMOR DEEP WITH OR WITHOU	692.12	692.12	7/1/2006
27067		3	EXCISION BENIGN TUMOR W/BONE GRAFT REQ SEPERATE IN	893.67	893.67	7/1/2006
27070		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION) (EG, OSTEOMYELITIS OR BONE	728.68	728.68	7/1/2006
27071		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION) (EG, OSTEOMYELITIS OR BONE	792.30	792.30	7/1/2006
27075		3	RADICAL RESECTION OF TUMOR OR INFECTION; WING OF ILIUM, ONE PUBIC OR ISCHIAL	2,024.43	2,024.43	7/1/2006
27076		3	PARTIAL REMOVAL OF HIP BONE	1,361.24	1,361.24	7/1/2006
27077		3	REMOVAL OF HIP BONE	2,331.83	2,331.83	7/1/2006
27078		3	PARTIAL REMOVAL OF HIP BONES	864.54	864.54	7/1/2006
27079		3	PARTIAL REMOVAL OF HIP BONES	855.57	855.57	7/1/2006
27080		3	COCCYGECTOMY PRIMARY	411.44	411.44	7/1/2006
27086		3	REMOVAL FOREIGN BODY SUBCUTANEOUS TISSUE	224.12	133.23	7/1/2006
27087		3	REMOVAL OF FOREIGN BODY, PELVIS OR HIP; DEEP (SUBFASCIAL OR INTRAMUSCULAR)	558.85	558.85	7/1/2006
27090		3	REMOVAL OF HIP PROSTHESIS	737.11	737.11	7/1/2006
27091		3	REMOVAL OF HIP PROSTHESIS; COMPLICATED, INCLUDING TOTAL HIP PROSTHESIS,	1,349.02	1,349.02	7/1/2006
27093		3	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY;	197.86	65.55	7/1/2006
27095		3	INJECTION PROCEDURE FOR HIP ARTHROGRAPHY WITH ANES	247.35	74.45	7/1/2006
27096		3	INJECTION PROCEDURE FOR SACROILIAC JOINT, ARTHOGRAPHY AND/OR ANESTHETIC STEROID	196.66	63.18	7/1/2006
27097		3	RELEASE OR RECESSION, HAMSTRING, PROXIMAL	565.62	565.62	7/1/2006
27098		3	TRANSFER, ADDUCTOR TO ISCHIUM	572.61	572.61	7/1/2006
27100		3	TRANSFER OF ABDOMINAL MUSCLE	727.60	727.60	7/1/2006
27105		3	TRANSFER OF SPINAL MUSCLE	767.06	767.06	7/1/2006
27110		3	TRANSFER ILIOPSOAS; TO GREATER TROCHANTER OF FEMUR	827.99	827.99	7/1/2006
27111		3	TRANSFER ILIOPSOAS TO FEMORAL NECK	784.81	784.81	7/1/2006
27120		3	RECONSTRUCTION OF HIP	1,110.06	1,110.06	7/1/2006
27122		3	ACETABULOPLASTY; RESECTION, FEMORAL HEAD (EG, GIRDLESTONE PROCEDURE)	965.24	965.24	7/1/2006
27125		3	HEMIARTHROPLASTY, HIP, PARTIAL (EG, FEMORAL STEM PROSTHESIS, BIPOLAR	939.43	939.43	7/1/2006
27130		3	ARTHROPLASTY, ACETABULAR AND PROXIMAL FEMORAL PROSTHETIC REPLACEMENT (TOTAL HI	1,245.71	1,245.71	7/1/2006
27132		3	CONVERSION OF PREVIOUS HIP SURGERY TO TOTAL HIP ARTHROPLASTY, WITH OR WITHOUT	1,450.23	1,450.23	7/1/2006
27134		3	REVISION OF TOTAL HIP, BOTH COMPONENTS	1,730.08	1,730.08	7/1/2006
27137		3	REVISION OF TOTAL HIP, ACETABULAR COMPONENT ONLY	1,308.38	1,308.38	7/1/2006
27138		3	REVISION OF TOTAL HIP, FEMORAL COMPONENT ONLY	1,363.53	1,363.53	7/1/2006
27140		3	OSTEOTOMY AND TRANSFER OF GREATER TROCHANTER OF FEMUR (SEPARATE PROCEDURE)	800.56	800.56	7/1/2006
27146		3	INCISION OF HIP BONE	1,097.75	1,097.75	7/1/2006
27147		3	OSTEOTOMY WITH OPEN REDUCTION OF HIP	1,262.31	1,262.31	7/1/2006
27151		3	INCISION OF HIP BONES	1,163.42	1,163.42	7/1/2006
27156		3	REVISION OF HIP BONES	1,514.84	1,514.84	7/1/2006
27158		3	OSTEOTOMY, PELVIS, BILATERAL (EG, CONGENITAL MALFORMATION)	1,146.77	1,146.77	7/1/2006
27161		3	INCISION OF NECK OF FEMUR	1,069.61	1,069.61	7/1/2006
27165		3	OSTEOTOMY INCLUDING INTERNAL OR EXTERNAL FIXATION	1,144.09	1,144.09	7/1/2006
27170		3	REPAIR/GRAFT FEMUR	1,017.75	1,017.75	7/1/2006
27175		3	TREATMENT OF SLIPPED FEMORAL EPIPHYSIS;	559.45	559.45	7/1/2006
27176		3	TREATMENT SLIPPED EPIPHYSIS	783.69	783.69	7/1/2006
27177		3	REPAIR SLIPPED EPIPHYSIS	964.04	964.04	7/1/2006
27178		3	OPEN RX SLIPPED FEM EPIPHYSIS CLOSED MANIP W/SINGL	758.43	758.43	7/1/2006
27179		3	REVISION OF NECK OF FEMUR	850.32	850.32	7/1/2006
27181		3	FIXATION SLIPPED EPIPHYSIS	902.82	902.82	7/1/2006
27185		3	EPIPHYSEAL ARREST BY EPIPHYSIODESIS OR STAPLING, GREATER TROCHANTER OF FEMUR	634.96	634.96	7/1/2006
27187		3	PROPHYLACTIC TX FEMORAL NECK AND PROXIMAL FEMUR	884.18	884.18	7/1/2006
27193		3	CLOSED TREATMENT OF PELVIC RING FRACTURE, DISLOCATION, DIASTASIS	390.75	390.75	7/1/2006
27194		3	CLOSED TX PELVIC RING FX; W/ MANIPULATION	639.13	639.13	7/1/2006
27200		3	REPAIR TAIL BONE FRACTURE	146.17	143.84	7/1/2006
27202		3	REPAIR TAIL BONE FRACTURE	837.62	837.62	7/1/2006
27215		3	OPEN TX OF ILIAC SPINE W/INTERNAL FIXATION	641.36	641.36	7/1/2006
27216		3	PERCUTANEOUS SKELETAL FX POST PELVIC RING FX/DISLOCATION	925.40	925.40	7/1/2006
27217		3	OPEN TX ANT. RING FX/DISLOCATION W/INTERNAL FIX	899.11	899.11	7/1/2006
27218		3	OPEN TX POST RING FX/DISLOCATION W/INTERNAL FIX.	1,183.15	1,183.15	7/1/2006
27220		3	TREATMENT HIPSOCKET FRACTURE	436.59	433.59	7/1/2006
27222		3	REPAIR HIPSOCKET FRACTURE	836.93	836.93	7/1/2006
27226		3	OPEN TX POST/ANT. ACETABULAR WALL FX, INTERNAL FIX	852.57	852.57	7/1/2006

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27227		3	OPEN TREATMENT ACETABULAR FX W/INTERNAL FIX.	1,447.38	1,447.38	7/1/2006
27228		3	OPEN TX ACETABULAR FX W/INTERNAL FIXATION	1,669.04	1,669.04	7/1/2006
27230		3	TREATMENT FRACTURE OF FEMUR	401.89	388.23	7/1/2006
27232		3	REPAIR FRACTURE OF FEMUR	661.28	661.28	7/1/2006
27235		3	FIXATION OF FEMUR FRACTURE	799.69	799.69	7/1/2006
27236		3	OPEN TREATMENT OF FEMORAL FRACTURE, PROXIMAL END, NECK, INTERNAL FIXATION OR	990.20	990.20	7/1/2006
27238		3	TREATMENT OF FEMUR FRACTURE	389.46	389.46	7/1/2006
27240		3	RX CLOSED INTERTROCHANTERIC OR PERTRO FEMORAL FX W	812.15	812.15	7/1/2006
27244		3	FIXATION OF FEMUR FRACTURE	1,012.15	1,012.15	7/1/2006
27245		3	OPEN TX FEMORAL FX; W/INTRAMEDULLARY IMPLANT	1,267.66	1,267.66	7/1/2006
27246		3	TREATMENT OF FEMUR FRACTURE	335.93	334.61	7/1/2006
27248		3	REPAIR OF FEMUR FRACTURE	689.81	689.81	7/1/2006
27250		3	REPAIR OF HIP DISLOCATION	417.50	417.50	7/1/2006
27252		3	REPAIR OF HIP DISLOCATION	657.65	657.65	7/1/2006
27253		3	REPAIR OF HIP DISLOCATION	840.82	840.82	7/1/2006
27254		3	REPAIR OF HIP DISLOCATION	1,127.82	1,127.82	7/1/2006
27256		3	TREATMENT OF HIP DISLOCATION	275.33	227.38	7/1/2006
27257		3	REPAIR OF HIP DISLOCATION	296.82	296.82	7/1/2006
27258		3	REPAIR OF HIP DISLOCATION	976.48	976.48	7/1/2006
27259		3	OPEN RX CLOSED/OPEN ACETAB FX W/FEMORAL SHAFT SHOR	1,329.97	1,329.97	7/1/2006
27265		3	TX ATRAUMATIC HIP DISLOCATION W/O ANESTHESIA	354.96	354.96	7/1/2006
27266		3	TX ATRAUMATIC HIP DISLOCATION W/ GEN ANESTHESIA	509.68	509.68	7/1/2006
27275		3	MANIPULATION OF HIP JOINT	160.42	160.42	7/1/2006
27280		3	FUSION OF SACROILIAC JOINT	877.88	877.88	7/1/2006
27282		3	FUSION OF PUBIC BONES	716.05	716.05	7/1/2006
27284		3	ARTHRODESIS, HIP JOINT (INCLUDING OBTAINING GRAFT);	1,423.36	1,423.36	7/1/2006
27286		3	FUSION OF HIP JOINT	1,439.37	1,439.37	7/1/2006
27290		3	AMPUTATION OF LEG AT HIP	1,381.79	1,381.79	7/1/2006
27295		3	AMPUTATION OF LEG AT HIP	1,113.38	1,113.38	7/1/2006
27301		3	INCISION AND DRAINAGE, DEEP ABSCESS, BURSA, OR HEMATOMA, THIGH OR KNEE REGION	591.69	427.51	7/1/2006
27303		3	INCISION, DEEP, WITH OPENING OF BONE CORTEX, FEMUR OR KNEE (EG, OSTEOMYELITIS	562.45	562.45	7/1/2006
27305		3	INCISION OF TENDON & FASCIA	407.86	407.86	7/1/2006
27306		3	TENOTOMY, PERCUTANEOUS, ADDUCTOR OR HAMSTRING; SINGLE TENDON (SEPARATE	342.23	342.23	7/1/2006
27307		3	TENOTOMY, PERCUTANEOUS, ADDUCTOR OR HAMSTRING; MULTIPLE TENDONS	411.28	411.28	7/1/2006
27310		3	ARTHROTOMY, KNEE, WITH EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY (EG,	622.21	622.21	7/1/2006
27315		3	PARTIAL REMOVAL, THIGH NERVE	439.98	439.98	7/1/2006
27320		3	PARTIAL REMOVAL, THIGH NERVE	424.77	424.77	7/1/2006
27323		3	BIOPSY SOFT TISSUES SUPERFICIAL	204.21	150.22	7/1/2006
27324		3	BIOPSY, SOFT TISSUE OF THIGH OR KNEE AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)	332.08	332.08	7/1/2006
27327		3	EXCISION BENIGN TUMOR SUBCUTANEOUS	374.34	298.74	7/1/2006
27328		3	EXC BENGIN TUMOR DEEP	364.61	364.61	7/1/2006
27329		3	RADICAL RESECTION SOFT TISSUE TUMOR THIGH/KNEE	856.90	856.90	7/1/2006
27330		3	ARTHROTOMY, KNEE; WITH SYNOVIAL BIOPSY ONLY	349.66	349.66	7/1/2006
27331		3	ARTHROTOMY, KNEE; INCLUDING JOINT EXPLORATION, BIOPSY, OR REMOVAL OF LOOSE OR	418.21	418.21	7/1/2006
27332		3	ARTHROTOMY, WITH EXCISION OF SEMILUNAR CARTILAGE (MENISCECTOMY) KNEE; MEDIAL OR	566.83	566.83	7/1/2006
27333		3	ARTHROTOMY KNEE EXC SEMILUNAR CARTILAGE MEDIAL AND	513.08	513.08	7/1/2006
27334		3	ARTHROTOMY, WITH SYNOVECTOMY KNEE; ANTERIOR OR POSTERIOR	593.76	593.76	7/1/2006
27335		3	ARTHROTOMY KNEE ANTERIOR AND POSTERIOR INCLUDING P	672.69	672.69	7/1/2006
27340		3	REMOVAL OF KNEECAP BURSA	318.09	318.09	7/1/2006
27345		3	EXCISION OF SYNOVIAL CYST OF POPLITEAL SPACE (EG, BAKER S CYST)	422.63	422.63	7/1/2006
27347		3	EXCISION OF LESION OF MENISCUS OR CAPSULE (EG, CYST, GANGLION), KNEE	410.50	410.50	7/1/2006
27350		3	REMOVAL OF KNEECAP	566.74	566.74	7/1/2006
27355		3	REMOVAL OF FEMUR LESION	530.38	530.38	7/1/2006
27356		3	REMOVAL & GRAFT FEMUR LESION	639.24	639.24	7/1/2006
27357		3	REMOVAL & GRAFT FEMUR LESION	712.36	712.36	7/1/2006
27358		3	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR OF FEMUR; WITH INTERNAL	272.99	272.99	7/1/2006
27360		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE, FEMUR,	735.67	735.67	7/1/2006
27365		3	RADICAL RESECTION OF TUMOR, BONE, FEMUR OR KNEE	1,036.92	1,036.92	7/1/2006
27370		3	INJECTION FOR KNEE X-RAY	159.95	47.01	7/1/2006
27372		3	REMOVAL FOREIGN BODY DEEP	535.07	356.56	7/1/2006
27380		3	REPAIR KNEECAP TENDON	527.78	527.78	7/1/2006
27381		3	REPAIR/GRAFT KNEECAP TENDON	714.82	714.82	7/1/2006
27385		3	REPAIR OF THIGH MUSCLE	563.74	563.74	7/1/2006
27386		3	REPAIR/GRAFT OF THIGH MUSCLE	737.88	737.88	7/1/2006
27390		3	TENOTOMY, OPEN, HAMSTRING, KNEE TO HIP; SINGLE TENDON	382.32	382.32	7/1/2006
27391		3	TENOTOMY, OPEN, HAMSTRING, KNEE TO HIP; MULTIPLE TENDONS, ONE LEG	504.97	504.97	7/1/2006
27392		3	TENOTOMY, OPEN, HAMSTRING, KNEE TO HIP; MULTIPLE TENDONS, BILATERAL	619.10	619.10	7/1/2006
27393		3	LENGTHENING OF HAMSTRING TENDON; SINGLE TENDON	448.27	448.27	7/1/2006
27394		3	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, ONE LEG	579.34	579.34	7/1/2006
27395		3	LENGTHENING OF HAMSTRING TENDON; MULTIPLE TENDONS, BILATERAL	778.29	778.29	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
27396		3	TRANSPLANT, HAMSTRING TENDON TO PATELLA; SINGLE TENDON	546.02	546.02	7/1/2006
27397		3	TRANSPLANT, HAMSTRING TENDON TO PATELLA; MULTIPLE TENDONS	747.75	747.75	7/1/2006
27400		3	TRANSFER, TENDON OR MUSCLE, HAMSTRINGS TO FEMUR (EG, EGGER S TYPE PROCEDURE)	595.37	595.37	7/1/2006
27403		3	ARTHROTOMY WITH MENISCUS REPAIR, KNEE	571.20	571.20	7/1/2006
27405		3	REPAIR OF KNEE LIGAMENT	594.60	594.60	7/1/2006
27407		3	REPAIR OF KNEE LIGAMENT	685.86	685.86	7/1/2006
27409		3	REPAIR OF KNEE LIGAMENTS	845.89	845.89	7/1/2006
27418		3	ANTERIOR TIBIAL TUBERCLEPLASTY (EG, MAQUET TYPE PROCEDURE)	729.01	729.01	7/1/2006
27420		3	RECONSTRUCTION OF DISLOCATING PATELLA; (EG, HAUSER TYPE PROCEDURE)	662.11	662.11	7/1/2006
27422		3	RECONSTRUCTION OF DISLOCATING PATELLA; WITH EXTENSOR REALIGNMENT AND/OR MUSCLE	660.53	660.53	7/1/2006
27424		3	REVISION/REMOVAL OF KNEECAP	660.62	660.62	7/1/2006
27425		3	LATERAL RETINACULAR RELEASE	391.81	391.81	7/1/2006
27427		3	RECONSTRUCTION KNEE EXTRA-ARTICULAR	632.79	632.79	7/1/2006
27428		3	RECONSTRUCTION KNEE INTRA-ARTICULAR	932.37	932.37	7/1/2006
27429		3	RECONSTRUCTION KNEE INTRA AND EXTRA ARTICULAR	1,032.63	1,032.63	7/1/2006
27430		3	QUADRICEPSPLASTY (EG, BENNETT OR THOMPSON TYPE)	652.37	652.37	7/1/2006
27435		3	CAPSULOTOMY, POSTERIOR CAPSULAR RELEASE, KNEE	661.79	661.79	7/1/2006
27437		3	ARTHRPLASTY PATELLA W/O PROSTHESIS	579.02	579.02	7/1/2006
27438		3	ARTHROPLASTY PATELLA W/PROSTHESIS	732.05	732.05	7/1/2006
27440		3	REPAIR OF KNEE JOINT	615.56	615.56	7/1/2006
27441		3	REPAIR OF KNEE JOINT	654.68	654.68	7/1/2006
27442		3	ARTHROPLASTY, FEMORAL CONDYLES OR TIBIAL PLATEAU(S), KNEE;	771.62	771.62	7/1/2006
27443		3	REPAIR OF KNEE JOINT	726.27	726.27	7/1/2006
27445		3	ARTHROPLASTY, KNEE, HINGE PROSTHESIS (EG, WALLDIUS TYPE)	1,116.80	1,116.80	7/1/2006
27446		3	TOTAL KNEE REPLACEMENT	1,008.36	1,008.36	7/1/2006
27447		3	ARTHROPLASTY, KNEE, CONDYLE AND PLATEAU; MEDIAL AND LATERAL COMPARTMENTS WITH	1,344.50	1,344.50	7/1/2006
27448		3	OSTEOTOMY FEMUR SHAFT OR SUPRACONDYLAR W/O FIXATIO	727.65	727.65	7/1/2006
27450		3	OSTEOTOMY FEMUR SHAFT OR SUPRACONDYLAR WITH FIXATI	909.78	909.78	7/1/2006
27454		3	OSTEOTOMY, MULTIPLE, WITH REALIGNMENT ON INTRAMEDULLARY ROD, FEMORAL SHAFT (EG,	1,117.68	1,117.68	7/1/2006
27455		3	OSTEOTOMY PROXIMAL TIBIA UNILATERAL BEFORE EPIPHYS	840.69	840.69	7/1/2006
27457		3	OSTEOTOMY PROXIMAL TIBIA AFTER EPIPHYSEAL CLOSURE	867.00	867.00	7/1/2006
27465		3	REVISION OF FEMUR	895.05	895.05	7/1/2006
27466		3	REVISION OF FEMUR	1,043.86	1,043.86	7/1/2006
27468		3	OSTEOPLASTY, FEMUR;	1,168.31	1,168.31	7/1/2006
27470		3	REPAIR OF FEMUR	1,033.61	1,033.61	7/1/2006
27472		3	REPAIR/GRAFT OF FEMUR	1,128.75	1,128.75	7/1/2006
27475		3	ARREST, EPIPHYSEAL, ANY METHOD (EG, EPIPHYDIODESIS); DISTAL FEMUR	581.51	581.51	7/1/2006
27477		3	REPAIR LOWER LEG EPIPHYSES	650.83	650.83	7/1/2006
27479		3	REPAIR OF LEG EPIPHYSES	844.46	844.46	7/1/2006
27485		3	ARREST, HEMIEPIPHYSEAL, DISTAL FEMUR OR PROXIMAL TIBIA OR FIBULA (EG, GENU	598.93	598.93	7/1/2006
27486		3	REVISION OF TOTAL KNEE ARTHROPLASTY, ONE COMPONENT	1,218.26	1,218.26	7/1/2006
27487		3	REVISION OF TOTAL KNEE ARTHROPLASTY, WITH OR WITHOUT ALLOGRAFT; FEMORAL AND	1,559.27	1,559.27	7/1/2006
27488		3	REMOVAL OF PROSTHESIS, INCLUDING TOTAL KNEE PROSTHESIS, METHYLMETHACRYLATE WITH	1,017.62	1,017.62	7/1/2006
27495		3	PROPHYLACTIC TREATMENT FEMUR	1,000.39	1,000.39	7/1/2006
27496		3	DECOMPRESSION FASCIOTOMY, THIGH/KNEE, 1 COMPART.	428.46	428.46	7/1/2006
27497		3	DECOMPRESSION FASCIOTOMY, THIGH/KNEE W/ DEBRIDEMENT	464.79	464.79	7/1/2006
27498		3	DECOMPRESSION FASCIOTOMY, THIGH/KNEE, MULTIPLE	513.61	513.61	7/1/2006
27499		3	DECOMPRESSION FASCIOTOMY; THIGH/KNEE W/ DEBRIDEMENT	584.09	584.09	7/1/2006
27500		3	TREATMENT OF FEMUR FRACTURE	438.71	401.07	7/1/2006
27501		3	CLOSED TREATMENT OF SUPRACONDYLAR OR TRANSCONDYLAR FEMORAL	428.87	415.21	7/1/2006
27502		3	TREATMENT OF CLOSED FEMORAL SHAFT FRACTURE WITH MA	689.90	689.90	7/1/2006
27503		3	CLOSED TX SUPRA/TRANSCONDYLAR FEM FX; W/MANIPULA.	697.74	697.74	7/1/2006
27506		3	REPAIR OF FEMUR FX W/INSERTION INTRAMEDULLARY IMPLANT	1,120.74	1,120.74	7/1/2006
27507		3	OPEN TX FEM SHAFT FX WITH PLATE SCREWS	885.03	885.03	7/1/2006
27508		3	TREATMENT OF FEMUR FRACTURE	446.52	413.92	7/1/2006
27509		3	PERCUTANEOUS SKELETAL FIXATION OF FEMORAL FRACTURE, DISTAL END, MEDIAL OR	572.41	572.41	7/1/2006
27510		3	REPAIR OF FEMUR FRACTURE	606.78	606.78	7/1/2006
27511		3	OPEN TX FEMORAL FX WO INTERCONDYLAR EXTENSION	916.93	916.93	7/1/2006
27513		3	OPEN TX FEMORAL FX W/INTERCONDYLAR EXTENSION	1,177.04	1,177.04	7/1/2006
27514		3	REPAIR OF FEMUR FRACTURE	1,134.33	1,134.33	7/1/2006
27516		3	TREATMENT OF FEMUR EPIPHYSIS	422.42	394.44	7/1/2006
27517		3	REPAIR OF FEMUR EPIPHYSIS	591.28	591.28	7/1/2006
27519		3	REPAIR OF FEMUR EPIPHYSIS	983.68	983.68	7/1/2006
27520		3	TREATMENT KNEECAP FRACTURE	264.50	227.90	7/1/2006
27524		3	REPAIR OF KNEECAP FRACTURE	673.02	673.02	7/1/2006
27530		3	TREATMENT OF KNEE FRACTURE	326.85	297.21	7/1/2006
27532		3	REPAIR OF KNEE FRACTURE	535.94	505.79	7/1/2006
27535		3	OPEN TX TIBIAL FX, PROXIMAL; UNICONDYLAR	795.25	795.25	7/1/2006
27536		3	TX TIBIAL FX BICONDYLAR	1,011.11	1,011.11	7/1/2006
27538		3	TREATMENT OF KNEE FRACTURE	397.78	366.48	7/1/2006

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27540		3	REPAIR KNEE FRACTURE	838.77	838.77	7/1/2006
27550		3	REPAIR KNEE DISLOCATION	423.75	387.79	7/1/2006
27552		3	REPAIR KNEE DISLOCATION	546.16	546.16	7/1/2006
27556		3	OPEN RX CLOSED OR OPEN KNEE DISLOC W/O PRIMARY LIG	962.55	962.55	7/1/2006
27557		3	OSTEOTOMY PROXIMAL TIBIA BILATERAL WITH PRIMARY LI	1,106.20	1,106.20	7/1/2006
27558		3	OPEN TX KNEE DISLOCATION; W/LIG REPAIR	1,141.10	1,141.10	7/1/2006
27560		3	REPAIR KNEECAP DISLOCATION	307.03	252.05	7/1/2006
27562		3	REPAIR KNEECAP DISLOCATION	388.08	388.08	7/1/2006
27566		3	REPAIR KNEECAP DISLOCATION	798.13	798.13	7/1/2006
27570		3	FIXATION OF KNEE JOINT	128.50	128.50	7/1/2006
27580		3	ARTHRODESIS, KNEE, ANY TECHNIQUE	1,264.51	1,264.51	7/1/2006
27590		3	AMPUTATION OF LEG	694.07	694.07	7/1/2006
27591		3	AMPUTATION THIGH THRU FEM IMMED FIT TECH INCLUD FI	788.46	788.46	7/1/2006
27592		3	AMPUTATION OF LEG	598.46	598.46	7/1/2006
27594		3	AMPUTATION FOLLOW-UP SURGERY	443.85	443.85	7/1/2006
27596		3	AMPUTATION FOLLOW-UP SURGERY	643.31	643.31	7/1/2006
27598		3	AMPUTATION OF LOWER LEG	649.27	649.27	7/1/2006
27600		3	DECOMPRESSION OF LEG	373.25	373.25	7/1/2006
27601		3	FASCIOTOMY LEG FOR CLOSEDSPACE DECOMPRESSION, ANT.	382.10	382.10	7/1/2006
27602		3	DECOMPRESSION OF LEG	459.85	459.85	7/1/2006
27603		3	INCISION AND DRAINAGE DEEP ABSCESS OR HEMATOMA	443.29	332.39	7/1/2006
27604		3	INCISION AND DRAINAGE INFECTED BURSA	378.52	307.97	7/1/2006
27605		3	TENOTOMY, PERCUTANEOUS, ACHILLES TENDON (SEPARATE PROCEDURE); LOCAL ANESTHESIA	367.82	189.95	7/1/2006
27606		3	TENOTOMY ACHILLES TENDON SUBCUTANEOUS GENERAL ANES	276.21	276.21	7/1/2006
27607		3	INCISION (EG, OSTEOMYELITIS OR BONE ABSCESS), LEG OR ANKLE	521.78	521.78	7/1/2006
27610		3	ARTHROTOMY, ANKLE, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF FOREIGN BODY	564.59	564.59	7/1/2006
27612		3	ARTHROTOMY, POSTERIOR CAPSULAR RELEASE, ANKLE, WITH OR WITHOUT ACHILLES TENDON	491.95	491.95	7/1/2006
27613		3	BIOPSY SOFT TISSUES SUPERFICIAL	190.05	142.69	7/1/2006
27614		3	BIOPSY, SOFT TISSUE OF LEG OR ANKLE AREA; DEEP (SUBFASCIAL OR INTRAMUSCULAR)	458.21	368.78	7/1/2006
27615		3	RADICAL RESECTION SOFT TISSUE TUMOR LEG/ANKLE	804.97	804.97	7/1/2006
27618		3	EXCISION, TUMOR, LEG OR ANKLE AREA; SUBCUTANEOUS TISSUE	398.94	331.67	7/1/2006
27619		3	EXCISION BENIGN TUMOR DEEP SUBFASCIAL OR INTRAMUSC	646.85	528.55	7/1/2006
27620		3	BIOPSY OF ANKLE JOINT	418.66	418.66	7/1/2006
27625		3	ARTHROTOMY, ANKLE, WITH SYNOVECTOMY;	542.59	542.59	7/1/2006
27626		3	EXPLORATION OF ANKLE JOINT	584.39	584.39	7/1/2006
27630		3	REMOVAL OF TENDON LESION	440.57	334.91	7/1/2006
27635		3	REMOVAL OF BONE LESION	533.83	533.83	7/1/2006
27637		3	REMOVAL/GRAFT OF BONE LESION	667.76	667.76	7/1/2006
27638		3	REMOVAL/GRAFT OF BONE LESION	697.15	697.15	7/1/2006
27640		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, OR DIAPHYSECTOMY) BONE (EG,	794.37	794.37	7/1/2006
27641		3	PARTIAL REMOVAL OF FIBULA	642.85	642.85	7/1/2006
27645		3	RADICAL RESECTION OF TUMOR, BONE; TIBIA	964.88	964.88	7/1/2006
27646		3	REMOVAL OF FIBULA	868.64	868.64	7/1/2006
27647		3	RADICAL RESECTION OF TUMOR, BONE; TALUS OR CALCANEUS	733.00	733.00	7/1/2006
27648		3	INJECTION PROCEDURE FOR ANKLE ARTHROGRAPHY	153.33	47.34	7/1/2006
27650		3	REPAIR ACHILLES TENDON	634.55	634.55	7/1/2006
27652		3	REPAIR/GRAFT ACHILLES TENDON	677.22	677.22	7/1/2006
27654		3	REPAIR, SECONDARY, ACHILLES TENDON, WITH OR WITHOUT GRAFT	633.59	633.59	7/1/2006
27656		3	REPAIR FASCIAL DEFECT OF LEG	462.99	304.47	7/1/2006
27658		3	REPAIR, FLEXOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON	348.51	348.51	7/1/2006
27659		3	REPAIR, FLEXOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON	457.41	457.41	7/1/2006
27664		3	REPAIR, EXTENSOR TENDON, LEG; PRIMARY, WITHOUT GRAFT, EACH TENDON	333.44	333.44	7/1/2006
27665		3	REPAIR, EXTENSOR TENDON, LEG; SECONDARY, WITH OR WITHOUT GRAFT, EACH TENDON	379.51	379.51	7/1/2006
27675		3	REPAIR, DISLOCATING PERONEAL TENDONS; WITHOUT FIBULAR OSTEOTOMY	474.17	474.17	7/1/2006
27676		3	REPAIR DISLOC PERONEAL TENDONS WITH FIBULAR OSTEO	558.59	558.59	7/1/2006
27680		3	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, LEG AND/OR ANKLE; SINGLE, EACH TENDON	397.31	397.31	7/1/2006
27681		3	TENOLYSIS, FLEXOR OR EXTENSOR TENDON, LEG AND/OR ANKLE; MULTIPLE TENDONS	468.09	468.09	7/1/2006
27685		3	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; SINGLE TENDON (SEPARATE	498.13	437.52	7/1/2006
27686		3	LENGTHENING OR SHORTENING OF TENDON, LEG OR ANKLE; MULTIPLE TENDONS (THROUGH	512.42	512.42	7/1/2006
27687		3	GASTROCNEMIUS RECESSION	423.88	423.88	7/1/2006
27690		3	REVISION OF LEG TENDON	554.86	554.86	7/1/2006
27691		3	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING);	653.71	653.71	7/1/2006
27692		3	TRANSFER OR TRANSPLANT OF SINGLE TENDON (WITH MUSCLE REDIRECTION OR REROUTING);	105.50	105.50	7/1/2006
27695		3	REPAIR, PRIMARY, DISRUPTED LIGAMENT, ANKLE; COLLATERAL	453.30	453.30	7/1/2006
27696		3	REPAIR OF ANKLE LIGAMENTS	540.51	540.51	7/1/2006
27698		3	REPAIR, SECONDARY DISRUPTED LIGAMENT, ANKLE, COLLATERAL (EG, WATSON-JONES	601.03	601.03	7/1/2006
27700		3	REPAIR OF ANKLE	552.86	552.86	7/1/2006
27702		3	ARTHROPLASTY ANKLE WITH IMPLANT	893.50	893.50	7/1/2006
27703		3	ARTHROPLASTY, ANKLE; REVISION, TOTAL ANKLE	1,007.20	1,007.20	7/1/2006
27704		3	REMOVAL ANKLE IMPLANT	489.06	489.06	7/1/2006

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27705		3	INCISION OF TIBIA	685.16	685.16	7/1/2006
27707		3	INCISION OF FIBULA	338.44	338.44	7/1/2006
27709		3	INCISION OF TIBIA & FIBULA	667.56	667.56	7/1/2006
27712		3	OSTEOTOMY; MULTIPLE, WITH REALIGNMENT ON INTRAMEDULLARY ROD (EG, SOFIELD TYPE	925.96	925.96	7/1/2006
27715		3	OSTEOPLASTY, TIBIA AND FIBULA, LENGTHENING OR SHORTENING	932.25	932.25	7/1/2006
27720		3	REPAIR OF LOWER LEG	783.10	783.10	7/1/2006
27722		3	REPAIR/GRAFT OF LOWER LEG	774.97	774.97	7/1/2006
27724		3	REPAIR/GRAFT OF LOWER LEG	1,137.68	1,137.68	7/1/2006
27725		3	REPAIR MALUNION TIBIA BY SYNOSTOSIS WITH FIBULA	1,017.56	1,017.56	7/1/2006
27727		3	REPAIR CONGENITAL PSEUDARTHROSIS TIBIA	903.15	903.15	7/1/2006
27730		3	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), ANY METHOD; DISTAL TIBIA	519.36	519.36	7/1/2006
27732		3	REPAIR OF FIBULA EPIPHYSIS	372.54	372.54	7/1/2006
27734		3	REPAIR LOWER LEG EPIPHYSES	544.72	544.72	7/1/2006
27740		3	ARREST, EPIPHYSEAL (EPIPHYSIODESIS), ANY METHOD, COMBINED, PROXIMAL AND DISTAL	637.10	637.10	7/1/2006
27742		3	REPAIR OF LEG EPIPHYSES	596.05	596.05	7/1/2006
27745		3	PROPHYLACTIC TREATMENT TIBIA	673.08	673.08	7/1/2006
27750		3	TREATMENT OF TIBIA FRACTURE	285.12	254.81	7/1/2006
27752		3	REPAIR OF TIBIA FRACTURE	453.94	421.30	7/1/2006
27756		3	REPAIR OF TIBIA FRACTURE	485.33	485.33	7/1/2006
27758		3	OPEN RX CLOSED OR OPEN TIBIAL SHAFT FX COMPLICATED	771.23	771.23	7/1/2006
27759		3	OPEN TX TIBIAL SHAFT FX BY INTERMEDULLARY IMPLANT	892.00	892.00	7/1/2006
27760		3	TREATMENT OF ANKLE FRACTURE	274.59	238.29	7/1/2006
27762		3	REPAIR OF ANKLE FRACTURE	418.12	382.82	7/1/2006
27766		3	REPAIR OF ANKLE FRACTURE	573.61	573.61	7/1/2006
27780		3	TREATMENT OF FIBULA FRACTURE	243.64	211.51	7/1/2006
27781		3	REPAIR OF FIBULA FRACTURE	357.24	328.89	7/1/2006
27784		3	REPAIR OF FIBULA FRACTURE	498.92	498.92	7/1/2006
27786		3	TREATMENT OF ANKLE FRACTURE	260.68	223.05	7/1/2006
27788		3	REPAIR OF ANKLE FRACTURE	364.04	331.07	7/1/2006
27792		3	REPAIR OF ANKLE FRACTURE	537.03	537.03	7/1/2006
27808		3	TREATMENT OF ANKLE FRACTURE	271.81	235.37	7/1/2006
27810		3	REPAIR OF ANKLE FRACTURE	410.57	374.14	7/1/2006
27814		3	REPAIR OF ANKLE FRACTURE	710.61	710.61	7/1/2006
27816		3	TREATMENT OF ANKLE FRACTURE	259.36	227.06	7/1/2006
27818		3	REPAIR OF ANKLE FRACTURE	427.99	388.03	7/1/2006
27822		3	OPEN RX CLOSED OR OPEN TRIMALLEOLAR ANKLE FX MED A	793.07	793.07	7/1/2006
27823		3	OPEN RX CLOSED OR OPEN TRIMALLEOLAR ANKLE FX W/INT	900.07	900.07	7/1/2006
27824		3	CLOSE TX FX WT BEARING PORTION DISTAL TIBIA	249.16	232.51	7/1/2006
27825		3	CLOSED TX FX WT BEARING PORTION TIBIA; WITH SKEL TRAC	465.27	424.70	7/1/2006
27826		3	OPEN TX FX DISTAL TIBIA WITH FIXATION OF FIBULA ONLY	634.11	634.11	7/1/2006
27827		3	OPEN TX FX TIBIA WITH FIXATION FIBULA OR TIBIA ONLY	985.44	985.44	7/1/2006
27828		3	OPEN TX FX TIBIA WITH INT & EXT FIX OF BOTH TIBIA AND FIBULA	1,111.07	1,111.07	7/1/2006
27829		3	OPEN TX TIBIOFIBULAR JOINT	444.42	444.42	7/1/2006
27830		3	REPAIR LOWER LEG DISLOCATION	294.27	276.29	7/1/2006
27831		3	REPAIR LOWER LEG DISLOCATION	328.69	328.69	7/1/2006
27832		3	REPAIR LOWER LEG DISLOCATION	461.12	461.12	7/1/2006
27840		3	REPAIR ANKLE DISLOCATION	300.00	300.00	7/1/2006
27842		3	REPAIR ANKLE DISLOCATION	416.08	416.08	7/1/2006
27846		3	REPAIR ANKLE DISLOCATION	653.75	653.75	7/1/2006
27848		3	REPAIR ANKLE DISLOCATION	769.19	769.19	7/1/2006
27860		3	FIXATION OF ANKLE	158.94	158.94	7/1/2006
27870		3	FUSION OF ANKLE	903.90	903.90	7/1/2006
27871		3	ARTHRODESIS TIBIOFIBULAR JOINT PROXIMAL OR DISTAL	618.15	618.15	7/1/2006
27880		3	AMPUTATION OF LOWER LEG	703.06	703.06	7/1/2006
27881		3	AMPUTATION LEG W/IMMEDIATE FITTING TECHNIQUE INC A	782.88	782.88	7/1/2006
27882		3	AMPUTATION OF LOWER LEG	566.52	566.52	7/1/2006
27884		3	AMPUTATION FOLLOW-UP SURGERY	514.36	514.36	7/1/2006
27886		3	AMPUTATION FOLLOW-UP SURGERY	583.73	583.73	7/1/2006
27888		3	AMPUTATION, ANKLE, THROUGH MALLEOLI OF TIBIA AND FIBULA (EG, SYME, PIROGOFF	631.66	631.66	7/1/2006
27889		3	ANKLE DISARTICULATION	607.55	607.55	7/1/2006
27892		3	DECOMPRESSION FASCIOTOMY, LEG: ANT &/OR LAT COMPAR	476.74	476.74	7/1/2006
27893		3	DECOMPRESSION FASCIOTOMY, LEG; POSTERIOR COMPART.	471.12	471.12	7/1/2006
27894		3	DECOMPRESSION FASCIOTOMY, LEG; ANT &/OR LAT & POST	672.80	672.80	7/1/2006
28001		3	INCISION AND DRAINAGE, BURSA, FOOT	204.93	170.81	7/1/2006
28002		3	INCISION AND DRAINAGE BELOW FASCIA, WITH OR WITHOUT TENDON SHEATH INVOLVEMENT,	345.64	305.23	7/1/2006
28003		3	DRAINAGE OF FOOT	535.24	501.79	7/1/2006
28005		3	INCISION, BONE CORTEX (EG, OSTEOMYELITIS OR BONE ABSCESS), FOOT	539.59	539.59	7/1/2006
28008		3	INCISION OF FOOT LIGAMENTS	324.02	279.31	7/1/2006
28010		3	TENOTOMY, PERCUTANEOUS, TOE; SINGLE TENDON	189.37	189.37	7/1/2006
28011		3	TENOTOMY, PERCUTANEOUS, TOE; MULTIPLE TENDONS	271.92	271.92	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
28020		3	ARTHROTOMY, INCLUDING EXPLORATION, DRAINAGE, OR REMOVAL OF LOOSE OR FOREIGN	396.33	333.73	7/1/2006
28022		3	EXPLORATION OF A FOOT JOINT	354.63	309.91	7/1/2006
28024		3	EXPLORATION OF A TOE JOINT	343.93	300.87	7/1/2006
28030		3	NEURECTOMY, INTRINSIC MUSCULATURE OF FOOT	359.33	359.33	7/1/2006
28035		3	RELEASE, TARSAL TUNNEL (POSTERIOR TIBIAL NERVE DECOMPRESSION)	393.45	334.82	7/1/2006
28043		3	EXCISION, TUMOR, FOOT; SUBCUTANEOUS TISSUE	264.22	243.02	7/1/2006
28045		3	EXCISION BENIGN TUMOR DEEP SUBFASCIAL INTRAMUSCULA	362.62	303.66	7/1/2006
28046		3	RADICAL RESECTION SOFT TISSUE TUMOR FOOT	688.27	612.09	7/1/2006
28050		3	ARTHROTOMY WITH BIOPSY; INTERTARSAL OR TARSOMETATARSAL JOINT	328.78	285.72	7/1/2006
28052		3	BIOPSY OF A FOOT JOINT	316.66	267.64	7/1/2006
28054		3	BIOPSY TO TOE JOINT	291.12	241.76	7/1/2006
28060		3	FASCIECTOMY, PLANTAR FASCIA; PARTIAL (SEPARATE PROCEDURE)	385.90	332.58	7/1/2006
28062		3	REMOVAL OF FOOT FASCIA	469.79	386.65	7/1/2006
28070		3	EXPLORATION OF A FOOT JOINT	373.30	326.60	7/1/2006
28072		3	EXPLORATION OF A FOOT JOINT	363.70	322.96	7/1/2006
28080		3	EXCISION, INTERDIGITAL (MORTON) NEUROMA, SINGLE, EACH	308.95	261.58	7/1/2006
28086		3	SYNOVECTOMY TENDON SHEATH FLEXOR	454.22	344.59	7/1/2006
28088		3	SYNOVECTOMY TENDON SHEATH EXTENSOR	343.78	281.84	7/1/2006
28090		3	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY)	342.59	286.61	7/1/2006
28092		3	EXCISION OF LESION, TENDON, TENDON SHEATH, OR CAPSULE (INCLUDING SYNOVECTOMY)	315.21	258.90	7/1/2006
28100		3	REMOVAL OF HEEL LESION	486.63	377.98	7/1/2006
28102		3	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TALUS OR CALCANEUS;	501.62	501.62	7/1/2006
28103		3	REMOVAL/GRAFT HEEL LESION	407.65	407.65	7/1/2006
28104		3	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TARSAL OR METATARSAL,	382.28	330.27	7/1/2006
28106		3	EXCISION OR CURETTAGE OF BONE CYST OR BENIGN TUMOR, TARSAL	426.83	426.83	7/1/2006
28107		3	REMOVAL/GRAFT FOOT LESION	433.49	356.31	7/1/2006
28108		3	REMOVAL OF TOE LESIONS	313.99	269.60	7/1/2006
28110		3	PARTIAL REMOVAL METATARSAL	332.20	265.96	7/1/2006
28111		3	PARTIAL REMOVAL METATARSAL	403.79	316.68	7/1/2006
28112		3	PARTIAL REMOVAL METATARSALS	368.12	293.93	7/1/2006
28113		3	PARTIAL REMOVAL METATARSAL	387.66	329.70	7/1/2006
28114		3	OSTECTOMY, COMPLETE EXCISION; ALL METATARSAL HEADS, WITH PARTIAL PROXIMAL	770.70	662.72	7/1/2006
28116		3	REVISION OF FOOT	527.96	473.97	7/1/2006
28118		3	PARTIAL REMOVAL OF HEEL	440.92	377.65	7/1/2006
28119		3	REMOVAL OF HEEL SPUR	390.01	333.37	7/1/2006
28120		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	453.59	358.20	7/1/2006
28122		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	511.57	459.57	7/1/2006
28124		3	PARTIAL EXCISION (CRATERIZATION, SAUCERIZATION, SEQUESTRECTOMY, OR	352.25	307.87	7/1/2006
28126		3	RESECTION, PARTIAL OR COMPLETE, PHALANGEAL BASE, EACH TOE	276.51	236.11	7/1/2006
28130		3	REMOVAL OF BONE OF ANKLE	543.57	543.57	7/1/2006
28140		3	REMOVAL OF METATARSAL	509.42	427.61	7/1/2006
28150		3	PHALANGECTOMY, TOE, EACH TOE	319.42	268.08	7/1/2006
28153		3	RESECTION, CONDYLE(S), DISTAL END OF PHALANX, EACH TOE	285.33	231.34	7/1/2006
28160		3	HEMIPHALANGECTOMY OR INTERPHALANGEAL JOINT EXCISION, TOE, PROXIMAL END OF	296.95	256.21	7/1/2006
28171		3	RADICAL RESECTION OF TUMOR, BONE; TARSAL (EXCEPT TALUS OR CALCANEUS)	556.10	556.10	7/1/2006
28173		3	RADICAL RESECTION OF TUMOR, BONE; METATARSAL	594.33	514.84	7/1/2006
28175		3	RADICAL RESECTION OF TUMOR, BONE; PHALANX OF TOE	423.74	357.16	7/1/2006
28190		3	REMOVE FOREIGN BODY SUBCUTANEOUS	188.25	124.66	7/1/2006
28192		3	REMOVAL FOREIGN BODY DEEP	362.45	301.51	7/1/2006
28193		3	REMOVAL FOREIGN BODY COMPLICATED	408.90	352.93	7/1/2006
28200		3	REPAIR, TENDON, FLEXOR, FOOT; PRIMARY OR SECONDARY, WITHOUT FREE GRAFT, EACH	348.23	297.22	7/1/2006
28202		3	REPAIR/GRAFT OF FOOT TENDON	506.34	415.92	7/1/2006
28208		3	REPAIR, TENDON, EXTENSOR, FOOT; PRIMARY OR SECONDARY, EACH TENDON	329.99	279.97	7/1/2006
28210		3	REPAIR/GRAFT OF FOOT TENDON	453.27	380.40	7/1/2006
28220		3	TENOLYSIS, FLEXOR, FOOT; SINGLE TENDON	330.88	289.48	7/1/2006
28222		3	TENOLYSIS, FLEXOR, FOOT; MULTIPLE TENDONS	391.77	354.67	7/1/2006
28225		3	TENOLYSIS, EXTENSOR, FOOT; SINGLE TENDON	284.10	238.39	7/1/2006
28226		3	TENOLYSIS, EXTENSOR, FOOT; MULTIPLE TENDONS	335.08	300.31	7/1/2006
28230		3	TENOTOMY, OPEN, TENDON FLEXOR; FOOT, SINGLE OR MULTIPLE TENDON(S) (SEPARATE	319.98	286.85	7/1/2006
28232		3	TENOTOMY, OPEN, TENDON FLEXOR; TOE, SINGLE TENDON (SEPARATE PROCEDURE)	281.87	241.79	7/1/2006
28234		3	TENOTOMY, OPEN, EXTENSOR, FOOT OR TOE, EACH TENDON	286.12	242.40	7/1/2006
28238		3	RECONSTRUCTION (ADVANCEMENT), POSTERIOR TIBIAL TENDON WITH EXCISION OF	542.83	465.99	7/1/2006
28240		3	RELEASE OF BIG TOE	323.66	285.57	7/1/2006
28250		3	DIVISION OF PLANTAR FASCIA AND MUSCLE (EG, STEINDLER STRIPPING) (SEPARATE	418.48	368.80	7/1/2006
28260		3	RELEASE OF MIDFOOT JOINT	522.48	478.10	7/1/2006
28261		3	CAPULOTOMY WITH TENDON LEGTHENING	743.61	700.22	7/1/2006
28262		3	CAPSULOTOMY, MIDFOOT; EXTENSIVE, INCLUDING POSTERIOR TALOTIBIAL CAPSULOTOMY AND	1,079.01	991.24	7/1/2006
28264		3	CAPSULOTOMY, MIDTARSAL (EG, HEYMAN TYPE PROCEDURE)	664.09	649.18	7/1/2006
28270		3	CAPSULOTOMY; METATARSOPHALANGEAL JOINT, WITH OR WITHOUT TENORRHAPHY, EACH JOIN	347.60	309.18	7/1/2006
28272		3	CAPSULOTOMY; INTERPHALANGEAL JOINT, EACH JOINT (SEPARATE PROCEDURE)	285.83	241.78	7/1/2006

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28280		3	SYNDACTYLIZATION, TOES (EG, WEBBING OR KELIKIAN TYPE PROCEDURE)	410.66	352.03	7/1/2006
28285		3	CORRECTION, HAMMERTOE (EG, INTERPHALANGEAL FUSION, PARTIAL OR TOTAL	339.79	292.10	7/1/2006
28286		3	CORRECTION, COCK-UP FIFTH TOE, WITH PLASTIC SKIN CLOSURE (EG, RUIZ-MORA TYPE	335.93	284.92	7/1/2006
28288		3	OSTECTOMY, PARTIAL, EXOSTECTOMY OR CONDYLECTOMY, METATARSAL HEAD, EACH	382.35	347.24	7/1/2006
28289		3	HALLUX RIGIDUS CORRECTION WITH CHEILECTOMY, DEBRIDEMENT AND CAPSULAR RELEASE OF	541.58	468.05	7/1/2006
28290		3	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; SIMPLE	429.99	378.98	7/1/2006
28292		3	REMOVAL OF BIG TOE JOINT	521.82	457.90	7/1/2006
28293		3	REMOVAL OF BIG TOE JOINT	711.83	557.81	7/1/2006
28294		3	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; WITH TENDON	579.70	489.28	7/1/2006
28296		3	INCISION OF METATARSAL	628.17	537.42	7/1/2006
28297		3	HALLUX VALGUS CORRECTION,LAPIDUS TYPE PROCEDURE	657.67	568.24	7/1/2006
28298		3	INCISION OF TOE	549.17	475.64	7/1/2006
28299		3	CORRECTION, HALLUX VALGUS (BUNION), WITH OR WITHOUT SESAMOIDECTOMY; BY DOUBLE	702.90	613.14	7/1/2006
28300		3	OSTEOTOMY; CALCANEUS (EG, DWYER OR CHAMBERS TYPE PROCEDURE), WITH OR WITHOUT	612.10	612.10	7/1/2006
28302		3	INCISION OF ANKLE BONE	604.73	604.73	7/1/2006
28304		3	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS;	622.34	549.14	7/1/2006
28305		3	OSTEOTOMY, TARSAL BONES, OTHER THAN CALCANEUS OR TALUS; WITH AUTOGRAFT	629.82	629.82	7/1/2006
28306		3	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	456.86	368.42	7/1/2006
28307		3	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	614.28	423.82	7/1/2006
28308		3	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	397.01	328.44	7/1/2006
28309		3	OSTEOTOMY, WITH OR WITHOUT LENGTHENING, SHORTENING OR ANGULAR CORRECTION,	770.38	770.38	7/1/2006
28310		3	OSTEOTOMY, SHORTENING, ANGULAR OR ROTATIONAL CORRECTION; PROXIMAL PHALANX,	402.05	329.18	7/1/2006
28312		3	INCISION OF BIG TOES	358.49	298.53	7/1/2006
28313		3	RECONSTRUCTION, ANGULAR DEFORMITY OF TOE, SOFT TISSUE PROCEDURES ONLY (EG,	372.05	357.15	7/1/2006
28315		3	SESAMOIDECTOMY FIRST TOE	351.43	299.76	7/1/2006
28320		3	REPAIR, NONUNION OR MALUNION; TARSAL BONES	586.01	586.01	7/1/2006
28322		3	REPAIR OF METATARSALS	633.89	539.49	7/1/2006
28340		3	RECONST TOE, MACRODACTYLY; SOFT TISSUE RESECTION	484.26	411.06	7/1/2006
28341		3	RECONST, TOE, MACRODACTYLY; W/ BONE RESECTION	555.89	485.34	7/1/2006
28344		3	RECONSTRUCTION, TOE(S); POLYDACTYLY	355.55	285.33	7/1/2006
28345		3	RECONSTRUCT TOES SYNDACTYLY W/WO GRAFT	436.90	386.55	7/1/2006
28360		3	RECONSTRUCTION CLEFT FOOT	880.54	880.54	7/1/2006
28400		3	TREATMENT OF HEEL FRACTURE	206.26	186.94	7/1/2006
28405		3	REPAIR OF HEEL FRACTURE	341.30	334.35	7/1/2006
28406		3	TREAT CLOSED CALCAN FIXATION W/MANIPULATION SKELET	477.96	477.96	7/1/2006
28415		3	REPAIR OF HEEL FRACTURE	1,076.72	1,076.72	7/1/2006
28420		3	REPAIR/GRAFT HEEL FRACTURE	1,091.66	1,091.66	7/1/2006
28430		3	TREATMENT OF ANKLE FRACTURE	195.00	167.41	7/1/2006
28435		3	REPAIR OF ANKLE FRACTURE	263.47	258.81	7/1/2006
28436		3	TREATMENT OF CLOSED TALUSFX W/ MANIP AND PINNING	384.00	384.00	7/1/2006
28445		3	REPAIR OF ANKLE FRACTURE	987.42	987.42	7/1/2006
28450		3	TREATMENT MIDFOOT FRACTURE	178.20	157.00	7/1/2006
28455		3	REPAIR MIDFOOT FRACTURE	235.00	235.00	7/1/2006
28456		3	TREATMENT OF CLOSED TARSAL BONE FX W/ MANIP,PINNIN	244.41	244.41	7/1/2006
28465		3	REPAIR MIDFOOT FRACTURE(S)	487.03	487.03	7/1/2006
28470		3	TREAT METATARSAL FRACTURES	182.23	159.59	7/1/2006
28475		3	REPAIR METATARSAL FRACTURES	227.70	223.72	7/1/2006
28476		3	TREATMENT OF CLOSED METATARSAL FX W/ MANIP,PINNING	299.05	299.05	7/1/2006
28485		3	REPAIR METATARSAL FRACTURES	405.19	405.19	7/1/2006
28490		3	TREAT BIG TOE FRACTURE	109.38	96.79	7/1/2006
28495		3	REPAIR BIG TOE FRACTURE	133.70	130.06	7/1/2006
28496		3	TREATMENT OF CLOSED TOE FX W/ MANIP AND PINNING	366.10	198.17	7/1/2006
28505		3	REPAIR OF BIG TOE FRACTURE	418.67	279.22	7/1/2006
28510		3	TREATMENT OF TOE FRACTURE	93.15	93.15	7/1/2006
28515		3	REPAIR OF TOE FRACTURE	119.64	119.64	7/1/2006
28525		3	REPAIR OF TOE FRACTURE	380.23	244.59	7/1/2006
28530		3	TREATMENT OF CLOSED SESAMOID FRACTURE	89.08	89.08	7/1/2006
28531		3	OPEN TX SESAMOID FX	333.57	161.00	7/1/2006
28540		3	REPAIR FOOT DISLOCATION	159.13	159.13	7/1/2006
28545		3	REPAIR FOOT DISLOCATION	174.57	174.57	7/1/2006
28546		3	TREATMENT TARSAL DISLOC WITH PERCUTANEOUS SKELETAL	356.73	272.60	7/1/2006
28555		3	REPAIR OF FOOT DISLOCATION	579.33	438.89	7/1/2006
28570		3	REPAIR FOOT DISLOCATION	145.43	142.43	7/1/2006
28575		3	REPAIR FOOT DISLOCATION	255.62	255.62	7/1/2006
28576		3	PERCUTANEOUS SKELETAL FIX TALOTARSEL JNTDISLOC.	304.12	304.12	7/1/2006
28585		3	REPAIR OF FOOT DISLOCATION	559.22	509.80	7/1/2006
28600		3	REPAIR FOOT DISLOCATION	167.67	163.37	7/1/2006
28605		3	REPAIR FOOT DISLOCATION	210.46	210.46	7/1/2006
28606		3	TREAT CLSD TARS/METATARS DESLOC W/PERCUT SKEL FIX	350.62	350.62	7/1/2006
28615		3	REPAIR FOOT DISLOCATION	576.30	576.30	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
28630		3	REPAIR OF TOE DISLOCATION	117.81	98.88	7/1/2006
28635		3	REPAIR OF TOE DISLOCATION	141.99	125.43	7/1/2006
28636		3	PERCU. SKELETAL FIX MET AT ARSOPHALANGEAL JNT DISLOC	238.15	196.75	7/1/2006
28645		3	REPAIR OF TOE DISLOCATION	328.99	273.35	7/1/2006
28660		3	REPAIR OF TOE DISLOCATION	89.01	73.45	7/1/2006
28665		3	REPAIR OF TOE DISLOCATION	122.48	122.48	7/1/2006
28666		3	PERCU. SKELETAL FIX METATARSOPHALANGEAL JOINT DISLOCATION	301.10	191.46	7/1/2006
28675		3	OPEN TREATMENT OF CLOSED OR OPEN INTERPHALANGEAL J	352.65	226.79	7/1/2006
28705		3	ARTHRODESIS; PANTALAR	1,159.77	1,159.77	7/1/2006
28715		3	ARTHRODESIS; TRIPLE	844.62	844.62	7/1/2006
28725		3	ARTHRODESIS; SUBTALAR	733.72	733.72	7/1/2006
28730		3	FUSION OF FOOT BONES	707.38	707.38	7/1/2006
28735		3	ARTHRODESIS, MIDTARSAL OR TARSOMETATARSAL, MULTIPLE OR TRANSVERSE; WITH	688.30	688.30	7/1/2006
28737		3	ARTHRODESIS, WITH TENDON LENGTHENING AND ADVANCEMENT, MIDTARSAL, TARSAL	606.47	606.47	7/1/2006
28740		3	FUSION OF FOOT BONES	677.19	531.13	7/1/2006
28750		3	FUSION OF BIG TOE JOINT	683.98	509.75	7/1/2006
28755		3	FUSION OF BIG TOE JOINT	387.98	309.81	7/1/2006
28760		3	ARTHRODESIS, WITH EXTENSOR HALLUCIS LONGUS TRANSFER TO FIRST METATARSAL NECK,	567.50	486.02	7/1/2006
28800		3	AMPUTATION, FOOT; MIDTARSAL (EG, CHOPART TYPE PROCEDURE)	514.16	514.16	7/1/2006
28805		3	AMPUTATION THRU METATARSAL	516.36	516.36	7/1/2006
28810		3	AMPUTATION TOE & METATARSAL	391.42	391.42	7/1/2006
28820		3	AMPUTATION OF TOE	423.20	298.00	7/1/2006
28825		3	PARTIAL AMPUTATION OF TOE	372.60	256.01	7/1/2006
29000		3	APPLICATION OF BODY CAST	188.80	147.84	7/1/2006
29010		3	APPLICATION OF BODY CAST	193.51	143.48	7/1/2006
29015		3	APPLICATION OF BODY CAST	191.92	146.21	7/1/2006
29020		3	APPLICATION OF BODY CAST	188.08	129.12	7/1/2006
29025		3	APPLICATION OF BODY CAST	200.88	158.15	7/1/2006
29035		3	APPLICATION OF BODY CAST	190.08	122.51	7/1/2006
29040		3	APPLICATION OF BODY CAST	170.03	138.24	7/1/2006
29044		3	APPLICATION OF BODY CAST	216.22	147.65	7/1/2006
29046		3	APPLICATION OF BODY CAST	203.76	165.82	7/1/2006
29049		3	APPLICATION, CAST; FIGURE-OF-EIGHT	78.10	52.46	7/1/2006
29055		3	APPLICATION OF SHOULDER CAST	169.78	119.49	7/1/2006
29058		3	APPLICATION OF SHOULDER CAST	102.75	74.83	7/1/2006
29065		3	APPLICATION OF LONG ARM CAST	78.83	59.52	7/1/2006
29075		3	APPLICATION OF FOREARM CAST	72.45	53.13	7/1/2006
29085		3	APPLICATION HAND/WRIST CAST	76.94	55.30	7/1/2006
29086		3	APPLICATION, CAST; FINGER (EG, CONTRACTURE)	55.73	40.16	7/1/2006
29105		3	APPLICATION LONG ARM SPLINT	74.83	50.98	7/1/2006
29125		3	APPLICATION FOREARM SPLINT	56.64	35.77	7/1/2006
29126		3	APPLICATION SHORT ARM SPLINT DYNAMIC	69.40	44.42	7/1/2006
29130		3	APPLICATION FINGER SPLINT STATIC	34.95	25.01	7/1/2006
29131		3	APPLICATION FINGER SPLINT DYNAMIC	45.00	28.44	7/1/2006
29200		3	STRAPPING OF CHEST	48.17	35.58	7/1/2006
29220		3	STRAPPING OF LOW BACK	47.81	36.88	7/1/2006
29240		3	STRAPPING OF SHOULDER	55.02	38.70	7/1/2006
29260		3	STRAPPING OF ELBOW OR WRIST	45.46	31.55	7/1/2006
29280		3	STRAPPING;	45.55	29.65	7/1/2006
29305		3	APPLICATION OF HIP CAST	191.92	139.30	7/1/2006
29325		3	APPLICATION OF HIP SPICA CAST; 1 & 1/2 SPICA OR BOTH LEGS	209.84	157.22	7/1/2006
29345		3	APPLICATION OF LONG LEG CAST	114.32	91.00	7/1/2006
29355		3	APPLICATION OF LONG LEG CAST	117.56	97.91	7/1/2006
29358		3	APPLICATION LONG LEG CLAST BRACE	125.62	93.31	7/1/2006
29365		3	APPLICATION OF LONG LEG CAST	102.07	78.56	7/1/2006
29405		3	APPLICATION SHORT LEG CAST	74.60	57.71	7/1/2006
29425		3	APPLICATION SHORT LEG CAST	80.56	64.33	7/1/2006
29435		3	APPLICATION PATELLAR TENDON BEARING CAST	98.76	77.90	7/1/2006
29440		3	ADDING WALKER TO PREVIOUSLY APPLIED CAST	45.22	31.31	7/1/2006
29445		3	APPLICATION OF RIGID TOTAL CONTACT LEG CAST	130.02	102.05	7/1/2006
29450		3	APPLICATION CLUBFOOT CAST, LONG OR SHORT LEG	129.80	117.21	7/1/2006
29505		3	APPLICATION LONG LEG SPLINT	65.75	41.44	7/1/2006
29515		3	APPLICATION LOWER LEG SPLINT	57.17	43.59	7/1/2006
29520		3	STRAPPING;	48.29	35.70	7/1/2006
29530		3	STRAPPING;	47.75	32.43	7/1/2006
29540		3	STRAPPING;	33.66	30.01	7/1/2006
29550		3	STRAPPING;	32.22	27.58	7/1/2006
29580		3	STRAPPING;	43.66	33.73	7/1/2006
29590		3	DENIS-BROWNE SPLINT STRAPPING	46.33	39.04	7/1/2006
29700		3	REMOVAL OR BIVALVING;	51.77	31.46	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
29705		3	REMOVAL OR BIVALVING;	57.43	42.78	7/1/2006
29710		3	REMOVAL OR BIVALVING;	103.53	75.93	7/1/2006
29715		3	REMOVAL OR BIVALVING;	74.67	49.17	7/1/2006
29720		3	REPAIR OF SPICA, BODY CAST OR JACKET	65.65	40.00	7/1/2006
29730		3	REVISION OF CAST	56.60	41.36	7/1/2006
29740		3	REVISION OF CAST	82.54	60.56	7/1/2006
29750		3	REVISION OF CAST	85.27	69.29	7/1/2006
29800		3	ARTHROSCOPY, TM JOINT WITH OR W/O SYNOVIAL BIOPSY	485.47	485.47	7/1/2006
29804		3	ARTHROSCOPY, TM JOINT, SURGICAL	577.55	577.55	7/1/2006
29805		3	ARTHROSCOPY, SHOULDER, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE	423.56	423.56	7/1/2006
29806		3	ARTHROSCOPY, SHOULDER, SURGICAL; CAPSULORRHAPHY	944.65	944.65	7/1/2006
29807		3	ARTHROSCOPY, SHOULDER, SURGICAL; REPAIR OF SLAP LESION	920.09	920.09	7/1/2006
29819		3	ARTHROSCOPY SHOULDER SURGICAL REMOVAL OF FB	529.83	529.83	7/1/2006
29820		3	ARTHROSCOPY SYNOVECTOMY PARTIAL	488.97	488.97	7/1/2006
29821		3	ARTHROSCOPY SYNOVECTOMY COMPLETE	533.99	533.99	7/1/2006
29822		3	ARTHROSCOPY DEBRIDEMENT LIMITED	518.88	518.88	7/1/2006
29823		3	ARTHROSCOPY DEBRIDEMENT EXTENSIVE	566.08	566.08	7/1/2006
29824		3	ARTHROSCOPY, SHOULDER, SURGICAL; DISTAL CLAVICULECTOMY INCLUDING DISTAL	579.46	579.46	7/1/2006
29825		3	ARTHROSCOPY WITH LYSIS OF ADHESIONS	528.83	528.83	7/1/2006
29826		3	ARTHROSCOPY SHOULDER W/ DECOMPR SUBACROMIAL SPACE	609.09	609.09	7/1/2006
29827		3	ARTHROSCOPY, SHOULDER, SURGICAL; WITH ROTATOR CUFF REPAIR	996.47	996.47	7/1/2006
29830		3	ARTHROSCOPY ELBOW DIAGNOSTIC	406.97	406.97	7/1/2006
29834		3	ARTHROSCOPY ELBOW SURGICAL WITH REMOVAL OF FB	444.31	444.31	7/1/2006
29835		3	ARTHROSCOPY ELBOW SYNOVECTOMY PARTIAL	454.33	454.33	7/1/2006
29836		3	ARTHROSCOPY ELBOW SYNOVECTOMY COMPLETE	525.13	525.13	7/1/2006
29837		3	ARTHROSCOPY ELBOW DEBRIDEMENT LIMITED	478.10	478.10	7/1/2006
29838		3	ARTHROSCOPY ELBOW DEBRIDEMENT EXTENSIVE	535.94	535.94	7/1/2006
29840		3	ARTHROSCOPY, WRIST, DIAGNOSTIC, WITH OR WITHOUT SYNOVIAL BIOPSY	395.32	395.32	7/1/2006
29843		3	SURGICAL ARTHROSCOPY FOR INFECTION	424.02	424.02	7/1/2006
29844		3	SURGICAL ARTHROSCOPY FOR PARTIAL SYNOVECTOMY	446.37	446.37	7/1/2006
29845		3	SURGICAL ARTHROSCOPY FOR COMPLETE SYNOVECTOMY	508.16	508.16	7/1/2006
29846		3	SURGICAL ARTHROSCOPY FOR EXCISION FIBROCARTILAGE	468.37	468.37	7/1/2006
29847		3	SURGICAL ARTHROSCOPY FOR FIXATION OF FRACTURE	485.11	485.11	7/1/2006
29848		3	ENDOSCOPY, WRIST, SURGICAL, WITH RELEASE OF TRANSVERSE CARPAL LIGAMENT	401.46	401.46	7/1/2006
29850		3	ARTHROSCOPICALLY AIDED TX OF FX KNEE	489.30	489.30	7/1/2006
29851		3	ARTHROSCOPICALLY AIDED TX FX OF KNEE	850.09	850.09	7/1/2006
29855		3	ARTHROSCOPICALLY AIDED TX OF TIBIAL FX	715.17	715.17	7/1/2006
29856		3	ARTHROSCOPICALLY AIDED TX OF TIBIAL FX	917.84	917.84	7/1/2006
29860		3	ARTHROSCOPY, HIP, DIAGNOSTIC WITH OR WITHOUT SYNOVIAL BIOPSY (SEPARATE	551.66	551.66	7/1/2006
29861		3	ARTHROSCOPY, HIP, SURGICAL; WITH REMOVAL OF LOOSE BODY OR FOREIGN BODY	609.22	609.22	7/1/2006
29862		3	ARTHROSCOPY, HIP, SURGICAL; WITH DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE	677.58	677.58	7/1/2006
29863		3	ARTHROSCOPY, HIP, SURGICAL; WITH SYNOVECTOMY	671.32	671.32	7/1/2006
29870		3	ARTHROSCOPY KNEE DIAGNOSTIC	364.06	364.06	7/1/2006
29871		3	ARTHROSCOPY KNEE SURGICAL	456.75	456.75	7/1/2006
29873		3	ARTHROSCOPY, KNEE, SURGICAL; WITH LATERAL RELEASE	457.90	457.90	7/1/2006
29874		3	ARTHROSCOPY KNEE WITH REMOVAL OF FOREIGN BODY	480.26	480.26	7/1/2006
29875		3	ARTHROSCOPY KNEE SYNOVECTOMY LIMITED	446.36	446.36	7/1/2006
29876		3	ARTHROSCOPY KNEE SYNOVECTOMY MAJOR	549.53	549.53	7/1/2006
29877		3	ARTHROSCOPY KNEE DEBRIDEMENT/SHAVING	517.66	517.66	7/1/2006
29879		3	ARTHROSCOPY, KNEE, SURGICAL; ABRASION ARTHROPLASTY (INCLUDES CHONDROPLASTY	557.62	557.62	7/1/2006
29880		3	ARTHROSCOPY W/MENISCECTOMY, KNEE	583.98	583.98	7/1/2006
29881		3	ARTHROSCOPY KNEE WITH MENISCECTOMY	541.09	541.09	7/1/2006
29882		3	ARTHROSCOPY KNEE WITH MENISCUS REPAIR	586.09	586.09	7/1/2006
29883		3	ARTHROSCOPY W/MENISCUS REPAIR, KNEE	742.38	742.38	7/1/2006
29884		3	ARTHROSCOPY KNEE WITH LYSIS OF ADHESIONS	515.38	515.38	7/1/2006
29885		3	SURGICAL ARTHROSCOPY W/BONE GRAFTING, KNEE	627.96	627.96	7/1/2006
29886		3	ARTHROSCOPY KNEE DRILLING	528.60	528.60	7/1/2006
29887		3	ARTHROSCOPY KNEE DRILLING WITH INTERNAL FIXATION	624.60	624.60	7/1/2006
29888		3	LIGAMENT REPAIR BY ARTHROSCOPY, ANTERIOR	894.09	894.09	7/1/2006
29889		3	LIGAMENT REPAIR BY ARTHROSCOPY, POSTERIOR	1,052.17	1,052.17	7/1/2006
29891		3	ARTHROSCOPY, ANKLE, SURGICAL; EXCISION OF OSTEOCHONDRAL DEFECT OF TALUS AND/OR	583.50	583.50	7/1/2006
29892		3	ARTHROSCOPICALLY AIDED REPAIR OF LARGE OSTEOCHONDRITIS DISSECANS LESION, TALAR	613.18	613.18	7/1/2006
29893		3	ENDOSCOPIC PLANTAR FASCIOTOMY	410.76	334.58	7/1/2006
29894		3	ARTHROSCOPY ANKLE SURGICAL	467.56	467.56	7/1/2006
29895		3	ARTHROSCOPY ANKLE SYNOVECTOMY PARTIAL	458.72	458.72	7/1/2006
29897		3	ARTHROSCOPY ANKLE DEBRIDEMENT LIMITED	480.52	480.52	7/1/2006
29898		3	ARTHROSCOPY ANKLE DEBRIDEMENT EXTENSIVE	534.37	534.37	7/1/2006
29899		3	ENDOSCOPIC PLANTAR FASCIOTOMY WITH ANKLE ARTHRODESIS	905.46	905.46	7/1/2006
29900		3	ARTHROSCOPY, METACARPOPHALANGEAL JOINT, DIAGNOSTIC, INCLUDES SYNOVIAL BIOPSY	411.19	411.19	7/1/2006
29901		3	ARTHROSCOPY, METACARPOPHALANGEAL JOINT, SURGICAL; WITH DEBRIDEMENT	452.77	452.77	7/1/2006

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29902		3	ARTHROSCOPY, METACARPOPHALANGEAL JOINT, SURGICAL; WITH REDUCTION OF DISPLACED	483.95	483.95	7/1/2006
30000		3	DRAINAGE OF NOSE LESION	189.39	100.29	7/1/2006
30020		3	DRAINAGE OF NOSE LESION	162.89	102.94	7/1/2006
30100		3	BIOPSY OF NOSE	101.04	62.62	7/1/2006
30110		3	REMOVAL OF NOSE POLYP(S)	169.56	113.91	7/1/2006
30115		3	REMOVAL OF NOSE POLYP(S)	357.15	357.15	7/1/2006
30117		3	EXCISION OR DESTRUCTION (EG, LASER), INTRANASAL LESION; INTERNAL APPROACH	556.31	273.45	7/1/2006
30118		3	REMOVAL OF NOSE LESION	671.87	671.87	7/1/2006
30120		3	REVISION OF NOSE	416.98	400.75	7/1/2006
30124		3	REMOVAL OF NOSE LESION	237.27	237.27	7/1/2006
30125		3	REMOVAL OF NOSE LESION	548.18	548.18	7/1/2006
30130		3	EXCISION TURBINATE, PARTIAL OR COMPLETE, ANY METHOD	314.29	314.29	7/1/2006
30140		3	SUBMUCOUS RESECTION TURBINATE, PARTIAL OR COMPLETE, ANY METHOD	336.88	336.88	7/1/2006
30150		3	PARTIAL REMOVAL OF NOSE	715.80	715.80	7/1/2006
30160		3	REMOVAL OF NOSE	704.00	704.00	7/1/2006
30200		3	INJECTION INTO TURBINATE(S), THERAPEUTIC	83.12	53.98	7/1/2006
30210		3	DISPLACEMENT THERAPY (PROETZ TYPE)	110.84	84.35	7/1/2006
30220		3	INSERTION, NASAL SEPTAL PROSTHESIS (BUTTON)	198.65	108.89	7/1/2006
30300		3	REMOVE FOREIGN BODY,NOSE	192.97	102.88	7/1/2006
30310		3	REMOVE FOREIGN BODY,NOSE	177.26	177.26	7/1/2006
30320		3	REMOVE FOREIGN BODY,NOSE	405.20	405.20	7/1/2006
30400		3	RECONSTRUCTION OF NOSE	891.90	891.90	7/1/2006
30410		3	RECONSTRUCTION OF NOSE	1,109.43	1,109.43	7/1/2006
30420		3	RECONSTRUCTION OF NOSE	1,199.52	1,199.52	7/1/2006
30430		3	REVISION OF NOSE	808.91	808.91	7/1/2006
30435		3	RHINOPLASTY SECONDARY INTERMEDIATE REVISION	1,091.89	1,091.89	7/1/2006
30450		3	RHINOPLASTY SECONDARY MAJOR REVISION	1,442.57	1,442.57	7/1/2006
30460		3	RHINOPLASTY FOR NASAL DEFORMITY; TIP ONLY	712.19	712.19	7/1/2006
30462		3	RHINOPLASTY FOR NASAL DEFORMITY; TIP,SEPTUM,OSTEOT	1,434.17	1,434.17	7/1/2006
30465		3	REPAIR OF NASAL VESTIBULAR STENOSIS (EG, SPREADER GRAFTING, LATERAL NASAL WALL	840.24	840.24	7/1/2006
30520		3	REPAIR OF NASAL SEPTUM	436.71	436.71	7/1/2006
30540		3	REPAIR NASAL LESION	602.14	602.14	7/1/2006
30545		3	REPAIR NASAL LESION	843.31	843.31	7/1/2006
30560		3	RELEASE OF NASAL ADHESIONS	205.99	118.55	7/1/2006
30580		3	REPAIR UPPER JAW FISTULA	519.03	453.45	7/1/2006
30600		3	REPAIR MOUTH/NOSE FISTULA	482.25	399.11	7/1/2006
30620		3	RECONSTRUCTION INNER NOSE	521.17	521.17	7/1/2006
30630		3	REPAIR NASAL SEPTAL PERFORATIONS	534.02	534.02	7/1/2006
30801		3	CAUTERY AND/OR ABLATION, MUCOSA OF TURBINATES, UNILATERAL OR BILATERAL, ANY	178.44	105.24	7/1/2006
30802		3	CAUTERIZATION AND/OR ABLATION, MUCOSA OF TURBINATES, UNILATERAL	229.80	155.27	7/1/2006
30901		3	CONTROL NASAL HEMORRHAGE, ANTERIOR, SIMPLE	91.14	56.70	7/1/2006
30903		3	CONTROL NASAL HEMORRHAGE, ANTERIOR, COMPLEX ANY METHOD	148.53	75.00	7/1/2006
30905		3	CONTROL NASAL HEMORRHAGE, POSTERIOR, WITH POSTERIOR NASAL PACKS AND/OR CAUTERY	191.43	100.02	7/1/2006
30906		3	CONTROL HEMORRHAGE POSTERIOR SUBSEQUENT W POSTERIO	221.99	132.56	7/1/2006
30915		3	LIGATION NASAL SINUS ARTERY	494.47	494.47	7/1/2006
30920		3	LIGATION UPPER JAW ARTERY	670.08	670.08	7/1/2006
30930		3	FRACTURE NASAL TURBINATE(S), THERAPEUTIC	101.79	101.79	7/1/2006
31000		3	LAVAGE BY CANNULATION; MAXILLARY SINUS	137.88	89.85	7/1/2006
31002		3	IRRIGATION OF SINUS	179.87	179.87	7/1/2006
31020		3	EXPLORATION OF SINUS	395.73	284.77	7/1/2006
31030		3	SINUSOTOMY, MAXILLARY; RADICAL W/O REMOVAL POLYPS	608.50	447.86	7/1/2006
31032		3	SINUSOTOMY, MAXILLARY, RADICAL W REMOVAL OF POLYPS	489.91	489.91	7/1/2006
31040		3	EXPLORATION BEHIND UPPER JAW	685.09	685.09	7/1/2006
31050		3	EXPLORATION OF SINUS	412.01	412.01	7/1/2006
31051		3	SINUSOTOMY W/MUCOSAL STRIPPING OR POLYP REMOVAL	543.50	543.50	7/1/2006
31070		3	EXPLORATION OF SINUS	359.57	359.57	7/1/2006
31075		3	EXPLORATION OF SINUS	669.98	669.98	7/1/2006
31080		3	SINUSOTOMY FRONTALOBLITERATIVE WO OSTEOPLAS FLAP B	887.51	887.51	7/1/2006
31081		3	SINUSOTOMY FRONTAL OBLITERATIVE W/O OSTEOPLAST FLA	980.03	980.03	7/1/2006
31084		3	REMOVAL OF SINUS	961.57	961.57	7/1/2006
31085		3	REMOVAL OF SINUS	1,013.86	1,013.86	7/1/2006
31086		3	NONOBLITERATIVE W OSTEOPLASTIC FLAP BROW INCISION	928.12	928.12	7/1/2006
31087		3	NONOBLITERATIVE W OSTEOPLASTIC FLAP CORONAL INCIS	920.44	920.44	7/1/2006
31090		3	SINUSOTOMY, UNILATERAL, THREE OR MORE PARANASAL SINUSES (FRONTAL, MAXILLARY,	781.42	781.42	7/1/2006
31200		3	REMOVAL OF SINUS	491.31	491.31	7/1/2006
31201		3	REMOVAL OF SINUS	624.60	624.60	7/1/2006
31205		3	REMOVAL OF SINUS	777.87	777.87	7/1/2006
31225		3	REMOVAL OF UPPER JAW	1,319.78	1,319.78	7/1/2006
31230		3	REMOVAL OF UPPER JAW	1,472.84	1,472.84	7/1/2006
31231		3	NASAL ENDOSCOPY, DIAGNOSTIC, UNILATERAL OR BILATERAL (SEPARATE PROCEDURE)	153.96	70.82	7/1/2006

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31233		3	NASAL/SINUS ENDOSCOPY, DIAGNOSTIC WITH MAXILLARY SINUSOSCOPY	225.85	132.12	7/1/2006
31235		3	NASAL/SINUS ENDOSCOPY, DIAGNOSTIC WITH SPHENOID SINUSOSCOPY	264.00	158.01	7/1/2006
31237		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	286.31	176.34	7/1/2006
31238		3	NASAL/SINUS ENDOSCOPY, SURGICAL; WITH CONTROL OF NASAL HEMORRHAGE	297.48	193.15	7/1/2006
31239		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	592.79	592.79	7/1/2006
31240		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	157.11	157.11	7/1/2006
31254		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH OSTEOMEATAL COMPLEX (OMC)	272.15	272.15	7/1/2006
31255		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH OSTEOMEATAL COMPLEX (OMC)	403.50	403.50	7/1/2006
31256		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH OSTEOMEATAL COMPLEX (OMC)	196.27	196.27	7/1/2006
31267		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH ANTERIOR AND POSTERIOR	318.19	318.19	7/1/2006
31276		3	NASAL/SINUS ENDOSCOPY, SURGICAL WITH FRONTAL SINUS EXPLORATION,	509.38	509.38	7/1/2006
31287		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH SPHENOIDOTOMY;	231.24	231.24	7/1/2006
31288		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH SPHENOIDOTOMY;	268.54	268.54	7/1/2006
31290		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH REPAIR OF CEREBROSPINAL FLUID LEAK;	1,051.98	1,051.98	7/1/2006
31291		3	NASAL/SINUS ENDOSCOPY, SURGICAL, WITH REPAIR OF CEREBROSPINAL FLUID LEAK;	1,106.88	1,106.88	7/1/2006
31292		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	910.98	910.98	7/1/2006
31293		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	990.30	990.30	7/1/2006
31294		3	NASAL/SINUS ENDOSCOPY, SURGICAL;	1,147.99	1,147.99	7/1/2006
31300		3	REMOVAL OF LARYNX LESION	1,038.21	1,038.21	7/1/2006
31320		3	INCISION OF LARYNX	541.77	541.77	7/1/2006
31360		3	REMOVAL OF LARYNX	1,201.11	1,201.11	7/1/2006
31365		3	REMOVAL OF LARYNX	1,590.14	1,590.14	7/1/2006
31367		3	PARTIAL REMOVAL OF LARYNX	1,553.99	1,553.99	7/1/2006
31368		3	PARTIAL REMOVAL OF LARYNX	1,871.17	1,871.17	7/1/2006
31370		3	PARTIAL REMOVAL OF LARYNX	1,548.04	1,548.04	7/1/2006
31375		3	PARTIAL REMOVAL OF LARYNX	1,441.11	1,441.11	7/1/2006
31380		3	PARTIAL REMOVAL OF LARYNX	1,450.01	1,450.01	7/1/2006
31382		3	PARTIAL LARYNGECTOMY ANTERO-LATERO-VERTICAL	1,493.94	1,493.94	7/1/2006
31390		3	REMOVAL OF LARYNX & PHARYNX	1,850.94	1,850.94	7/1/2006
31395		3	RECONSTRUCT LARYNX & PHARYNX	2,114.68	2,114.68	7/1/2006
31400		3	REVISION OF LARYNX	847.01	847.01	7/1/2006
31420		3	REMOVAL OF EPIGLOTTIS	703.33	703.33	7/1/2006
31500		3	INTUBATION, ENDOTRACHEAL, EMERGENCY PROCEDURE	106.02	106.02	7/1/2006
31502		3	TRACHEOTOMY TUBE CHANGE PRIOR TO ESTABLISHMENT OF FISTULA TRACT	34.82	33.83	7/1/2006
31505		3	VISUALIZATION OF LARYNX	71.14	43.32	7/1/2006
31510		3	BIOPSY/REMOVAL LARYNX LESION	182.45	114.21	7/1/2006
31511		3	LARYNGOSCOPY INDIRECT WITH REMOVAL FOREIGN BODY	185.82	117.25	7/1/2006
31512		3	LARYNGOSCOPY INDIRECT WITH REMOVAL LESION	185.00	123.72	7/1/2006
31513		3	LARYNGOSCOPY INDIRECT WITH VOCA CORD INJECTION	127.88	127.88	7/1/2006
31515		3	VISUALIZATION OF LARYNX	185.62	103.14	7/1/2006
31520		3	VISUALIZATION OF LARYNX	148.45	148.45	7/1/2006
31525		3	VISUALIZATION OF LARYNX	220.42	154.51	7/1/2006
31526		3	LARYNGOSCOPY DIAGNOSTIC W OPERATING MICROSCOPE	154.34	154.34	7/1/2006
31527		3	LARYNGOSCOPY DIRECT WITH INSERTION OF OBTURATOR	185.99	185.99	7/1/2006
31528		3	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; WITH DILATION, INITIAL	138.06	138.06	7/1/2006
31529		3	LARYNGOSCOPY DIRECT, WITH OR WITHOUT TRACHEOSCOPY; WITH DILATION, SUBSEQUENT	158.20	158.20	7/1/2006
31530		3	REMOVAL FOREIGN BODY, LARYNX	193.29	193.29	7/1/2006
31531		3	REMOVAL FOREIGN BODY, LARYNX	211.09	211.09	7/1/2006
31535		3	BIOPSY OF LARYNX	186.00	186.00	7/1/2006
31536		3	BIOPSY OF LARYNX	209.35	209.35	7/1/2006
31540		3	REMOVAL OF LARYNX LESION	240.40	240.40	7/1/2006
31541		3	REMOVAL OF LARYNX LESION	263.67	263.67	7/1/2006
31545		3	LARYNGOSCOPY, DIRECT, OPERATIVE, WITH OPERATING MICROSCOPE OR TELESCOPE, WITH	350.61	350.61	7/1/2006
31546		3	LARYNGOSCOPY, DIRECT, OPERATIVE, WITH OPERATING MICROSCOPE OR TELESCOPE, WITH	533.23	533.23	7/1/2006
31560		3	REMOVAL OF LARYNX LESION	310.79	310.79	7/1/2006
31561		3	REMOVAL OF LARYNX LESION	338.90	338.90	7/1/2006
31570		3	INJECTION THERAPY OF LARYNX	334.58	225.28	7/1/2006
31571		3	INJECTION THERAPY OF LARYNX	247.79	247.79	7/1/2006
31575		3	LARYNGOSCOPY FLEXIBLE FIBERSCOPIC DIAGNOSTIC	104.94	71.16	7/1/2006
31576		3	LARYNGOSCOPY FLEXIBLE FIBERSCOPIC WITH BIOPSY	195.71	116.88	7/1/2006
31577		3	LARYNGOSCOPY FLEX FIBERSCOPIC W/REMOVAL FOREIGN BO	218.64	144.44	7/1/2006
31578		3	LARYNGOSCOPY FLEX FIBERSCOPIC W/REMOVAL OF LESION	249.64	157.89	7/1/2006
31579		3	LARYNGOSCOPY, FLEXIBLE OR RIGID FIBEROPTIC, WITH STROBOSCOPY	211.05	134.53	7/1/2006
31580		3	REVISION OF LARYNX	996.67	996.67	7/1/2006
31582		3	REVISION OF LARYNX	1,674.50	1,674.50	7/1/2006
31584		3	REPAIR OF LARYNX	1,348.24	1,348.24	7/1/2006
31587		3	LARYNGOPLASTY, CRICOID SPLIT	761.01	761.01	7/1/2006
31588		3	LARYNGOPLASTY NOS	947.82	947.82	7/1/2006
31590		3	LARYNGEAL REINNERVATION BY NEUROMUSCULAR PEDICLE	785.98	785.98	7/1/2006
31595		3	SECTION RECURRENT LARYNGEAL NERVE, THERAPEUTIC (SEPARATE PROCEDURE),	666.01	666.01	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
31600		3	INCISION OF WINDPIPE	382.56	382.56	7/1/2006
31601		3	TRACHEOSTOMY UNDER TWO YEARS	248.89	248.89	7/1/2006
31603		3	TRACHEOSTOMY EMERGENCY PROCEDURE TRANSTRACHAEL	215.83	215.83	7/1/2006
31605		3	CRICOTHYROIDOSTOMY	176.92	176.92	7/1/2006
31610		3	INCISION OF WINDPIPE	607.48	607.48	7/1/2006
31611		3	CONST TRACH FISTULA W/ INSERT SPEECH PROSTHESIS	447.80	447.80	7/1/2006
31612		3	TRACHEAL PUNCTURE, PERCUTANEOUS WITH TRANSTRACHEAL ASPIRATION AND/OR INJECTION	71.04	46.20	7/1/2006
31613		3	TRACHEOSTOMA REVISION;	373.64	373.64	7/1/2006
31614		3	TRACHEOSTOMA REVISION COMPLEX WITH FLAP ROTATION	558.83	558.83	7/1/2006
31615		3	VISUALIZATION OF WINDPIPE	165.05	118.68	7/1/2006
31620		3	ENDOBRONCHIAL ULTRASOUND (EBUS) DURING BRONCHOSCOPIC DIAGNOSTIC OR THERAPEUTI	240.41	71.16	7/1/2006
31622		3	BRONCHOSCOPY, (RIGID OR FLEXIBLE); DIAGNOSTIC, WITH OR WITHOUT CELL WASHING	292.04	139.34	7/1/2006
31623		3	BRONCHOSCOPY; WITH BRUSHING OR PROTECTED BRUSHINGS	319.99	141.46	7/1/2006
31624		3	BRONCHOSCOPY; WITH BRONCHIAL ALVEOLAR LAVAGE	298.46	141.46	7/1/2006
31625		3	BIOPSY OF BRONCHI	318.22	165.19	7/1/2006
31628		3	BRONCHOSCOPY W TRANSBRONCHIAL LUNG BIOPSY	374.14	184.02	7/1/2006
31629		3	BRONCHOSCOPY DIAG W/ TRANSBRONCHIAL NEEDLE BIOPSY	624.26	197.31	7/1/2006
31630		3	VISUALIZATION OF BRONCHI	201.51	201.51	7/1/2006
31631		3	BRONCHOSCOPY DIAG W/ TRACHEAL DILATION AND STENT	223.43	223.43	7/1/2006
31632		3	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	68.06	51.50	7/1/2006
31633		3	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	81.68	64.46	7/1/2006
31635		3	REMOVE FOREIGN BODY,BRONCHUS	340.70	185.02	7/1/2006
31636		3	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	220.57	220.57	7/1/2006
31637		3	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; EACH	78.43	78.43	7/1/2006
31638		3	BRONCHOSCOPY, RIGID OR FLEXIBLE, WITH OR WITHOUT FLUOROSCOPIC GUIDANCE; WITH	246.34	246.34	7/1/2006
31640		3	REMOVAL OF BRONCHIAL LESION	256.99	256.99	7/1/2006
31641		3	BRONCHOSCOPY, (RIGID OR FLEXIBLE); WITH DESTRUCTION OF TUMOR OR RELIEF OF	251.40	251.40	7/1/2006
31643		3	BRONCHOSCOPY; WITH PLACEMENT OF CATHETER(S) FOR INTRACAVITARY RADIOELEMENT	171.00	171.00	7/1/2006
31645		3	CLEARANCE WINDPIPE/BRONCHI	288.04	154.55	7/1/2006
31646		3	CLEARANCE WINDPIPE/BRONCHI	262.46	134.28	7/1/2006
31656		3	INJECTION FOR BRONCHUS X-RAY	323.71	109.07	7/1/2006
31700		3	INSERTION OF AIRWAY CATHETER	121.63	72.61	7/1/2006
31708		3	INJECTION FOR LARYNGOGRAPHY	119.95	67.61	7/1/2006
31710		3	INSERTION OF AIRWAY CATHETER	63.15	63.15	7/1/2006
31715		3	INJECTION FOR BRONCHUS X-RAY	52.84	52.84	7/1/2006
31717		3	CATH WITH BRONCHIAL BRUSH BIOPSY	353.47	105.72	7/1/2006
31720		3	CATHETER ASPIRATION (SEPARATE PROCEDURE); NASOTRACHEAL	50.71	50.71	7/1/2006
31725		3	CATHETER ASPIRATION (SEPARATE PROCEDURE);	95.32	93.00	7/1/2006
31730		3	TRANSTRACHEAL INTRO DILATOR/STENT/TUBE FOR OXYGEN	180.32	140.57	7/1/2006
31750		3	REPAIR OF WINDPIPE	1,075.18	1,075.18	7/1/2006
31755		3	REPAIR OF WINDPIPE	1,417.01	1,417.01	7/1/2006
31760		3	REPAIR OF WINDPIPE	1,224.30	1,224.30	7/1/2006
31766		3	CARINAL RECONSTRUCTION	1,651.35	1,651.35	7/1/2006
31770		3	REPAIR/GRAFT OF BRONCHUS	1,214.71	1,214.71	7/1/2006
31775		3	REPAIR OF BRONCHUS	1,306.92	1,306.92	7/1/2006
31780		3	EXCISION TRACHEAL STENOSIS AND ANASTOMOSIS CERVICA	1,041.90	1,041.90	7/1/2006
31781		3	EXCISION TRACHEAL STENOSIS AND ANASTAMOSIS CERVICO	1,300.08	1,300.08	7/1/2006
31785		3	EXCIS TRACHEAL TUMOR OR CAR CINOMA CERVICAL	994.06	994.06	7/1/2006
31786		3	EXCIS TRACHEAL TUMOR OR CARCINOMA THORACIC	1,372.61	1,372.61	7/1/2006
31800		3	SUTURE OF TRACHEAL WOUND OR INJURY; CERVICAL	592.39	592.39	7/1/2006
31805		3	REPAIR OF WINDPIPE INJURY	753.41	753.41	7/1/2006
31820		3	CLOSURE OF WINDPIPE LESION	358.18	291.28	7/1/2006
31825		3	REPAIR OF WINDPIPE DEFECT	511.41	435.56	7/1/2006
31830		3	REVISION TRACH SCAR	363.24	303.95	7/1/2006
32000		3	THORACENTESIS, PUNCTURE OF PLEURAL CAVITY FOR ASPIRATION,	158.64	73.19	7/1/2006
32002		3	THORACENTESIS WITH INSERT OF TUBE W/WO WATER SEAL	188.26	116.72	7/1/2006
32005		3	CHEMICAL PLEURODESIS	298.45	107.23	7/1/2006
32019		3	INSERTION OF INDWELLING TUNNELED PLEURAL CATHETER WITH CUFF	822.92	214.46	7/1/2006
32020		3	TUBE THORACOSTOMY W WATER SEAL PNEUMOTHOR HEMOTHOR	197.55	197.55	7/1/2006
32035		3	THORACOSTOMY W/RIB RESECTION	534.71	534.71	7/1/2006
32036		3	THORACOSTOMY W/OPEN FLAP DRAINING FOR EMPYEMA	594.08	594.08	7/1/2006
32095		3	BIOPSY THRU CHEST WALL	506.08	506.08	7/1/2006
32100		3	EXPLORATION/BIOPSY OF CHEST	858.15	858.15	7/1/2006
32110		3	THORACOTOMY MAJOR W CONT OF TRAM HEM AND OR REPAIR	1,256.44	1,256.44	7/1/2006
32120		3	EXPLORATION OF CHEST	687.15	687.15	7/1/2006
32124		3	EXPLORE CHEST,FREE ADHESIONS	739.97	739.97	7/1/2006
32140		3	THORACOTOMY MAJOR W CYST REMOVAL W OR WO PLEURAL P	801.00	801.00	7/1/2006
32141		3	THORACOT MAJOR W/EXC-PLICA BULLAE W/WO PLEUR PROCE	800.14	800.14	7/1/2006
32150		3	REMOVAL OF LUNG LESION(S)	806.98	806.98	7/1/2006
32151		3	THORACOT MAJOR W/REMOVAL INTRAPULMONARY FOR BODY	821.54	821.54	7/1/2006

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32160		3	OPEN CHEST HEART MASSAGE	538.44	538.44	7/1/2006
32200		3	DRAINAGE OF LUNG LESION	880.96	880.96	7/1/2006
32201		3	PNEUMONOSTOMY; WITH PERCUTANEOUS DRAINAGE OF ABSCESS OR CYST	836.80	192.24	7/1/2006
32215		3	PLEURAL SCARIFICATION FOR REPEAT PNEUMOTHORAX	672.92	672.92	7/1/2006
32220		3	RELEASE OF LUNG	1,372.46	1,372.46	7/1/2006
32225		3	PARTIAL RELEASE OF LUNG	802.03	802.03	7/1/2006
32310		3	PLEURECTOMY, PARIETAL (SEPARATE PROCEDURE)	773.50	773.50	7/1/2006
32320		3	DECORTICATION/PARIETAL PLEURECTOMY	1,345.36	1,345.36	7/1/2006
32400		3	BIOPSY, PLEURA;	136.22	83.89	7/1/2006
32402		3	BIOPSY, PLEURA;	465.96	465.96	7/1/2006
32405		3	BIOPSY, LUNG OR MEDIASTINUM, PERCUTANEOUS NEEDLE	94.21	92.89	7/1/2006
32420		3	PNEUMOCENTESIS, PUNCTURE OF LUNG FOR ASPIRATION	103.77	103.77	7/1/2006
32440		3	REMOVAL OF LUNG, TOTAL PNEUMONECTOMY;	1,409.92	1,409.92	7/1/2006
32442		3	REMOVAL OF LUNG, TOTAL PNEUMONECTOMY;	1,521.96	1,521.96	7/1/2006
32445		3	REMOVAL OF LUNG, TOTAL PNEUMONECTOMY; EXTRAPLEURAL	1,453.51	1,453.51	7/1/2006
32480		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; SINGLE LOBE (LOBECTOMY)	1,333.13	1,333.13	7/1/2006
32482		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY;	1,409.90	1,409.90	7/1/2006
32484		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY;	1,190.54	1,190.54	7/1/2006
32486		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY;	1,380.48	1,380.48	7/1/2006
32488		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY;	1,467.43	1,467.43	7/1/2006
32491		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; EXCISION-PLICATION OF	1,251.97	1,251.97	7/1/2006
32500		3	REMOVAL OF LUNG, OTHER THAN TOTAL PNEUMONECTOMY; WEDGE RESECTION, SINGLE OR	1,274.61	1,274.61	7/1/2006
32501		3	RESECTION AND REPAIR OF PORTION OF BRONCHUS (BRONCHOPLASTY) WHEN PERFORMED AT	234.48	234.48	7/1/2006
32503		3	RESECTION OF APICAL LUNG TUMOR (EG, PANCOAST TUMOR), INCLUDING CHEST WALL RE	1,681.25	1,681.25	7/1/2006
32504		3	RESECTION OF APICAL LUNG TUMOR (EG, PANCOAST TUMOR), INCLUDING CHEST WALL RE	1,923.52	1,923.52	7/1/2006
32540		3	REMOVAL OF LUNG LESION	894.02	894.02	7/1/2006
32601		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	292.45	292.45	7/1/2006
32602		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	317.49	317.49	7/1/2006
32603		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	407.30	407.30	7/1/2006
32604		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	458.98	458.98	7/1/2006
32605		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	368.07	368.07	7/1/2006
32606		3	THORACOSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE);	440.61	440.61	7/1/2006
32650		3	THORACOSCOPY, SURGICAL; WITH PLEURODESIS (EG, MECHANICAL OR CHEMICAL)	646.00	646.00	7/1/2006
32651		3	THORACOSCOPY, SURGICAL;	746.79	746.79	7/1/2006
32652		3	THORACOSCOPY, SURGICAL;	1,068.32	1,068.32	7/1/2006
32653		3	THORACOSCOPY, SURGICAL;	736.00	736.00	7/1/2006
32654		3	THORACOSCOPY, SURGICAL;	734.78	734.78	7/1/2006
32655		3	THORACOSCOPY, SURGICAL;	753.96	753.96	7/1/2006
32656		3	THORACOSCOPY, SURGICAL;	770.43	770.43	7/1/2006
32657		3	THORACOSCOPY, SURGICAL;	791.18	791.18	7/1/2006
32658		3	THORACOSCOPY, SURGICAL;	700.09	700.09	7/1/2006
32659		3	THORACOSCOPY, SURGICAL;	701.30	701.30	7/1/2006
32660		3	THORACOSCOPY, SURGICAL;	989.37	989.37	7/1/2006
32661		3	THORACOSCOPY, SURGICAL;	777.68	777.68	7/1/2006
32662		3	THORACOSCOPY, SURGICAL;	934.30	934.30	7/1/2006
32663		3	THORACOSCOPY, SURGICAL;	1,083.51	1,083.51	7/1/2006
32664		3	THORACOSCOPY, SURGICAL;	817.36	817.36	7/1/2006
32665		3	THORACOSCOPY, SURGICAL;	878.25	878.25	7/1/2006
32800		3	REPAIR LUNG HERNIA THRU CHEST WALL	781.78	781.78	7/1/2006
32810		3	CLOSE CHEST WALL FOLL OPEN FLAP DRAIN FOR EMPYEMA	762.64	762.64	7/1/2006
32815		3	OPEN CLOSURE OF MAJOR BRONCHIAL FISTULA	1,272.07	1,272.07	7/1/2006
32820		3	MAJOR RECONSTRUCT CHEST WALL POST TRAUMA	1,234.41	1,234.41	7/1/2006
32851		3	LUNG TRANSPLANT, SINGLE;	2,433.04	2,433.04	7/1/2006
32852		3	LUNG TRANSPLANT, SINGLE;	2,742.65	2,742.65	7/1/2006
32853		3	LUNG TRANSPLANT, DOUBLE (BILATERAL SEQUENTIAL OR EN BLOC);	2,933.95	2,933.95	7/1/2006
32854		3	LUNG TRANSPLANT, DOUBLE (BILATERAL SEQUENTIAL OR EN BLOC);	3,152.09	3,152.09	7/1/2006
32900		3	RESECTION RIBS EXTRAPLEURAL ALL STAGES	1,124.31	1,124.31	7/1/2006
32905		3	THORACOPLASTY SCHEDE TYPE OR EXTRAPLEURAL	1,153.14	1,153.14	7/1/2006
32906		3	THORACOPLASTY WITH CLOSURE BRONCHOPLEURAL FISTULA	1,452.00	1,452.00	7/1/2006
32940		3	REVISION OF LUNG	1,077.19	1,077.19	7/1/2006
32960		3	PNEUMOTHORAX, THERAPEUTIC, INTRAPLEURAL INJECTION OF AIR	127.54	88.48	7/1/2006
32997		3	TOTAL LUNG LAVAGE (UNILATERAL)	291.71	291.71	7/1/2006
33010		3	PERICARDIOCENTESIS;	109.71	109.71	7/1/2006
33011		3	PERICARDIOCENTESIS;	110.93	110.93	7/1/2006
33015		3	INCISION OF HEART SAC	423.72	423.72	7/1/2006
33020		3	INCISION OF HEART SAC	719.16	719.16	7/1/2006
33025		3	INCISION OF HEART SAC	685.65	685.65	7/1/2006
33030		3	PARTIAL REMOVAL OF HEART SAC	1,052.47	1,052.47	7/1/2006
33031		3	PERICARDIECTOMY W/O CARDIOPULMONARY BYPASS	1,188.75	1,188.75	7/1/2006
33050		3	REMOVAL OF HEART SAC LESION	825.30	825.30	7/1/2006

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33120		3	REMOVAL OF HEART LESION	1,350.69	1,350.69	7/1/2006
33130		3	REMOVAL OF HEART LESION	1,171.83	1,171.83	7/1/2006
33140		3	TRANSMYOCARDIAL LASER REVASCULARIZATION, BY THORACOTOMY (SEPARATE PROCEDURE)	1,146.01	1,146.01	7/1/2006
33141		3	TRANSMYOCARDIAL LASER REVASCULARIZATION, BY THORACOTOMY; PERFORMED AT THE TIME	242.12	242.12	7/1/2006
33200		3	INSERTION OF PERMANENT PACEMAKER WITH EPICARDIAL ELECTRODE(S); BY THORACOTOMY	714.86	714.86	7/1/2006
33201		3	INSERT PERM PACEMAKER W/EPICARD ELECTRODE BY XIPHO	615.73	615.73	7/1/2006
33206		3	INSERTION OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S	399.82	399.82	7/1/2006
33207		3	INSERTION PERMANENT PACEMAKER VENTRICULAR	457.38	457.38	7/1/2006
33208		3	INSERTION OR REPLACEMENT OF PERMANENT PACEMAKER WITH TRANSVENOUS ELECTRODE(S	463.57	463.57	7/1/2006
33210		3	INSERTION OR REPLACEMENT OF TEMPORARY TRANSVENOUS SINGLE CHAMBER CARDIAC	164.36	164.36	7/1/2006
33211		3	INSERTION OR REPLACEMENT OF TEMPORARY TRANSVENOUS DUAL CHAMBER	170.28	170.28	7/1/2006
33212		3	INSERTION OR REPLACEMENT OF PACEMAKER PULSE GENERATOR ONLY; SINGLE CHAMBER,	319.90	319.90	7/1/2006
33213		3	INSERTION OR REPLACEMENT OF PACEMAKER PULSE GENERATOR ONLY;	362.89	362.89	7/1/2006
33214		3	UPGRADE OF IMPLANTED PACEMAKER SYSTEM, CONVERSION OF SINGLE	454.32	454.32	7/1/2006
33215		3	INSERT TRANSVENOUS ELECTRODE; SINGLE CHAMBER (1 ELECTRODE) PERMANENT PACEMAKE	285.20	285.20	7/1/2006
33216		3	INSERTION OR REPOSITIONING OF A TRANSVENOUS ELECTRODE (15 DAYS OR MORE AFTER	355.48	355.48	7/1/2006
33217		3	INSERTION OR REPOSITIONING OF A TRANSVENOUS ELECTRODE (15 DAYS OR MORE AFTER	356.08	356.08	7/1/2006
33218		3	REPAIR OF SINGLE TRANSVENOUS ELECTRODE FOR A SINGLE CHAMBER, PERMANENT	346.78	346.78	7/1/2006
33220		3	REPAIR OF TWO TRANSVENOUS ELECTRODES FOR A DUAL CHAMBER PERMANENT PACEMAKER	348.66	348.66	7/1/2006
33222		3	REVISION OR RELOCATION OF SKIN POCKET FOR PACEMAKER	330.32	330.32	7/1/2006
33223		3	REVISION OF SKIN POCKET FOR SINGLE OR DUAL CHAMBER PACING	394.95	394.95	7/1/2006
33224		3	INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR	470.73	470.73	7/1/2006
33225		3	INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR	418.25	418.25	7/1/2006
33226		3	REPOSITIONING OF PREVIOUSLY IMPLANTED CARDIAC VENOUS SYSTEM (LEFT VENTRICULAR)	452.96	452.96	7/1/2006
33233		3	REMOVAL OF PERMANENT PACEMAKER PULSE GENERATOR	232.16	232.16	7/1/2006
33234		3	REMOVAL OF TRANSVENOUS PACEMAKER ELECTRODE(S); SINGLE LEAD SYSTEM, ATRIAL OR	457.05	457.05	7/1/2006
33235		3	REMOVAL OF TRANSVENOUS PACEMAKER ELECTRODE(S); DUAL LEAD SYSTEM	581.11	581.11	7/1/2006
33236		3	REMOVAL OF PERMANENT EPICARDIAL PACEMAKER AND ELECTRODES BY THORACOTOMY;	738.39	738.39	7/1/2006
33237		3	REMOVAL OF PERMANENT EPICARDIAL PACEMAKER AND ELECTRODES BY THORACOTOMY;	787.87	787.87	7/1/2006
33238		3	REMOVAL OF PERMANENT TRANSVENOUS ELECTRODE(S) BY THORACOTOMY	865.25	865.25	7/1/2006
33240		3	INSERTION OR REPLACEMENT OF IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR	434.74	434.74	7/1/2006
33241		3	REMOVAL OF IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR PULSE GENERATOR ONLY	219.17	219.17	7/1/2006
33243		3	REMOVAL OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR	1,242.75	1,242.75	7/1/2006
33244		3	REMOVAL OF SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-DEFIBRILLATOR	812.94	812.94	7/1/2006
33245		3	IMPLANTATION OR REPLACEMENT OF IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR PADS BY	822.76	822.76	7/1/2006
33246		3	INSERTION OF EPICARDIAL SINGLE OR DUAL CHAMBER PACING CARDIOVERTER-	1,146.56	1,146.56	7/1/2006
33249		3	INSERTION OR REPOSITIONING OF ELECTRODE LEAD(S) FOR SINGLE OR DUAL CHAMBER	806.91	806.91	7/1/2006
33250		3	OPERATIVE ABLATION OF SUPRAVENTRICULAR ARRHYTHMOGENIC FOCUS OR PATHWAY (EG,	1,223.08	1,223.08	7/1/2006
33251		3	ABLAT SUPRAVENT ARRHYTH FOCUS WITH CARD-PUL BYPASS	1,363.03	1,363.03	7/1/2006
33253		3	OPERATIVE INCISIONS AND RECONSTRUCTION OF ATRIA FOR TREATMENT OF ATRIAL	1,679.22	1,679.22	7/1/2006
33261		3	OPERATIVE ABLATION OF VENTRICULAR ARRHYTHMOGENIC FOCUS WITH CARDIOPULMONARY	1,364.16	1,364.16	7/1/2006
33282		3	IMPLANTATION OF PATIENT-ACTIVATED CARDIAC EVENT RECORDER	288.55	288.55	7/1/2006
33284		3	REMOVAL OF AN IMPLANTABLE, PATIENT-ACTIVATED CARDIAC EVENT RECORDER	210.49	210.49	7/1/2006
33300		3	REPAIR OF HEART WOUND	1,010.46	1,010.46	7/1/2006
33305		3	REPAIR OF HEART WOUND	1,194.89	1,194.89	7/1/2006
33310		3	CARDIOTOMY/EXPLOR WITHOUT BYPASS	1,043.08	1,043.08	7/1/2006
33315		3	CARDIOTOMY EXPLOR WITH BYPASS	1,241.01	1,241.01	7/1/2006
33320		3	SUTURE REPAIR OF AORTA OR GREAT VESSELS; WITHOUT SHUNT OR CARDIOPULMONARY BYPA	923.92	923.92	7/1/2006
33321		3	SUTURE REPAIR OF AORTA OR GREAT VESSELS;	1,117.92	1,117.92	7/1/2006
33322		3	REPAIR MAJOR BLOOD VESSELS	1,150.82	1,150.82	7/1/2006
33330		3	INSERTION OF GRAFT, AORTA OR GREAT VESSELS; WITHOUT SHUNT, OR CARDIOPULMONARY	1,175.04	1,175.04	7/1/2006
33332		3	INSERTION OF GRAFT, AORTA OR GREAT VESSELS;	1,279.88	1,279.88	7/1/2006
33335		3	INSERTION OF HEART GRAFT	1,619.10	1,619.10	7/1/2006
33400		3	REPAIR OF AORTIC VALVE	1,639.24	1,639.24	7/1/2006
33401		3	VALVULOPLASTY, AORTIC VALVE;	1,389.89	1,389.89	7/1/2006
33403		3	VALVULOPLASTY, AORTIC VALVE;	1,451.21	1,451.21	7/1/2006
33404		3	CONSTRUCTION OF APICAL/AORTIC CONDUIT	1,608.54	1,608.54	7/1/2006
33405		3	REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH PROSTHETIC VALVE	1,984.68	1,984.68	7/1/2006
33406		3	REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH ALLOGRAFT VALVE	2,108.34	2,108.34	7/1/2006
33410		3	REPLACEMENT, AORTIC VALVE, WITH CARDIOPULMONARY BYPASS; WITH STENTLESS TISSUE	1,825.22	1,825.22	7/1/2006
33411		3	REPLACEMENT AORTIC VALVE W/ ANNULUS ENLARGEMENT	2,049.27	2,049.27	7/1/2006
33412		3	REPLACEMENT AORTIC VALVE, KONNO PROCEDURE	2,334.25	2,334.25	7/1/2006
33413		3	REPLACEMENT, AORTIC VALVE; BY TRANSLOCATION OF AUTOLOGOUS PULMONARY VALVE WITH	2,404.86	2,404.86	7/1/2006
33414		3	REPAIR OF LEFT VENTRICULAR OUTFLOW TRACT OBSTRUCTION BY PATCH	1,663.98	1,663.98	7/1/2006
33415		3	REVISION OF AORTIC VALVE	1,463.88	1,463.88	7/1/2006
33416		3	VENTRICULOMYOTOMY/MYECTOMY FOR SUBAORTIC STENOSIS	1,643.23	1,643.23	7/1/2006
33417		3	REVISION OF AORTIC VALVE	1,572.08	1,572.08	7/1/2006
33420		3	VALVOTOMY, MITRAL VALVE; CLOSED HEART	1,175.53	1,175.53	7/1/2006
33422		3	VALVOTOMY, MITRAL VALVE; OPEN HEART, WITH CARDIOPULMONARY BYPASS	1,473.68	1,473.68	7/1/2006
33425		3	REVISION OF MITRAL VALVE	1,495.32	1,495.32	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
33426		3	VALVULOPLASTY MV W/ CARD-PUL BYPASS W/ PROSTH RING	1,866.67	1,866.67	7/1/2006
33427		3	VALVULOPLASTY MV W/ CPB RADICAL RECONSTR W/WO RING	2,216.78	2,216.78	7/1/2006
33430		3	REPLACEMENT OF MITRAL VALVE	1,891.84	1,891.84	7/1/2006
33460		3	VALVECTOMY, TRICUSPID VALVE, WITH CARDIOPULMONARY BYPASS	1,302.65	1,302.65	7/1/2006
33463		3	VALVULOPLASTY, TRICUSPID VALVE;	1,436.37	1,436.37	7/1/2006
33464		3	VALVULOPLASTY, TRICUSPID VALVE;	1,524.01	1,524.01	7/1/2006
33465		3	REPLACEMENT, TRICUSPID VALVE, WITH CARDIOPULMONARY BYPASS	1,562.99	1,562.99	7/1/2006
33468		3	REVISION OF TRICUSPID VALVE	1,629.59	1,629.59	7/1/2006
33470		3	VALVOTOMY, PULMONARY VALVE, CLOSED HEART; TRANSVENTRICULAR	1,126.94	1,126.94	7/1/2006
33471		3	VALVOTOMY, PULMONARY VALVE, CLOSED HEART VIA PULMONARY ARTERY	1,201.80	1,201.80	7/1/2006
33472		3	VALVOTOMY, PULMONARY VALVE, OPEN HEART; WITH INFLOW OCCLUSION	1,275.37	1,275.37	7/1/2006
33474		3	REVISION OF TRICUSPID VALVE	1,263.75	1,263.75	7/1/2006
33475		3	REPLACEMENT, PULMONARY VALVE	1,807.82	1,807.82	7/1/2006
33476		3	REVISION OF HEART CHAMBER	1,379.02	1,379.02	7/1/2006
33478		3	REVISION OF HEART CHAMBER	1,484.24	1,484.24	7/1/2006
33496		3	REPAIR OF NON-STRUCTURAL PROSTHETIC VALVE DYSFUNCTION WITH CARDIOPULMONARY	1,496.30	1,496.30	7/1/2006
33500		3	REPAIR CORONARY FISTULA W/CARDIO-PULMONARY BYPASS	1,384.41	1,384.41	7/1/2006
33501		3	REPAIR OF CORONARY FISTULA; WO CP BYPASS	957.19	957.19	7/1/2006
33502		3	REPAIR OF ANOMALOUS CORONARY ARTERY; BY LIGATION	1,192.97	1,192.97	7/1/2006
33503		3	ANOMALOUS CORONARY ARTERY GRAFT WITHOUT BYPASS	1,147.12	1,147.12	7/1/2006
33504		3	ANOMALOUS CORONARY ARTERY GRAFT WITH BYPASS	1,355.74	1,355.74	7/1/2006
33505		3	REPAIR OF ANOMALOUS CORONARY ARTERY;	1,443.71	1,443.71	7/1/2006
33506		3	REPAIR OF ANOMALOUS CORONARY ARTERY;	1,867.02	1,867.02	7/1/2006
33507		3	REPAIR OF ANOMALOUS (EG, INTRAMURAL) AORTIC ORIGIN OF CORONARY ARTERY BY UNR	1,626.51	1,626.51	7/1/2006
33508		3	ENDOSCOPY, SURGICAL, INCLUDING VIDEO-ASSISTED HARVEST OF VEIN(S) FOR CORONARY	15.39	15.39	7/1/2006
33510		3	CORONARY ARTERY BYPASS SINGLE VENOUS GRAFT	1,683.01	1,683.01	7/1/2006
33511		3	CORONARY ARTERY BYPASS 2 CORONARY VENOUS GRAFTS	1,747.57	1,747.57	7/1/2006
33512		3	CORONARY ARTERY BYPASS 3 CORONARY VENOUS GRAFTS	1,834.97	1,834.97	7/1/2006
33513		3	CORONARY ARTERY BYPASS 4 CORONARY VENOUS GRAFTS	1,849.08	1,849.08	7/1/2006
33514		3	CORONARY ARTERY BYPASS 5 CORONARY VENOUS GRAFTS	1,886.23	1,886.23	7/1/2006
33516		3	CORONARY ARTERY BYPASS 6 OR MORE VENOUS GRAFTS	2,000.05	2,000.05	7/1/2006
33517		3	CORONARY ARTERY BYPASS;SINGLE VEIN GRAFT	129.03	129.03	7/1/2006
33518		3	CORONARY ARTERY BYPASS; 2 VENOUS GRAFTS	243.00	243.00	7/1/2006
33519		3	CORONARY ARTERY BYPASS; 3 VENOUS GRAFTS	356.97	356.97	7/1/2006
33521		3	CORONARY ARTERY BYPASS; 4 VENOUS GRAFTS	471.41	471.41	7/1/2006
33522		3	CORONARY ARTERY BYPASS; 5 VENOUS GRAFTS	585.25	585.25	7/1/2006
33523		3	CORONARY ARTERY BYPASS; 6 OR MORE VENOUS GRAFTS	699.84	699.84	7/1/2006
33530		3	REOPERATION CORONARY BYPASS FOR MORE THAN 1 MONTH AFTER ORIGINAL	293.81	293.81	7/1/2006
33533		3	CORONARY ARTERY BYPASS; SINGLE ARTERIAL GRAFT	1,726.57	1,726.57	7/1/2006
33534		3	CORONARY ARTERY BYPASS; 2 ARTERIAL GRAFTS	1,851.65	1,851.65	7/1/2006
33535		3	CORONARY ARTERY BYPASS; 3 ARTERIAL GRAFTS	1,957.89	1,957.89	7/1/2006
33536		3	CORONARY ARTERY BYPASS; 4 OR MORE ARTERIAL GRAFTS	2,078.47	2,078.47	7/1/2006
33542		3	REMOVAL OF HEART LESION	1,566.15	1,566.15	7/1/2006
33545		3	REPAIR OF HEART DEFECT	1,960.40	1,960.40	7/1/2006
33572		3	CORONARY ENDARTERECTOMY, OPEN, ANY METHOD, OF LEFT ANTERIOR	222.86	222.86	7/1/2006
33600		3	CLOSURE OF ATRIOVENTRICULAR VALVE (MITRAL OR TRICUSPID) BY SUTURE OR	1,578.30	1,578.30	7/1/2006
33602		3	CLOSURE OF SEMILUNAR VALVE (AORTIC OR PULMONARY) BY SUTURE OR PATCH	1,527.23	1,527.23	7/1/2006
33606		3	ANASTOMOSIS OF PULMONARY ARTERY TO AORTA (DAMUS-KAYE-STANSEL PROCEDURE)	1,660.41	1,660.41	7/1/2006
33608		3	REPAIR OF COMPLEX CARDIAC ANOMALY OTHER THAN PULMONARY ATRESIA	1,694.86	1,694.86	7/1/2006
33610		3	REPAIR OF COMPLEX CARDIAC ANOMALIES (EG, SINGLE VENTRICLE WITH SUBAORTIC	1,656.87	1,656.87	7/1/2006
33611		3	REPAIR OF DOUBLE OUTLET RIGHT VENTRICLE WITH INTRAVENTRICULAR TUNNEL	1,792.10	1,792.10	7/1/2006
33612		3	REPAIR OF DOUBLE OUTLET RIGHT VENTRICLE WITH INTRAVENTRICULAR TUNNEL	1,883.08	1,883.08	7/1/2006
33615		3	REPAIR OF COMPLEX CARDIAC ANOMALIES (EG, TRICUSPID ATRESIA)	1,758.04	1,758.04	7/1/2006
33617		3	REPAIR OF COMPLEX CARDIAC ANOMALIES (EG, SINGLE VENTRICLE)	1,991.18	1,991.18	7/1/2006
33619		3	REPAIR OF SINGLE VENTRICLE WITH AORTIC OUTFLOW OBSTRUCTION	2,456.92	2,456.92	7/1/2006
33641		3	REPAIR OF HEART DEFECT	1,159.15	1,159.15	7/1/2006
33645		3	REVISION OF HEART VEINS	1,367.76	1,367.76	7/1/2006
33647		3	REPAIR OF ASD AND VSD, DIRECT OR PATCH CLOSURE	1,565.68	1,565.68	7/1/2006
33660		3	REPAIR OF INCOMPLETE OR PARTIAL ATRIOVENTRICULAR CANAL (OSTIUM PRIMUM ATRIAL	1,629.68	1,629.68	7/1/2006
33665		3	REPAIR OF INTERMEDIATE OR TRANSITIONAL ATRIOVENTRICULAR CANAL, WITH OR WITHOUT	1,579.58	1,579.58	7/1/2006
33670		3	REPAIR OF HEART CHAMBERS	1,802.75	1,802.75	7/1/2006
33681		3	REPAIR OF HEART DEFECT	1,690.11	1,690.11	7/1/2006
33684		3	REPAIR OF HEART DEFECT	1,596.37	1,596.37	7/1/2006
33688		3	REPAIR OF HEART DEFECT	1,557.14	1,557.14	7/1/2006
33690		3	BANDING OF PULMONARY ARTERY	1,085.45	1,085.45	7/1/2006
33692		3	COMPLETE REPAIR TETRALOGY OF FALLOT WITHOUT PULMONARY ATRESIA;	1,672.97	1,672.97	7/1/2006
33694		3	REPAIR OF HEART DEFECTS	1,815.81	1,815.81	7/1/2006
33697		3	COMPLETE REPAIR TETRALOGY OF FALLOT WITH PULMONARY ATRESIA	1,882.16	1,882.16	7/1/2006
33702		3	REPAIR OF HEART DEFECTS	1,455.97	1,455.97	7/1/2006
33710		3	REPAIR OF HEART DEFECTS	1,633.76	1,633.76	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
33720		3	REPAIR OF HEART DEFECT	1,450.38	1,450.38	7/1/2006
33722		3	CLOSURE OF AORTICO-LEFT VENTRICULAR TUNNEL	1,511.42	1,511.42	7/1/2006
33730		3	COMPLETE REPAIR ANOMALOUS VENOUS RETURN	1,815.74	1,815.74	7/1/2006
33732		3	REPAIR OF COR TRIATRIATUM OR SUPRAVALVULAR MITRAL RING BY RESECTION	1,541.46	1,541.46	7/1/2006
33735		3	ATRIAL SEPTECTOMY OR SEPTOSTOMY; CLOSED HEART (BLALOCK-HANLON TYPE OPERATION)	1,110.46	1,110.46	7/1/2006
33736		3	ATRIAL SEPTECTOMY OR SEPTOSTOMY;	1,309.80	1,309.80	7/1/2006
33737		3	ATRIAL SEPTECTOMY OR SEPTOSTOMY; OPEN HEART, WITH INFLOW OCCLUSION	1,220.01	1,220.01	7/1/2006
33750		3	SHUNT SUBCLAVIAN TO PULMONARY ARTERY	1,135.64	1,135.64	7/1/2006
33755		3	SHUNT ASCENDING AORTA TO PULMONARY ARTERY	1,150.67	1,150.67	7/1/2006
33762		3	SHUNT DESCENDING AORTA TO PULMONARY ARTERY	1,192.72	1,192.72	7/1/2006
33764		3	SHUNT,CENTRAL W/ PROSTHETIC GRAFT	1,192.05	1,192.05	7/1/2006
33766		3	SHUNT; SUPERIOR VENA CAVA TO PULMONARY ARTERY FOR FLOW TO ONE LUNG (CLASSICAL	1,290.90	1,290.90	7/1/2006
33767		3	SHUNT;	1,357.60	1,357.60	7/1/2006
33768		3	ANASTOMOSIS, CAVOPULMONARY, SECOND SUPERIOR VENA CAVA (LIST SEPARATELY IN AD	403.88	403.88	7/1/2006
33770		3	REPAIR OF TRANSPOSITION OF THE GREAT ARTERIES WITH VENTRICULAR	1,949.30	1,949.30	7/1/2006
33771		3	REPAIR OF TRANSPOSITION OF THE GREAT ARTERIES WITH VENTRICULAR	1,787.49	1,787.49	7/1/2006
33774		3	REP TRANSPOSITION GRT ARTERIES W CARDIOPULM BYPASS	1,711.06	1,711.06	7/1/2006
33775		3	REP TRANSPOSITION GRT ART W CPB W REM PULM BAND	1,770.06	1,770.06	7/1/2006
33776		3	REP TRANSPO GRT ART W CPB W CL VENT SEPTAL DEFECT	1,865.54	1,865.54	7/1/2006
33777		3	REP TRANSPO GRT ART W CPB W REP SUBPULM OBSTRUCT	1,847.58	1,847.58	7/1/2006
33778		3	REPAIR TRANSPO GRT ARTERIES W CARDIOPULM BYPASS	2,141.44	2,141.44	7/1/2006
33779		3	REP TRANSPO GRT ARTERIES W CPB W REMOVAL PULM BAND	1,879.32	1,879.32	7/1/2006
33780		3	REPAIR AORTIC ARTERY W/ CLOSURE SEPTAL DEFECT	2,219.48	2,219.48	7/1/2006
33781		3	REPAIR AORTIC ARTERY W/ REPAIR OF OBSTRUCTION	1,890.44	1,890.44	7/1/2006
33786		3	TOTAL REPAIR TRUNCUS ARTERIOSUS	2,088.18	2,088.18	7/1/2006
33788		3	REVISION OF PULMONARY ARTERY	1,446.38	1,446.38	7/1/2006
33800		3	AORTIC SUSPENSION FOR TRACHEAL DECOMPRESSION	909.70	909.70	7/1/2006
33802		3	DIVISION ABERRANT VESSEL	993.18	993.18	7/1/2006
33803		3	DIVISION OF ABERRANT VESSEL W/ REANASTOMOSIS	1,102.34	1,102.34	7/1/2006
33813		3	OBLITERATION SEPTAL DEFECT W/O BYPASS	1,176.62	1,176.62	7/1/2006
33814		3	OBLITERATION SEPTAL DEFECT WITH BYPASS	1,434.82	1,434.82	7/1/2006
33820		3	REPAIR OF PATENT DUCTUS ARTERIOSUS; BY LIGATION	917.25	917.25	7/1/2006
33822		3	PATENT DUCTUS ARTERIOSUS DIVISION UNDER 18 YRS	981.45	981.45	7/1/2006
33824		3	PATENE DUCTUS ARTERIOSUS DIVISION 18 YRS OLDER	1,099.61	1,099.61	7/1/2006
33840		3	EXC OF COARCTATION OF AORTA W/WO ASSOC PAT DUC W/D	1,133.02	1,133.02	7/1/2006
33845		3	EXC COARCTATION OF AORTA W/WO ASSOC PAT DUC ART WI	1,246.19	1,246.19	7/1/2006
33851		3	EXCISION COARCTATION OF AORTA WALDHUSEN PROCEDURE	1,192.48	1,192.48	7/1/2006
33852		3	REPAIR OF HYPOPLASTIC OR INTERRUPTED AORTIC ARCH USING AUTOGENOUS OR PROSTHETI	1,278.99	1,278.99	7/1/2006
33853		3	REPAIR OF HYPOPLASTIC OR INTERRUPTED AORTIC ARCH USING AUTOGENOUS	1,735.40	1,735.40	7/1/2006
33860		3	ASCENDING AORTA GRAFT, WITH CARDIOPULMONARY BYPASS, WITH OR WITHOUT VALVE	2,041.19	2,041.19	7/1/2006
33861		3	ASCENDING AORTA GRAFT, WITH CARDIOPULMONARY BYPASS, WITH OR	2,239.60	2,239.60	7/1/2006
33863		3	ASCENDING AORTA GRAFT, WITH CARDIOPULMONARY BYPASS, WITH OR	2,389.10	2,389.10	7/1/2006
33870		3	TRANSVERSE ARCH GRAFT W/BYPASS	2,338.40	2,338.40	7/1/2006
33875		3	DESCEND THORACIC AORTA GRAFT W/O BYPASS	1,766.67	1,766.67	7/1/2006
33877		3	REPAIR THORACOAAA W/ GRFT, W/WO CP BYPASS	2,207.66	2,207.66	7/1/2006
33910		3	PULMONARY ARTERY EMBOLECTOMY WITH BYPASS	1,347.92	1,347.92	7/1/2006
33915		3	PULMONARY ARTERY EMBOLECTOMY WITHOUT BYPASS	1,108.84	1,108.84	7/1/2006
33916		3	PULMONARY ENDARTERECTOMY W/ BYPASS	1,389.44	1,389.44	7/1/2006
33917		3	REPAIR OF PULMONARY ARTERY STENOSIS BY RECONSTRUCTION WITH PATCH OR GRAFT	1,370.40	1,370.40	7/1/2006
33920		3	REPAIR OF PULMONARY ATRESIA WITH VENTRICULAR SEPTAL DEFECT,	1,708.25	1,708.25	7/1/2006
33922		3	TRANSECTION OF PULMONARY ARTERY WITH CARDIOPULMONARY BYPASS	1,278.57	1,278.57	7/1/2006
33924		3	LIGATION AND TAKEDOWN OF A SYSTEMIC-TO-PULMONARY ARTERY SHUNT, PERFORMED IN	277.83	277.83	7/1/2006
33925		3	REPAIR OF PULMONARY ARTERY ARBORIZATION ANOMALIES BY UNIFOCALIZATION; WITHOU	1,654.97	1,654.97	7/1/2006
33926		3	REPAIR OF PULMONARY ARTERY ARBORIZATION ANOMALIES BY UNIFOCALIZATION; WITH C	2,242.23	2,242.23	7/1/2006
33935		3	HEART LUNG TRANSPLANT WITH RECIPIENT CARDIECTOMY	3,355.13	3,355.13	7/1/2006
33945		3	HEART TRANSPLANT WITH OR WITHOUT RECIP CARDIECTOMY	2,365.98	2,365.98	7/1/2006
33960		3	PROLONGED EXTRACORPOREAL CIRCULATION FOR CARDIOPULMONARY INSUFFICIENCY; INITIAL	919.35	919.35	7/1/2006
33961		3	PROLONGED EXTRACORPOREAL CIRCULATION FOR CARDIOPULMONARY INSUFFICIENCY; EACH	532.97	532.97	7/1/2006
33967		3	INSERTION OF INTRA-AORTIC BALLOON ASSIST DEVICE, PERCUTANEOUS	243.59	243.59	7/1/2006
33968		3	REMOVAL OF INTRA-AORTIC BALLOON ASSIST DEVICE, PERCUTANEOUS	32.27	32.27	7/1/2006
33970		3	INSERTION OF INTRA-AORTIC BALLOON ASSIST DEVICE THROUGH THE FEMORAL ARTERY,	337.40	337.40	7/1/2006
33971		3	REMOVAL OF INTRA-AORTIC BALLOON ASSIST DEVICE INCLUDING REPAIR OF FEMORAL	576.20	576.20	7/1/2006
33973		3	INSERTION OF INTRA-AORTIC BALLOON ASSIST DEVICE THROUGH THE ASCENDING	489.37	489.37	7/1/2006
33974		3	REMOVAL OF INTRA-AORTIC BALLOON ASSIST DEVICE FROM THE ASCENDING	819.21	819.21	7/1/2006
33975		3	INSERTION OF VENTRICULAR ASSIST DEVICE; EXTRACORPOREAL, SINGLE VENTRICLE	1,033.01	1,033.01	7/1/2006
33976		3	INSERTION OF VENTRICULAR ASSIST DEVICE; EXTRACORPOREAL, BIVENTRICULAR	1,152.15	1,152.15	7/1/2006
33977		3	REMOVAL OF VENTRICULAR ASSIST DEVICE; EXTRACORPOREAL, SINGLE VENTRICLE	1,125.59	1,125.59	7/1/2006
33978		3	REMOVAL OF VENTRICULAR ASSIST DEVICE; EXTRACORPOREAL, BIVENTRICULAR	1,246.29	1,246.29	7/1/2006
33979		3	INSERTION OF VENTRICULAR ASSIST DEVICE, IMPLANTABLE INTRACORPOREAL, SINGLE	2,307.16	2,307.16	7/1/2006
33980		3	REMOVAL OF VENTRICULAR ASSIST DEVICE, IMPLANTABLE INTRACORPOREAL, SINGLE	3,055.22	3,055.22	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
34001		3	REMOVAL BLOOD CLOT ARTERY	728.32	728.32	7/1/2006
34051		3	REMOVAL OF BLOOD CLOT,ARTERY	855.93	855.93	7/1/2006
34101		3	REMOVAL OF BLOOD CLOT,ARTERY	569.63	569.63	7/1/2006
34111		3	EMBOLECTOMY/THROMBECTOMY, RADIAL OR ULNAR ARTERY	568.94	568.94	7/1/2006
34151		3	REMOVAL OF BLOOD CLOT,ARTERY	1,324.93	1,324.93	7/1/2006
34201		3	REMOVAL BLOOD CLOT ARTERY	573.27	573.27	7/1/2006
34203		3	EMBOLECTOMY/THROMBECTOMY,POPLITEAL-TIBIO-PERONEAL	914.97	914.97	7/1/2006
34401		3	REMOVAL OF BLOOD CLOT, VEIN	1,321.37	1,321.37	7/1/2006
34421		3	REMOVAL OF BLOOD CLOT, VEIN	676.03	676.03	7/1/2006
34451		3	REMOVAL OF BLOOD CLOT, VEIN	1,436.86	1,436.86	7/1/2006
34471		3	REMOVAL OF BLOOD CLOT, VEIN	568.56	568.56	7/1/2006
34490		3	REMOVAL OF BLOOD CLOT, VEIN	565.77	565.77	7/1/2006
34501		3	VALVULOPLASTY FEMORAL VEIN	908.52	908.52	7/1/2006
34502		3	RECONSTRUCTION OF VENA CAVA, ANY METHOD	1,460.38	1,460.38	7/1/2006
34510		3	VENOUS VALVE TRANSPOSITION ANY VEIN DONOR	1,046.85	1,046.85	7/1/2006
34520		3	CROSS-OVER VEIN GRAFT TO VENOUS SYSTEM	976.80	976.80	7/1/2006
34530		3	SAPHENOPOPLITEAL VEIN ANASTOMOSIS	924.07	924.07	7/1/2006
34800		3	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION;	1,104.02	1,104.02	7/1/2006
34802		3	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION;	1,204.52	1,204.52	7/1/2006
34803		3	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION;	1,249.32	1,249.32	7/1/2006
34804		3	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION;	1,204.73	1,204.73	7/1/2006
34805		3	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION;	1,153.03	1,153.03	7/1/2006
34808		3	ENDOVASCULAR PLACEMENT OF ILIAC ARTERY OCCLUSION DEVICE (LIST SEPARATELY IN	206.17	206.17	7/1/2006
34812		3	OPEN FEMORAL ARTERY EXPOSURE FOR DELIVERY OF ENDOVASCULAR PROSTHESIS, BY GROIN	343.42	343.42	7/1/2006
34813		3	PLACEMENT OF FEMORAL-FEMORAL PROSTHETIC GRAFT DURING ENDOVASCULAR AORTIC	239.48	239.48	7/1/2006
34820		3	OPEN ILIAC ARTERY EXPOSURE FOR DELIVERY OF ENDOVASCULAR PROSTHESIS OR ILIAC	490.72	490.72	7/1/2006
34825		3	PLACEMENT OF PROXIMAL OR DISTAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF	664.82	664.82	7/1/2006
34826		3	PLACEMENT OF PROXIMAL OR DISTAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF	203.85	203.85	7/1/2006
34830		3	OPEN REPAIR OF INFRARENAL AORTIC ANEURYSM OR DISSECTION, PLUS REPAIR OF	1,730.91	1,730.91	7/1/2006
34831		3	OPEN REPAIR OF INFRARENAL AORTIC ANEURYSM OR DISSECTION, PLUS REPAIR OF	1,766.93	1,766.93	7/1/2006
34832		3	OPEN REPAIR OF INFRARENAL AORTIC ANEURYSM OR DISSECTION, PLUS REPAIR OF	1,865.48	1,865.48	7/1/2006
34833		3	OPEN ILIAC ARTERY EXPOSURE WITH CREATION OF CONDUIT FOR DELIVERY OF INFRARENAL	616.40	616.40	7/1/2006
34834		3	OPEN BRACHIAL ARTERY EXPOSURE TO ASSIST IN THE DEPLOYMENT OF INFRARENAL AORTIC	282.47	282.47	7/1/2006
34900		3	ENDOVASCULAR GRAFT REPLACEMENT FOR REPAIR OF ILIAC ARTERY (EG, ANEURYSM,	885.21	885.21	7/1/2006
35001		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,086.95	1,086.95	7/1/2006
35002		3	REPAIR RUPTURE ANEURYSM ARTERY NECK INCISION	1,145.82	1,145.82	7/1/2006
35005		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	985.64	985.64	7/1/2006
35011		3	DIRECT REPAIR OF ANEURYSM, FALSE ANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	969.86	969.86	7/1/2006
35013		3	REPAIR RUPTURED ANEURYSM ARTERY ARM INCISION	1,183.06	1,183.06	7/1/2006
35021		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,083.34	1,083.34	7/1/2006
35022		3	RUPTURED ANEURYSM INNOMINATE ARTERY THORACIC	1,233.52	1,233.52	7/1/2006
35045		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	936.78	936.78	7/1/2006
35081		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,478.73	1,478.73	7/1/2006
35082		3	REPAIR RUPTURED ANEURYSM ABDOMINAL AORTA	2,015.72	2,015.72	7/1/2006
35091		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,840.40	1,840.40	7/1/2006
35092		3	REPAIR RUPT ANEURYSM ABD AORTA VISCERAL VESSELS	2,348.04	2,348.04	7/1/2006
35102		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,618.08	1,618.08	7/1/2006
35103		3	REPAIR RUPT ANEURYSM ABD AORTA ILIAC VESSELS	2,114.52	2,114.52	7/1/2006
35111		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,324.39	1,324.39	7/1/2006
35112		3	REPAIR RUPTURED ANEURYSM SPLENIC ARTERY	1,569.56	1,569.56	7/1/2006
35121		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,587.26	1,587.26	7/1/2006
35122		3	REPAIR RUPT ANEURYSM HEPATIC CELIAC RENAL MESENTER	1,825.92	1,825.92	7/1/2006
35131		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,341.55	1,341.55	7/1/2006
35132		3	RUPTURE ANEURYSM ILIAC ARTERY	1,588.54	1,588.54	7/1/2006
35141		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,080.67	1,080.67	7/1/2006
35142		3	REPAIR DEFECT OF ARTERY	1,258.37	1,258.37	7/1/2006
35151		3	DIRECT REPAIR OF ANEURYSM, PSEUDOANEURYSM, OR EXCISION (PARTIAL OR TOTAL) AND	1,219.65	1,219.65	7/1/2006
35152		3	RUPTURE ANEURYSM POPLITEAL ARTERY	1,381.39	1,381.39	7/1/2006
35180		3	REPAIR CONGENITAL A-V FISTULA, HEAD AND NECK	743.21	743.21	7/1/2006
35182		3	REPAIR CONGENTIAL A-V FISTULA, THORAX AND ABDOMEN	1,603.83	1,603.83	7/1/2006
35184		3	REPAIR CONGENTIAL A-V FISTULA, EXTREMITIES	980.28	980.28	7/1/2006
35188		3	REPAIR ACQ OR TRAUMATIC A-V FISTULA, HEAD AND NECK	816.32	816.32	7/1/2006
35189		3	REPAIR ACQ OR TRAUMATIC A-V FISTULA, THORAX/ABD	1,494.92	1,494.92	7/1/2006
35190		3	REPAIR ACQ OR TRAUMATIC A-V FISTULA, EXTREMITIES	714.33	714.33	7/1/2006
35201		3	REPAIR BLOOD VESSEL LESION	898.52	898.52	7/1/2006
35206		3	REPAIR BLOOD VESSEL LESION	736.79	736.79	7/1/2006
35207		3	REPAIR BLOOD VESSELS HAND, FINGER	642.66	642.66	7/1/2006
35211		3	REPAIR BLOOD VESSEL LESION	1,221.22	1,221.22	7/1/2006
35216		3	REPAIR BLOOD VESSEL LESION	1,032.83	1,032.83	7/1/2006
35221		3	REPAIR BLOOD VESSEL LESION	1,282.70	1,282.70	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
35226		3	REPAIR BLOOD VESSEL LESION	814.38	814.38	7/1/2006
35231		3	REPAIR BLOOD VESSEL LESION	1,108.06	1,108.06	7/1/2006
35236		3	REPAIR BLOOD VESSEL LESION	932.35	932.35	7/1/2006
35241		3	REPAIR BLOOD VESSEL LESION	1,281.35	1,281.35	7/1/2006
35246		3	REPAIR BLOOD VESSEL LESION	1,416.17	1,416.17	7/1/2006
35251		3	REPAIR BLOOD VESSEL LESION	1,571.43	1,571.43	7/1/2006
35256		3	REPAIR BLOOD VESSEL LESION	997.53	997.53	7/1/2006
35261		3	REPAIR BLOOD VESSEL LESION	965.04	965.04	7/1/2006
35266		3	REPAIR BLOOD VESSEL LESION	816.43	816.43	7/1/2006
35271		3	REPAIR BLOOD VESSEL LESION	1,216.99	1,216.99	7/1/2006
35276		3	REPAIR BLOOD VESSEL LESION	1,322.03	1,322.03	7/1/2006
35281		3	REPAIR BLOOD VESSEL LESION	1,485.90	1,485.90	7/1/2006
35286		3	REPAIR BLOOD VESSEL LESION	902.16	902.16	7/1/2006
35301		3	RECHANNELING OF ARTERY	1,013.57	1,013.57	7/1/2006
35311		3	RECHANNELING OF ARTERY	1,439.05	1,439.05	7/1/2006
35321		3	RECHANNELING OF ARTERY	872.04	872.04	7/1/2006
35331		3	RECHANNELING OF ARTERY	1,401.53	1,401.53	7/1/2006
35341		3	RECHANNELING OF ARTERY	1,349.73	1,349.73	7/1/2006
35351		3	RECHANNELING OF ARTERY	1,222.39	1,222.39	7/1/2006
35355		3	THROMBOENDARTERECTOMY W/ OR W/O PATCH, ILIOFEMORAL	994.55	994.55	7/1/2006
35361		3	RECHANNELING OF ARTERY	1,494.72	1,494.72	7/1/2006
35363		3	THROMBOENDARTERECTOMY W/ OR W/O PATCH AORTOILIOFEM	1,602.81	1,602.81	7/1/2006
35371		3	RECHANNELING OF ARTERY	808.62	808.62	7/1/2006
35372		3	THROMBOENDARTECTOMY, W/WO PATCH GRFT, DEEP FEMORAL	974.30	974.30	7/1/2006
35381		3	RECHANNELING OF ARTERY	878.80	878.80	7/1/2006
35390		3	REOPERATION, CAROTID, THROMBOENDARTERECTOMY, MORE THAN ONE MONTH AFTER ORIGIN	160.52	160.52	7/1/2006
35450		3	TRANSLUMINAL ANGIOPLASTY, INTRAOPERATIVE, RENAL	508.88	508.88	7/1/2006
35452		3	TRANSLUMINAL ANGIOPLASTY, INTRAOPERATIVE, AORTIC	355.74	355.74	7/1/2006
35454		3	TRANSLUMINAL ANGIOPLASTY,INTRAOPERATIVE, ILIAC	313.38	313.38	7/1/2006
35456		3	TRANSLUMINAL ANGIOPLASTY, INTRAOP, FEMORAL-POPLITE	379.45	379.45	7/1/2006
35458		3	TRANSLUMINAL BALLOON ANGIOPLASTY, OPEN; BRACHIOCEPHALIC TRUNK OR BRANCHES, EACH	485.21	485.21	7/1/2006
35459		3	TRANSLIMINAL ANGIOPLASTY,OPEN; TIBIOPERONEAL	442.87	442.87	7/1/2006
35460		3	TRANSLUMINAL ANGIOPLASTY,OPEN; TIBIOPERONEAL	311.59	311.59	7/1/2006
35470		3	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; TIBIOPERONEAL TRUNK OR	3,278.11	437.53	7/1/2006
35471		3	TRANSLUMINAL ANGIOPLASTY PERCUTAN; RENAL/VISLERAL.	3,707.72	508.43	7/1/2006
35472		3	TRANSLUMINAL ANGIOPLASTY PERCUTANEOUS; AORTIC	2,399.50	352.87	7/1/2006
35473		3	TRANSLUMINAL ANGIOPLASTY PERCUTANEOUS, ILIAC	2,216.52	309.33	7/1/2006
35474		3	TRANSLUMINAL ANGIOPLASTY, PERCUTAN; FEMORAL-POPLIT	3,191.86	373.81	7/1/2006
35475		3	TRANSLUMINAL BALLOON ANGIOPLASTY, PERCUTANEOUS; BRACHIOCEPHALIC TRUNK OR	2,219.06	473.84	7/1/2006
35476		3	TRANSLUMINAL ANGIOPLASTY,PERCUTANEOUS; VENOUS	1,710.80	303.10	7/1/2006
35480		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, OPEN; RENAL	561.83	561.83	7/1/2006
35481		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, OPEN; AORTIC	394.54	394.54	7/1/2006
35482		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, OPEN; ILIAC	344.69	344.69	7/1/2006
35483		3	TRANS LUM ATHERECTOMY OPEN; FEM-POPLITEAL	417.41	417.41	7/1/2006
35484		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, OPEN; BRACHIOCEPHALIC TRUNK OR BRANCHES,	529.61	529.61	7/1/2006
35485		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, OPEN; TIBIOPERONEAL TRUNK AND BRANCHES	489.05	489.05	7/1/2006
35490		3	TRANSLUM ATHERECTOMY, PERCU; RENAL/VISCERL ART.	570.56	570.56	7/1/2006
35491		3	TRANSLUM ATHERECTOMY, PERCU; AORTIC	399.97	399.97	7/1/2006
35492		3	TRANSLUM ATHERECTOMY, PERCU; ILIAC	354.96	354.96	7/1/2006
35493		3	TRANSLUM ATHERECTOMY, PERCU; FEM-POPLITEAL	430.36	430.36	7/1/2006
35494		3	TRANSLUMINAL PERIPHERAL ATHERECTOMY, PERCUTANEOUS; BRACHIOCEPHALIC TRUNK OR	536.80	536.80	7/1/2006
35495		3	TRANSLUM ATHERECTOMY, PERCU; TIBIOPERONEAL	502.94	502.94	7/1/2006
35500		3	HARVEST OF UPPER EXTREMITY VEIN, ONE SEGMENT, FOR LOWER EXTREMITY OR CORONARY	319.87	319.87	7/1/2006
35501		3	ARTERY BYPASS GRAFT	1,033.99	1,033.99	7/1/2006
35506		3	ARTERY BYPASS GRAFT	1,086.19	1,086.19	7/1/2006
35507		3	ARTERY BYPASS GRAFT	1,085.54	1,085.54	7/1/2006
35508		3	BYPASS GRAFT W/ VEIN, CAROTID-VERTEBRAL	1,047.86	1,047.86	7/1/2006
35509		3	ARTERY BYPASS GRAFT	1,000.77	1,000.77	7/1/2006
35510		3	BYPASS GRAFT, WITH VEIN; CAROTID-BRACHIAL	1,213.45	1,213.45	7/1/2006
35511		3	ARTERY BYPASS GRAFT	1,138.07	1,138.07	7/1/2006
35512		3	BYPASS GRAFT, WITH VEIN; SUBCLAVIAN-BRACHIAL	1,189.81	1,189.81	7/1/2006
35515		3	BYPASS GRAFT W/ VEIN, SUBCLAVIAN-VERTEBRAL	1,042.55	1,042.55	7/1/2006
35516		3	ARTERY BYPASS GRAFT	866.42	866.42	7/1/2006
35518		3	BYPASS GRAFT W/ VEIN, AXILLARY-AXILLARY	1,128.87	1,128.87	7/1/2006
35521		3	ARTERY BYPASS GRAFT	1,195.36	1,195.36	7/1/2006
35522		3	BYPASS GRAFT, WITH VEIN; AXILLARY-BRACHIAL	1,154.89	1,154.89	7/1/2006
35525		3	BYPASS GRAFT, WITH VEIN; BRACHIAL-BRACHIAL	1,101.62	1,101.62	7/1/2006
35526		3	ARTERY BYPASS GRAFT	1,575.60	1,575.60	7/1/2006
35531		3	ARTERY BYPASS GRAFT	1,899.05	1,899.05	7/1/2006
35533		3	BYPASS GRAFT W/ VEIN, AXILLARY-FEMORAL-FEMORAL	1,482.19	1,482.19	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
35536		3	ARTERY BYPASS GRAFT	1,672.95	1,672.95	7/1/2006
35541		3	BYPASS GRAFT, WITH VEIN; AORTOILIAC OR BI-ILIAC	1,383.60	1,383.60	7/1/2006
35546		3	ARTERY BYPASS GRAFT	1,362.91	1,362.91	7/1/2006
35548		3	ARTERY BYPASS GRAFT	1,156.94	1,156.94	7/1/2006
35549		3	ARTERY BYPASS GRAFT	1,259.50	1,259.50	7/1/2006
35551		3	ARTERY BYPASS GRAFT	1,422.96	1,422.96	7/1/2006
35556		3	ARTERY BYPASS GRAFT	1,176.08	1,176.08	7/1/2006
35558		3	ARTERY BYPASS GRAFT	1,147.16	1,147.16	7/1/2006
35560		3	BYPASS GRAFT W/ VEIN, AORTORENAL	1,700.91	1,700.91	7/1/2006
35563		3	ARTERY BYPASS GRAFT	1,298.51	1,298.51	7/1/2006
35565		3	ARTERY BYPASS GRAFT	1,246.19	1,246.19	7/1/2006
35566		3	ARTERY BYPASS GRAFT	1,433.70	1,433.70	7/1/2006
35571		3	ARTERY BYPASS GRAFT	1,303.63	1,303.63	7/1/2006
35572		3	HARVEST OF FEMOROPOPLITEAL VEIN, ONE SEGMENT, FOR VASCULAR RECONSTRUCTION	342.36	342.36	7/1/2006
35583		3	IN-SITU VEIN BYPASS; FEMORAL-POPLITEAL	1,214.30	1,214.30	7/1/2006
35585		3	IN-SITU VEIN BYPASS; FEMORAL-ANT TIB,POST TIB,PERO	1,518.77	1,518.77	7/1/2006
35587		3	IN-SITU VEIN BYPASS; POPLITEAL-TIBIAL, PERONEAL	1,350.66	1,350.66	7/1/2006
35600		3	HARVEST OF UPPER EXTREMITY ARTERY, ONE SEGMENT, FOR CORONARY ARTERY BYPASS	248.33	248.33	7/1/2006
35601		3	ARTERY BYPASS GRAFT	972.52	972.52	7/1/2006
35606		3	ARTERY BYPASS GRAFT	1,033.18	1,033.18	7/1/2006
35612		3	ARTERY BYPASS GRAFT	875.88	875.88	7/1/2006
35616		3	ARTERY BYPASS GRAFT	883.35	883.35	7/1/2006
35621		3	ARTERY BYPASS GRAFT	1,073.60	1,073.60	7/1/2006
35623		3	BYPASS GRAFT, WITH OTHER THAN VEIN;	1,290.56	1,290.56	7/1/2006
35626		3	ARTERY BYPASS GRAFT	1,487.05	1,487.05	7/1/2006
35631		3	ARTERY BYPASS GRAFT	1,794.84	1,794.84	7/1/2006
35636		3	BYPASS GRAFT, WITH OTHER THAN VEIN; SPLENORENAL (SPLENIC TO RENAL ARTERIAL	1,563.28	1,563.28	7/1/2006
35641		3	BYPASS GRAFT, WITH OTHER THAN VEIN; AORTOILIAC OR BI-ILIAC	1,330.96	1,330.96	7/1/2006
35642		3	BYPASS GRAFT W/ OTHER THAN VEIN, CAROTID-VERTEBRAL	987.05	987.05	7/1/2006
35645		3	BYPASS GRAFT W/ OTHER THAN VEIN, SUBCLAVIAN-VERT	959.84	959.84	7/1/2006
35646		3	BYPASS GRAFT, WITH OTHER THAN VEIN; AORTOBIFEMORAL	1,650.77	1,650.77	7/1/2006
35647		3	BYPASS GRAFT, WITH OTHER THAN VEIN; AORTOFEMORAL	1,488.70	1,488.70	7/1/2006
35650		3	BYPASS GRAFT W/ OTHER THAN VEIN, AXILLARY-AXILLARY	1,022.67	1,022.67	7/1/2006
35651		3	ARTERY BYPASS GRAFT	1,331.26	1,331.26	7/1/2006
35654		3	BYPASS GRAFT W/ OTHER THAN VEIN, AXIL-FEM-FEM	1,333.48	1,333.48	7/1/2006
35656		3	ARTERY BYPASS GRAFT	1,051.36	1,051.36	7/1/2006
35661		3	ARTERY BYPASS GRAFT	1,041.32	1,041.32	7/1/2006
35663		3	ARTERY BYPASS GRAFT	1,193.51	1,193.51	7/1/2006
35665		3	ARTERY BYPASS GRAFT	1,137.55	1,137.55	7/1/2006
35666		3	ARTERY BYPASS GRAFT	1,223.82	1,223.82	7/1/2006
35671		3	ARTERY BYPASS GRAFT	1,069.23	1,069.23	7/1/2006
35681		3	BYPASS GRAFT; COMPOSITE, PROSTHETIC AND VEIN (LIST SEPARATELY IN ADDITION TO	80.32	80.32	7/1/2006
35682		3	BYPASS GRAFT; AUTOGENOUS COMPOSITE, TWO SEGMENTS OF VEINS FROM TWO LOCATIONS	361.62	361.62	7/1/2006
35683		3	BYPASS GRAFT; AUTOGENOUS COMPOSITE, THREE OR MORE SEGMENTS OF VEIN FROM TWO O	427.05	427.05	7/1/2006
35685		3	PLACEMENT OF VEIN PATCH OR CUFF AT DISTAL ANASTOMOSIS OF BYPASS GRAFT,	203.53	203.53	7/1/2006
35686		3	CREATION OF DISTAL ARTERIOVENOUS FISTULA DURING LOWER EXTREMITY BYPASS SURGERY	168.51	168.51	7/1/2006
35691		3	TRANSPOSITION AND/OR REIMPLANTATION;	987.11	987.11	7/1/2006
35693		3	TRANSPOSITION AND/OR REIMPLANTATION;	859.57	859.57	7/1/2006
35694		3	TRANSPOSITION AND/OR REIMPLANTATION;	1,036.23	1,036.23	7/1/2006
35695		3	TRANSPOSITION AND/OR REIMPLANTATION;	1,035.49	1,035.49	7/1/2006
35697		3	REIMPLANTATION, VISCERAL ARTERY TO INFRARENAL AORTIC PROSTHESIS, EACH ARTERY	151.24	151.24	7/1/2006
35700		3	REOPERATION, FEMORAL-POPLITEAL OR FEMORAL (POPLITEAL) -ANTERIOR	154.76	154.76	7/1/2006
35701		3	EXPLORATION,CAROTID ARTERY	502.38	502.38	7/1/2006
35721		3	EXPLORATION,FEMORAL ARTERY	428.94	428.94	7/1/2006
35741		3	EXPLORATION POPLITEAL ARTERY	467.97	467.97	7/1/2006
35761		3	EXPLORATION OF ARTERY/VEIN	343.41	343.41	7/1/2006
35800		3	EXPLORATION OF NECK	428.62	428.62	7/1/2006
35820		3	EXPLORATION OF CHEST	745.63	745.63	7/1/2006
35840		3	EXPLORATION OF ABDOMEN	557.41	557.41	7/1/2006
35860		3	EXPLORATION OF LIMB	351.24	351.24	7/1/2006
35870		3	REPAIR OF GRAFT-ENTERIC FISTULA	1,189.41	1,189.41	7/1/2006
35875		3	THROMBECTOMY OF ARTERIAL OR VENOUS GRAFT (OTHER THAN HEMODIALYSIS GRAFT OR	568.29	568.29	7/1/2006
35876		3	THROMBECTOMY OF ARTERIAL OR VENOUS GRAFT;	915.44	915.44	7/1/2006
35879		3	REVISION, LOWER EXTREMITY ARTERIAL BYPASS, WITHOUT THROMBECTOMY, OPEN; WITH	883.00	883.00	7/1/2006
35881		3	REVISION, LOWER EXTREMITY ARTERIAL BYPASS, WITHOUT THROMBECTOMY, OPEN; WITH	993.56	993.56	7/1/2006
35901		3	EXCISION OF INFECTED GRAFT;	497.21	497.21	7/1/2006
35903		3	EXCISION OF INFECTED GRAFT;	572.02	572.02	7/1/2006
35905		3	EXCISION OF INFECTED GRAFT;	1,662.90	1,662.90	7/1/2006
35907		3	EXCISION OF INFECTED GRAFT;	1,841.38	1,841.38	7/1/2006
36000		3	INSERTION VEIN ACCESS DEVICE	25.59	8.37	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
36002		3	INJECTION PROCEDURES (EG, THROMBIN) FOR PERCUTANEOUS TREATMENT OF EXTREMITY	169.54	106.61	7/1/2006
36005		3	INJECTION PROCEDURE FOR EXTREMITY VENOGRAPHY (INCLUDING INTRODUCTION OF NEEDLE	289.40	45.62	7/1/2006
36010		3	INSERTION VEIN ACCESS DEVICE	733.34	118.17	7/1/2006
36011		3	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM;	1,043.38	154.38	7/1/2006
36012		3	SELECTIVE CATHETER PLACEMENT, VENOUS SYSTEM;	760.99	171.08	7/1/2006
36013		3	INTRODUCTION OF CATHETER, RIGHT HEART OR MAIN PULMONARY ARTERY	805.97	119.00	7/1/2006
36014		3	SELECTIVE CATHETER PLACEMENT, LEFT OR RIGHT PULMONARY ARTERY	781.52	147.22	7/1/2006
36015		3	SELECTIVE CATHETER PLACEMENT, SEGMENTAL OR SUBSEGMENTAL PULMONARY ARTERY	917.20	170.62	7/1/2006
36100		3	ESTABLISH ACCESS TO ARTERY	515.83	151.48	7/1/2006
36120		3	INTRODUCTION OF NEEDLE OR INTRACATHETER;	430.99	97.12	7/1/2006
36140		3	INTRODUCTION OF NEEDLE OR INTRACATHETER;	500.35	97.25	7/1/2006
36145		3	ARTERIOVENOUS SHUNT FOR DIALYSIS	491.91	96.76	7/1/2006
36160		3	INTRODUCTION OF NEEDLE OR INTRACATHETER, AORTIC, TRANSLUMBAR	544.53	124.46	7/1/2006
36200		3	ESTABLISH ACCESS TO AORTA	662.77	147.71	7/1/2006
36215		3	ARTERIAL CATH. PLACEMENT; 1ST ORDER THORACIC OR BRACHIOCEPHALIC BRANCH	1,072.30	227.68	7/1/2006
36216		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM;	1,162.73	256.50	7/1/2006
36217		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM;	2,078.20	308.80	7/1/2006
36218		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD	206.90	49.24	7/1/2006
36245		3	INTRODUCTION OF CATHETER AORTA, EACH ADDITIONAL	1,241.15	230.92	7/1/2006
36246		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM;	1,193.82	259.10	7/1/2006
36247		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM;	1,881.81	308.50	7/1/2006
36248		3	SELECTIVE CATHETER PLACEMENT, ARTERIAL SYSTEM; ADDITIONAL SECOND ORDER, THIRD	172.12	49.24	7/1/2006
36260		3	INSERTION IMPLANTABLE INFUSION PUMP	540.92	540.92	7/1/2006
36261		3	REVISION OF IMPLANTED INTRA-ARTERIAL INFUSION PUMP	333.54	333.54	7/1/2006
36262		3	REMOVAL OF IMPLANTED INFUSION PUMP	247.93	247.93	7/1/2006
36400		3	VENIPUNCTURE, UNDER AGE 3 YEARS; FEMORAL OR JUGULAR	23.65	17.35	7/1/2006
36405		3	VENIPUNCTURE, UNDER AGE 3 YEARS;	20.46	14.50	7/1/2006
36406		3	VENIPUNCTURE, UNDER AGE 3 YEARS;	15.99	8.37	7/1/2006
36410		3	VENIPUNCTURE, CHILD OVER AGE 3 YEARS OR ADULT, NECESSITATING	16.32	8.37	7/1/2006
36415		3	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	3.00	3.00	7/1/2006
36420		3	VENIPUNCTURE, CUTDOWN;	49.24	46.92	7/1/2006
36425		3	VENIPUNCTURE, CUTDOWN;	36.03	36.03	7/1/2006
36430		3	BLOOD TRANSFUSION SERVICE	34.84	34.84	7/1/2006
36440		3	PUSH TRANSFUSION, BLOOD, 2 YEARS OR UNDER	48.99	48.99	7/1/2006
36450		3	EXCHANGE TRANSFUSION, BLOOD;	108.64	108.64	7/1/2006
36455		3	EXCHANGE TRANSFUSION, BLOOD;	124.40	124.40	7/1/2006
36460		3	TRANSFUSION, INTRAUTERINE, FETAL	329.63	329.63	7/1/2006
36470		3	INJECTION OF SCLEROSING SOLUTION;	131.11	66.19	7/1/2006
36471		3	INJECTION OF SCLEROSING SOLUTION;	162.92	92.70	7/1/2006
36475		3	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	1,957.59	334.59	7/1/2006
36476		3	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	387.50	163.60	7/1/2006
36478		3	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	1,804.24	334.59	7/1/2006
36479		3	ENDOVENOUS ABLATION THERAPY OF INCOMPETENT VEIN, EXTREMITY, INCLUSIVE OF ALL	391.15	163.60	7/1/2006
36481		3	PERCUTANEOUS PORTAL VEIN CATHETERIZATION BY ANY METHOD	454.43	349.99	7/1/2006
36500		3	VENOUS CATHETERIZATION FOR SELECTIVE ORGAN BLOOD SAMPLING	176.36	176.36	7/1/2006
36510		3	CATHETERIZATION OF UMBILICAL VEIN FOR DIAGNOSIS OR THERAPY, NEWBORN	170.72	61.75	7/1/2006
36511		3	THERAPEUTIC APHERESIS; FOR WHITE BLOOD CELLS	88.67	88.67	7/1/2006
36512		3	THERAPEUTIC APHERESIS; FOR RED BLOOD CELLS	89.00	89.00	7/1/2006
36513		3	THERAPEUTIC APHERESIS; FOR PLATELETS	90.74	90.74	7/1/2006
36514		3	THERAPEUTIC APHERESIS; FOR PLASMA PHERESIS	628.23	88.00	7/1/2006
36515		3	THERAPEUTIC APHERESIS; WITH EXTRACORPOREAL IMMUNOADSORPTION AND PLASMA	2,266.80	86.35	7/1/2006
36516		3	THERAPEUTIC APHERESIS; WITH EXTRACORPOREAL SELECTIVE ADSORPTION OR SELECTIVE	2,837.65	61.67	7/1/2006
36522		3	PHOTOPHERESIS, EXTRACORPOREAL	1,138.27	94.92	7/1/2006
36550		3	DECLOTTING BY THROMBOLYTIC AGENT OF IMPLANTED VASCULAR ACCESS DEVICE OR CATHET	21.44	21.44	7/1/2006
36555		3	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; UNDER 5	290.14	125.52	7/1/2006
36556		3	INSERTION OF NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER; AGE 5	281.19	118.90	7/1/2006
36557		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT	898.58	284.49	7/1/2006
36558		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS CATHETER, WITHOUT	884.47	270.38	7/1/2006
36560		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	1,223.51	338.48	7/1/2006
36561		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	1,211.53	326.83	7/1/2006
36563		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE WITH	1,130.55	341.22	7/1/2006
36565		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	1,049.23	326.83	7/1/2006
36566		3	INSERTION OF TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	1,093.73	350.13	7/1/2006
36568		3	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER (PICC), WITHOUT	321.73	90.87	7/1/2006
36569		3	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER (PICC), WITHOUT	313.68	88.78	7/1/2006
36570		3	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	1,306.29	294.73	7/1/2006
36571		3	INSERTION OF PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE, WITH	1,307.89	293.68	7/1/2006
36575		3	REPAIR OF TUNNELED OR NON-TUNNELED CENTRAL VENOUS ACCESS CATHETER, WITHOUT	163.21	37.34	7/1/2006
36576		3	REPAIR OF CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT OR PUMP, CENTRAI	349.76	180.50	7/1/2006
36578		3	REPLACEMENT, CATHETER ONLY, OF CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS	499.67	206.54	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
36580		3	REPLACEMENT, COMPLETE, OF A NON-TUNNELED CENTRALLY INSERTED CENTRAL VENOUS	282.07	65.12	7/1/2006
36581		3	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS	775.41	191.79	7/1/2006
36582		3	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS	1,055.40	286.29	7/1/2006
36583		3	REPLACEMENT, COMPLETE, OF A TUNNELED CENTRALLY INSERTED CENTRAL VENOUS ACCESS	1,057.86	288.76	7/1/2006
36584		3	REPLACEMENT, COMPLETE, OF A PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER	279.11	65.80	7/1/2006
36585		3	REPLACEMENT, COMPLETE, OF A PERIPHERALLY INSERTED CENTRAL VENOUS ACCESS DEVICE,	1,100.95	267.59	7/1/2006
36589		3	REMOVAL OF TUNNELED CENTRAL VENOUS CATHETER, WITHOUT SUBCUTANEOUS PORT OR PU	161.78	133.30	7/1/2006
36590		3	REMOVAL OF TUNNELED CENTRAL VENOUS ACCESS DEVICE, WITH SUBCUTANEOUS PORT OR	240.90	185.92	7/1/2006
36595		3	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH)	707.11	182.12	7/1/2006
36596		3	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	150.71	44.72	7/1/2006
36597		3	REPOSITIONING OF PREVIOUSLY PLACED CENTRAL VENOUS CATHETER UNDER FLUOROSCOPIC	125.00	59.75	7/1/2006
36598		3	CONTRAST INJECTION(S) FOR RADIOLOGIC EVALUATION OF EXISTING CENTRAL VENOUS A	115.57	115.57	7/1/2006
36600		3	ARTERIAL PUNCTURE, WITHDRAWAL OF BLOOD FOR DIAGNOSIS	28.21	14.96	7/1/2006
36620		3	ARTERIAL CATHETERIZATION OR CANNULATION FOR SAMPLING, MONITORING	50.63	50.63	7/1/2006
36625		3	ARTERIAL CATHETERIZATION OR CANNULATION FOR SAMPLING, MONITORING	99.38	99.38	7/1/2006
36640		3	ARTERIAL CATHETERIZATION FOR PROLONGED INFUSION THERAPY (CHEMOTHERAPY), CUTDOW	114.89	114.89	7/1/2006
36660		3	CATHETERIZATION, UMBILICAL ARTERY, NEWBORN, FOR DIAGNOSIS OR THERAPY	68.20	68.20	7/1/2006
36680		3	PLACEMENT OF NEEDLE FOR INTRAOSSEOUS INFUSION	61.97	61.97	7/1/2006
36800		3	INSERTION OF CANNULA FOR HEMODIALYSIS, OTHER PURPOSE (SEPARATE PROCEDURE); VEIN	152.96	152.96	7/1/2006
36810		3	REDIRECTION OF BLOOD FLOW	208.58	208.58	7/1/2006
36815		3	REDIRECTION OF BLOOD FLOW	141.12	141.12	7/1/2006
36818		3	ARTERIOVENOUS ANASTOMOSIS, OPEN; BY UPPER ARM CEPHALIC VEIN TRANSPOSITION	658.69	658.69	7/1/2006
36819		3	ARTERIOVENOUS ANASTOMOSIS, OPEN; BY UPPER ARM BASILIC VEIN TRANSPOSITION	759.69	759.69	7/1/2006
36820		3	ARTERIOVENOUS ANASTOMOSIS, OPEN; BY FOREARM VEIN TRANSPOSITION	760.00	760.00	7/1/2006
36821		3	ARTERIOVENOUS ANASTOMOSIS, OPEN; DIRECT, ANY SITE (EG, CIMINO TYPE) (SEPARATE	503.84	503.84	7/1/2006
36822		3	INSERTION OF CANNULA(S) FOR PROLONGED EXTRACORPOREAL CIRCULATION FOR	357.69	357.69	7/1/2006
36823		3	INSERTION OF ARTERIAL AND VENOUS CANNULA(S) FOR ISOLATED EXTRACORPOREAL	1,132.00	1,132.00	7/1/2006
36825		3	CREATION OF ARTERIOVENOUS FISTULA BY OTHER THAN DIRECT ARTERIOVENOUS	552.61	552.61	7/1/2006
36830		3	ARTERIOVENOUS FISTULA NONAUTOGENOUS GRAFT	643.27	643.27	7/1/2006
36831		3	THROMBECTOMY, OPEN, ARTERIOVENOUS FISTULA WITHOUT REVISION, AUTOGENOUS OR	443.61	443.61	7/1/2006
36832		3	REVISION, OPEN, ARTERIOVENOUS FISTULA; WITHOUT THROMBECTOMY, AUTOGENOUS OR	567.16	567.16	7/1/2006
36833		3	REVISION, ARTERIOVENOUS FISTULA; WITH THROMBECTOMY, AUTOGENOUS OR NONAUTOGENC	640.43	640.43	7/1/2006
36834		3	PLASTIC REPAIR OF ARTERIOVENOUS ANEURYSM (SEPARATE PROCEDURE)	547.70	547.70	7/1/2006
36835		3	INSERTION OF THOMAS SHUNT (SEPARATE PROCEDURE)	423.06	423.06	7/1/2006
36838		3	DISTAL REVASCULARIZATION AND INTERVAL LIGATION (DRIL), UPPER EXTREMITY	1,122.69	1,122.69	7/1/2006
36860		3	EXTERNAL CANNULA DECLOTTING (SEPARATE PROCEDURE); WITHOUT BALLOON CATHETER	133.86	97.42	7/1/2006
36861		3	CANNULA DECLOTTING WITH BALLOON CATHETER	146.30	146.30	7/1/2006
36870		3	THROMBECTOMY, PERCUTANEOUS, ARTERIOVENOUS FISTULA, AUTOGENOUS OR NONAUTOGEN	1,953.55	296.76	7/1/2006
37140		3	VENOUS ANASTOMOSIS; PORTOCAVAL	1,242.65	1,242.65	7/1/2006
37145		3	VENOUS ANASTOMOSIS; RENOPORTAL	1,320.17	1,320.17	7/1/2006
37160		3	VENOUS ANASTOMOSIS; CAVAL-MESENTERIC	1,148.68	1,148.68	7/1/2006
37180		3	VENOUS ANASTOMOSIS; SPLENORENAL, PROXIMAL	1,303.37	1,303.37	7/1/2006
37181		3	SPLENORENAL DISTAL (SELECTIVE DECOMPRESSION)	1,402.79	1,402.79	7/1/2006
37182		3	INSERTION OF TRANSVENOUS INTRAHEPATIC PORTOSYSTEMIC SHUNT(S) (TIPS) (INCLUDES	835.39	835.39	7/1/2006
37183		3	REVISION OF TRANSVENOUS INTRAHEPATIC PORTOSYSTEMIC SHUNT(S) (TIPS) (INCLUDES	398.52	398.52	7/1/2006
37184		3	PRIMARY PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, NONCORONARY, ART	2,705.96	435.75	7/1/2006
37185		3	PRIMARY PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, NONCORONARY, ART	883.09	159.69	7/1/2006
37186		3	SECONDARY PERCUTANEOUS TRANSLUMINAL THROMBECTOMY (EG, NONPRIMARY MECHANICAL	1,825.06	239.49	7/1/2006
37187		3	PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, VEIN(S), INCLUDING INTRAP	2,632.01	405.19	7/1/2006
37188		3	PERCUTANEOUS TRANSLUMINAL MECHANICAL THROMBECTOMY, VEIN(S), INCLUDING INTRAP	2,272.66	292.60	7/1/2006
37195		3	THROMBOLYSIS, CEREBRAL, BY INTRAVENOUS INFUSION	279.68	279.68	7/1/2006
37200		3	TRANSCATHETER BIOPSY	219.72	219.72	7/1/2006
37201		3	TRANSCATHETER THERAPY, INFUSION FOR THROMBOLYSIS OTHER THAN CORONARY	271.72	271.72	7/1/2006
37202		3	TRANSCATHETER THERAPY, INFUSION OTHER THAN FOR THROMBOLYSIS,	314.73	314.73	7/1/2006
37203		3	TRANSCATHETER RETRIEVAL, PERCUTANEOUS, OF INTRAVASCULAR FOREIGN	1,279.46	254.98	7/1/2006
37204		3	TRANSCATHETER OCCULSION/EMBOLIZATION, PERCUTANEOUS	882.19	882.19	7/1/2006
37205		3	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), (NON-CORONARY	436.11	436.11	7/1/2006
37206		3	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), (NON-CORONARY VESSEL),	202.84	202.84	7/1/2006
37207		3	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), (NON-CORONARY	429.01	429.01	7/1/2006
37208		3	TRANSCATHETER PLACEMENT OF AN INTRAVASCULAR STENT(S), (NON-CORONARY VESSEL),	207.42	207.42	7/1/2006
37209		3	EXCHANGE OF A PREVIOUSLY PLACED ARTERIAL CATHETER DURING	109.69	109.69	7/1/2006
37215		3	TRANSCATHETER PLACEMENT OF INTRAVASCULAR STENT(S), CERVICAL CAROTID ARTERY,	1,000.80	1,000.80	7/1/2006
37216		3	TRANSCATHETER PLACEMENT OF INTRAVASCULAR STENT(S), CERVICAL CAROTID ARTERY,	964.09	964.09	7/1/2006
37250		3	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL) DURING DIAGNOSTIC EVALUATION	105.29	105.29	7/1/2006
37251		3	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL) DURING THERAPEUTIC INTERVENTIOI	80.20	80.20	7/1/2006
37500		3	VASCULAR ENDOSCOPY, SURGICAL, WITH LIGATION OF PERFORATOR VEINS, SUBFASCIAL	658.34	658.34	7/1/2006
37565		3	LIGATION, INTERNAL JUGULAR VEIN	608.44	608.44	7/1/2006
37600		3	LIGATION OF NECK ARTERY	657.06	657.06	7/1/2006
37605		3	LIGATION OF NECK ARTERY	745.76	745.76	7/1/2006
37606		3	LIGATION OF NECK ARTERY	405.45	405.45	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
37607		3	LIGATION OR BANDING OF ANGIOACCESS ARTERIOVENOUS FISTULA	359.10	359.10	7/1/2006
37609		3	LIGATION OR BIOPSY TEMPORAL ARTERY	265.68	181.55	7/1/2006
37615		3	LIGATION MAJOR ARTERY NECK	358.07	358.07	7/1/2006
37616		3	LIGATION MAJOR ARTERY CHEST	914.71	914.71	7/1/2006
37617		3	LIGATE MAJOR ARTERY ABDOMEN	1,166.03	1,166.03	7/1/2006
37618		3	LIGATION MAJOR ARTERY EXTREMITY	309.23	309.23	7/1/2006
37620		3	INTERRUPTION, PARTIAL OR COMPLETE, OF INFERIOR VENA CAVA BY SUTURE, LIGATION,	590.23	590.23	7/1/2006
37650		3	LIGATION OF FEMORAL VEIN	458.90	458.90	7/1/2006
37660		3	LIGATION OF COMMON ILIAC VEIN	1,112.87	1,112.87	7/1/2006
37700		3	REVISE LEG VEIN	238.83	238.83	7/1/2006
37718		3	LIGATION, DIVISION, AND STRIPPING, SHORT SAPHENOUS VEIN	381.41	381.41	7/1/2006
37722		3	LIGATION, DIVISION, AND STRIPPING, LONG (GREATER) SAPHENOUS VEINS FROM SAPHE	446.68	446.68	7/1/2006
37735		3	REMOVAL OF LEG VEINS/LESION	595.33	595.33	7/1/2006
37760		3	REVISION OF LEG VEINS	586.09	586.09	7/1/2006
37765		3	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; 10-20 STAB INCISIONS	428.68	428.68	7/1/2006
37766		3	STAB PHLEBECTOMY OF VARICOSE VEINS, ONE EXTREMITY; MORE THAN 20 INCISIONS	522.40	522.40	7/1/2006
37780		3	REVISION OF LEG VEIN	244.83	244.83	7/1/2006
37785		3	REVISION LEG VEIN	322.48	240.22	7/1/2006
38100		3	REMOVAL OF SPLEEN	770.11	770.11	7/1/2006
38101		3	SPLENECTOMY PARTIAL	812.77	812.77	7/1/2006
38102		3	SPLENECTOMY; TOTAL, EN BLOC FOR EXTENSIVE DISEASE, IN CONJUNCTION WITH OTHER	241.29	241.29	7/1/2006
38115		3	REPAIR RUPTURED SPLEEN W/WO PARTIAL SPLENECTOMY	836.05	836.05	7/1/2006
38120		3	LAPAROSCOPY, SURGICAL, SPLENECTOMY	907.66	907.66	7/1/2006
38200		3	INJECTION FOR SPLEEN X-RAY	127.75	127.75	7/1/2006
38205		3	BLOOD-DERIVED HEMATOPOIETIC PROGENITOR CELL HARVESTING FOR TRANSPLANTATION, PEI	77.81	77.81	7/1/2006
38206		3	BLOOD-DERIVED HEMATOPOIETIC PROGENITOR CELL HARVESTING FOR TRANSPLANTATION, PEI	77.81	77.81	7/1/2006
38220		3	BONE MARROW; ASPIRATION ONLY	163.58	57.26	7/1/2006
38221		3	BONE MARROW; BIOPSY, NEEDLE OR TROCAR	181.44	72.47	7/1/2006
38230		3	BONE MARROW HARVESTING FOR TRANSPLANTATION.	281.14	281.14	7/1/2006
38240		3	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENIC	117.30	117.30	7/1/2006
38241		3	BONE MARROW TRANSPLANT, AUTOLOGOUS	117.63	117.63	7/1/2006
38242		3	BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENEIC	89.24	89.24	7/1/2006
38300		3	DRAINAGE OF LYMPH NODE ABSCESS OR LYMPHADENITIS;	220.16	145.45	7/1/2006
38305		3	DRAINAGE LYMPH NODE LESION	383.10	383.10	7/1/2006
38308		3	INCISION OF LYMPH CHANNELS	375.65	375.65	7/1/2006
38380		3	SUTURE AND OR LIGATION OF THORACIC DUCT CERVICAL A	474.07	474.07	7/1/2006
38381		3	SUTURE AND OR LIGATION OF THORACIC DUCT THORACIC A	733.94	733.94	7/1/2006
38382		3	SUTURE/LIGATION THORACIC DUCT ABDOMINAL APPROACH	584.87	584.87	7/1/2006
38500		3	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, SUPERFICIAL	268.49	214.98	7/1/2006
38505		3	BIOPSY OR EXCISION OF LYMPH NODE(S);	111.35	68.95	7/1/2006
38510		3	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, DEEP CERVICAL NODE(S)	431.89	363.32	7/1/2006
38520		3	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, DEEP CERVICAL NODE(S) WITH EXCISION	393.61	393.61	7/1/2006
38525		3	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, DEEP AXILLARY NODE(S)	345.91	345.91	7/1/2006
38530		3	BIOPSY OR EXCISION OF LYMPH NODE(S); OPEN, INTERNAL MAMMARY NODE(S)	458.48	458.48	7/1/2006
38542		3	DISSECTION DEEP JUGULAR NODE	374.96	374.96	7/1/2006
38550		3	EXCISION OF CYSTIC HYGROMA, AXILLARY OR CERVICAL; WITHOUT DEEP NEUROVASCULAR	398.89	398.89	7/1/2006
38555		3	EXCISION OF CYSTIC HYGROMA, AXILLARY OR CERVICAL; WITH DEEP NEUROVASCULAR	831.88	831.88	7/1/2006
38562		3	LIMITED LYMPHADENECTOMY FOR STAGING PELVIC	596.38	596.38	7/1/2006
38564		3	LIMITED LYMPHADENECTOMY FOR STAGING RETROPERITONEA	593.83	593.83	7/1/2006
38570		3	LAPAROSCOPY, SURGICAL; WITH RETROPERITONEAL LYMPH NODE SAMPLING (BIOPSY),	490.53	490.53	7/1/2006
38571		3	LAPAROSCOPY, SURGICAL; WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY	741.77	741.77	7/1/2006
38572		3	LAPAROSCOPY, SURGICAL; WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND	875.18	875.18	7/1/2006
38700		3	REMOVAL OF LYMPH NODES, NECK	519.91	519.91	7/1/2006
38720		3	REMOVAL OF LYMPH NODES, NECK	827.61	827.61	7/1/2006
38724		3	CERVICAL LYMPHADENECTOMY	878.84	878.84	7/1/2006
38740		3	REMOVAL LYMPH NODES, ARMPIT	554.76	554.76	7/1/2006
38745		3	REMOVAL LYMPH NODES, ARMPITS	712.46	712.46	7/1/2006
38746		3	THORACIC LYMPHADENECTOMY, REGIONAL, INCLUDING MEDIASTINAL AND PERITRACHEAL	245.44	245.44	7/1/2006
38747		3	ABDOMINAL LYMPHADENECTOMY, REGIONAL, INCLUDING CELIAC, GASTRIC, PORTAL,	245.75	245.75	7/1/2006
38760		3	INGUIOFEMORAL LYMPHADENECTOMY SUPERFIC INCL CLOQ N	708.03	708.03	7/1/2006
38765		3	INGUINOFEMORAL LYMPHADENECTOMY, SUPERFICIAL	1,067.64	1,067.64	7/1/2006
38770		3	PELVIC LYMPHADENECTOMY INC EXT ILIAC HYPOGASTRIC W	698.64	698.64	7/1/2006
38780		3	RETROPERITONEAL LYMPHADENECTOMY EXTENS INC PEL AOR	912.15	912.15	7/1/2006
38790		3	INJECTION PROCEDURE; LYMPHANGIOGRAPHY	293.55	74.61	7/1/2006
38792		3	INJECTION PROCEDURE; FOR IDENTIFICATION OF SENTINEL NODE	34.68	34.68	7/1/2006
38794		3	CANNULATION, THORACIC DUCT	281.83	281.83	7/1/2006
39000		3	MEDIASTINOTOMY WITH EXPLORATION, DRAINAGE, REMOVAL OF FOREIGN BODY, OR BIOPSY;	393.70	393.70	7/1/2006
39010		3	MEDIASTINOTOMY WITH EXPLORATION, DRAINAGE, REMOVAL OF FOREIGN BODY, OR BIOPSY;	713.33	713.33	7/1/2006
39200		3	REMOVAL MEDIASTINAL LESION	784.41	784.41	7/1/2006
39220		3	REMOVAL MEDIASTINAL LESION	992.64	992.64	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
39400		3	VISUALIZATION OF MEDIASTINUM	381.48	381.48	7/1/2006
39501		3	REPAIR, LACERATION OF DIAPHRAGM, ANY APPROACH	728.82	728.82	7/1/2006
39502		3	REPAIR DIAPHRAGMATIC HERNIA EXCEPT NEONATAL	874.13	874.13	7/1/2006
39503		3	REPAIR DIAPHRAGMATIC HERNIA NEONATAL	4,776.12	4,776.12	7/1/2006
39520		3	REPAIR OF DIAPHRAGM HERNIA	897.27	897.27	7/1/2006
39530		3	REPAIR OF DIAPHRAGM HERNIA	839.29	839.29	7/1/2006
39531		3	REP DIAPHRAG HERNIA COMB THORACICOABDOMINAL W/DILA	886.47	886.47	7/1/2006
39540		3	REPAIR OF DIAPHRAGM HERNIA	726.30	726.30	7/1/2006
39541		3	REPARI DIAPHR HERNIA TRAUMATIC CHRONIC	780.93	780.93	7/1/2006
39545		3	IMBRICATION OF DIAPHRAGM FOR EVENTRATION, TRANSTHORACIC OR TRANSABDOMINAL,	773.21	773.21	7/1/2006
39560		3	RESECTION, DIAPHRAGM; WITH SIMPLE REPAIR (EG, PRIMARY SUTURE)	676.17	676.17	7/1/2006
39561		3	RESECTION, DIAPHRAGM; WITH COMPLEX REPAIR (EG, PROSTHETIC MATERIAL, LOCAL	994.06	994.06	7/1/2006
40490		3	BIOPSY LIP	99.06	65.28	7/1/2006
40500		3	PARTIAL EXCISION OF LIP	391.36	306.24	7/1/2006
40510		3	PARTIAL EXCISION OF LIP	399.74	313.29	7/1/2006
40520		3	PARTIAL EXCISION OF LIP	430.16	316.22	7/1/2006
40525		3	EXCISION LIP FULL THICKNESS LOCAL FLAP	500.38	500.38	7/1/2006
40527		3	EXCISION LIP FULL THICKNESS CROSS LIP FLAP	594.81	594.81	7/1/2006
40530		3	PARTIAL REMOVAL OF LIP	466.08	358.76	7/1/2006
40650		3	REPAIR LIP	365.01	248.75	7/1/2006
40652		3	REPAIR LIP	422.02	306.40	7/1/2006
40654		3	REPAIR LIP	490.15	368.26	7/1/2006
40700		3	REPAIR CLEFT LIP	783.06	783.06	7/1/2006
40701		3	REPAIR CLEFT LIP	984.21	984.21	7/1/2006
40702		3	REPAIR CLEFT LIP	771.02	771.02	7/1/2006
40720		3	REPAIR CLEFT LIP	856.93	856.93	7/1/2006
40761		3	REPAIR CLEFT LIP	914.87	914.87	7/1/2006
40800		3	DRAINAGE MOUTH LESION	143.46	103.83	7/1/2006
40801		3	DRAINAGE MOUTH LESION	231.71	189.32	7/1/2006
40804		3	REMOVAL FOREIGN BODY, MOUTH	159.79	108.79	7/1/2006
40805		3	REMOVAL OF EMBEDDED FOREIGN BODY, VESTIBULE OF MOUTH;	252.94	197.57	7/1/2006
40808		3	BIOPSY MOUTH LESION	124.97	85.89	7/1/2006
40810		3	EXCISION MOUTH LESION	145.88	105.14	7/1/2006
40812		3	EXCISION MOUTH LESION	213.16	169.44	7/1/2006
40814		3	EXCISION MOUTH LESION	296.17	261.39	7/1/2006
40816		3	EXC LESION OF MUCOSA AND SUBMUCOSA W/O REPAIR	312.56	273.81	7/1/2006
40818		3	EXCISION ORAL MUCOSA, GRAFT	263.18	223.43	7/1/2006
40820		3	DESTRUCTION OF LESION OR SCAR OF VESTIBULE OF MOUTH BY PHYSICAL	179.12	129.77	7/1/2006
40830		3	REPAIR MOUTH LACERATION	191.29	137.30	7/1/2006
40831		3	REPAIR MOUTH LACERATION	250.16	196.82	7/1/2006
40840		3	RECONSTRUCTION MOUTH	663.76	570.25	7/1/2006
40842		3	RECONSTRUCTION MOUTH	673.03	564.06	7/1/2006
40843		3	RECONSTRUCTION MOUTH	863.75	726.29	7/1/2006
40844		3	RECONSTRUCTION MOUTH	1,145.20	1,005.42	7/1/2006
40845		3	RECONSTRUCTION MOUTH	1,280.66	1,152.80	7/1/2006
41000		3	DRAINAGE MOUTH LESION	126.41	96.27	7/1/2006
41005		3	DRAINAGE MOUTH LESION	158.76	105.10	7/1/2006
41006		3	DRAINAGE MOUTH LESION	283.70	230.04	7/1/2006
41007		3	INCISION/DRAINAGE ABSCESS MOUTH SUBMENTAL SPACE	289.33	219.11	7/1/2006
41008		3	INCISION/DRAINAGE MOUTH SUBMANDIBULAR SPACE	285.99	236.97	7/1/2006
41009		3	INCISION/DRAINAGE MOUTH MASTICATOR SPACE	304.67	258.30	7/1/2006
41010		3	INCISION TONGUE FOLD	153.39	92.77	7/1/2006
41015		3	DRAINAGE EXTRAORAL ABSCESS/CYST/HEMATOMA FLOOR OF	332.33	290.27	7/1/2006
41016		3	INCISION/DRAINAGE EXTRAORAL LESION SUBMENTAL	344.86	298.49	7/1/2006
41017		3	INCISION/DRAINAGE MOUTH LESION SUBMANDIBULAR LESIO	345.52	301.14	7/1/2006
41018		3	EXTRAORAL INCISION AND DRAINAGE OF ABSCESS, CYST, OR HEMATOMA	402.60	350.62	7/1/2006
41100		3	BIOPSY TONGUE	142.63	109.17	7/1/2006
41105		3	POSTERIOR ONE-THIRD	130.63	97.84	7/1/2006
41108		3	BIOPSY FLOOR OF MOUTH	109.00	77.54	7/1/2006
41110		3	EXCISION TONGUE LESION	156.40	111.68	7/1/2006
41112		3	EXCISION TONGUE LESION	253.13	211.72	7/1/2006
41113		3	EXCISION TONGUE LESION	280.01	237.95	7/1/2006
41114		3	EXC LESION TONGUE LOCAL TONGUE FLAP	562.52	562.52	7/1/2006
41115		3	EXCISION OF LINGUAL FRENUM (FRENECTOMY)	176.10	128.40	7/1/2006
41116		3	EXCISION LESION FLOOR OF MOUTH	237.56	186.22	7/1/2006
41120		3	PARTIAL REMOVAL OF TONGUE	878.02	878.02	7/1/2006
41130		3	PARTIAL REMOVAL OF TONGUE	960.05	960.05	7/1/2006
41135		3	TONGUE AND NECK SURGERY	1,644.96	1,644.96	7/1/2006
41140		3	REMOVAL OF TONGUE	1,854.73	1,854.73	7/1/2006
41145		3	TONGUE REMOVAL; NECK SURGERY	2,153.50	2,153.50	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
41150		3	MOUTH AND JAW SURGERY	1,693.89	1,693.89	7/1/2006
41153		3	GLOSSECTOMY COMPOSITE PROC W/RESECTION FLOOR MOUTH	1,731.47	1,731.47	7/1/2006
41155		3	MOUTH, JAW, AND NECK SURGERY	1,940.57	1,940.57	7/1/2006
41250		3	REPAIR LACERATION TONGUE	164.00	112.00	7/1/2006
41251		3	REPAIR LACERATION TO 2CM POSTERIOR ONE THIRD TONGU	195.44	138.13	7/1/2006
41252		3	REPAIR LACERATION TONGUE	242.79	188.47	7/1/2006
41500		3	FIXATION TONGUE	387.55	387.55	7/1/2006
41510		3	TONGUE TO LIP SURGERY	390.70	390.70	7/1/2006
41520		3	RECONSTRUCTION, TONGUE FOLD	257.87	224.74	7/1/2006
41800		3	DRAINAGE GUM LESION	131.01	87.28	7/1/2006
41805		3	REMOVAL FOREIGN BODY, GUM	136.41	121.17	7/1/2006
41806		3	REMOVAL FOREIGN BODY,JAWBONE	224.28	206.05	7/1/2006
41820		3	EXCISION, GUM	368.22	368.22	7/1/2006
41821		3	EXCISION, GUM FLAP	306.86	306.86	7/1/2006
41822		3	EXCISION GUM LESION	219.49	152.58	7/1/2006
41823		3	EXCISION GUM LESION	314.46	262.79	7/1/2006
41825		3	EXCISION GUM LESION	152.31	125.15	7/1/2006
41826		3	EXCISION GUM LESION	170.90	159.97	7/1/2006
41827		3	EXCISION GUM LESION	314.00	252.39	7/1/2006
41830		3	ALVEOLECTOMY INC/CURRETTAGE OF OSTEITIS OR SEQUEST	295.01	250.62	7/1/2006
41850		3	DESTRUCTION OF LESION EXCEPT EXCISION	36.82	36.82	7/1/2006
41870		3	GRAFT GUM	490.96	490.96	7/1/2006
41872		3	GINGIVOPLASTY, EACH QUADRANT (SPECIFY)	266.77	215.09	7/1/2006
41874		3	ALVEOLOPLASTY, EACH QUADRANT (SPECIFY)	282.26	226.95	7/1/2006
42000		3	DRAINAGE MOUTH ROOF LESION	132.17	88.45	7/1/2006
42100		3	BIOPSY ROOF OF MOUTH	119.38	95.21	7/1/2006
42104		3	EXCISION LESION ROOF MOUTH	147.19	114.07	7/1/2006
42106		3	EXCISION LESION, MOUTH ROOF	188.35	162.52	7/1/2006
42107		3	EXCISION LESION PALATE, UVULA LOCAL FLAP CLOSURE	359.42	300.79	7/1/2006
42120		3	RESECTION PALATE OR EXTENSIVE RESECTION OF LESION	624.60	624.60	7/1/2006
42140		3	EXCISION UVULA	184.87	130.88	7/1/2006
42145		3	PALATOPHARYNGOPLASTY	553.19	553.19	7/1/2006
42160		3	DESTRUCTION OF LESION, PALATE OR UVULA (THERMAL, CRYO OR CHEMICAL)	209.82	144.90	7/1/2006
42180		3	REPAIR PALATE	196.86	164.73	7/1/2006
42182		3	REPAIR PALATE	275.26	247.44	7/1/2006
42200		3	RECONSTRUCTION CLEFT PALATE	799.75	799.75	7/1/2006
42205		3	RECONSTRUCTION CLEFT PALATE	848.70	848.70	7/1/2006
42210		3	RECONSTRUCTION CLEFT PALATE	951.66	951.66	7/1/2006
42215		3	RECONSTRUCTION CLEFT PALATE	648.78	648.78	7/1/2006
42220		3	RECONSTRUCTION CLEFT PALATE	494.43	494.43	7/1/2006
42225		3	RECONSTRUCTION CLEFT PALATE	929.65	929.65	7/1/2006
42226		3	LENGTHENING PALATE AND PHARYNGEAL FLAP	871.16	871.16	7/1/2006
42227		3	LENGTHENING OF PALATE WITH ISLAND FLAP	881.34	881.34	7/1/2006
42235		3	REPAIR PALATE	693.40	693.40	7/1/2006
42260		3	REPAIR NOSE TO LIP FISTULA	720.01	616.00	7/1/2006
42300		3	DRAINAGE SALIVARY GLAND	166.91	133.45	7/1/2006
42305		3	DRAINAGE SALIVARY GLAND	386.60	386.60	7/1/2006
42310		3	DRAINAGE SALIVARY GLAND	134.35	110.17	7/1/2006
42320		3	DRAINAGE SALIVARY GLAND	198.09	159.00	7/1/2006
42330		3	TREATMENT SALIVARY STONE	188.28	145.22	7/1/2006
42335		3	TREATMENT SALIVARY STONE	288.48	230.19	7/1/2006
42340		3	TREATMENT SALIVARY STONE	375.65	305.43	7/1/2006
42400		3	BIOPSY SALIVARY GLAND	84.12	53.31	7/1/2006
42405		3	BIOPSY SALIVARY GLAND	257.72	206.38	7/1/2006
42408		3	EXCISION SALIVARY CYST	369.88	293.36	7/1/2006
42409		3	TREATMENT SALIVARY CYST	257.43	199.14	7/1/2006
42410		3	EXCISION PAROTID GLAND	563.56	563.56	7/1/2006
42415		3	EX PAROTID TUMOR PAROTID GL LAT LOB W DISSECAN PRE	1,000.66	1,000.66	7/1/2006
42420		3	EXCISION PAROTID GLAND	1,153.28	1,153.28	7/1/2006
42425		3	EXCISION PAROTID GLAND	778.07	778.07	7/1/2006
42426		3	EXCISION PAROTID TUMOR OR PAROTID GLAND TOTAL	1,238.06	1,238.06	7/1/2006
42440		3	EXCISION SUBMAXILLARY GLAND	423.16	423.16	7/1/2006
42450		3	EXCISION SUBLINGUAL GLAND	371.73	316.75	7/1/2006
42500		3	REPAIR SALIVARY DUCT	352.70	302.68	7/1/2006
42505		3	REPAIR SALIVARY DUCT	471.30	413.01	7/1/2006
42507		3	PAROTID DUCT DIVERS BILATERAL	447.86	447.86	7/1/2006
42508		3	PAROTID DUCT DIVERS BILAT W/EXC ONE SUBMANOLB GLAN	628.13	628.13	7/1/2006
42509		3	PAROTID DUCT DIVERSION BILAT W/EXC BOTH SUBMANDIBU	774.69	774.69	7/1/2006
42510		3	PAROTID DUCT DIVERSION BILAT LIGAT SUBMANDIBULAR	566.95	566.95	7/1/2006
42550		3	INJECTION FOR SIALOGRAPHY	153.27	60.20	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
42600		3	CLOSURE SALIVARY FISTULA	401.69	319.88	7/1/2006
42650		3	DILATION SALIVARY DUCT	65.77	52.85	7/1/2006
42660		3	DILATION AND CATHETERIZATION OF SALIVARY DUCT, WITH OR WITHOUT INJECTION	87.47	70.91	7/1/2006
42665		3	LIGATION SALIVARY DUCT, INTRAORAL	234.84	182.50	7/1/2006
42700		3	DRAINAGE TONSIL ABSCESS	149.43	117.63	7/1/2006
42720		3	DRAINAGE THROAT ABSCESS	365.23	330.78	7/1/2006
42725		3	DRAINAGE THROAT ABSCESS	679.12	679.12	7/1/2006
42800		3	BIOPSY THROAT	125.12	98.95	7/1/2006
42802		3	BIOPSY THROAT	216.20	126.77	7/1/2006
42804		3	BIOPSY UPPER NOSE/THROAT	171.16	104.56	7/1/2006
42806		3	BIOPSY UPER NOSE/THROAT	195.02	124.14	7/1/2006
42808		3	EXCISION LESION PHARYNX	189.86	151.44	7/1/2006
42809		3	REMOVAL OF FOREIGN BODY FROM PHARYNX	146.36	112.90	7/1/2006
42810		3	EXCISION THROAT CYST	313.48	241.28	7/1/2006
42815		3	EXCISION THROAT CYST	481.21	481.21	7/1/2006
42820		3	REMOVAL TONSILS AND ADENOIDS	256.86	256.86	7/1/2006
42821		3	REMOVAL TONSILS AND ADENOIDS	278.42	278.42	7/1/2006
42825		3	REMOVAL OF TONSILS	233.86	233.86	7/1/2006
42826		3	REMOVAL OF TONSILS	228.24	228.24	7/1/2006
42830		3	REMOVAL OF ADENOIDS	182.26	182.26	7/1/2006
42831		3	REMOVAL OF ADENOIDS	197.04	197.04	7/1/2006
42835		3	REMOVAL OF ADENOIDS	169.46	169.46	7/1/2006
42836		3	REMOVAL OF ADENOIDS	218.85	218.85	7/1/2006
42842		3	RADICAL RESECTION TONSIL WITHOUT CLOSURE	696.39	696.39	7/1/2006
42844		3	RADICAL RESECTION TONSIL CLOSURE WITH LOCAL FLAP	1,080.44	1,080.44	7/1/2006
42845		3	RADICAL RESECTION TONSIL CLOSURE WITH OTHER FLAP	1,688.78	1,688.78	7/1/2006
42860		3	EXCISION TONSIL TAGS	163.90	163.90	7/1/2006
42870		3	EXCISION LINGUAL TONSIL	488.71	488.71	7/1/2006
42890		3	PARTIAL REMOVAL PHARYNX	959.35	959.35	7/1/2006
42892		3	RESECT LATERAL PHARYNGEAL WALL DIRECT CLOSURE	1,169.06	1,169.06	7/1/2006
42894		3	RESECT PHARYNGEAL WALL WITH MYOCUTANEOUS FLAP	1,596.86	1,596.86	7/1/2006
42900		3	REPAIR THROAT WOUND	321.73	321.73	7/1/2006
42950		3	RECONSTRUCTION OF THROAT	702.01	702.01	7/1/2006
42953		3	PHARYNGOESOPHAGEAL REPAIR	918.17	918.17	7/1/2006
42955		3	SURGICAL OPENING OF THROAT	638.54	638.54	7/1/2006
42960		3	CONTROL OROPHARYNGEAL HEMORRHAGE, PRIMARY OR SECONDARY (EG,	153.52	153.52	7/1/2006
42961		3	CONTROL OROPHARYNGEAL HEMORRHAGE, PRIMARY OR SECONDARY (EG,	375.88	375.88	7/1/2006
42962		3	CONTROL BLEEDING, THROAT	466.48	466.48	7/1/2006
42970		3	CONTROL OF NASOPHARYNGEAL HEMORRHAGE, PRIMARY OR SECONDARY (EG,	342.90	342.90	7/1/2006
42971		3	CONTROL OF NASOPHARYNGEAL HEMORRHAGE, PRIMARY OR SECONDARY	404.89	404.89	7/1/2006
42972		3	CONTROL BLEEDING,NOSE/THROAT	462.60	462.60	7/1/2006
43020		3	INCISION OF ESOPHAGUS	490.80	490.80	7/1/2006
43030		3	CRICOPHARYNGEAL MYOTOMY	475.13	475.13	7/1/2006
43045		3	ESOPHAGOTOMY, THORACIC APPROACH, WITH REMOVAL OF FOREIGN BODY	1,138.14	1,138.14	7/1/2006
43100		3	EXCISION OF LESION, ESOPHAGUS, WITH PRIMARY REPAIR; CERVICAL APPROACH	558.62	558.62	7/1/2006
43101		3	EXCISION OF LESION, ESOPHAGUS, WITH PRIMARY REPAIR; THORACIC OR ABDOMINAL	897.77	897.77	7/1/2006
43107		3	TOTAL OR NEAR TOTAL ESOPHAGECTOMY, WITHOUT THORACOTOMY;	2,161.72	2,161.72	7/1/2006
43108		3	TOTAL OR NEAR TOTAL ESOPHAGECTOMY, WITHOUT THORACOTOMY; WITH COLON	1,793.14	1,793.14	7/1/2006
43112		3	TOTAL OR NEAR TOTAL ESOPHAGECTOMY, WITH THORACOTOMY;	2,338.74	2,338.74	7/1/2006
43113		3	TOTAL OR NEAR TOTAL ESOPHAGECTOMY, WITH THORACOTOMY; WITH COLON INTERPOSITION	1,871.66	1,871.66	7/1/2006
43116		3	PARTIAL ESOPHAGECTOMY, CERVICAL, WITH FREE INTESTINAL GRAFT,	1,746.95	1,746.95	7/1/2006
43117		3	PARTIAL ESOPHAGECTOMY, DISTAL TWO-THIRDS, WITH THORACOTOMY	2,129.90	2,129.90	7/1/2006
43118		3	PARTIAL ESOPHAGECTOMY, DISTAL TWO-THIRDS, WITH THORACOTOMY AND SEPARATE	1,745.71	1,745.71	7/1/2006
43121		3	PARTIAL ESOPHAGECTOMY, DISTAL TWO-THIRDS, WITH THORACOTOMY	1,593.45	1,593.45	7/1/2006
43122		3	PARTIAL ESOPHAGECTOMY, THORACOABDOMINAL OR ABDOMINAL APPROACH,	2,138.04	2,138.04	7/1/2006
43123		3	PARTIAL ESOPHAGECTOMY, THORACOABDOMINAL OR ABDOMINAL APPROACH, WITH OR WITHOU	1,757.46	1,757.46	7/1/2006
43124		3	TOTAL OR PARTIAL ESOPHAGECTOMY, WITHOUT RECONSTRUCTION	1,502.31	1,502.31	7/1/2006
43130		3	REMOVAL ESOPHAGUS POUCH	700.11	700.11	7/1/2006
43135		3	REMOVAL ESOPHAGUS POUCH	900.64	900.64	7/1/2006
43200		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF	197.37	95.68	7/1/2006
43201		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY	232.39	115.14	7/1/2006
43202		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	255.66	102.64	7/1/2006
43204		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH INJECTION SCLEROSIS OF ESOPHAGEAL VARICES	192.63	192.63	7/1/2006
43205		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE;	192.89	192.89	7/1/2006
43215		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH REMOVAL OF FOREIGN BODY	138.42	138.42	7/1/2006
43216		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE;	126.12	126.12	7/1/2006
43217		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER	341.26	149.81	7/1/2006
43219		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH INSERTION OF PLASTIC TUBE OR STENT	151.05	151.05	7/1/2006
43220		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE;	111.65	111.65	7/1/2006
43226		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE;	122.74	122.74	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
43227		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH CONTROL OF BLEEDING (EG, INJECTION,	183.73	183.73	7/1/2006
43228		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE;	194.54	194.54	7/1/2006
43231		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION	163.54	163.54	7/1/2006
43232		3	ESOPHAGOSCOPY, RIGID OR FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND-GUIDED	229.04	229.04	7/1/2006
43234		3	UPPER GASTROINTESTINAL ENDOSCOPY, SIMPLE PRIMARY EXAMINATION (EG, WITH SMALL	253.16	105.10	7/1/2006
43235		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	262.00	124.21	7/1/2006
43236		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	322.61	150.38	7/1/2006
43237		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	205.86	205.86	7/1/2006
43238		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	255.89	255.89	7/1/2006
43239		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	298.19	147.81	7/1/2006
43240		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	345.97	345.97	7/1/2006
43241		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	134.52	134.52	7/1/2006
43242		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	365.79	365.79	7/1/2006
43243		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	231.40	231.40	7/1/2006
43244		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	255.23	255.23	7/1/2006
43245		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	163.54	163.54	7/1/2006
43246		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	219.34	219.34	7/1/2006
43247		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	173.29	173.29	7/1/2006
43248		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	162.10	162.10	7/1/2006
43249		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	149.55	149.55	7/1/2006
43250		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	164.59	164.59	7/1/2006
43251		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	188.55	188.55	7/1/2006
43255		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	243.84	243.84	7/1/2006
43256		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	220.26	220.26	7/1/2006
43258		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE	230.34	230.34	7/1/2006
43259		3	UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH,	261.16	261.16	7/1/2006
43260		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	299.97	299.97	7/1/2006
43261		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	315.47	315.47	7/1/2006
43262		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	370.55	370.55	7/1/2006
43263		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	366.29	366.29	7/1/2006
43264		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP); WITH ENDOSCOPIC	445.01	445.01	7/1/2006
43267		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	370.55	370.55	7/1/2006
43268		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	373.87	373.87	7/1/2006
43269		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	411.06	411.06	7/1/2006
43271		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	370.55	370.55	7/1/2006
43272		3	ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP);	370.55	370.55	7/1/2006
43280		3	LAPAROSCOPY, SURGICAL, ESOPHAGOGASTRIC FUNDOPLASTY (EG, NISSEN, TOUPET	913.73	913.73	7/1/2006
43300		3	REPAIR OF ESOPHAGUS	565.50	565.50	7/1/2006
43305		3	REPAIR ESOPHAGUS AND FISTULA	1,015.56	1,015.56	7/1/2006
43310		3	REPAIR OF ESOPHAGUS	1,359.10	1,359.10	7/1/2006
43312		3	ESOPHAGOPLASTY WITH REPAIR OF TRACHEOESOPHAGEAL FI	1,508.74	1,508.74	7/1/2006
43313		3	ESOPHAGOPLASTY FOR CONGENITAL DEFECT, (PLASTIC REPAIR OR RECONSTRUCTION),	2,377.94	2,377.94	7/1/2006
43314		3	ESOPHAGOPLASTY FOR CONGENITAL DEFECT, (PLASTIC REPAIR OR RECONSTRUCTION),	2,597.01	2,597.01	7/1/2006
43320		3	ESOPHAGOGASTROSTOMY (CARDIOPLASTY), WITH OR WITHOUT VAGOTOMY AND PYLOROPLAST	1,081.13	1,081.13	7/1/2006
43324		3	ESOPHAGOGASTRIC FUNDOPLASTY	1,093.90	1,093.90	7/1/2006
43325		3	ESOPHAGOGASTRIC FUNDOPLASTY WITH FUNDIC PATCH (THA	1,072.62	1,072.62	7/1/2006
43326		3	ESOPHAGOGASTRIC FUNDOPLASTY WITH GASTROPLASTY	1,083.05	1,083.05	7/1/2006
43330		3	ESOPHAGOMYOTOMY (HELLER TYPE); ABDOMINAL APPROACH	1,054.21	1,054.21	7/1/2006
43331		3	ESOPHAGOMYOTOMY THORACIC APPROACH	1,114.56	1,114.56	7/1/2006
43340		3	ESOPHAGOJEJUNOSTOMY W TOT GASTREC ABD APPROACH	1,059.15	1,059.15	7/1/2006
43341		3	ESOPHAGOJEJUNOSTOMY THORACIC APPROACH	1,149.17	1,149.17	7/1/2006
43350		3	ESOPHAGOSTOMY FISTULIZATION ESOPHA EXT ABD APP	880.34	880.34	7/1/2006
43351		3	ESOPHAGOSTOMY THORACIC APPROACH	1,041.51	1,041.51	7/1/2006
43352		3	ESOPHAGOMYOTOMY CERVICAL APPROACH	873.15	873.15	7/1/2006
43360		3	GASTROINTESTINAL RECONSTRUCTION FOR PREVIOUS ESOPHAGECTOMY,	1,896.65	1,896.65	7/1/2006
43361		3	GASTROINTESTINAL RECONSTRUCTION FOR PREVIOUS ESOPHAGECTOMY, FOR OBSTRUCTING	2,120.17	2,120.17	7/1/2006
43400		3	LIGATION ESOPHAGEAL VEINS	1,120.23	1,120.23	7/1/2006
43401		3	TRANSECTION OF ESOPH W/ REPAIR FOR ESOPH VARICES	1,179.26	1,179.26	7/1/2006
43405		3	LIGATION OR STAPLING AT GASTROESOPHAGEAL JUNCTION FOR PRE-EXISTING	1,101.96	1,101.96	7/1/2006
43410		3	REPAIR WOUND,ESOPHAGUS	777.02	777.02	7/1/2006
43415		3	SUTURE OF ESOPHAGEAL WOUND OR INJURY; TRANSTHORACIC OR TRANSABDOMINAL APPROA	1,367.71	1,367.71	7/1/2006
43420		3	REPAIR OPENING,ESOPHAGUS	794.64	794.64	7/1/2006
43425		3	CLOSURE OF ESOPHAGOSTOMY OR FISTULA; TRANSTHORACIC OR TRANSABDOMINAL APPROAC	1,155.36	1,155.36	7/1/2006
43450		3	DILATION OF ESOPHAGUS	139.66	75.07	7/1/2006
43453		3	DILATION OF ESOPHAGUS, OVER GUIDE WIRE	258.28	81.08	7/1/2006
43456		3	DILATION ESOPHAGUS	553.56	133.57	7/1/2006
43458		3	DILATION OF ESOPHAGUS WITH BALLOON (30 MM DIAMETER OR LARGER) FOR ACHALASIA	336.62	158.09	7/1/2006
43460		3	ESOPHAGOGASTRIC TAMPONADE, WITH BALLOON (SENGSTAAKEN TYPE)	192.95	192.95	7/1/2006
43500		3	INCISION OF STOMACH	595.11	595.11	7/1/2006
43501		3	GASTROTOMY; WITH SUTURE REPAIR OF BLEEDING ULCER	1,056.82	1,056.82	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
43502		3	GASTROTOMY;	1,216.86	1,216.86	7/1/2006
43510		3	GASTROTOMY; WITH ESOPHAGEAL DILATION AND INSERTION OF PERMANENT INTRALUMINAL	722.90	722.90	7/1/2006
43520		3	INCISION PYLORIC MUSCLE	564.56	564.56	7/1/2006
43600		3	BIOPSY OF STOMACH;	93.85	93.85	7/1/2006
43605		3	BIOPSY OF STOMACH	642.55	642.55	7/1/2006
43610		3	EXCISION, LOCAL; ULCER OR BENIGN TUMOR OF STOMACH	773.17	773.17	7/1/2006
43611		3	EXCISION, LOCAL;	946.42	946.42	7/1/2006
43620		3	GASTRECTOMY, TOTAL; WITH ESOPHAGOENTEROSTOMY	1,562.24	1,562.24	7/1/2006
43621		3	GASTRECTOMY, TOTAL;	1,594.89	1,594.89	7/1/2006
43622		3	GASTRECTOMY, TOTAL;	1,686.22	1,686.22	7/1/2006
43631		3	GASTRECTOMY, PARTIAL, DISTAL;	1,184.68	1,184.68	7/1/2006
43632		3	GASTRECTOMY, PARTIAL, DISTAL;	1,184.68	1,184.68	7/1/2006
43633		3	GASTRECTOMY, PARTIAL, DISTAL;	1,210.55	1,210.55	7/1/2006
43634		3	GASTRECTOMY, PARTIAL, DISTAL;	1,314.31	1,314.31	7/1/2006
43635		3	VAGOTOMY WHEN PERFORMED WITH PARTIAL DISTAL GASTRECTOMY (LIST SEPARATELY IN	103.57	103.57	7/1/2006
43640		3	DIVISION VAGUS NERVE	904.28	904.28	7/1/2006
43641		3	VAGOTOMY W/ PYLOROPLASTY PARIETAL CELL	916.02	916.02	7/1/2006
43644		3	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; WITH GASTRIC BYPASS AND	1,446.83	1,446.83	7/1/2006
43651		3	LAPAROSCOPY, SURGICAL; TRANSECTION OF VAGUS NERVES, TRUNCAL	553.35	553.35	7/1/2006
43652		3	LAPAROSCOPY, SURGICAL; TRANSECTION OF VAGUS NERVES, SELECTIVE OR HIGHLY	663.54	663.54	7/1/2006
43653		3	LAPAROSCOPY, SURGICAL; GASTROSTOMY, WITHOUT CONSTRUCTION OF GASTRIC TUBE (EG,	440.00	440.00	7/1/2006
43750		3	PERCUTANEOUS PLACEMENT GASTROSTOMY TUBE	244.07	244.07	7/1/2006
43760		3	CHANGE OF GASTROSTOMY TUBE	110.90	56.58	7/1/2006
43761		3	REPOSITIONING OF THE GASTRIC FEEDING TUBE, ANY METHOD, THROUGH THE DUODENUM FOR	114.11	97.22	7/1/2006
43800		3	RECONSTRUCTION OF PYLORUS	729.32	729.32	7/1/2006
43810		3	FUSION STOMACH AND BOWEL	776.20	776.20	7/1/2006
43820		3	GASTROJEJUNOSTOMY; WITHOUT VAGOTOMY	811.86	811.86	7/1/2006
43825		3	FUSION STOMACH AND BOWEL	1,015.16	1,015.16	7/1/2006
43830		3	GASTROSTOMY, OPEN; WITHOUT CONSTRUCTION OF GASTRIC TUBE (EG, STAMM PROCEDURE)	531.58	531.58	7/1/2006
43831		3	TEMPORARY OPENING,STOMACH	454.91	454.91	7/1/2006
43832		3	GASTROSTOMY, OPEN; WITH CONSTRUCTION OF GASTRIC TUBE (EG, JANEWAY PROCEDURE)	833.18	833.18	7/1/2006
43840		3	REPAIR LESION,STOMACH	831.15	831.15	7/1/2006
43842		3	GASTRIC RESTRICTIVE PROCEDURE, WITHOUT GASTRIC BYPASS, FOR MORBID OBESITY;	978.80	978.80	7/1/2006
43843		3	GASTRIC RESTRICTIVE PROCEDURE, WITHOUT GASTRIC BYPASS, FOR MORBID OBESITY;	984.51	984.51	7/1/2006
43846		3	GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH	1,270.23	1,270.23	7/1/2006
43847		3	GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH	1,411.25	1,411.25	7/1/2006
43848		3	REVISION OF GASTRIC RESTRICTIVE PROCEDURE FOR MORBID OBESITY	1,538.02	1,538.02	7/1/2006
43850		3	REVISION STOMACHBOWEL FUSION	1,288.51	1,288.51	7/1/2006
43855		3	REVISION STOMACHBOWEL FUSION	1,362.93	1,362.93	7/1/2006
43860		3	REVISION OF GASTROJEJUNAL ANASTOMOSIS (GASTROJEJUNOSTOMY) WITH RECONSTRUCTION	1,305.20	1,305.20	7/1/2006
43865		3	REVISION STOMACHBOWEL FUSION	1,382.29	1,382.29	7/1/2006
43870		3	REPAIR OPENING,STOMACH	527.04	527.04	7/1/2006
43880		3	REPAIR STOMACH-BOWEL FISTULA	1,288.66	1,288.66	7/1/2006
44005		3	FREEING OF BOWEL ADHESION	854.99	854.99	7/1/2006
44010		3	DUODENOTOMY	668.06	668.06	7/1/2006
44015		3	TUBE OR NEEDLE CATHETER JEJUNOSTOMY FOR ENTERAL ALIMENTATION, INTRAOPERATIVE,	131.47	131.47	7/1/2006
44020		3	ENTEROTOMY, SMALL INTESTINE, OTHER THAN DUODENUM; FOR EXPLORATION, BIOPSY(S),	741.68	741.68	7/1/2006
44021		3	ENTEROTOMY SMALL BOWEL FOR DECOMPRESSION	745.92	745.92	7/1/2006
44025		3	EXPLORATION OF LARGE BOWEL	755.12	755.12	7/1/2006
44050		3	REDUCTION BOWEL OBSTRUCTION	744.25	744.25	7/1/2006
44055		3	CORRECTION OF MALROTATION	1,146.12	1,146.12	7/1/2006
44100		3	BIOPSY OF INTESTINE BY CAPSULE, TUBE, PERORAL (ONE OR MORE SPECIMENS)	99.80	99.80	7/1/2006
44110		3	EXCISION OF ONE OR MORE LESIONS OF SMALL OR LARGE INTESTINE NOT REQUIRING	633.10	633.10	7/1/2006
44111		3	EXCISION BOWEL LESIONS	759.07	759.07	7/1/2006
44120		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE; SINGLE RESECTION AND ANASTOMOSIS	896.87	896.87	7/1/2006
44121		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE; EACH ADDITIONAL RESECTION AND	223.56	223.56	7/1/2006
44125		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE; WITH ENTEROSTOMY	923.23	923.23	7/1/2006
44126		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE FOR CONGENITAL ATRESIA, SINGLE	1,852.81	1,852.81	7/1/2006
44127		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE FOR CONGENITAL ATRESIA, SINGLE	2,128.45	2,128.45	7/1/2006
44128		3	ENTERECTOMY, RESECTION OF SMALL INTESTINE FOR CONGENITAL ATRESIA, SINGLE	224.58	224.58	7/1/2006
44130		3	ENTEROENTEROSTOMY, ANASTOMOSIS OF INTESTINE, WITH OR WITHOUT CUTANEOUS	770.16	770.16	7/1/2006
44139		3	MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED IN	111.91	111.91	7/1/2006
44140		3	PARTIAL REMOVAL OF COLON	1,104.23	1,104.23	7/1/2006
44141		3	COLECTOMY PARTIAL WITH CECOSTOMY COLOSTOMY	1,092.94	1,092.94	7/1/2006
44143		3	COLECTOMY PARTIAL WITH END COLOSTOMY CLOSURE DISTA	1,250.26	1,250.26	7/1/2006
44144		3	COLECTOMY PARTIAL W/RESEC COLOS ILEOS MUCOFISTULA	1,157.92	1,157.92	7/1/2006
44145		3	PARTIAL REMOVAL OF COLON	1,384.04	1,384.04	7/1/2006
44146		3	COLECTOMY PARTIAL W/COLOPROCTOSTOMY COLOSTOMY	1,495.36	1,495.36	7/1/2006
44147		3	COLECTOMY PARTIAL ABD AND TRANSANAL APPROACH	1,091.43	1,091.43	7/1/2006
44150		3	REMOVAL OF COLON	1,329.76	1,329.76	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
44151		3	COLECTOMY TOTAL WITH CONTINENT ILEOSTOMY	1,491.33	1,491.33	7/1/2006
44152		3	COLECTOMY W/ ILEOSTOMY MUCOSECTOMY ANASTOMOSIS	1,466.27	1,466.27	7/1/2006
44153		3	COLECTOMY TOTAL	1,658.38	1,658.38	7/1/2006
44155		3	REMOVAL OF COLON	1,518.79	1,518.79	7/1/2006
44156		3	COLECTOMY TOTAL ABD W/ PROCTECTOMY W/ CONTINENT	1,696.66	1,696.66	7/1/2006
44160		3	COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH ILEOCOLOSTOMY	980.70	980.70	7/1/2006
44180		3	LAPAROSCOPY, SURGICAL, ENTEROLYSIS (FREEING OF INTESTINAL ADHESION) (SEPARAT	768.80	768.80	7/1/2006
44186		3	LAPAROSCOPY, SURGICAL; JEJUNOSTOMY (EG, FOR DECOMPRESSION OR FEEDING)	540.00	540.00	7/1/2006
44187		3	LAPAROSCOPY, SURGICAL; ILEOSTOMY OR JEJUNOSTOMY, NON-TUBE	893.04	893.04	7/1/2006
44188		3	LAPAROSCOPY, SURGICAL, COLOSTOMY OR SKIN LEVEL CECOSTOMY	979.18	979.18	7/1/2006
44202		3	LAPAROSCOPY, SURGICAL; ENTERECTOMY, RESECTION OF SMALL INTESTINE, SINGLE	1,154.22	1,154.22	7/1/2006
44203		3	LAPAROSCOPY, SURGICAL; EACH ADDITIONAL SMALL INTESTINE RESECTION AND	222.67	222.67	7/1/2006
44204		3	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS	1,303.50	1,303.50	7/1/2006
44205		3	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH REMOVAL OF TERMINAL ILEUM WITH	1,156.09	1,156.09	7/1/2006
44206		3	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH END COLOSTOMY AND CLOSURE OF	1,423.75	1,423.75	7/1/2006
44207		3	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH	1,544.21	1,544.21	7/1/2006
44208		3	LAPAROSCOPY, SURGICAL; COLECTOMY, PARTIAL, WITH ANASTOMOSIS, WITH	1,675.68	1,675.68	7/1/2006
44210		3	LAPAROSCOPY, SURGICAL; COLECTOMY, TOTAL, ABDOMINAL, WITHOUT PROCTECTOMY, WITH	1,479.36	1,479.36	7/1/2006
44211		3	LAPAROSCOPY, SURGICAL; COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY, WITH	1,841.38	1,841.38	7/1/2006
44212		3	LAPAROSCOPY, SURGICAL; COLECTOMY, TOTAL, ABDOMINAL, WITH PROCTECTOMY, WITH	1,708.19	1,708.19	7/1/2006
44213		3	LAPAROSCOPY, SURGICAL, MOBILIZATION (TAKE-DOWN) OF SPLENIC FLEXURE PERFORMED	176.56	176.56	7/1/2006
44227		3	LAPAROSCOPY, SURGICAL, CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE, WIT	1,384.47	1,384.47	7/1/2006
44300		3	SURGICAL OPENING OF BOWEL	653.71	653.71	7/1/2006
44310		3	ILEOSTOMY	841.25	841.25	7/1/2006
44312		3	REPAIR SMALL BOWEL OPENING	442.07	442.07	7/1/2006
44314		3	REPAIR SMALL BOWEL OPENING	798.83	798.83	7/1/2006
44316		3	CONTINENT ILEOSTOMY	1,096.35	1,096.35	7/1/2006
44320		3	COLOSTOMY OR SKIN LEVEL CECOSTOMY	939.90	939.90	7/1/2006
44322		3	COLOSTOMY OR SKIN LEVEL CECOSTOMY; WITH MULTIPLE BIOPSIES (EG, FOR CONGENITAL	750.60	750.60	7/1/2006
44340		3	REPAIR LARGE BOWEL OPENING	441.82	441.82	7/1/2006
44345		3	REPAIR LARGE BOWEL OPENING	828.51	828.51	7/1/2006
44346		3	REVISION OF COLOSTOMY W/ REPAIR PARACOLOSTOMY HERN	904.53	904.53	7/1/2006
44360		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	134.06	134.06	7/1/2006
44361		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	147.91	147.91	7/1/2006
44363		3	SM INTEST ENDOSCOPY ENTEROSCOPY W/REMOV FOREIGN BO	177.58	177.58	7/1/2006
44364		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	189.86	189.86	7/1/2006
44365		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION	169.75	169.75	7/1/2006
44366		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	223.40	223.40	7/1/2006
44369		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	227.59	227.59	7/1/2006
44370		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM, NC	246.56	246.56	7/1/2006
44372		3	SMALL INTEST, ENDO, ENTERO, PLACEMENT J TUBE	224.09	224.09	7/1/2006
44373		3	SMALL INT. ENDOSCOPY CONVERSION OF GTUBE TO JTUBE	178.90	178.90	7/1/2006
44376		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION	265.93	265.93	7/1/2006
44377		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION	278.83	278.83	7/1/2006
44378		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM,	357.75	357.75	7/1/2006
44379		3	SMALL INTESTINAL ENDOSCOPY, ENTEROSCOPY BEYOND SECOND PORTION OF DUODENUM,	379.58	379.58	7/1/2006
44380		3	ILEOSCOPY, THROUGH STOMA; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S)	57.86	57.86	7/1/2006
44382		3	ILEOSCOPY, THROUGH STOMA; WITH BIOPSY, SINGLE OR MULTIPLE	69.36	69.36	7/1/2006
44383		3	ILEOSCOPY, THROUGH STOMA; WITH TRANSENDOSCOPIC STENT PLACEMENT (INCLUDES	152.75	152.75	7/1/2006
44385		3	ENDOSCOPIC EVALUATION OF SMALL INTESTINAL (ABDOMINAL OR PELVIC) POUCH;	180.27	93.82	7/1/2006
44386		3	ENDOSCOPIC EVALUATION OF SMALL INTESTINAL (ABDOMINAL OR PELVIC) POUCH;	301.53	110.01	7/1/2006
44388		3	COLONOSCOPY THROUGH STOMA; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF	276.11	145.61	7/1/2006
44389		3	COLONOSCOPY THROUGH STOMA; WITH BIOPSY, SINGLE OR MULTIPLE	338.84	160.97	7/1/2006
44390		3	FIBEROPTIC COLONOSCOPY W REMOVAL FOREIGN BODY	381.07	194.26	7/1/2006
44391		3	COLONOSCOPY THROUGH STOMA; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR	452.83	218.98	7/1/2006
44392		3	COLONOSCOPY THROUGH STOMA; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER	363.61	194.36	7/1/2006
44393		3	COLONOSCOPY THROUGH STOMA; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER	412.78	245.51	7/1/2006
44394		3	COLONOSCOPY THROUGH STOMA;	427.24	224.86	7/1/2006
44397		3	COLONOSCOPY THROUGH STOMA; WITH TRANSENDOSCOPIC STENT PLACEMENT (INCLUDES	237.81	237.81	7/1/2006
44500		3	INTRODUCTION OF LONG GASTROINTESTINAL TUBE (EG, MILLER-ABBOTT)	23.63	23.63	7/1/2006
44602		3	SUTURE OF SMALL INTESTINE (ENTERORRHAPHY) FOR PERFORATED ULCER,	836.44	836.44	7/1/2006
44603		3	SUTURE OF SMALL INTESTINE (ENTERORRHAPHY) FOR PERFORATED ULCER,	967.68	967.68	7/1/2006
44604		3	SUTURE OF LARGE INTESTINE (COLORRHAPHY) FOR PERFORATED ULCER,	838.21	838.21	7/1/2006
44605		3	REPAIR BOWEL LESION	1,038.45	1,038.45	7/1/2006
44615		3	INTESTINAL STRICTUROPLASTY (ENTEROTOMY AND ENTERORRHAPHY) WITH	841.24	841.24	7/1/2006
44620		3	REPAIR BOWEL OPENING	650.18	650.18	7/1/2006
44625		3	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND	793.08	793.08	7/1/2006
44626		3	CLOSURE OF ENTEROSTOMY, LARGE OR SMALL INTESTINE; WITH RESECTION AND COLORECTAL	1,312.48	1,312.48	7/1/2006
44640		3	REPAIR BOWEL-SKIN FISTULA	1,126.45	1,126.45	7/1/2006
44650		3	REPAIR BOWEL FISTULA	1,172.66	1,172.66	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
44660		3	REPAIR BOWEL-BLADDER FISTULA	1,093.92	1,093.92	7/1/2006
44661		3	CLOSURE OF ENTEROVESICAL FISTULA; WITH INTESTINE AND/OR BLADDER RESECTION	1,273.61	1,273.61	7/1/2006
44680		3	SURGICAL FOLDING INTESTINE	811.74	811.74	7/1/2006
44700		3	EXCLUSION OF SMALL INTESTINE FROM PELVIS BY MESH OR OTHER PROSTHESIS, OR NATIVE	842.55	842.55	7/1/2006
44701		3	INTRAOPERATIVE COLONIC LAVAGE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY	155.24	155.24	7/1/2006
44800		3	EXCISION BOWEL POUCH	615.48	615.48	7/1/2006
44820		3	EXCISION MESENTERY LESION	652.30	652.30	7/1/2006
44850		3	REPAIR OF MESENTERY	583.92	583.92	7/1/2006
44900		3	INCISION AND DRAINAGE OF APPENDICEAL ABSCESS; OPEN	550.26	550.26	7/1/2006
44901		3	INCISION AND DRAINAGE OF APPENDICEAL ABSCESS; PERCUTANEOUS	1,052.83	163.16	7/1/2006
44950		3	APPENDECTOMY	532.94	532.94	7/1/2006
44955		3	APPENDECTOMY; WHEN DONE FOR INDICATED PURPOSE AT TIME OF OTHER MAJOR PROCEDUR	77.45	77.45	7/1/2006
44960		3	APPENDECTOMY FOR RUPT APPEN W/ABSCESS OR GENERALIZ	658.15	658.15	7/1/2006
44970		3	LAPAROSCOPY, SURGICAL, APPENDECTOMY	474.60	474.60	7/1/2006
45000		3	TRANSRECTAL DRAINAGE OF PELVIC ABSCESS	272.70	272.70	7/1/2006
45005		3	DRAINAGE OF RECTAL ABSCESS	211.88	129.74	7/1/2006
45020		3	DRAINAGE OF RECTAL ABSCESS	290.89	290.89	7/1/2006
45100		3	BIOPSY OF RECTUM	220.40	220.40	7/1/2006
45108		3	ANORECTAL MYOMECTOMY	276.62	276.62	7/1/2006
45110		3	PROCTECTOMY; COMPLETE, COMBINED ABDOMINOPERINEAL, WITH COLOSTOMY	1,495.53	1,495.53	7/1/2006
45111		3	PROCTECTOMY; PARTIAL RESECTION OF RECTUM, TRANSABDOMINAL APPROACH	877.89	877.89	7/1/2006
45112		3	PROCTECTOMY, COMBINED ABDOMINOPERINEAL, PULL-THROUGH PROCEDURE (EG, COLO-ANAL	1,567.04	1,567.04	7/1/2006
45113		3	PROCTECTOMY, PARTIAL, WITH RECTAL MUCOSECTOMY, ILEOANAL	1,596.09	1,596.09	7/1/2006
45114		3	PROCTECTOMY, PARTIAL, WITH ANASTOMOSIS; ABDOMINAL AND TRANSSACRAL APPROACH	1,420.38	1,420.38	7/1/2006
45116		3	PARTIAL REMOVAL OF RECTUM	1,282.51	1,282.51	7/1/2006
45119		3	PROCTECTOMY, COMBINED ABDOMINOPERINEAL PULL-THROUGH PROCEDURE (EG, COLO-ANAL	1,599.40	1,599.40	7/1/2006
45120		3	PROCTECTOMY, COMPLETE (FOR CONGENITAL MEGACOLON), ABDOMINAL AND PERINEAL	1,287.01	1,287.01	7/1/2006
45121		3	PROCTECTOMY, COMPLETE (FOR CONGENITAL MEGACOLON), ABDOMINAL AND PERINEAL	1,415.38	1,415.38	7/1/2006
45123		3	PROCTECTOMY, PARTIAL, WITHOUT ANASTOMOSIS, PERINEAL APPROACH	870.70	870.70	7/1/2006
45126		3	PELVIC EXENTERATION FOR COLORECTAL MALIGNANCY, WITH PROCTECTOMY (WITH OR	2,360.84	2,360.84	7/1/2006
45130		3	EXCISION OF RECTAL PROLAPSE	856.84	856.84	7/1/2006
45135		3	EXCISION OF RECTAL PROLAPSE	1,026.42	1,026.42	7/1/2006
45136		3	EXCISION OF ILEOANAL RESERVOIR WITH ILEOSTOMY	1,460.49	1,460.49	7/1/2006
45150		3	EXCISION RECTAL STRICTURE	315.94	315.94	7/1/2006
45160		3	EXCISION OF RECTAL LESION	809.92	809.92	7/1/2006
45170		3	EXCISION RECTAL TUMOR SIMPLE TRANSANAL APPROACH	617.95	617.95	7/1/2006
45190		3	DESTRUCTION OF RECTAL TUMOR (EG, ELECTRODESSICATION, ELECTROSURGERY, LASER	529.28	529.28	7/1/2006
45300		3	PROCTOSIGMOIDOSCOPY, RIGID; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF	65.28	23.88	7/1/2006
45303		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH DILATION (EG, BALLOON, GUIDE WIRE, BOUGIE)	637.38	27.92	7/1/2006
45305		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH BIOPSY, SINGLE OR MULTIPLE	126.34	55.46	7/1/2006
45307		3	PROCTOSIGM W/REMOVAL OF FOREIGN BODY	137.07	52.28	7/1/2006
45308		3	PROCTOSIGMOIDOSCOPY, RIGID;	98.20	46.53	7/1/2006
45309		3	PROCTOSIGMOIDOSCOPY, RIGID;	170.84	105.26	7/1/2006
45315		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH REMOVAL OF MULTIPLE TUMORS, POLYPS, OR OTHER	148.92	74.73	7/1/2006
45317		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR	138.28	79.32	7/1/2006
45320		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH ABLATION OF TUMOR(S), POLYP(S), OR OTHER	157.29	84.09	7/1/2006
45321		3	PROCTOSIGMOIDOSCOPY FOR DECOMPRESSION OF VOLVULUS	63.67	63.67	7/1/2006
45327		3	PROCTOSIGMOIDOSCOPY, RIGID; WITH TRANSENDOSCOPIC STENT PLACEMENT (INCLUDES	85.95	85.95	7/1/2006
45330		3	SIGMOIDOSCOPY, FLEXIBLE; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S)	111.92	52.97	7/1/2006
45331		3	SIGMOIDOSCOPY, FLEXIBLE; WITH BIOPSY, SINGLE OR MULTIPLE	145.49	63.02	7/1/2006
45332		3	SIGMOIDOSCOPY W/REMOVAL OF FOREIGN BODY	234.07	94.63	7/1/2006
45333		3	SIGMOIDOSCOPY, FLEXIBLE; WITH REMOVAL OF TUMOR(S), POLYP(S), OR OTHER LESION(S)	229.54	94.40	7/1/2006
45334		3	SIGMOIDOSCOPY, FLEXIBLE; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR	140.66	140.66	7/1/2006
45335		3	SIGMOIDOSCOPY, FLEXIBLE; WITH DIRECTED SUBMUCOSAL INJECTION(S), ANY SUBSTANCE	161.75	77.95	7/1/2006
45337		3	SIGMOIDOSCOPY, FLEXIBLE; WITH DECOMPRESSION OF VOLVULUS, ANY METHOD	122.93	122.93	7/1/2006
45338		3	SIGMOIDOSCOPY, FLEXIBLE;	261.85	121.75	7/1/2006
45339		3	SIGMOIDOSCOPY, FLEXIBLE;	233.97	161.44	7/1/2006
45340		3	SIGMOIDOSCOPY, FLEXIBLE; WITH DILATION BY BALLOON, 1 OR MORE STRICTURES	276.53	98.99	7/1/2006
45341		3	SIGMOIDOSCOPY, FLEXIBLE; WITH ENDOSCOPIC ULTRASOUND EXAMINATION	133.43	133.43	7/1/2006
45342		3	SIGMOIDOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC ULTRASOUND GUIDED INTRAMURAL OR	203.73	203.73	7/1/2006
45345		3	SIGMOIDOSCOPY, FLEXIBLE; WITH TRANSENDOSCOPIC STENT PLACEMENT (INCLUDES	148.85	148.85	7/1/2006
45355		3	COLONOSCOPY, RIGID OR FLEXIBLE, TRANSABDOMINAL VIA COLOTOMY, SINGLE OR MULTIPLE	180.37	180.37	7/1/2006
45378		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; DIAGNOSTIC, WITH OR WITHOUT	343.80	188.45	7/1/2006
45379		3	COLONOSCOPY FIBEROPTIC BEYOND SPLENIC FLEXURE W/RE	431.86	237.76	7/1/2006
45380		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH BIOPSY, SINGLE OR	406.37	225.17	7/1/2006
45381		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH DIRECTED SUBMUCOSAL	393.93	212.42	7/1/2006
45382		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH CONTROL OF BLEEDING	544.17	286.48	7/1/2006
45383		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH ABLATION OF TUMOR(S),	485.03	295.90	7/1/2006
45384		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE;	403.50	238.22	7/1/2006
45385		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH REMOVAL OF TUMOR(S),	459.51	268.06	7/1/2006

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45386		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH DILATION BY BALLOON, 1	585.56	232.80	7/1/2006
45387		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH TRANSENDOSCOPIC STENT	300.98	300.98	7/1/2006
45391		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH ENDOSCOPIC ULTRASOUND	258.51	258.51	7/1/2006
45392		3	COLONOSCOPY, FLEXIBLE, PROXIMAL TO SPLENIC FLEXURE; WITH TRANSENDOSCOPIC	327.61	327.61	7/1/2006
45395		3	LAPAROSCOPY, SURGICAL; PROCTECTOMY, COMPLETE, COMBINED ABDOMINOPERINEAL, WIT	1,635.60	1,635.60	7/1/2006
45397		3	LAPAROSCOPY, SURGICAL; PROCTECTOMY, COMBINED ABDOMINOPERINEAL PULL-THROUGH P	1,782.07	1,782.07	7/1/2006
45400		3	LAPAROSCOPY, SURGICAL; PROCTOPEXY (FOR PROLAPSE)	956.76	956.76	7/1/2006
45402		3	LAPAROSCOPY, SURGICAL; PROCTOPEXY (FOR PROLAPSE), WITH SIGMOID RESECTION	1,297.81	1,297.81	7/1/2006
45500		3	REPAIR OF RECTUM	396.48	396.48	7/1/2006
45505		3	REPAIR OF RECTUM	420.21	420.21	7/1/2006
45520		3	TREATMENT OF RECTAL PROLAPSE	75.27	33.21	7/1/2006
45540		3	FIXATION OF RECTAL PROLAPSE	853.00	853.00	7/1/2006
45541		3	PROCTOPEXY FOR PROLAPSE PERINEAL APPROACH	714.84	714.84	7/1/2006
45550		3	FIXATION OF RECTAL PROLAPSE	1,193.14	1,193.14	7/1/2006
45560		3	REPAIR RECTOCELE SEPARATE PROCEDURE	573.82	573.82	7/1/2006
45562		3	EXPLORATION, REPAIR, AND PRESACRAL DRAINAGE FOR RECTAL INJURY;	827.02	827.02	7/1/2006
45563		3	EXPLORATION, REPAIR, AND PRESACRAL DRAINAGE FOR RECTAL INJURY;	1,263.60	1,263.60	7/1/2006
45800		3	REPAIR RECTOBLADDER FISTULA	927.74	927.74	7/1/2006
45805		3	REPAIR RECTOBLADDER FISTULA	1,109.26	1,109.26	7/1/2006
45820		3	REPAIR RECTOURETHRAL FISTULA	953.71	953.71	7/1/2006
45825		3	REPAIR RECTOURETHRAL FISTULA	1,143.13	1,143.13	7/1/2006
45900		3	REDUCTION OF RECTAL PROLAPSE	150.56	150.56	7/1/2006
45905		3	DILATION OF ANAL SPHINCTER	136.39	136.39	7/1/2006
45910		3	DILATION RECTAL NARROWING	162.70	162.70	7/1/2006
45915		3	REMOVAL RECTAL OBSTRUCTION	263.38	189.52	7/1/2006
45990		3	ANORECTAL EXAM, SURGICAL, REQUIRING ANESTHESIA (GENERAL, SPINAL, OR EPIDURAL	94.89	94.89	7/1/2006
46020		3	PLACEMENT OF SETON	189.06	173.16	7/1/2006
46030		3	REMOVAL OF ANAL SETON, OTHER MARKER	92.22	70.92	7/1/2006
46040		3	INCISION OF RECTAL ABSCESS	374.87	311.26	7/1/2006
46045		3	DRAINAGE TRANSANAL ABSCESS UNDER ANESTHESIA	263.63	263.63	7/1/2006
46050		3	INCISION ANAL ABSCESS	130.43	73.81	7/1/2006
46060		3	INCISION AND DRAINAGE OF ISCHIORECTAL OR INTRAMURAL ABSCESS, WITH FISTULECTOMY	327.58	327.58	7/1/2006
46070		3	INCISION ANAL SEPTUM	166.58	166.58	7/1/2006
46080		3	INCISION ANAL SPHINCTER	175.06	133.99	7/1/2006
46083		3	INCISION OF THROMBOSED HEMORRHOID, EXTERNAL	137.66	84.33	7/1/2006
46200		3	REMOVAL ANAL FISSURE	259.61	226.77	7/1/2006
46210		3	CRYPTECTOMY;	272.86	190.38	7/1/2006
46211		3	REMOVAL ANAL CRYPTS	343.23	279.97	7/1/2006
46220		3	PAPILLECTOMY OR EXCISION OF SINGLE TAG, ANUS (SEPARATE PROCEDURE)	136.26	91.55	7/1/2006
46221		3	HEMORRHOIDECTOMY BY SIMPLE LIGATURE	166.43	136.46	7/1/2006
46230		3	EXCISION OF EXTERNAL HEMORRHOID TAGS AND/OR MULTIPLE PAPILLAE	201.45	142.17	7/1/2006
46250		3	HEMORRHOIDECTOMY	326.96	237.44	7/1/2006
46255		3	HEMORRHOIDECTOMY	372.31	272.40	7/1/2006
46257		3	HEMORRHOIDECTOMY WITH FISSURECTOMY	304.15	304.15	7/1/2006
46258		3	HEMORRHOIDECTOMY WITH FISTULECTOMY	330.24	330.24	7/1/2006
46260		3	HEMORRHOIDECTOMY	352.15	352.15	7/1/2006
46261		3	HEMORRHOIDECTOMY INT AND EXTERNAL COMPLEX OR EXTEN	392.31	392.31	7/1/2006
46262		3	HEMORRHOIDECTOMY INT AND EXT COMPLX OR EXTEN W/FIS	412.66	412.66	7/1/2006
46270		3	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); SUBCUTANEOUS	309.78	238.24	7/1/2006
46275		3	REMOVAL ANAL FISTULA	329.48	274.50	7/1/2006
46280		3	SURGICAL TREATMENT OF ANAL FISTULA (FISTULECTOMY/FISTULOTOMY); COMPLEX OR	338.12	338.12	7/1/2006
46285		3	REMOVAL ANAL FISTULA	281.90	248.05	7/1/2006
46288		3	CLOSURE OF ANAL FISTULA WITH RECTAL ADVANCEMENT FLAP	396.43	396.43	7/1/2006
46320		3	REMOVAL HEMORRHOID CLOT	132.66	90.27	7/1/2006
46500		3	INJECTION TREATMENT OF ANUS	131.87	99.74	7/1/2006
46505		3	CHEMODENERVATION OF INTERNAL ANAL SPHINCTER	207.22	171.44	7/1/2006
46600		3	ANOSCOPY; DIAGNOSTIC, WITH OR WITHOUT COLLECTION OF SPECIMEN(S) BY BRUSHING OR	70.82	30.42	7/1/2006
46604		3	ANOSCOPY; WITH DILATION (EG, BALLOON, GUIDE WIRE, BOUGIE)	353.00	70.46	7/1/2006
46606		3	ANOSCOPY; WITH BIOPSY, SINGLE OR MULTIPLE	156.77	45.48	7/1/2006
46608		3	ANOSCOPY;	204.12	79.58	7/1/2006
46610		3	ANOSCOPY; WITH REMOVAL OF SINGLE TUMOR, POLYP, OR OTHER LESION BY HOT BIOPSY	184.79	71.18	7/1/2006
46611		3	ANOSCOPY;	180.17	95.38	7/1/2006
46612		3	ANOSCOPY; WITH REMOVAL OF MULTIPLE TUMORS, POLYPS, OR OTHER LESIONS BY HOT	262.93	123.10	7/1/2006
46614		3	ANOSCOPY; WITH CONTROL OF BLEEDING (EG, INJECTION, BIPOLAR CAUTERY, UNIPOLAR	154.15	104.80	7/1/2006
46615		3	ANOSCOPY;	186.45	139.49	7/1/2006
46700		3	REPAIR ANAL STRICTURE	489.45	489.45	7/1/2006
46705		3	REPAIR OF ANAL STRICTURE	391.25	391.25	7/1/2006
46706		3	REPAIR OF ANAL FISTULA WITH FIBRIN GLUE	133.90	133.90	7/1/2006
46710		3	REPAIR OF ILEOANAL POUCH FISTULA/SINUS (EG, PERINEAL OR VAGINAL), POUCH ADVA	865.20	865.20	7/1/2006
46712		3	REPAIR OF ILEOANAL POUCH FISTULA/SINUS (EG, PERINEAL OR VAGINAL), POUCH ADVA	1,807.91	1,807.91	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
46715		3	REPAIR OF LOW IMPERFORATE ANUS; WITH ANOPERINEAL FISTULA ("CUT-BACK"	398.64	398.64	7/1/2006
46716		3	REPAIR OF LOW IMPERFORATE ANUS; WITH TRANSPOSITION OF ANOPERINEAL OR	842.89	842.89	7/1/2006
46730		3	REPAIR OF HIGH IMPERFORATE ANUS WITHOUT FISTULA; PERINEAL OR SACROPERINEAL	1,417.44	1,417.44	7/1/2006
46735		3	REPAIR OF HIGH IMPERFORATE ANUS WITHOUT FISTULA; COMBINED TRANSABDOMINAL AND	1,679.94	1,679.94	7/1/2006
46740		3	CONSTRUCTION OF ANUS	1,573.37	1,573.37	7/1/2006
46742		3	REPAIR OF HIGH IMPERFORATE ANUS WITH RECTOURETHRAL OR RECTOVAGINAL	1,937.92	1,937.92	7/1/2006
46744		3	REPAIR OF CLOACAL ANOMALY BY ANORECTOVAGINOPLASTY AND URETHROPLASTY,	2,740.15	2,740.15	7/1/2006
46746		3	REPAIR OF CLOACAL ANOMALY BY ANORECTOVAGINOPLASTY AND URETHROPLASTY,	3,104.81	3,104.81	7/1/2006
46748		3	REPAIR OF CLOACAL ANOMALY BY ANORECTOVAGINOPLASTY AND URETHROPLASTY,	3,170.55	3,170.55	7/1/2006
46750		3	REPAIR ANAL SPHINCTER	561.25	561.25	7/1/2006
46751		3	REPAIR ANAL SPHINCTER	516.90	516.90	7/1/2006
46753		3	RECONSTRUCTION OF ANUS	447.28	447.28	7/1/2006
46754		3	REMOVAL OF SUTURE FROM ANUS	202.82	138.90	7/1/2006
46760		3	REPAIR ANAL SPHINCTER	790.52	790.52	7/1/2006
46761		3	SPHINCTEROPLASTY, LEVATORMUSCLE IMBRICATION	729.86	729.86	7/1/2006
46762		3	SPHINCTEROPLASTY W/ ARTIFICIAL SPHINCTER	668.61	668.61	7/1/2006
46900		3	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA,	158.47	114.75	7/1/2006
46910		3	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA,	167.69	106.41	7/1/2006
46916		3	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA,	174.17	115.54	7/1/2006
46917		3	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA,	374.87	108.90	7/1/2006
46922		3	DESTRUCTION ANAL LESION, SIMPLE; SURGICAL EXCISION	180.68	107.44	7/1/2006
46924		3	DESTRUCTION OF LESION(S), ANUS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM	393.85	150.07	7/1/2006
46934		3	CRYOTHERAPY OF HEMORRHOIDS	301.64	231.39	7/1/2006
46935		3	CRYOTHERAPY OF HEMORRHOIDS	207.72	132.86	7/1/2006
46936		3	CRYOTHERAPY OF HEMORRHOIDS	301.96	223.13	7/1/2006
46937		3	CRYOSURGERY OF RECTAL TUMOR;	192.15	140.48	7/1/2006
46938		3	CRYOSURGERY OF RECTAL TUMOR;	313.27	282.13	7/1/2006
46940		3	CURETTAGE OR CAUTERY OF ANAL FISSURE, INCLUDING DILATION OF ANAL SPHINCTER	154.87	124.89	7/1/2006
46942		3	TREATMENT OF ANAL FISSURE	138.77	111.61	7/1/2006
46945		3	LIGATION OF INTERNAL HEMORRHOIDS;	178.93	152.77	7/1/2006
46946		3	LIGATION OF INTERNAL HEMORRHOIDS;	222.65	178.47	7/1/2006
46947		3	HEMORRHOIDOPEXY (EG, FOR PROLAPSING INTERNAL HEMORRHOIDS) BY STAPLING	294.59	294.59	7/1/2006
47000		3	BIOPSY OF LIVER, NEEDLE; PERCUTANEOUS	173.19	92.04	7/1/2006
47001		3	BIOPSY OF LIVER, NEEDLE; WHEN DONE FOR INDICATED PURPOSE AT TIME OF OTHER MAJOR	95.58	95.58	7/1/2006
47010		3	HEPATOTOMY; FOR OPEN DRAINAGE OF ABSCESS OR CYST, ONE OR TWO STAGES	895.72	895.72	7/1/2006
47011		3	HEPATOTOMY; FOR PERCUTANEOUS DRAINAGE OF ABSCESS OR CYST, ONE OR TWO STAGES	178.00	178.00	7/1/2006
47015		3	LAPAROTOMY, WITH ASPIRATION AND/OR INJECTION OF HEPATIC	833.63	833.63	7/1/2006
47100		3	BIOPSY OF LIVER, WEDGE	654.81	654.81	7/1/2006
47120		3	PARTIAL REMOVAL OF LIVER	1,885.10	1,885.10	7/1/2006
47122		3	RESECTION OF LIVER, TRISEGMENTECTOMY	2,859.54	2,859.54	7/1/2006
47125		3	PARTIAL REMOVAL OF LIVER	2,560.01	2,560.01	7/1/2006
47130		3	PARTIAL REMOVAL OF LIVER	2,771.64	2,771.64	7/1/2006
47135		3	LIVER ALLOTRANSPLANTATION; ORTHOTOPIC, PARTIAL OR WHOLE, FROM CADAVER OR LIVING	4,201.99	4,201.99	7/1/2006
47136		3	LIVER ALLOTRANSPLANTATION;	3,557.25	3,557.25	7/1/2006
47300		3	TREATMENT,LIVER LESION	826.88	826.88	7/1/2006
47350		3	MANAGEMENT OF LIVER HEMORRHAGE; SIMPLE SUTURE OF LIVER WOUND OR INJURY	1,056.03	1,056.03	7/1/2006
47360		3	MANAGEMENT OF LIVER HEMORRHAGE; COMPLEX SUTURE OF LIVER WOUND OR INJURY, WITH	1,429.33	1,429.33	7/1/2006
47361		3	MANAGEMENT OF LIVER HEMORRHAGE; EXPLORATION OF HEPATIC WOUND, EXTENSIVE	2,443.47	2,443.47	7/1/2006
47362		3	MANAGEMENT OF LIVER HEMORRHAGE; RE-EXPLORATION OF HEPATIC WOUND FOR REMOVAL C	1,010.46	1,010.46	7/1/2006
47370		3	LAPAROSCOPY, SURGICAL, ABLATION OF ONE OR MORE LIVER TUMOR(S); RADIOFREQUENCY	1,035.24	1,035.24	7/1/2006
47371		3	LAPAROSCOPY, SURGICAL, ABLATION OF ONE OR MORE LIVER TUMOR(S); CRYOSURGICAL	1,038.00	1,038.00	7/1/2006
47380		3	ABLATION, OPEN, OF ONE OR MORE LIVER TUMOR(S); RADIOFREQUENCY	1,202.41	1,202.41	7/1/2006
47381		3	ABLATION, OPEN, OF ONE OR MORE LIVER TUMOR(S); CRYOSURGICAL	1,220.45	1,220.45	7/1/2006
47382		3	ABLATION, ONE OR MORE LIVER TUMOR(S), PERCUTANEOUS, RADIOFREQUENCY	770.00	770.00	7/1/2006
47400		3	INCISION OF BILE DUCT	1,684.82	1,684.82	7/1/2006
47420		3	CHOLEDOCHOTOMY OR CHOLEDOCHOSTOMY WITH EXPLORATION, DRAINAGE, OR REMOVAL OF	1,065.73	1,065.73	7/1/2006
47425		3	INCISION OF BILE DUCT	1,065.13	1,065.13	7/1/2006
47460		3	TRANSDUODENAL SPHINCTEROTOMY OR SPHINCTEROPLASTY, WITH OR WITHOUT TRANSDUODE	975.20	975.20	7/1/2006
47480		3	INCISION OF GALLBLADDER	617.34	617.34	7/1/2006
47490		3	PERCUTANEOUS CHOLECYSTOSTOMY	454.67	454.67	7/1/2006
47500		3	INJECTION FOR LIVER X-RAYS	94.53	94.53	7/1/2006
47505		3	INJ PROC CHOLANGIOGRAPHY THR EXISTING CATH.	36.56	36.56	7/1/2006
47510		3	INTRODUCTION TRANSHEPATIC CATH OR STENT	458.41	458.41	7/1/2006
47511		3	INTRO TRANSHEPATIC STENT FOR BILIARY DRAINAGE	560.19	560.19	7/1/2006
47525		3	CHANGE PERCUTANEOUS BILIARY DRAINAGE CATHETER	708.20	300.13	7/1/2006
47530		3	REVISION AND/OR REINSERTION OF TRANSHEPATIC TUBE	1,340.97	342.00	7/1/2006
47550		3	BILIARY ENDOSCOPY, INTRAOPERATIVE (CHOLEDOCHOSCOPY) (LIST SEPARATELY IN	151.68	151.68	7/1/2006
47552		3	BILIARY ENDOSCOPY, PERCUTANEOUS VIA T-TUBE OR OTHER TRACT; DIAGNOSTIC, WITH OR	305.60	305.60	7/1/2006
47553		3	BILIARY ENDOSCOPY, PERCUTANEOUS VIA T-TUBE OR OTHER TRACT; WITH BIOPSY, SINGLE	305.35	305.35	7/1/2006
47554		3	BILIARY ENDOSCOPY, PERCUTANEOUS VIA T-TUBE OR OTHER TRACT; WITH REMOVAL OF	459.24	459.24	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
47555		3	BILIARY ENDOSCOPY, PERCUTANEOUS VIA T-TUBE OR OTHER TRACT; WITH DILATION OF	364.00	364.00	7/1/2006
47556		3	BILIARY ENDOSCOPY, PERCUTANEOUS VIA T-TUBE OR OTHER TRACT; WITH DILATION OF	411.75	411.75	7/1/2006
47560		3	LAPAROSCOPY, SURGICAL; WITH GUIDED TRANSHEPATIC CHOLANGIOGRAPHY, WITHOUT BIOPSY	245.98	245.98	7/1/2006
47561		3	LAPAROSCOPY, SURGICAL; WITH GUIDED TRANSHEPATIC CHOLANGIOGRAPHY WITH BIOPSY	264.49	264.49	7/1/2006
47562		3	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY	597.47	597.47	7/1/2006
47563		3	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH CHOLANGIOGRAPHY	641.27	641.27	7/1/2006
47564		3	LAPAROSCOPY, SURGICAL; CHOLECYSTECTOMY WITH EXPLORATION OF COMMON DUCT	752.27	752.27	7/1/2006
47570		3	LAPAROSCOPY, SURGICAL; CHOLECYSTOENTEROSTOMY	668.25	668.25	7/1/2006
47600		3	REMOVAL OF GALLBLADDER	732.79	732.79	7/1/2006
47605		3	REMOVAL OF GALLBLADDER	788.49	788.49	7/1/2006
47610		3	REMOVAL OF GALLBLADDER	996.62	996.62	7/1/2006
47612		3	CHOLECYSTECTOMY W/ CHOLEDOCHOENTEROSTOMY	993.30	993.30	7/1/2006
47620		3	REMOVAL OF GALLBLADDER	1,087.45	1,087.45	7/1/2006
47630		3	BILIARY DUCT STONE EXTRACTION, PERCUTANEOUS VIA T-TUBE TRACT,	504.57	504.57	7/1/2006
47700		3	EXPLOR FOR CONG ATRESIA BILE DUCTS WITH OR W/O LIV	854.62	854.62	7/1/2006
47701		3	PORTOENTEROSTOMY	1,465.26	1,465.26	7/1/2006
47711		3	EXCISION OF BILE DUCT TUMOR, WITH OR WITHOUT PRIMARY REPAIR OF BILE DUCT;	1,227.34	1,227.34	7/1/2006
47712		3	EXCISION OF BILE DUCT TUMOR, WITH OR WITHOUT PRIMARY REPAIR OF BILE DUCT;	1,589.04	1,589.04	7/1/2006
47715		3	EXCISION OF CHOLEDOCHAL CYST	1,012.47	1,012.47	7/1/2006
47716		3	ANASTOMOSIS, CHOLEDOCHAL CYST, W/O EXCISION	899.82	899.82	7/1/2006
47720		3	FUSION GALLBLADDER & BOWEL	868.22	868.22	7/1/2006
47721		3	CHOLECYSTOENTEROSTOMY W/GASTROENTEROSTOMY	1,029.17	1,029.17	7/1/2006
47740		3	FUSION GALLBLADDER & BOWEL	996.80	996.80	7/1/2006
47741		3	CHOLECYSTOENTEROSTOMY;	1,140.23	1,140.23	7/1/2006
47760		3	ANASTOMOSIS, OF EXTRAHEPATIC BILIARY DUCTS AND GASTROINTESTINAL TRACT	1,367.51	1,367.51	7/1/2006
47765		3	ANASTOMOSIS, OF INTRAHEPATIC DUCTS AND GASTROINTESTINAL TRACT	1,327.96	1,327.96	7/1/2006
47780		3	FUSION BILE DUCTS AND BOWEL	1,404.32	1,404.32	7/1/2006
47785		3	ANASTOMOSIS, ROUX-EN-Y, OF INTRAHEPATIC BILIARY DUCTS AND	1,641.97	1,641.97	7/1/2006
47800		3	RECONSTRUCTION OF BILE DUCTS	1,240.80	1,240.80	7/1/2006
47801		3	PLACEMENT OF CHOLEDOCHAL STENT	842.45	842.45	7/1/2006
47802		3	U-TUBE HEPATICOENTEROSTOMY	1,161.07	1,161.07	7/1/2006
47900		3	SUTURE OF EXTRAHEPATIC BILIARY DUCT FOR PRE-EXISTING INJURY	1,070.33	1,070.33	7/1/2006
48000		3	PLACEMENT OF DRAINS, PERIPANCREATIC, FOR ACUTE PANCREATITIS;	1,469.45	1,469.45	7/1/2006
48001		3	PLACEMENT OF DRAINS, PERIPANCREATIC, FOR ACUTE PANCREATITIS;	1,842.06	1,842.06	7/1/2006
48005		3	RESECTION OR DEBRIDEMENT OF PANCREAS AND PERIPANCREATIC TISSUE	2,192.47	2,192.47	7/1/2006
48020		3	REMOVAL OF PANCREATIC STONE	855.49	855.49	7/1/2006
48100		3	BIOPSY OF PANCREAS, OPEN (EG, FINE NEEDLE ASPIRATION, NEEDLE CORE BIOPSY, WEDGE	661.36	661.36	7/1/2006
48102		3	BIOPSY PANCREAS NEEDLE PERCUTANEOUS	438.57	239.17	7/1/2006
48120		3	REMOVAL PANCREAS LESION	845.18	845.18	7/1/2006
48140		3	PANCREATECTOMY, DISTAL SUBTOTAL, WITH OR WITHOUT SPLENECTOMY; WITHOUT	1,210.29	1,210.29	7/1/2006
48145		3	PARTIAL REMOVAL OF PANCREAS	1,262.31	1,262.31	7/1/2006
48146		3	PANCREATECTOMY, DISTAL, NEAR-TOTAL WITH PRESERVATION OF DUODENUM	1,426.91	1,426.91	7/1/2006
48148		3	EXCISION OF AMPULLA OF VATER	927.12	927.12	7/1/2006
48150		3	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH TOTAL DUODENECTOMY, PARTIAL GASTRECTON	2,517.89	2,517.89	7/1/2006
48152		3	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH TOTAL DUODENECTOMY,	2,309.60	2,309.60	7/1/2006
48153		3	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH NEAR-TOTAL DUODENECTOMY,	2,515.11	2,515.11	7/1/2006
48154		3	PANCREATECTOMY, PROXIMAL SUBTOTAL WITH NEAR-TOTAL DUODENECTOMY,	2,324.11	2,324.11	7/1/2006
48155		3	REMOVAL OF PANCREAS	1,347.37	1,347.37	7/1/2006
48180		3	PANCREATICOJEJUNOSTOMY, SIDE-TO-SIDE ANASTOMOSIS (PUESTOW-TYPE OPERATION)	1,300.43	1,300.43	7/1/2006
48400		3	INJECTION PROCEDURE FOR INTRAOPERATIVE PANCREATOGRAPHY (LIST SEPARATELY IN	94.86	94.86	7/1/2006
48500		3	MARSUPIALIZATION OF PANCREATIC CYST	839.06	839.06	7/1/2006
48510		3	EXTERNAL DRAINAGE, PSEUDOCYST OF PANCREAS; OPEN	802.93	802.93	7/1/2006
48511		3	EXTERNAL DRAINAGE, PSEUDOCYST OF PANCREAS; PERCUTANEOUS	843.10	192.57	7/1/2006
48520		3	FUSION PANCREAS CYST - BOWEL	829.90	829.90	7/1/2006
48540		3	FUSION PANCREAS CYST - BOWEL	1,036.94	1,036.94	7/1/2006
48545		3	PANCREATORRHAPHY FOR INJURY	972.32	972.32	7/1/2006
48547		3	DUODENAL EXCLUSION WITH GASTROJEJUNOSTOMY FOR PANCREATIC INJURY	1,353.91	1,353.91	7/1/2006
49000		3	EXPLORATION OF ABDOMEN	632.73	632.73	7/1/2006
49002		3	REEXPLORATION OF ABDOMEN	574.67	574.67	7/1/2006
49010		3	EXPLORATION BEHIND ABDOMEN	671.94	671.94	7/1/2006
49020		3	DRAINAGE OF PERITONEAL ABSCESS OR LOCALIZED PERITONITIS, EXCLUSIVE OF	1,223.60	1,223.60	7/1/2006
49021		3	DRAINAGE OF PERITONEAL ABSCESS OR LOCALIZED PERITONITIS, EXCLUSIVE OF	825.15	162.70	7/1/2006
49040		3	DRAINAGE OF SUBDIAPHRAGMATIC OR SUBPHRENIC ABSCESS; OPEN	737.52	737.52	7/1/2006
49041		3	DRAINAGE OF SUBDIAPHRAGMATIC OR SUBPHRENIC ABSCESS; PERCUTANEOUS	797.39	192.57	7/1/2006
49060		3	DRAINAGE OF RETROPERITONEAL ABSCESS; OPEN	856.80	856.80	7/1/2006
49061		3	DRAINAGE OF RETROPERITONEAL ABSCESS; PERCUTANEOUS	789.77	178.00	7/1/2006
49062		3	DRAINAGE OF EXTRAPERITONEAL LYMPHOCELE TO PERITONEAL CAVITY, OPEN	620.48	620.48	7/1/2006
49080		3	REMOVAL OF ABDOMINAL FLUID	182.61	65.68	7/1/2006
49081		3	PERITONEOCENTESIS, ABDOMINAL PARACENTESIS, OR PERITONEAL LAVAGE	133.22	61.68	7/1/2006
49085		3	REMOVE FOREIGN BODY,ABDOMEN	654.90	654.90	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
49180		3	NEEDLE BIOPSY RETROPERITONEAL MASS PERCUTANEOUS	167.60	83.47	7/1/2006
49200		3	EXCISION INTRA-ABD RETROPERITONEAL TUMORS/CYSTS OR	563.14	563.14	7/1/2006
49201		3	EXC INTRA ABD OR RETROPERITONEAL TUMORS OR CYSTS E	808.13	808.13	7/1/2006
49215		3	EXCISION OF PRESACRAL OR SACROCCYGEAL TUMOR	1,769.55	1,769.55	7/1/2006
49220		3	STAGING LAPAROTOMY FOR HODGKINS DISEASE OR LYMPHOMA (INCLUDES SPLENECTOMY,	798.25	798.25	7/1/2006
49250		3	EXCISION OF UMBILICUS	466.58	466.58	7/1/2006
49255		3	REMOVAL OF OMENTUM	619.10	619.10	7/1/2006
49320		3	LAPAROSCOPY, ABDOMEN, PERITONEUM, AND OMENTUM, DIAGNOSTIC, WITH OR WITHOUT	285.36	285.36	7/1/2006
49321		3	LAPAROSCOPY, SURGICAL; WITH BIOPSY (SINGLE OR MULTIPLE)	297.87	297.87	7/1/2006
49322		3	LAPAROSCOPY, SURGICAL, ABDOMEN, PERITONEUM, AND OMENTUM; WITH ASPIRATION OF	320.58	320.58	7/1/2006
49323		3	LAPAROSCOPY, SURGICAL, ABDOMEN, PERITONEUM, AND OMENTUM; WITH DRAINAGE OF	517.65	517.65	7/1/2006
49400		3	INJECTION OF AIR OR CONTRAST INTO PERITONEAL CAVITY (SEPARATE PROCEDURE)	173.16	91.68	7/1/2006
49419		3	INSERTION OF INTRAPERITONEAL CANNULA OR CATHETER, WITH SUBCUTANEOUS RESERVOIR,	375.97	375.97	7/1/2006
49420		3	INSERTION INTRAPERITONEAL CANNULA OR CATH FOR DRAI	120.87	120.87	7/1/2006
49421		3	INSERTION INTRAPERITONEAL CANNULA PERMANENT	320.13	320.13	7/1/2006
49422		3	REMOVAL OF PERMANENT INTRAPERITONEAL CANNULA OR CATHETER	339.10	339.10	7/1/2006
49423		3	EXCHANGE OF PREVIOUSLY PLACED ABSCESS OR CYST DRAINAGE CATHETER UNDER	521.99	71.86	7/1/2006
49424		3	CONTRAST INJECTION FOR ASSESSMENT OF ABSCESS OR CYST VIA PREVIOUSLY PLACED	151.50	37.89	7/1/2006
49425		3	INSERTION OF PERITONEAL-VENOUS SHUNT	629.35	629.35	7/1/2006
49426		3	REVISION OF PERITONEAL-VENOUS SHUNT	533.67	533.67	7/1/2006
49427		3	INJ PROC. FOR EVAL PREVIOUSLY PLACED SHUNT.	43.59	43.59	7/1/2006
49428		3	LIGATION OF PERITONEAL-VENOUS SHUNT	366.42	366.42	7/1/2006
49429		3	REMOVAL OF PERITONEAL-VENOUS SHUNT	403.00	403.00	7/1/2006
49491		3	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (LESS THAN 37 WEEKS GESTATION	599.85	599.85	7/1/2006
49492		3	REPAIR, INITIAL INGUINAL HERNIA, PRETERM INFANT (LESS THAN 37 WEEKS GESTATION	748.56	748.56	7/1/2006
49495		3	REPAIR, INITIAL INGUINAL HERNIA, FULL TERM INFANT UNDER AGE 6 MONTHS, OR	326.76	326.76	7/1/2006
49496		3	REPAIR INITIAL INGUINAL HERNIA, UNDER AGE 6 MONTHS, WITH OR	482.52	482.52	7/1/2006
49500		3	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO UNDER 5 YEARS, WITH OR WITHOUT	316.64	316.64	7/1/2006
49501		3	REPAIR INITIAL INGUINAL HERNIA, AGE 6 MONTHS TO UNDER 5 YEARS,	484.10	484.10	7/1/2006
49505		3	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OVER; REDUCIBLE	421.08	421.08	7/1/2006
49507		3	REPAIR INITIAL INGUINAL HERNIA, AGE 5 YEARS OR OVER;	521.17	521.17	7/1/2006
49520		3	REPAIR RECURRENT INGUINAL HERNIA, ANY AGE; REDUCIBLE	522.90	522.90	7/1/2006
49521		3	REPAIR RECURRENT INGUINAL HERNIA, ANY AGE;	640.35	640.35	7/1/2006
49525		3	REPAIR INGUINAL HERNIA, SLIDING, ANY AGE	469.30	469.30	7/1/2006
49540		3	REPAIR LUMBAR HERNIA	562.25	562.25	7/1/2006
49550		3	REPAIR INITIAL FEMORAL HERNIA, ANY AGE, REDUCIBLE;	473.41	473.41	7/1/2006
49553		3	REPAIR INITIAL FEMORAL HERNIA, ANY AGE;	514.48	514.48	7/1/2006
49555		3	REPAIR RECURRENT FEMORAL HERNIA; REDUCIBLE	493.80	493.80	7/1/2006
49557		3	REPAIR RECURRENT FEMORAL HERNIA;	599.86	599.86	7/1/2006
49560		3	REPAIR INITIAL INCISIONAL OR VENTRAL HERNIA; REDUCIBLE	621.43	621.43	7/1/2006
49561		3	REPAIR INITIAL INCISIONAL HERNIA;	756.42	756.42	7/1/2006
49565		3	REPAIR RECURRENT INCISIONAL OR VENTRAL HERNIA; REDUCIBLE	624.08	624.08	7/1/2006
49566		3	REPAIR RECURRENT INCISIONAL HERNIA;	764.62	764.62	7/1/2006
49568		3	IMPLANTATION OF MESH OR OTHER PROSTHESIS FOR INCISIONAL OR VENTRAL HERNIA	245.75	245.75	7/1/2006
49570		3	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT); REDUCIBLE (SEPARATE PROCEDURE)	326.77	326.77	7/1/2006
49572		3	REPAIR EPIGASTRIC HERNIA (EG, PREPERITONEAL FAT);	377.15	377.15	7/1/2006
49580		3	REPAIR UMBILICAL HERNIA, UNDER AGE 5 YEARS; REDUCIBLE	245.38	245.38	7/1/2006
49582		3	REPAIR UMBILICAL HERNIA, UNDER AGE 5 YEARS;	374.27	374.27	7/1/2006
49585		3	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OVER;	352.13	352.13	7/1/2006
49587		3	REPAIR UMBILICAL HERNIA, AGE 5 YEARS OR OVER;	418.51	418.51	7/1/2006
49590		3	REPAIR ABDOMINAL HERNIA	468.55	468.55	7/1/2006
49600		3	REPAIR OF SMALL OMPHALOCELE, WITH PRIMARY CLOSURE	601.16	601.16	7/1/2006
49605		3	REPAIR OF LARGE OMPHALOCELE OR GASTROSCHISIS; WITH OR WITHOUT PROSTHESIS	3,894.55	3,894.55	7/1/2006
49606		3	REPAIR OMPHALOCELE STAG CLO PROSTH RED OP ROOM ANE	980.06	980.06	7/1/2006
49610		3	REPAIR UMBILICAL HERNIA	574.53	574.53	7/1/2006
49611		3	REPAIR UMBILICAL HERNIA	570.28	570.28	7/1/2006
49650		3	LAPAROSCOPY, SURGICAL; REPAIR INITIAL INGUINAL HERNIA	352.80	352.80	7/1/2006
49651		3	LAPAROSCOPY, SURGICAL; REPAIR RECURRENT INGUINAL HERNIA	456.71	456.71	7/1/2006
49900		3	REPAIR OF ABDOMINAL WALL	684.25	684.25	7/1/2006
49904		3	OMENTAL FLAP, EXTRA-ABDOMINAL (EG, FOR RECONSTRUCTION OF STERNAL AND CHEST WALL	1,286.07	1,286.07	7/1/2006
49905		3	OMENTAL FLAP FOR RECONSTRUTION OF CHEST WALL	328.92	328.92	7/1/2006
50010		3	EXPLORATION OF KIDNEY	589.25	589.25	7/1/2006
50020		3	DRAINAGE OF PERIRENAL OR RENAL ABSCESS; OPEN	814.33	814.33	7/1/2006
50021		3	DRAINAGE OF PERIRENAL OR RENAL ABSCESS; PERCUTANEOUS	845.02	162.37	7/1/2006
50040		3	DRAINAGE OF KIDNEY	786.79	786.79	7/1/2006
50045		3	EXPLORATION OF KIDNEY	803.39	803.39	7/1/2006
50060		3	REMOVAL OF KIDNEY STONE	984.79	984.79	7/1/2006
50065		3	INCISION OF KIDNEY	985.77	985.77	7/1/2006
50070		3	INCISION OF KIDNEY	1,036.27	1,036.27	7/1/2006
50075		3	REMOVAL OF KIDNEY STONE	1,280.92	1,280.92	7/1/2006

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50080		3	PERCUTANEOUS NEPHROSTOLITHOTOMY, UP TO 2 CM	761.18	761.18	7/1/2006
50081		3	PERCUTANEOUS NEPHROSTOLITHOTOMY, OVER 2 CM	1,110.08	1,110.08	7/1/2006
50100		3	REVISE KIDNEY BLOOD VESSELS	884.20	884.20	7/1/2006
50120		3	EXPLORATION OF KIDNEY	824.53	824.53	7/1/2006
50125		3	EXPLORATION/DRAINAGE KIDNEY	858.19	858.19	7/1/2006
50130		3	REMOVAL OF KIDNEY STONE	887.34	887.34	7/1/2006
50135		3	EXPLORATION OF KIDNEY	978.12	978.12	7/1/2006
50200		3	BIOPSY OF KIDNEY	141.10	141.10	7/1/2006
50205		3	BIOPSY OF KIDNEY	602.70	602.70	7/1/2006
50220		3	NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY, ANY OPEN APPROACH INCLUDING RIB	887.61	887.61	7/1/2006
50225		3	REMOVAL OF KIDNEY	1,032.09	1,032.09	7/1/2006
50230		3	REMOVAL OF KIDNEY	1,113.73	1,113.73	7/1/2006
50234		3	NEPHRECTOMY WITH TOTAL URETERECTOMY AND BLADDER CU	1,135.15	1,135.15	7/1/2006
50236		3	REMOVAL OF KIDNEY & URETER	1,274.31	1,274.31	7/1/2006
50240		3	PARTIAL REMOVAL OF KIDNEY	1,125.79	1,125.79	7/1/2006
50250		3	ABLATION, OPEN, ONE OR MORE RENAL MASS LESION(S), CRYOSURGICAL, INCLUDING IN	1,055.06	1,055.06	7/1/2006
50280		3	REMOVAL OF KIDNEY LESION	812.78	812.78	7/1/2006
50290		3	EXCISION OF PERINEPHRIC CYST	776.39	776.39	7/1/2006
50300		3	DONOR NEPHRECTOMY, WITH PREPARATION AND MAINTENANCE OF ALLOGRAFT; FROM CADAVE	1,294.66	1,294.66	7/1/2006
50320		3	DONOR NEPHRECTOMY, OPEN FROM LIVING DONOR (EXCLUDING PREPARATION AND	1,206.43	1,206.43	7/1/2006
50340		3	REMOVAL OF KIDNEY	690.36	690.36	7/1/2006
50360		3	RENAL ALLOTRANSPLANTATION, IMPLANTATION OF GRAFT; EXCLUDING DONOR AND RECIPIENT	1,734.88	1,734.88	7/1/2006
50365		3	TRANSPLANTATION OF KIDNEY	2,029.09	2,029.09	7/1/2006
50370		3	REMOVAL OF TRANSPLANTED RENAL ALLOGRAFT	768.87	768.87	7/1/2006
50380		3	REIMPLANTATION OF KIDNEY	1,202.16	1,202.16	7/1/2006
50382		3	REMOVAL (VIA SNARE/CAPTURE) AND REPLACEMENT OF INTERNALLY DWELLING URETERAL	1,405.54	267.79	7/1/2006
50384		3	REMOVAL (VIA SNARE/CAPTURE) OF INTERNALLY DWELLING URETERAL STENT VIA PERCUT	1,357.04	243.80	7/1/2006
50387		3	REMOVAL AND REPLACEMENT OF EXTERNALLY ACCESSIBLE TRANSNEPHRIC URETERAL STENT	679.59	96.96	7/1/2006
50389		3	REMOVAL OF NEPHROSTOMY TUBE, REQUIRING FLUOROSCOPIC GUIDANCE (EG, WITH CONCU	464.52	53.47	7/1/2006
50390		3	DRAINAGE OF KIDNEY LESION	94.53	94.53	7/1/2006
50391		3	INSTILLATION(S) OF THERAPEUTIC AGENT INTO RENAL PELVIS AND/OR URETER THROUGH	126.12	94.66	7/1/2006
50392		3	DRAINAGE OF KIDNEY LESION	176.28	176.28	7/1/2006
50393		3	INTRODUCTION URETERAL CATH OR STENT INTO URETER	214.45	214.45	7/1/2006
50394		3	PREPARATION FOR KIDNEY X-RAY	117.61	50.37	7/1/2006
50395		3	INTRODUCTION OF GUIDE INTO RENAL PELVIS	175.85	175.85	7/1/2006
50396		3	MEASUREMENT KIDNEY PRESSURE	114.01	114.01	7/1/2006
50398		3	CHANGE OF KIDNEY TUBE	596.52	71.86	7/1/2006
50400		3	REVISION OF KIDNEY/URETER	994.10	994.10	7/1/2006
50405		3	REVISION OF KIDNEY/URETER	1,200.87	1,200.87	7/1/2006
50500		3	REPAIR OF KIDNEY WOUND	1,028.03	1,028.03	7/1/2006
50520		3	CLOSURE KIDNEY/SKIN FISTULA	900.01	900.01	7/1/2006
50525		3	CLOSURE NEPHROVISCERAL FISTULA INCLUDING VISCERAL	1,141.63	1,141.63	7/1/2006
50526		3	CLOSURE NEPHROVISCERAL FISTULA THORACIC APPROACH	1,235.75	1,235.75	7/1/2006
50540		3	REVISION OF HORSESHOE KIDNEY	1,024.03	1,024.03	7/1/2006
50541		3	LAPAROSCOPY, SURGICAL; ABLATION OF RENAL CYSTS	816.65	816.65	7/1/2006
50542		3	LAPAROSCOPY, SURGICAL; ABLATION OF RENAL MASS LESION(S)	1,020.95	1,020.95	7/1/2006
50543		3	LAPAROSCOPY, SURGICAL; PARTIAL NEPHRECTOMY	1,296.61	1,296.61	7/1/2006
50544		3	LAPAROSCOPY, SURGICAL; PYELOPLASTY	1,124.65	1,124.65	7/1/2006
50545		3	LAPAROSCOPY, SURGICAL; RADICAL NEPHRECTOMY (INCLUDES REMOVAL OF GEROTA'S FASCIA	1,206.85	1,206.85	7/1/2006
50546		3	LAPAROSCOPY, SURGICAL; NEPHRECTOMY, INCLUDING PARTIAL URETERECTOMY	1,049.99	1,049.99	7/1/2006
50547		3	LAPAROSCOPY, SURGICAL; DONOR NEPHRECTOMY FROM LIVING DONOR (EXCLUDING	1,348.87	1,348.87	7/1/2006
50548		3	LAPAROSCOPY, SURGICAL; NEPHRECTOMY WITH TOTAL URETERECTOMY	1,221.38	1,221.38	7/1/2006
50551		3	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY,	347.93	276.05	7/1/2006
50553		3	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY,	369.03	296.49	7/1/2006
50555		3	VISUALIZATION/BIOPSY KIDNEY	404.76	322.61	7/1/2006
50557		3	TREATMENT OF KIDNEY LESION	400.84	324.99	7/1/2006
50561		3	RENAL ENDOSCOPY WITH REMOVAL OF FOREIGN BODY	453.94	373.12	7/1/2006
50562		3	RENAL ENDOSCOPY THROUGH ESTABLISHED NEPHROSTOMY OR PYELOSTOMY, WITH OR WITHO	552.34	552.34	7/1/2006
50570		3	RENAL ENDOSCOPY THROUGH NEPHROTOMY OR PYELOTOMY, WITH OR WITHOUT	465.43	465.43	7/1/2006
50572		3	RENAL ENDOSCOPY THROUGH NEPHROTOMY OR PYELOTOMY, WITH OR WITHOUT	507.75	507.75	7/1/2006
50574		3	VISUALIZATION/BIOPSY KIDNEY	537.98	537.98	7/1/2006
50575		3	RENAL ENDOSCOPY THROUGH NEPHROTOMY OR PYELOTOMY, WITH OR WITHOUT	679.10	679.10	7/1/2006
50576		3	TREATMENT OF KIDNEY LESION	534.48	534.48	7/1/2006
50580		3	TREATMENT OF KIDNEY LESION	576.89	576.89	7/1/2006
50590		3	LITHOTRIPSY SHOCK WAVE (PROFESSIONAL COMPONENT)	753.59	478.35	7/1/2006
50600		3	EXPLORATION OF URETER	816.86	816.86	7/1/2006
50605		3	URETEROTOMY FOR INSERTION OF INDWELLING STENT	812.87	812.87	7/1/2006
50610		3	REMOVAL OF STONE, URETER	836.02	836.02	7/1/2006
50620		3	REMOVAL OF STONE, URETER	780.06	780.06	7/1/2006
50630		3	REMOVAL OF STONE, URETER	770.61	770.61	7/1/2006

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Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
50650		3	REMOVAL OF URETER	893.87	893.87	7/1/2006
50660		3	REMOVAL OF URETER	998.55	998.55	7/1/2006
50684		3	INJECTION FOR URETER X/RAY	193.46	44.08	7/1/2006
50686		3	MANOMETRIC STUDIES THROUGH URETEROSTOMY OR INDWELLING URETERAL CATHETER	171.17	84.06	7/1/2006
50688		3	CHANGE OF URETER TUBE	78.85	78.85	7/1/2006
50690		3	INJECTION FOR URETER X-RAY	103.99	67.22	7/1/2006
50700		3	REVISION OF URETER	812.31	812.31	7/1/2006
50715		3	RELEASE OF URETER	1,018.60	1,018.60	7/1/2006
50722		3	RELEASE OF URETER	890.72	890.72	7/1/2006
50725		3	RELEASE/REVISION OF URETER	966.60	966.60	7/1/2006
50727		3	REVISION URINARY-CUTANEOUS ANASTOMOSIS	449.96	449.96	7/1/2006
50728		3	REVISION OF URINARY-CUTANEOUS ANASTOMOSIS W REPAIR	639.57	639.57	7/1/2006
50740		3	FUSION OF URETER-KIDNEY	963.95	963.95	7/1/2006
50750		3	FUSION OF URETER-KIDNEY	998.11	998.11	7/1/2006
50760		3	FUSION OF URETER	952.51	952.51	7/1/2006
50770		3	SPLICING OF URETERS	999.39	999.39	7/1/2006
50780		3	REIMPLANT URETER IN BLADDER	946.45	946.45	7/1/2006
50782		3	URETERONEOCYSTOSTOMY; ANASTOMOSIS	1,030.55	1,030.55	7/1/2006
50783		3	URETERONEOCYSTOSTOMY; URETERAL TAILORING	1,056.99	1,056.99	7/1/2006
50785		3	REIMPLANT URETER IN BLADDER	1,046.35	1,046.35	7/1/2006
50800		3	IMPLANT URETER IN BOWEL	764.09	764.09	7/1/2006
50810		3	URETEROSIGMOIDOSTOMY, WITH CREATION OF SIGMOID BLADDER AND ESTABLISHMENT OF	1,075.74	1,075.74	7/1/2006
50815		3	URETEROCOLON CONDUIT, INCLUDING INTESTINE ANASTOMOSIS	1,032.15	1,032.15	7/1/2006
50820		3	URETEROILEAL CONDUIT (ILEAL BLADDER), INCLUDING INTESTINE ANASTOMOSIS (BRICKER	1,117.41	1,117.41	7/1/2006
50825		3	CONTINENT DIVERSION, INCLUDING INTESTINE ANASTOMOSIS USING ANY SEGMENT OF SMALL	1,430.13	1,430.13	7/1/2006
50830		3	URINARY ANDIVERSION	1,583.06	1,583.06	7/1/2006
50840		3	REPLACEMENT OF ALL OR PART OF URETER BY INTESTINE SEGMENT, INCLUDING INTESTINE	1,032.40	1,032.40	7/1/2006
50845		3	CUTANEOUS APPENDICO-VESICOSTOMY	1,082.33	1,082.33	7/1/2006
50860		3	TRANSPLANT OF URETER TO SKIN	801.61	801.61	7/1/2006
50900		3	REPAIR OF URETER	719.61	719.61	7/1/2006
50920		3	CLOSURE URETER/SKIN FISTULA	756.42	756.42	7/1/2006
50930		3	CLOSURE URETER/BOWEL FISTULA	966.70	966.70	7/1/2006
50940		3	RELEASE OF URETER	763.03	763.03	7/1/2006
50945		3	LAPAROSCOPY, SURGICAL, URETEROLITHOTOMY	875.81	875.81	7/1/2006
50947		3	LAPAROSCOPY, SURGICAL; URETERONEOCYSTOSTOMY WITH CYSTOSCOPY AND URETERAL STE	1,252.01	1,252.01	7/1/2006
50948		3	LAPAROSCOPY, SURGICAL; URETERONEOCYSTOSTOMY WITHOUT CYSTOSCOPY AND URETERAL	1,136.65	1,136.65	7/1/2006
50951		3	VISUALIZATION OF URETER	361.77	287.57	7/1/2006
50953		3	VISUALIZATION OF URETER	380.27	312.70	7/1/2006
50955		3	VISUALIZATION/BIOPSY URETER	466.69	342.82	7/1/2006
50957		3	TREATMENT OF URETER LESION	406.53	333.99	7/1/2006
50961		3	TREATMENT OF URETER LESION	371.65	299.44	7/1/2006
50970		3	VISUALIZATION OF URETER	350.49	350.49	7/1/2006
50972		3	VISUALIZATION OF URETER	340.80	340.80	7/1/2006
50974		3	VISUALIZATION/BIOPSY URETER	447.54	447.54	7/1/2006
50976		3	TREATMENT OF URETER LESION	441.99	441.99	7/1/2006
50980		3	TREATMENT OF URETER LESION	336.15	336.15	7/1/2006
51000		3	ASPIRATION OF BLADDER BY NEEDLE	93.82	37.18	7/1/2006
51005		3	ASPIRATION OF BLADDER;	195.03	50.29	7/1/2006
51010		3	ASPIRATION OF BLADDER;	319.33	195.45	7/1/2006
51020		3	CYSTOTOMY OR CYSTOSTOMY W/FULGRATION AND/OR INSERT	379.90	379.90	7/1/2006
51030		3	INCISION/TREATMENT BLADDER	388.57	388.57	7/1/2006
51040		3	INCISION OF BLADDER	256.94	256.94	7/1/2006
51045		3	INCISION OF BLADDER	385.53	385.53	7/1/2006
51050		3	REMOVAL OF BLADDER STONE	380.97	380.97	7/1/2006
51060		3	REMOVAL OF URETERAL STONE	481.93	481.93	7/1/2006
51065		3	CYSTOTOMY, WITH CALCULUS BASKET EXTRACTION AND/OR ULTRASONIC OR	477.19	477.19	7/1/2006
51080		3	DRAINAGE OF BLADDER ABSCESS	341.71	341.71	7/1/2006
51500		3	REMOVAL OF BLADDER CYST	554.02	554.02	7/1/2006
51520		3	REMOVAL OF BLADDER LESION	505.02	505.02	7/1/2006
51525		3	REMOVAL OF BLADDER LESION	728.42	728.42	7/1/2006
51530		3	REMOVAL OF BLADDER LESION	659.97	659.97	7/1/2006
51535		3	REVISION OF URETER LESION	682.86	682.86	7/1/2006
51550		3	PARTIAL REMOVAL OF BLADDER	816.51	816.51	7/1/2006
51555		3	PARTIAL REMOVAL OF BLADDER	1,089.70	1,089.70	7/1/2006
51565		3	REVISION OF BLADDER & URETER	1,112.29	1,112.29	7/1/2006
51570		3	REMOVAL OF BLADDER	1,233.94	1,233.94	7/1/2006
51575		3	CYCTECTOMY W/BILAT LYMPHADENECTOMY INCLUDING HYPOG	1,543.37	1,543.37	7/1/2006
51580		3	REMOVAL OF BLADDER	1,583.47	1,583.47	7/1/2006
51585		3	CYCTECTOMY W/BILAT LYMPH INCLUDING HYPOGASTRIC AND	1,778.49	1,778.49	7/1/2006
51590		3	CYSTECTOMY, COMPLETE, WITH URETEROILEAL CONDUIT OR SIGMOID BLADDER, INCLUDING	1,645.02	1,645.02	7/1/2006

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51595		3	CYSTECTOMY W/BILAT LYMPH INCLUDING HYPOGASTRIC AND	1,863.67	1,863.67	7/1/2006
51596		3	CYSTECTOMY, COMPLETE, WITH CONTINENT DIVERSION, ANY OPEN TECHNIQUE, USING ANY	1,989.94	1,989.94	7/1/2006
51597		3	REMOVAL OF PELVIC STRUCTURES	1,935.49	1,935.49	7/1/2006
51600		3	INJECTION PROCEDURE FOR CYSTOGRAPHY OR VOIDING URETHROCYSTOGRAPHY	200.66	42.67	7/1/2006
51605		3	INJECTION PROCEDURE AND PLACEMENT OF CHAIN FOR CONTRAST AND/	225.02	35.56	7/1/2006
51610		3	INJECTION PROCEDURE FOR RETROGRADE URETHROCYSTOGRAPHY	115.27	59.29	7/1/2006
51700		3	BLADDER IRRIGATION, SIMPLE, LAVAGE AND/OR INSTILLATION	86.06	42.34	7/1/2006
51701		3	INSERTION OF NON-DWELLING BLADDER CATHETER (EG, STRAIGHT CATHETERIZATION FOR	71.26	25.22	7/1/2006
51702		3	INSERTION OF TEMPORARY INDWELLING BLADDER CATHETER; SIMPLE (EG, FOLEY)	88.15	26.87	7/1/2006
51703		3	INSERTION OF TEMPORARY INDWELLING BLADDER CATHETER; COMPLICATED (EG, ALTERED	145.98	73.78	7/1/2006
51705		3	CHANGE OF CYSTOSTOMY TUBE;	113.85	58.54	7/1/2006
51710		3	CHANGE OF BLADDER TUBE	166.81	81.68	7/1/2006
51715		3	ENDOSCOPIC INJECTION OF IMPLANT MATERIAL INTO THE SUBMUCOSAL	270.48	185.69	7/1/2006
51720		3	TREATMENT OF BLADDER LESION	131.74	96.65	7/1/2006
51725		3	SIMPLE CYSTOMETROGRAM	243.54	243.54	7/1/2006
51725	26	5	SIMPLE CYSTOMETROGRAM	73.36	73.36	7/1/2006
51725	TC	T	SIMPLE CYSTOMETROGRAM	170.18	170.18	7/1/2006
51726		3	COMPLEX CYSTOMETROGRAM WITH GAS	314.79	314.79	7/1/2006
51726	26	5	COMPLEX CYSTOMETROGRAM WITH GAS	83.11	83.11	7/1/2006
51726	TC	T	COMPLEX CYSTOMETROGRAM WITH GAS	231.68	231.68	7/1/2006
51736		3	SIMPLE UROGLOWMETRY	42.56	42.56	7/1/2006
51736	26	5	SIMPLE UROGLOWMETRY	29.74	29.74	7/1/2006
51736	TC	T	SIMPLE UROGLOWMETRY	12.82	12.82	7/1/2006
51741		3	ELECTRONIC UROFLOWNETRY INITIAL RECORDIN	69.74	69.74	7/1/2006
51741	26	5	ELECTRONIC UROFLOWNETRY INITIAL RECORDIN	55.37	55.37	7/1/2006
51741	TC	T	ELECTRONIC UROFLOWNETRY INITIAL RECORDIN	14.37	14.37	7/1/2006
51772		3	URETHRAL PRESSURE PROFILE GAS/LIQUID INITIAL RECORDING	247.73	247.73	7/1/2006
51772	26	5	URETHRAL PRESSURE PROFILE GAS/LIQUID INITIAL RECORDING	79.51	79.51	7/1/2006
51772	TC	T	URETHRAL PRESSURE PROFILE GAS/LIQUID INITIAL RECORDING	168.09	168.09	7/1/2006
51784		3	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER,	190.93	190.93	7/1/2006
51784	26	5	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER,	74.41	74.41	7/1/2006
51784	TC	T	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER,	116.52	116.52	7/1/2006
51785		3	NEEDLE ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER, ANY	205.94	205.94	7/1/2006
51785	26	5	NEEDLE ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER, ANY	74.18	74.18	7/1/2006
51785	TC	T	NEEDLE ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR URETHRAL SPHINCTER, ANY	131.76	131.76	7/1/2006
51792		3	STIMULAUS EVOKED RESPONSE	243.28	243.28	7/1/2006
51792	26	5	STIMULAUS EVOKED RESPONSE	54.80	54.80	7/1/2006
51792	TC	T	STIMULAUS EVOKED RESPONSE	188.48	188.48	7/1/2006
51795		3	VOIDING PRESS STY WITH PRESS PROBE INSERT PER URETHRA	302.28	302.28	7/1/2006
51795	26	5	VOIDING PRESS STY WITH PRESS PROBE INSERT PER URETHRA	74.41	74.41	7/1/2006
51795	TC	T	VOIDING PRESS STY WITH PRESS PROBE INSERT PER URETHRA	227.87	227.87	7/1/2006
51797		3	VOIDING PRESSURE STUDIES INTRA-ABDOMINAL	253.63	253.63	7/1/2006
51797	26	5	VOIDING PRESSURE STUDIES INTRA-ABDOMINAL	77.92	77.92	7/1/2006
51797	TC	T	VOIDING PRESSURE STUDIES INTRA-ABDOMINAL	175.71	175.71	7/1/2006
51800		3	CYSTOPLASTY OR CYSTOURETHROPLASTY WITH OR W/O RES	907.57	907.57	7/1/2006
51820		3	REVISION OF URINARY TRACT	958.02	958.02	7/1/2006
51840		3	ANTERIOR VESICOURETHROPEXY, OR URETHROPEXY (EG, MARSHALL-MARCHETTI-KRANTZ,	594.12	594.12	7/1/2006
51841		3	FIXATION OF BLADDER/URETHRA	708.62	708.62	7/1/2006
51845		3	ABDOMINO-VAGINAL VESICAL NECK SUSPENSION	525.48	525.48	7/1/2006
51860		3	REPAIR OF BLADDER WOUND	649.88	649.88	7/1/2006
51865		3	REPAIR OF BLADDER WOUND	790.69	790.69	7/1/2006
51880		3	REPAIR OF BLADDER OPENING	423.17	423.17	7/1/2006
51900		3	REPAIR BLADDER/VAGINA LESION	695.50	695.50	7/1/2006
51920		3	REPAIR BLADDER/UTERUS LESION	638.80	638.80	7/1/2006
51925		3	HYSTERECTOMY/BLADDER REPAIR	892.82	892.82	7/1/2006
51940		3	CLOSURE, EXSTROPHY OF BLADDER	1,472.54	1,472.54	7/1/2006
51960		3	ENTEROCYSTOPLASTY, INCLUDING INTESTINAL ANASTOMOSIS	1,184.86	1,184.86	7/1/2006
51980		3	CONSTRUCT BLADDER OPENING	606.62	606.62	7/1/2006
51990		3	LAPAROSCOPY, SURGICAL; URETHRAL SUSPENSION FOR STRESS INCONTINENCE	685.37	685.37	7/1/2006
51992		3	LAPAROSCOPY, SURGICAL; SLING OPERATION FOR STRESS INCONTINENCE (EG, FASCIA OR	742.19	742.19	7/1/2006
52000		3	CYSTOURETHROSCOPY	185.23	100.76	7/1/2006
52001		3	CYSTOURETHROSCOPY WITH IRRIGATION AND EVACUATION OF MULTIPLE OBSTRUCTING CLOTS	373.10	266.78	7/1/2006
52005		3	CYSTOSCOPY/URETHERAL CATHETER	274.07	118.72	7/1/2006
52007		3	CYSTOURETHROSCOPY WITH URETHRAL CATHETERIZATION	659.99	151.89	7/1/2006
52010		3	CYSTOSCOPY/DUCT CATHETER	470.63	151.66	7/1/2006
52204		3	CYSTOSCOPY AND BIOPSY	571.17	119.05	7/1/2006
52214		3	TREAT URINARY TRACT LESION	1,404.81	183.25	7/1/2006
52224		3	TREAT URINARY TRACT LESION	1,329.07	156.21	7/1/2006
52234		3	TREATMENT OF BLADDER LESION	228.92	228.92	7/1/2006
52235		3	TREATMENT OF BLADDER LESION	269.10	269.10	7/1/2006

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52240		3	TREATMENT OF BLADDER LESION	475.12	475.12	7/1/2006
52250		3	CYSTOVRE INS RADIOAC SUB W/WO BIOPSY O FULGURATION	223.68	223.68	7/1/2006
52260		3	DILATION OF BLADDER	194.26	194.26	7/1/2006
52265		3	CYSTOURETHROSCOPY, WITH DILATION OF BLADDER FOR INTERSTITIAL CYSTITIS;	554.09	147.68	7/1/2006
52270		3	REVISION OF URETHRA	492.83	167.57	7/1/2006
52275		3	REVISION OF URETHRA	693.17	231.44	7/1/2006
52276		3	CYSTOURETHROSCOPY DIRECT VISION INTERN URETHROTOMY	247.00	247.00	7/1/2006
52277		3	REVISION OF SPHINCTER	305.78	305.78	7/1/2006
52281		3	CYSTOURETHROSCOPY, WITH CALIBRATION AND/OR DILATION OF URETHRAL STRICTURE OR	340.92	141.19	7/1/2006
52282		3	CYSTOURETHROSCOPY, WITH INSERTION OF URETHRAL STENT	314.62	314.62	7/1/2006
52283		3	INJECTION TREATMENT, URETHRA	271.11	185.99	7/1/2006
52285		3	REVISION URETHRA & BLADDER	268.75	179.65	7/1/2006
52290		3	REVISON URETER(S) OPENING	226.92	226.92	7/1/2006
52300		3	CYSTOURETHROSCOPY; WITH RESECTION OR FULGURATION OF ORTHOTOPIC URETEROCELE(S	262.83	262.83	7/1/2006
52301		3	CYSTOURETHROSCOPY; WITH RESECTION OR FULGURATION OF ECTOPIC URETEROCELE(S),	274.53	274.53	7/1/2006
52305		3	TREATMENT OF BLADDER LESION	261.18	261.18	7/1/2006
52310		3	REMOVE BLADDER/URETHRA STONE	261.45	139.89	7/1/2006
52315		3	REMOVE BLADDER/URETHRA STONE	483.57	256.68	7/1/2006
52317		3	LITHOLAPAXY: CRUSHING OR FRAGMENTATION OF CALCULUS BY ANY MEANS IN BLADDER AND	1,213.85	328.49	7/1/2006
52318		3	LITHOLAPAXY: OF CALCULUS COMPLICATEED	448.16	448.16	7/1/2006
52320		3	REMOVE URETERAL STONE	230.45	230.45	7/1/2006
52325		3	CYSTOURETHROSCOPY WITH FRAGMENTATION OF CALCULUS	301.77	301.77	7/1/2006
52327		3	CYSTOURETHROSCOPY (INCLUDING URETERAL CATHETERIZATION);	1,251.62	255.30	7/1/2006
52330		3	EXPLORATION OF URETER	1,478.84	247.67	7/1/2006
52332		3	CYSTOURETHROSCOPY W/INTSERT INDW URETERAL STERNT	297.51	141.50	7/1/2006
52334		3	CYSTOURETHROSCOPY WITH INSERTION OF URETERAL WIRE	238.98	238.98	7/1/2006
52341		3	CYSTOURETHROSCOPY; WITH TREATMENT OF URETERAL STRICTURE (EG, BALLOON DILATION,	299.10	299.10	7/1/2006
52342		3	CYSTOURETHROSCOPY; WITH TREATMENT OF URETEROPELVIC JUNCTION STRICTURE (EG,	322.09	322.09	7/1/2006
52343		3	CYSTOURETHROSCOPY; WITH TREATMENT OF INTRA-RENAL STRICTURE (EG, BALLOON	356.40	356.40	7/1/2006
52344		3	CYSTOURETHROSCOPY WITH URETEROSCOPY; WITH TREATMENT OF URETERAL STRICTURE (EC	382.28	382.28	7/1/2006
52345		3	CYSTOURETHROSCOPY WITH URETEROSCOPY; WITH TREATMENT OF URETEROPELVIC JUNCTIO	406.27	406.27	7/1/2006
52346		3	CYSTOURETHROSCOPY WITH URETEROSCOPY; WITH TREATMENT OF INTRA-RENAL STRICTURE	455.89	455.89	7/1/2006
52351		3	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; DIAGNOSTIC	291.28	291.28	7/1/2006
52352		3	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH REMOVAL OR	341.77	341.77	7/1/2006
52353		3	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH LITHOTRIPSY	394.44	394.44	7/1/2006
52354		3	CYSTOURETHROSCOPY, WITH URETERSCOPY AND/OR PYELOSCOPY; WITH BIOPSY AND/OR	364.65	364.65	7/1/2006
52355		3	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH RESECTION OF	436.03	436.03	7/1/2006
52400		3	CYSTOURETHROSCOPY WITH INCISION, FULGURATION, OR RESECTION OF CONGENITAL	487.69	487.69	7/1/2006
52450		3	TRANSURETHRAL INCISION OF PROSTATE	409.03	409.03	7/1/2006
52500		3	REVISION OF BLADDER	448.58	448.58	7/1/2006
52510		3	TRANSURETHRAL BALLOON DILATION OF THE PROSTATIC URETHRA	355.98	355.98	7/1/2006
52601		3	TRANSURETHRAL ELECTROSURGICAL RESECTION OF PROSTATE, INCLUDING CONTROL OF	633.93	633.93	7/1/2006
52606		3	CONTROL POSTOP BLEEDING	423.39	423.39	7/1/2006
52612		3	REMOVE PROSTATE, FIRST STAGE	423.72	423.72	7/1/2006
52614		3	REMOVE PROSTATE,SECOND STAGE	367.92	367.92	7/1/2006
52620		3	REMOVE RESIDUAL PROSTATE	347.48	347.48	7/1/2006
52630		3	REMOVE PROSTATE REGROWTH	378.76	378.76	7/1/2006
52640		3	RELIEVE BLADDER CONTRACTURE	347.18	347.18	7/1/2006
52647		3	NON-CONTACT LASER COAGULATION OF PROSTATE, INCLUDING CONTROL	2,845.11	539.46	7/1/2006
52648		3	CONTACT LASER VAPORIZATION WITH OR WITHOUT TRANSURETHRAL	580.59	580.06	7/1/2006
52700		3	DRAINAGE OF PROSTATE ABSCESS	361.18	361.18	7/1/2006
53000		3	REVISION OF URETHRA	136.78	136.78	7/1/2006
53010		3	REVISION OF URETHRA	232.94	232.94	7/1/2006
53020		3	MEATOTOMY CUTTING OF MEATUS EXCEPT INFANT OFFICE	166.42	88.91	7/1/2006
53025		3	REVISION OF URETHRA	166.40	59.42	7/1/2006
53040		3	DRAINAGE OF URETHRA ABSCESS	354.37	354.37	7/1/2006
53060		3	DRAINAGE OF URETHRA ABSCESS	170.18	146.52	7/1/2006
53080		3	DRAINAGE OF URINARY LEAKAGE	435.82	435.82	7/1/2006
53085		3	DRAINAGE OF URINARY LEAKAGE	635.99	635.99	7/1/2006
53200		3	BIOPSY OF URETHRA	141.58	130.32	7/1/2006
53210		3	REMOVAL OF URETHRA	666.11	666.11	7/1/2006
53215		3	REMOVAL OF URETHRA	805.48	805.48	7/1/2006
53220		3	TREATMENT OF URETHRA LESION	386.16	386.16	7/1/2006
53230		3	REMOVAL OF URETHRA LESION	517.70	517.70	7/1/2006
53235		3	REMOVAL OF URETHRA LESION	543.57	543.57	7/1/2006
53240		3	REVISION OF URETHRAL POUCH	360.76	360.76	7/1/2006
53250		3	REMOVAL OF URETHRAL GLAND	332.29	332.29	7/1/2006
53260		3	TREATMENT OF URETHRAL LESION	187.57	160.08	7/1/2006
53265		3	TREATMENT OF URETHRAL LESION	207.95	164.89	7/1/2006
53270		3	REMOVAL OF URETHRAL GLAND	191.36	169.17	7/1/2006

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53275		3	REPAIR OF URETHRAL DEFECT	244.96	244.96	7/1/2006
53400		3	REVISION URETHRA, 1ST STAGE	681.67	681.67	7/1/2006
53405		3	REVISION URETHRA, 2ND STAGE	755.61	755.61	7/1/2006
53410		3	RECONSTRUCTION OF URETHRA	852.07	852.07	7/1/2006
53415		3	URETHROPLASTY, TRANSPUBIC, ONE STAGE	972.75	972.75	7/1/2006
53420		3	REVISION URETHRA, 1ST STAGE	736.99	736.99	7/1/2006
53425		3	REVISION URETHRA, 2ND STAGE	829.18	829.18	7/1/2006
53430		3	RECONSTRUCTION OF URETHRA	846.25	846.25	7/1/2006
53431		3	URETHROPLASTY WITH TUBULARIZATION OF POSTERIOR URETHRA AND/OR LOWER BLADDER FC	1,014.80	1,014.80	7/1/2006
53440		3	OPERATION FOR CORRECTION OF MALE URINARY INCONTINENCE, WITH	710.16	710.16	7/1/2006
53442		3	REM PERINEAL PROSTHESIS INTRODUCDED FOR INCONTINEN	615.24	615.24	7/1/2006
53444		3	INSERTION OF TANDEM CUFF (DUAL CUFF)	698.47	698.47	7/1/2006
53445		3	INSERTION OF INFLATABLE URETHRAL/BLADDER NECK SPHINCTER, INCLUDING PLACEMENT OF	763.46	763.46	7/1/2006
53446		3	REMOVAL OF INFLATABLE URETHRAL/BLADDER NECK SPHINCTER, INCLUDING PUMP,	557.41	557.41	7/1/2006
53447		3	REMOVAL AND REPLACEMENT OF INFLATABLE URETHRAL/BLADDER NECK SPHINCTER INCLUDIN	720.15	720.15	7/1/2006
53448		3	REMOVAL AND REPLACEMENT OF INFLATABLE URETHRAL/BLADDER NECK SPHINCTER INCLUDIN	1,095.36	1,095.36	7/1/2006
53449		3	REPAIR OF INFLATABLE URETHRAL/BLADDER NECK SPHINCTER, INCLUDING PUMP,	521.20	521.20	7/1/2006
53450		3	REVISION OF URETHRA	339.91	339.91	7/1/2006
53460		3	REVISION OF URETHRA	390.05	390.05	7/1/2006
53500		3	URETHROLYSIS, TRANSVAGINAL, SECONDARY, OPEN, INCLUDING CYSTOURETHROSCOPY (EG,	665.63	665.63	7/1/2006
53502		3	URETHRORRHAPHY FEMALE	420.78	420.78	7/1/2006
53505		3	REPAIR OF URETHRA INJURY	414.97	414.97	7/1/2006
53510		3	REPAIR OF URETHRA INJURY	551.56	551.56	7/1/2006
53515		3	REPAIR OF URETHRA INJURY	699.42	699.42	7/1/2006
53520		3	REPAIR OF URETHRA DEFECT	474.59	474.59	7/1/2006
53600		3	DILATION OF URETHRAL STRICTURE BY PASSAGE OF SOUND OR URETHRAL DILATOR, MALE;	83.40	59.88	7/1/2006
53601		3	DILATION OF URETHRAL STRICTURE BY PASSAGE OF SOUND OR URETHRAL DILATOR, MALE;	78.96	49.15	7/1/2006
53605		3	DILATION URETHRAL STRICTURE	61.74	61.74	7/1/2006
53620		3	DILATION OF URETHRAL STRICTURE BY PASSAGE OF FILIFORM AND FOLLOWER, MALE;	127.10	80.40	7/1/2006
53621		3	DILATION OF URETHRAL STRICTURE BY PASSAGE OF FILIFORM AND FOLLOWER, MALE;	119.80	67.14	7/1/2006
53660		3	DILATION OF FEMALE URETHRA INCLUDING SUPPOSITORY AND/OR INSTILLATION;	70.10	36.98	7/1/2006
53661		3	DILATION OF FEMALE URETHRA INCLUDING SUPPOSITORY AND/OR INSTILLATION;	70.13	36.68	7/1/2006
53665		3	DILATION OF URETHRA	37.03	37.03	7/1/2006
53850		3	TRANSURETHRAL DESTRUCTION OF PROSTATE TISSUE; BY MICROWAVE THERMOTHERAPY	3,479.74	486.14	7/1/2006
53852		3	TRANSURETHRAL DESTRUCTION OF PROSTATE TISSUE; BY RADIOFREQUENCY THERMOTHERAP	3,320.36	516.55	7/1/2006
53853		3	TRANSURETHRAL DESTRUCTION OF PROSTATE TISSUE; BY WATER-INDUCED THERMOTHERAPY	2,035.11	291.55	7/1/2006
54000		3	SLITTING OF PREPUCE, DORSAL OR LATERAL (SEPARATE PROCEDURE);	154.70	88.78	7/1/2006
54001		3	SLITTING OF PREPUCE, DORSAL OR LATERAL (SEPARATE PROCEDURE);	187.96	119.07	7/1/2006
54015		3	INCISION AND DRAINAGE OF PENIS DEEP	284.72	284.72	7/1/2006
54050		3	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILLOMA,	101.47	80.60	7/1/2006
54055		3	TREATMENT OF PENIS LESION	97.77	72.26	7/1/2006
54056		3	DESTRUCTION OF LESION, PENIS, SIMPLE; CRYOSURGERY	102.00	83.45	7/1/2006
54057		3	DESTRUCTION OF LESION, PENIS, SIMPLE; LASER	120.25	74.21	7/1/2006
54060		3	TREATMENT OF PENIS LESION	175.49	107.59	7/1/2006
54065		3	DESTRUCTION OF LESION(S), PENIS (EG, CONDYLOMA, PAPILLOMA, MOLLUSCUM	177.56	130.86	7/1/2006
54100		3	BIOPSY OF PENIS; (SEPARATE PROCEDURE)	163.78	97.87	7/1/2006
54105		3	BIOPSY OF PENIS	273.50	195.67	7/1/2006
54110		3	TREATMENT OF PENIS LESION	538.24	538.24	7/1/2006
54111		3	EXCISION OF PENILE PLAQUE WITH GRAFT TO 5CM	701.40	701.40	7/1/2006
54112		3	EXCISION OF PENILE PLAQUE WITH GRAFT MORE THAN 5CM	821.42	821.42	7/1/2006
54115		3	REMOVAL FOREIGN BODY FROM DEEP PENILE TISSUE	376.04	345.57	7/1/2006
54120		3	PARTIAL AMPUTATION OF PENIS	529.27	529.27	7/1/2006
54125		3	AMPUTATION OF PENIS	701.72	701.72	7/1/2006
54130		3	AMPUTATION OF PENIS	1,030.31	1,030.31	7/1/2006
54135		3	AMPUTATION PENIS W/BILATERAL LYMPH INCLUDE HYPOGAS	1,328.19	1,328.19	7/1/2006
54150		3	CIRCUMCISION	213.27	92.04	7/1/2006
54152		3	CIRCUMCISION	127.29	127.29	7/1/2006
54160		3	CIRCUMCISION	231.12	129.77	7/1/2006
54161		3	CIRCUMCISION	174.70	174.70	7/1/2006
54162		3	LYSIS OR EXCISION OF PENILE POST-CIRCUMCISION ADHESIONS	267.20	160.54	7/1/2006
54163		3	REPAIR INCOMPLETE CIRCUMCISION	179.42	179.42	7/1/2006
54164		3	FRENULOTOMY OF PENIS	155.10	155.10	7/1/2006
54200		3	INJECTION PROCEDURE FOR PEYRONIE DISEASE;	99.62	72.13	7/1/2006
54205		3	TREATMENT OF PENIS LESION	453.39	453.39	7/1/2006
54220		3	IRRIGATION OF CORPORA CAVERNOSA FOR PRIAPISM	218.56	122.51	7/1/2006
54230		3	ING PROCEDURE FOR CORPORA CAVERNOSGRAPHY	86.09	71.18	7/1/2006
54240		3	PENILE PLETHYSMOGRAPHY	85.15	85.15	7/1/2006
54240	26	5	PENILE PLETHYSMOGRAPHY	63.79	63.79	7/1/2006
54240	TC	T	PENILE PLETHYSMOGRAPHY	21.26	21.26	7/1/2006
54300		3	REVISION OF PENIS	576.40	576.40	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
54304		3	PLASTIC OPERATION ON PENIS FOR CORRECT OF CHORDEE	679.23	679.23	7/1/2006
54308		3	URETHROPLASTY SECOND STAGE HYPOSPADIAS LESS TH 3CM	642.29	642.29	7/1/2006
54312		3	URETHROPLASTY FOR HYPOSPADIAS REPAIR MORE THAN 3CM	748.26	748.26	7/1/2006
54316		3	URETHROPLASTY FOR HYPOSPADIAS REPAIR WITH GRAFT	896.02	896.02	7/1/2006
54318		3	URETHROPLASTY FOR HYPOSPADIAS TO RELEASE PENIS	628.45	628.45	7/1/2006
54322		3	HYPOSPADIAS REPAIR WITH MEATAL ADVANCEMENT	703.17	703.17	7/1/2006
54324		3	HYPOSPADIAS REPAIR WITH URETHROPLASTY BY FLAPS	876.74	876.74	7/1/2006
54326		3	HYPOSPADIAS REPAIR WITH URETHROPLASTY BY FLAPS/MOB	848.84	848.84	7/1/2006
54328		3	HYPOSPADIAS WITH URETHROPLASTY TO CORRECT CHORDEE	825.77	825.77	7/1/2006
54332		3	PENILE HYPOSPADIAS REPAIR DISSECTION TO CORR CHORD	898.09	898.09	7/1/2006
54336		3	HYPOSPADIAS REPAIR TO CORRT CHORDEE AND URETHROPLA	1,112.60	1,112.60	7/1/2006
54340		3	REPAIR HYPOSPADIAS COMPLICATIONS, SIMPLE	501.88	501.88	7/1/2006
54344		3	REPAIR HYPOSPADIAS COMPLICATIONS MOBILIZATION GRAF	865.68	865.68	7/1/2006
54348		3	REPAIR HYPOSPADIAS COMPLI DISSECTION AND URETHROPL	921.61	921.61	7/1/2006
54352		3	REPAIR OF HYPOSPADIAS CRIPPLE REQUIRING DISSECTION	1,311.85	1,311.85	7/1/2006
54360		3	PLASTI OPERATION ON PENIS TO CORRECT ANGULATION	648.21	648.21	7/1/2006
54380		3	REVISION OF PENIS	714.49	714.49	7/1/2006
54385		3	REVISE PENIS/BLADDER DEFECT	847.10	847.10	7/1/2006
54390		3	REVISE PENIS/BLADDER DEFECT	1,124.77	1,124.77	7/1/2006
54400		3	REVISION OF PENIS	482.13	482.13	7/1/2006
54406		3	REMOVAL OF ALL COMPONENTS OF A MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS	634.58	634.58	7/1/2006
54415		3	REMOVAL OF NON-INFLATABLE (SEMI-RIGID) OR INFLATABLE (SELF-CONTAINED) PENILE	447.34	447.34	7/1/2006
54420		3	REVISION OF PENIS	613.92	613.92	7/1/2006
54430		3	REVISION OF PENIS	550.55	550.55	7/1/2006
54435		3	CORPORA CAVERNOSA-GLANS PENIS FISTULIZATION	349.79	349.79	7/1/2006
54440		3	REVISION OF PENIS	806.00	806.00	7/1/2006
54450		3	FORESKIN MANIPULATION	73.63	56.74	7/1/2006
54500		3	BIOPSY OF TESTIS, NEEDLE (SEPARATE PROCEDURE)	69.55	67.89	7/1/2006
54505		3	BIOPSY OF TESTIS	194.03	194.03	7/1/2006
54512		3	EXCISION OF EXTRAPARENCHYMAL LESION OF TESTIS	460.78	460.78	7/1/2006
54520		3	REMOVAL OF TESTIS	291.87	291.87	7/1/2006
54522		3	ORCHIECTOMY, PARTIAL	523.48	523.48	7/1/2006
54530		3	REMOVAL OF TESTIS	464.19	464.19	7/1/2006
54535		3	EXTENSIVE TESTIS SURGERY	642.79	642.79	7/1/2006
54550		3	EXPLORATION FOR TESTIS	419.53	419.53	7/1/2006
54560		3	EXPLORATION FOR TESTIS	591.64	591.64	7/1/2006
54600		3	REDUCE TESTIS TORSION	381.35	381.35	7/1/2006
54620		3	FIXATION OF TESTIS	265.40	265.40	7/1/2006
54640		3	ORCHIOPEXY, INGUINAL APPROACH, WITH OR WITHOUT HERNIA REPAIR	386.22	386.22	7/1/2006
54650		3	ORCHIOPEXY, ABDOMINAL APPROACH, FOR INTRA-ABDOMINAL TESTIS	617.43	617.43	7/1/2006
54670		3	REPAIR TESTIS INJURY	358.50	358.50	7/1/2006
54680		3	RELOCATION OF TESTIS(ES)	685.48	685.48	7/1/2006
54690		3	LAPAROSCOPY, SURGICAL; ORCHIECTOMY	581.00	581.00	7/1/2006
54692		3	LAPAROSCOPY, SURGICAL; ORCHIOPEXY FOR INTRA-ABDOMINAL TESTIS	673.13	673.13	7/1/2006
54700		3	DRAINAGE OF SCROTUM	193.84	193.84	7/1/2006
54800		3	BIOPSY OF EPIDIDYMIS	120.32	119.00	7/1/2006
54820		3	EXPLORATION OF EPIDIDYMIS	291.29	291.29	7/1/2006
54830		3	REMOVE EPIDIDYMIS LESION	302.81	302.81	7/1/2006
54840		3	REMOVE EPIDIDYMIS LESION	287.46	287.46	7/1/2006
54860		3	REMOVAL OF EPIDIDYMIS	347.18	347.18	7/1/2006
54861		3	REMOVAL OF EPIDIDYMES	477.34	477.34	7/1/2006
55000		3	PUNCTURE ASPIRATION OF HYDROCELE, TUNICA VAGINALIS, WITH OR	122.58	75.55	7/1/2006
55040		3	REMOVAL OF HYDROCELE	298.58	298.58	7/1/2006
55041		3	REMOVAL OF HYDROCELES	423.62	423.62	7/1/2006
55060		3	REPAIR OF HYDROCELE	310.99	310.99	7/1/2006
55100		3	DRAINAGE OF SCROTUM ABSCESS	202.49	132.27	7/1/2006
55110		3	SCROTAL EXPLORATION	318.44	318.44	7/1/2006
55120		3	REMOVAL OF SCROTUM LESION	289.59	289.59	7/1/2006
55150		3	REMOVAL OF SCROTUM	399.67	399.67	7/1/2006
55175		3	SCROTOPLASTY; SIMPLE	296.52	296.52	7/1/2006
55180		3	SCROTOPLASTY; COMPLICATED	583.83	583.83	7/1/2006
55200		3	INCISION OF SPERM DUCT	568.96	238.59	7/1/2006
55250		3	REMOVAL OF SPERM DUCT(S)	505.12	197.74	7/1/2006
55300		3	PREPARATION,SPERM DUCT X-RAY	175.16	175.16	7/1/2006
55450		3	LIGATION OF SPERM DUCTS	386.84	216.59	7/1/2006
55500		3	REMOVAL OF HYDROCELE	315.92	315.92	7/1/2006
55520		3	REMOVAL OF SPERM CORD LESION	341.66	341.66	7/1/2006
55530		3	REVISE SPERMATIC CORD VEINS	313.48	313.48	7/1/2006
55535		3	REVISE SPERMATIC CORD VEINS	359.26	359.26	7/1/2006
55540		3	REVISE HERNIA & SPERM VEINS	423.30	423.30	7/1/2006

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55550		3	LAPAROSCOPY, SURGICAL, WITH LIGATION OF SPERMATIC VEINS FOR VARICOCELE	358.61	358.61	7/1/2006
55600		3	INCISE SPERM DUCT POUCH	353.92	353.92	7/1/2006
55650		3	REMOVE SPERM DUCT POUCH	620.20	620.20	7/1/2006
55680		3	REMOVE SPERM POUCH LESION	295.70	295.70	7/1/2006
55700		3	BIOPSY OF PROSTRATE	198.17	80.26	7/1/2006
55705		3	BIOPSY OF PROSTATE	247.73	247.73	7/1/2006
55720		3	DRAINAGE OF PROSTATE ABSCESS	423.12	423.12	7/1/2006
55725		3	DRAINAGE OF PROSTATE ABSCESS	476.99	476.99	7/1/2006
55801		3	REMOVAL OF PROSTATE	923.04	923.04	7/1/2006
55810		3	REMOVAL OF PROSTATE	1,145.17	1,145.17	7/1/2006
55812		3	PROSTATECTOMY W LYMPH NODE BIOPSY	1,400.01	1,400.01	7/1/2006
55815		3	PROSTATECTOMY PERINEAL W PELVIC LYMPHADENECTOMY	1,538.77	1,538.77	7/1/2006
55821		3	REMOVAL OF PROSTATE	741.28	741.28	7/1/2006
55831		3	REMOVAL OF PROSTATE	807.58	807.58	7/1/2006
55840		3	PROSTATECTOMY, RETROPUBIC RADICAL, WITH OR WITHOUT NERVE SPARING;	1,160.62	1,160.62	7/1/2006
55842		3	PROSTATECTOMY RETROPUBIC W LYMPH BIOPSY	1,242.19	1,242.19	7/1/2006
55845		3	EXTENSIVE PROSTATE SURGERY	1,435.34	1,435.34	7/1/2006
55859		3	TRANSPERINEAL PLACEMENT OF NEEDLES OR CATHETERS INTO PROSTATE FOR INTERSTITIAL	664.23	664.23	7/1/2006
55860		3	EXPOSURE OF PROSTATE, ANY APPROACH, FOR INSERTION OF RADIOACTIVE SUBSTANCE;	755.34	755.34	7/1/2006
55862		3	EXPOSURE OF PROSTATE, ANY APPROACH, FOR INSERTION OF RADIOACTIVE SUBSTANCE;	955.35	955.35	7/1/2006
55865		3	EXPOSURE OF PROSTATE, ANY APPROACH, FOR INSERTION OF RADIOACTIVE SUBSTANCE;	1,166.90	1,166.90	7/1/2006
55866		3	LAPAROSCOPY, SURGICAL PROSTATECTOMY, RETROPUBIC RADICAL, INCLUDING NERVE SPARIN	1,543.22	1,543.22	7/1/2006
55873		3	CRYOSURGICAL ABLATION OF THE PROSTATE (INCLUDES ULTRASONIC GUIDANCE FOR	1,028.47	1,028.47	7/1/2006
56405		3	I AND D OF ABSCESS, VULVA/PERINEAL.	99.81	93.52	7/1/2006
56420		3	DRAINAGE OF VULVA ABSCESS	129.25	88.18	7/1/2006
56440		3	MARSUPILIZATION OF BARTHOLIN'S GLAND CYST	166.72	166.72	7/1/2006
56441		3	LYSIS OF LABIAL ADHESIONS	135.81	122.24	7/1/2006
56501		3	DESTRUCTION OF LESION(S), VULVA; SIMPLE (EG, LASER SURGERY, ELECTROSURGERY,	118.28	100.30	7/1/2006
56515		3	DESTRUCTION OF LESION(S), VULVA; EXTENSIVE (EG, LASER SURGERY, ELECTROSURGERY,	191.33	167.02	7/1/2006
56605		3	BIOPSY OF VULVA OR PERINEUM (SEPARATE PROCEDURE);	78.04	57.83	7/1/2006
56606		3	BIOPSY OF VULVA OR PERINEUM (SEPARATE PROCEDURE); EACH SEPARATE ADDITIONAL	37.64	28.70	7/1/2006
56620		3	VULVECTOMY PARTIAL UNILATERAL OR BILATERAL	448.30	448.30	7/1/2006
56625		3	EXTERNAL GENITAL SURGERY	501.94	501.94	7/1/2006
56630		3	VULVECTOMY RADICAL WITHOUT SKIN GRAFT	705.49	705.49	7/1/2006
56631		3	VULVECTOMY, RADICAL, PARTIAL; W LYMPHADENECTOMY	919.82	919.82	7/1/2006
56632		3	VULVECTOMY, RADICAL, PARTIAL;	1,099.81	1,099.81	7/1/2006
56633		3	VULVECTOMY, RADICAL, COMPLETE	922.78	922.78	7/1/2006
56634		3	VULVECTOMY, RAD, COMPLETE; UNI LYMPHADENECTOMY	1,005.42	1,005.42	7/1/2006
56637		3	VULVECTOMY, RADICAL, COMPLETE; W LYMPHADENECTOMY	1,216.75	1,216.75	7/1/2006
56640		3	VULVECTOMY RADICAL WITH INGUINOFEM ILIAC PELVIC LY	1,214.95	1,214.95	7/1/2006
56700		3	EXTERNAL GENITAL SURGERY	158.58	158.58	7/1/2006
56720		3	EXTERNAL GENITAL SURGERY	43.22	43.22	7/1/2006
56740		3	EXTERNAL GENITAL SURGERY	261.87	261.87	7/1/2006
56800		3	PLASTIC REPAIR OF INTROITUS	222.70	222.70	7/1/2006
56805		3	CLITOROPLASTY FOR INTERSEX STATE	1,039.91	1,039.91	7/1/2006
56810		3	PERINEOPLASTY, REPAIR OF PERINEUM, NON-OB	235.65	235.65	7/1/2006
56820		3	COLPOSCOPY OF THE VULVA;	101.54	79.68	7/1/2006
56821		3	COLPOSCOPY OF THE VULVA; WITH BIOPSY (S)	137.61	109.64	7/1/2006
57000		3	DRAINAGE OF PELVIC LESION	171.04	171.04	7/1/2006
57010		3	COLPOTOMY WITH DRAINAGE PELVIC ABSCESS	358.95	358.95	7/1/2006
57020		3	DRAINAGE OF PELVIC FLUID	89.23	77.57	7/1/2006
57022		3	INCISION AND DRAINAGE OF VAGINAL HEMATOMA; OBSTETRICAL/POSTPARTUM	147.51	147.51	7/1/2006
57023		3	INCISION AND DRAINAGE OF VAGINAL HEMATOMA; NON-OBSTETRICAL (EG, POST-TRAUMA,	268.91	268.91	7/1/2006
57061		3	DESTRUCTION OF VAGINAL LESION(S); SIMPLE (EG, LASER SURGERY, ELECTROSURGERY,	103.11	85.56	7/1/2006
57065		3	DESTRUCTION OF VAGINAL LESION(S); EXTENSIVE (EG, LASER SURGERY, ELECTROSURGERY,	177.29	156.42	7/1/2006
57100		3	BIOPSY OF VAGINA	82.20	62.33	7/1/2006
57105		3	BIOPSY OF VAGINA	125.06	112.49	7/1/2006
57106		3	VAGINECTOMY, PARTIAL REMOVAL OF VAGINAL WALL;	384.22	384.22	7/1/2006
57107		3	VAGINECTOMY, PARTIAL REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL	1,236.38	1,236.38	7/1/2006
57109		3	VAGINECTOMY, PARTIAL REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL	1,417.30	1,417.30	7/1/2006
57110		3	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL;	794.81	794.81	7/1/2006
57111		3	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL	1,462.67	1,462.67	7/1/2006
57112		3	VAGINECTOMY, COMPLETE REMOVAL OF VAGINAL WALL; WITH REMOVAL OF PARAVAGINAL	1,515.15	1,515.15	7/1/2006
57120		3	VAGINAL SURGERY	439.62	439.62	7/1/2006
57130		3	VAGINAL SURGERY	165.71	145.18	7/1/2006
57135		3	EXCISION VAGINAL CYST OR TUMOR	178.46	157.92	7/1/2006
57150		3	TREATMENT VAGINAL INFECTION	57.82	28.18	7/1/2006
57155		3	INSERTION OF UTERINE TANDEMS AND/OR VAGINAL OVOIDS FOR CLINICAL BRACHYTHERAPY	386.65	386.65	7/1/2006
57160		3	FITTING AND INSERTION OF PESSARY OR OTHER INTRAVAGINAL SUPPORT DEVICE	67.80	45.61	7/1/2006
57170		3	DIAPHRAM FITTING WITH INSTRUCTIONS	84.32	46.23	7/1/2006

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57180		3	INTRO OF HEMOSTATIC AGENTOR PACKN NON-OB HEMORRHAG	132.96	102.99	7/1/2006
57200		3	REPAIR OF VAGINA	248.10	248.10	7/1/2006
57210		3	REPAIR VAGINA/PERINEUM	314.00	314.00	7/1/2006
57220		3	REVISION OF URETHRA	269.57	269.57	7/1/2006
57230		3	REVISION OF URETHRAL LESION	328.08	328.08	7/1/2006
57240		3	REPAIR OF BLADDER LESION	358.99	358.99	7/1/2006
57250		3	POSTERIOR COLPORRHAPHY REPAIR RECTOCELE WITH OR W/	332.29	332.29	7/1/2006
57260		3	EXTENSIVE VAGINAL REPAIR	480.04	480.04	7/1/2006
57265		3	EXTENSIVE VAGINAL REPAIR	638.36	638.36	7/1/2006
57267		3	INSERTION OF MESH OR OTHER PROSTHESIS FOR REPAIR OF PELVIC FLOOR DEFECT, EACH	256.02	256.02	7/1/2006
57268		3	REPAIR ENTEROCELE VAGINAL APPROACH	400.33	400.33	7/1/2006
57270		3	REPAIR OF VISCERAL POUCH	675.34	675.34	7/1/2006
57280		3	FIXATION OF VAGINA	823.68	823.68	7/1/2006
57282		3	SACROSPINOUS LIGAMENT FIXATION FOR PROLAPSE	419.86	419.86	7/1/2006
57283		3	COLPOPEXY, VAGINAL; INTRA-PERITONEAL APPROACH (UTEROSACRAL, LEVATOR MYORRHAPHY	610.19	610.19	7/1/2006
57284		3	PARAVAGINAL DEFECT REPAIR (INCLUDING REPAIR OF CYSTOCELE, STRESS URINARY	726.16	726.16	7/1/2006
57287		3	REMOVAL OR REVISION OF SLING FOR STRESS INCONTINENCE (EG, FASCIA OR SYNTHETIC)	587.45	587.45	7/1/2006
57288		3	SLING OPERATION FOR STRESS INCONTINENCE	689.93	689.93	7/1/2006
57289		3	PEREYRA PROCEDURE INC ANTERIOR COLPORRHAPHY	644.46	644.46	7/1/2006
57291		3	CONSTRUCTION ARTIFICIAL VAGINA W/O GRAFT	470.58	470.58	7/1/2006
57292		3	CONSTRUCTION ARTIFICIAL VAGINA WITH GRAFT	737.16	737.16	7/1/2006
57295		3	REVISION (INCLUDING REMOVAL) OF PROSTHETIC VAGINAL GRAFT, VAGINAL APPROACH	436.25	436.25	7/1/2006
57300		3	REPAIR RECTUM/VAGINA LESION	435.76	435.76	7/1/2006
57305		3	REPAIR RECTUM/VAGINA LESION	742.45	742.45	7/1/2006
57307		3	REPAIR RECTUM/VAGINA LESION	849.83	849.83	7/1/2006
57308		3	CLOSURE OF RECTOVAGINAL FISTULA; TRANSPERINEAL APPROACH, WITH PERINEAL BODY	552.70	552.70	7/1/2006
57310		3	REPAIR URETHRA/VAGINA LESION	383.37	383.37	7/1/2006
57311		3	CLOSURE URETHROVAGINAL FISTULA W/ BULBOCAVERNOSUS	438.38	438.38	7/1/2006
57320		3	REPAIR BLADDER/VAGINA LESION	448.66	448.66	7/1/2006
57330		3	REPAIR BLADDER/VAGINA LESION	657.80	657.80	7/1/2006
57335		3	VAGINOPLASTY FOR INTERSEX STATE	1,017.02	1,017.02	7/1/2006
57400		3	DILATION PROCEDURE	124.45	124.45	7/1/2006
57410		3	PELVIC EXAMINATION	133.86	96.56	7/1/2006
57415		3	REMOVAL VAG FOREIGN BODY W ANESTH.	130.69	130.69	7/1/2006
57420		3	COLPOSCOPY OF THE ENTIRE VAGINA, WITH CERVIX IF PRESENT;	106.70	84.06	7/1/2006
57421		3	COLPOSCOPY OF THE ENTIRE VAGINA, WITH CERVIX IF PRESENT; WITH BIOPSY(S)	146.47	117.17	7/1/2006
57425		3	LAPAROSCOPY, SURGICAL, COLPOPEXY (SUSPENSION OF VAGINAL APEX)	826.91	826.91	7/1/2006
57452		3	EXAMINATION OF VAGINA	100.55	83.23	7/1/2006
57454		3	COLPOSCOPY (VAGINOSCOPY); WITH BIOPSY(S) OF THE CERVIX AND/OR ENDOCERVICAL	144.66	128.43	7/1/2006
57455		3	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH BIOPSY(S) OF THE	134.15	105.99	7/1/2006
57456		3	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH ENDOCERVICAL	126.33	98.83	7/1/2006
57460		3	COLPOSCOPY (VAGINOSCOPY); WITH LOOP ELECTRODE EXCISION PROCEDURE OF THE CERVIX	303.82	155.43	7/1/2006
57461		3	COLPOSCOPY OF THE CERVIX INCLUDING UPPER/ADJACENT VAGINA; WITH LOOP ELECTRODE	335.65	181.63	7/1/2006
57500		3	BIOPSY SINGLE OR MULTIPLE OR LOCAL EXC LESION WITH	122.05	58.44	7/1/2006
57505		3	ENDOCERVICAL CURETTAGE (NOT DONE AS PART OF A DILATION AND CURETTAGE)	92.63	80.67	7/1/2006
57510		3	CAUTERY OF CERVIX; ELECTRO OR THERMAL	125.38	108.11	7/1/2006
57511		3	CRYOCAUTRY INITIAL OR REPEAT CERVIX UTERI	134.08	119.08	7/1/2006
57513		3	CAUTERIZATION OF CERVIX LASER SURGERY	130.68	120.08	7/1/2006
57520		3	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH OR WITHOUT DILATION AND	286.88	251.73	7/1/2006
57522		3	CONIZATION OF CERVIX, WITH OR WITHOUT FULGURATION, WITH	234.72	211.42	7/1/2006
57530		3	REMOVAL OF CERVIX	297.74	297.74	7/1/2006
57531		3	RADICAL TRACHELECTOMY, WITH BILATERAL TOTAL PELVIC LYMPHADENECTOMY AND	1,520.81	1,520.81	7/1/2006
57540		3	REMOVAL OF CERVIX TISSUE	680.58	680.58	7/1/2006
57545		3	REMOVE CERVIX, REPAIR PELVIS	725.01	725.01	7/1/2006
57550		3	REMOVAL OF CERVIX TISSUE	341.03	341.03	7/1/2006
57555		3	REMOVE CERVIX, REPAIR VAGINA	515.57	515.57	7/1/2006
57556		3	CERVIX UTERI WITH REPAIR OF ENTEROCELE	483.16	483.16	7/1/2006
57700		3	REVISION OF CERVIX	239.91	239.91	7/1/2006
57720		3	REVISION OF CERVIX	262.63	262.63	7/1/2006
57800		3	DILATION OF CERVICAL CANAL	54.97	45.36	7/1/2006
57820		3	D&C OF CERVIX	113.42	102.49	7/1/2006
58100		3	ENDOMETRIAL SAMPLING (BIOPSY) WITH OR WITHOUT ENDOCERVICAL SAMPLING (BIOPSY),	102.95	83.08	7/1/2006
58110		3	ENDOMETRIAL SAMPLING (BIOPSY) PERFORMED IN CONJUNCTION WITH COLPOSCOPY (LIST	48.01	40.06	7/1/2006
58120		3	D & C DIAG AND OR THERAPEUTIC	203.23	188.98	7/1/2006
58140		3	MYOMECTOMY, EXCISION OF LEIOMYOMATA OF UTERUS, SINGLE OR MULTIPLE (SEPARATE	802.38	802.38	7/1/2006
58145		3	REMOVAL OF UTERINE LESION	470.44	470.44	7/1/2006
58146		3	MYOMECTOMY, EXCISION OF FIBROID TUMOR(S) OF UTERUS, 5 OR MORE INTRAMURAL MYOMAS	1,035.00	1,035.00	7/1/2006
58150		3	HYSTERECTOMY	838.77	838.77	7/1/2006
58152		3	TOTAL ABDOMINAL HYSTERECTOMY (CORPUS AND CERVIX), WITH OR WITHOUT REMOVAL OF	1,124.13	1,124.13	7/1/2006
58180		3	PARTIAL HYSTERECTOMY	834.97	834.97	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
58200		3	EXTENSIVE UTERINE SURGERY	1,166.28	1,166.28	7/1/2006
58210		3	EXTENSIVE UTERINE SURGERY	1,552.53	1,552.53	7/1/2006
58240		3	REMOVAL OF PELVIS CONTENTS	2,062.06	2,062.06	7/1/2006
58260		3	HYSTERECTOMY	725.02	725.02	7/1/2006
58262		3	VAGINAL HYSTERECTOMY W/ REMOVAL OF TUBES AND OVARY(S)	817.39	817.39	7/1/2006
58263		3	VAGINAL HYSTERECTOMY W/ REMOVAL OR TUBE/OVARY & ENTEROCELE	883.85	883.85	7/1/2006
58267		3	HYSTERECTOMY & REPAIR VAGINA	937.77	937.77	7/1/2006
58270		3	HYSTERECTOMY & REPAIR VAGINA	786.96	786.96	7/1/2006
58275		3	VAGINAL HYSTERECTOMY, WITH TOTAL OR PARTIAL VAGINECTOMY;	868.30	868.30	7/1/2006
58280		3	HYSTERECTOMY, REVISE VAGINA	931.92	931.92	7/1/2006
58285		3	HYSTERECTOMY	1,192.78	1,192.78	7/1/2006
58290		3	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 GRAMS;	1,038.81	1,038.81	7/1/2006
58291		3	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 GRAMS; WITH REMOVAL OF	1,133.25	1,133.25	7/1/2006
58292		3	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 GRAMS; WITH REMOVAL OF	1,199.52	1,199.52	7/1/2006
58293		3	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 GRAMS; WITH	1,246.94	1,246.94	7/1/2006
58294		3	VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250 GRAMS; WITH REPAIR OF	1,100.55	1,100.55	7/1/2006
58300		3	INSERT INTRAUTERINE DEVICE	86.16	51.71	7/1/2006
58301		3	REMOVAL OF IUD	92.90	65.08	7/1/2006
58346		3	INSERTION OF HEYMAN CAPSULES FOR CLINICAL BRACHYTHERAPY	385.73	385.73	7/1/2006
58353		3	ENDOMETRIAL ABLATION, THERMAL, WITHOUT HYSTEROSCOPIC GUIDANCE	1,322.17	205.76	7/1/2006
58400		3	FIXATION OF UTERUS	376.40	376.40	7/1/2006
58410		3	FIXATION OF UTERUS	704.64	704.64	7/1/2006
58520		3	REPAIR OF RUPTURED UTERUS	662.69	662.69	7/1/2006
58540		3	REVISION OF UTERUS	798.24	798.24	7/1/2006
58545		3	LAPAROSCOPY, SURGICAL, MYOMECTOMY, EXCISION; 1 TO 4 INTRAMURAL MYOMAS WITH	804.18	804.18	7/1/2006
58546		3	LAPAROSCOPY, SURGICAL, MYOMECTOMY, EXCISION; 5 OR MORE INTRAMURAL MYOMAS AND/OI	1,032.08	1,032.08	7/1/2006
58550		3	LAPAROSCOPY, SURGICAL; WITH VAGINAL HYSTERECTOMY WITH OR WITHOUT REMOVAL OF	791.91	791.91	7/1/2006
58552		3	LAPAROSCOPY SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS 250 GRAMS OR LESS;	880.93	880.93	7/1/2006
58553		3	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250	1,032.08	1,032.08	7/1/2006
58554		3	LAPAROSCOPY, SURGICAL, WITH VAGINAL HYSTERECTOMY, FOR UTERUS GREATER THAN 250	1,188.42	1,188.42	7/1/2006
58555		3	HYSTEROSCOPY, DIAGNOSTIC (SEPARATE PROCEDURE)	201.97	180.45	7/1/2006
58558		3	HYSTEROSCOPY, SURGICAL; WITH SAMPLING (BIOPSY) OF ENDOMETRIUM AND/OR	255.99	255.99	7/1/2006
58559		3	HYSTEROSCOPY, SURGICAL; WITH LYSIS OF INTRAUTERINE ADHESIONS (ANY METHOD)	329.51	329.51	7/1/2006
58560		3	HYSTEROSCOPY, SURGICAL; WITH DIVISION OR RESECTION OF INTRAUTERINE SEPTUM (ANY	373.35	373.35	7/1/2006
58561		3	HYSTEROSCOPY, SURGICAL; WITH REMOVAL OF LEIOMYOMATA	529.62	529.62	7/1/2006
58562		3	HYSTEROSCOPY, SURGICAL; WITH REMOVAL OF IMPACTED FOREIGN BODY	279.76	279.76	7/1/2006
58563		3	HYSTEROSCOPY, SURGICAL; WITH ENDOMETRIAL ABLATION (EG, ENDOMETRIAL RESECTION,	2,105.28	330.24	7/1/2006
58565		3	HYSTEROSCOPY, SURGICAL; WITH BILATERAL FALLOPIAN TUBE CANNULATION TO INDUCE	1,926.34	409.67	7/1/2006
58600		3	LIGATION OR TRANSECTION FALLOP TUBES ABD OR VAG UN	327.09	327.09	7/1/2006
58605		3	LIGATION OR TRANSECTION FALLOP TUBES ABD OR VAG PO	296.59	296.59	7/1/2006
58611		3	LIGATION OR TRANSECTION OF FALLOPIAN TUBE(S) WHEN DONE AT THE TIME OF CESAREAN	75.10	75.10	7/1/2006
58615		3	OCCLUS FALLOPIAN TUBES BY DEVICE VAG/SUPRAPUBIC	240.64	240.64	7/1/2006
58660		3	LAPAROSCOPY, SURGICAL; WITH LYSIS OF ADHESIONS (SALPINGOLYSIS, OVARIOLYSIS)	612.38	612.38	7/1/2006
58661		3	LAPAROSCOPY, SURGICAL; WITH REMOVAL OF ADNEXAL STRUCTURES (PARTIAL OR TOTAL	597.90	597.90	7/1/2006
58662		3	LAPAROSCOPY, SURGICAL; WITH FULGURATION OR EXCISION OF LESIONS OF THE OVARY,	648.81	648.81	7/1/2006
58670		3	LAPAROSCOPY, SURGICAL; WITH FULGURATION OF OVIDUCTS (WITH OR WITHOUT	325.33	325.33	7/1/2006
58671		3	LAPAROSCOPY, SURGICAL; WITH OCCLUSION OF OVIDUCTS BY DEVICE (EG, BAND, CLIP, OR	325.56	325.56	7/1/2006
58700		3	SALPINGECTOMY COMPLETE OR PARTIAL UNILATERAL OR BI	666.64	666.64	7/1/2006
58720		3	REMOVAL OF OVARY/TUBE(S)	631.99	631.99	7/1/2006
58800		3	DRAINAGE OF OVARIAN CYST(S)	279.50	254.95	7/1/2006
58805		3	DRAINAGE OF OVARIAN CYST(S)	343.10	343.10	7/1/2006
58820		3	DRAINAGE OF OVARIAN ABSCESS; VAGINAL APPROACH, OPEN	272.86	272.86	7/1/2006
58822		3	DRAINAGE OF OVARIAN ABSCESS	563.95	563.95	7/1/2006
58823		3	DRAINAGE OF PELVIC ABSCESS, TRANSVAGINAL OR TRANSRECTAL APPROACH, PERCUTANEOUS	835.02	163.96	7/1/2006
58825		3	OVARIAN TRANSPOSITION	617.45	617.45	7/1/2006
58900		3	BIOPSY OF OVARY(S)	349.77	349.77	7/1/2006
58920		3	PARTIAL REMOVAL OF OVARY(S)	626.25	626.25	7/1/2006
58925		3	OVARIAN CYSTECTOMY UNILATERAL OR BILATERAL	629.46	629.46	7/1/2006
58940		3	OOPHORECTOMY PARTIAL OR TOTAL UNILATERAL OR BILATE	419.15	419.15	7/1/2006
58943		3	OOPHORECTOMY, PARTIAL OR TOTAL, UNILATERAL OR BILATERAL; FOR OVARIAN, TUBAL OR	1,000.77	1,000.77	7/1/2006
58950		3	RESECTION OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL	934.34	934.34	7/1/2006
58951		3	RESECT OVARIAN MALIGNANCY	1,212.01	1,212.01	7/1/2006
58952		3	RESECTION OF OVARIAN, TUBAL OR PRIMARY PERITONEAL MALIGNANCY WITH BILATERAL	1,358.49	1,358.49	7/1/2006
58953		3	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTO	1,720.91	1,720.91	7/1/2006
58954		3	BILATERAL SALPINGO-OOPHORECTOMY WITH OMENTECTOMY, TOTAL ABDOMINAL HYSTERECTO	1,875.84	1,875.84	7/1/2006
58956		3	BILATERAL SALPINGO-OOPHORECTOMY WITH TOTAL OMENTECTOMY, TOTAL ABDOMINAL	1,182.79	1,182.79	7/1/2006
58960		3	LAPAROTOMY, FOR STAGING OR RESTAGING OF OVARIAN, TUBAL OR PRIMARY PERITONEAL	812.04	812.04	7/1/2006
59000		3	AMNIOCENTESIS; DIAGNOSTIC	122.84	76.14	7/1/2006
59001		3	AMNIOCENTESIS; THERAPEUTIC AMNIOTIC FLUID REDUCTION (INCLUDES ULTRASOUND	171.07	171.07	7/1/2006
59012		3	CORDOCENTESIS (INTRAUTERINE), ANY METHOD	193.75	193.75	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
59020		3	FETAL CONTRACTION	55.59	55.59	7/1/2006
59020	26	5	FETAL CONTRACTION	36.06	36.06	7/1/2006
59020	TC	T	FETAL CONTRACTION	19.53	19.53	7/1/2006
59025		3	FETAL NON-STRESS TEST	36.96	36.96	7/1/2006
59025	26	5	FETAL NON-STRESS TEST	28.84	28.84	7/1/2006
59025	TC	T	FETAL NON-STRESS TEST	8.08	8.08	7/1/2006
59030		3	FETAL BLOOD SAMPLING SCALP	107.98	107.98	7/1/2006
59100		3	REMOVAL OF UTERUS LESION	725.76	725.76	7/1/2006
59120		3	TREATMENT ATYPICAL PREGNANCY	682.05	682.05	7/1/2006
59121		3	SURG TREAT ECTOPIC PREGN TUBAL WO SALPING/OOPHOREC	693.27	693.27	7/1/2006
59130		3	TREATMENT ATYPICAL PREGNANCY	747.95	747.95	7/1/2006
59135		3	TREATMENT ATYPICAL PREGNANCY	814.79	814.79	7/1/2006
59136		3	TX ECTOPIC PREGNANCY W/ PARTIAL RESECTION UTERUS	765.19	765.19	7/1/2006
59140		3	TREATMENT ATYPICAL PREGNANCY	299.47	299.47	7/1/2006
59150		3	LAP TX ECTOPIC PREGNANCY W/O REMOVAL TUBES/OVARIES	682.28	682.28	7/1/2006
59151		3	LAP TX ECTOPIC PREGNANCY W/ REMOVAL TUBES/OVARIES	676.87	676.87	7/1/2006
59160		3	CURRETTAGE, POSTPARTUM	221.62	183.20	7/1/2006
59200		3	INSERTION OF HYGROSCOPIC CERVICAL DILATOR	72.24	42.76	7/1/2006
59300		3	REPAIR OF VAGINAL WALL	172.11	131.70	7/1/2006
59320		3	CERCLAGE OF CERVIX DURING PREGNANCY, VAGINAL	143.95	143.95	7/1/2006
59325		3	CERCLAGE OF CERVIX DURING PREGNANCY, ABDOMINAL	229.38	229.38	7/1/2006
59350		3	HYSTERORRHAPHY OF RUPTURED UTERUS	267.08	267.08	7/1/2006
59400		3	OBSTETRICAL CARE	1,464.17	1,464.17	7/1/2006
59409		3	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS);	735.09	735.09	7/1/2006
59410		3	VAGINAL DELIVERY ONLY (WITH OR WITHOUT EPISIOTOMY AND/OR FORCEPS); INCLUDING	821.39	821.39	7/1/2006
59412		3	EXTERNAL CEPHALIC VERSION, W/ OR W/O TOCOLYSIS	97.61	97.61	7/1/2006
59414		3	DELIVERY OF PLACENTA (INFANT BORN OUTSIDE OF HOSP)	87.92	87.92	7/1/2006
59425		3	ANTEPARTUM CARE ONLY;	338.53	260.46	7/1/2006
59426		3	ANTEPARTUM CARE ONLY;	593.54	449.91	7/1/2006
59430		3	POSTPARTUM CARE ONLY, SEPARATE PROCEDURE	128.95	119.34	7/1/2006
59510		3	TOTAL OB CARE W/ CESAREAN DELIVERY	1,659.45	1,659.45	7/1/2006
59514		3	CESAREAN DELIVERY ONLY;	867.69	867.69	7/1/2006
59515		3	CESAREAN DELIVERY ONLY; INCLUDING POSTPARTUM CARE	979.23	979.23	7/1/2006
59525		3	SUBTOTAL OR TOTAL HYSTERECTOMY AFTER CESAREAN DELIVERY (LIST SEPARATELY IN	461.44	461.44	7/1/2006
59812		3	SURGICAL TX SPONTANEOUS ABORTION, ANY TRIMESTER	250.26	250.26	7/1/2006
59820		3	MISSED ABORTION COMPLETED MED OR SURG ANY TRIMESTE	312.63	284.15	7/1/2006
59821		3	SURGICAL TX MISSED ABORTION, SECOND TRIMESTER	326.76	297.94	7/1/2006
59830		3	SEPTIC ABORTION	384.95	384.95	7/1/2006
59840		3	D AND C THERAPEUTIC ABORTION INCLUDES SUCTION	195.28	195.28	7/1/2006
59841		3	LEGAL THERAPEUTIC ABORTION BY D&C	332.79	315.54	7/1/2006
59850		3	THERAPEUTIC ABORTION BY SALINE INJECTION	349.89	349.89	7/1/2006
59851		3	LEGAL ABORTION THERAPEUTIC WITH DILATION AND CURRE	366.84	366.84	7/1/2006
59852		3	LEGAL ABORTION THERAPEUTIC WITH HYSTEROTOMY	505.04	505.04	7/1/2006
59855		3	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES	370.97	370.97	7/1/2006
59856		3	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES	444.70	444.70	7/1/2006
59857		3	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES	536.76	536.76	7/1/2006
59866		3	MULTIFETAL PREGNANCY REDUCTION(S) (MPR)	226.63	226.63	7/1/2006
59870		3	UTERINE EVAC AND CURETTAGE FOR HYDATIFORM MOLE	397.45	397.45	7/1/2006
59871		3	REMOVAL OF CERCLAGE SUTURE UNDER ANESTHESIA (OTHER THAN LOCAL)	146.15	125.63	7/1/2006
60000		3	INCISION AND DRAINAGE OF THYROGLOSSAL DUCT CYST, INFECTED	130.53	123.46	7/1/2006
60001		3	ASPIRATION AND/OR INJECTION, THYROID CYST	83.24	47.47	7/1/2006
60100		3	BIOPSY THYROID, PERCUTANEOUS CORE NEEDLE	104.84	76.02	7/1/2006
60200		3	DRAINAGE THYROID DUCT LESION	565.47	565.47	7/1/2006
60210		3	PARTIAL THYROID LOBECTOMY, UNILATERAL;	606.47	606.47	7/1/2006
60212		3	PARTIAL THYROID LOBECTOMY, UNILATERAL;	875.81	875.81	7/1/2006
60220		3	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH OR WITHOUT ISTHMUSECTOMY	662.16	662.16	7/1/2006
60225		3	TOTAL THYROID LOBECTOMY, UNILATERAL; WITH CONTRALATERAL SUBTOTAL LOBECTOMY,	793.71	793.71	7/1/2006
60240		3	REMOVAL OF THYROID	871.84	871.84	7/1/2006
60252		3	REMOVAL OF THYROID	1,127.46	1,127.46	7/1/2006
60254		3	EXTENSIVE THYROID SURGERY	1,499.85	1,499.85	7/1/2006
60260		3	THYROIDECTOMY, REMOVAL OF ALL REMAINING THYROID TISSUE FOLLOWING PREVIOUS	959.53	959.53	7/1/2006
60270		3	THYROIDECTOMY, INCLUDING SUBSTERNAL THYROID; STERNAL SPLIT OR TRANSTHORACIC	1,129.24	1,129.24	7/1/2006
60271		3	THYROIDECTOMY, INCLUDING SUBSTERNAL THYROID GLAND;	929.79	929.79	7/1/2006
60280		3	REMOVAL THYROID DUCT LESION	378.10	378.10	7/1/2006
60281		3	EXCISION OF THYROGLOSSAL DUCT,CYST,SINUS;RECURRENT	517.33	517.33	7/1/2006
60500		3	EXPLORE PARATHYROID GLANDS	875.45	875.45	7/1/2006
60502		3	RE-EXPLORATION OF PARATHYROIDS	1,100.56	1,100.56	7/1/2006
60505		3	EXPLORE PARATHYROID GLANDS	1,196.14	1,196.14	7/1/2006
60512		3	PARATHYROID AUTOTRANSPLANTATION (LIST SEPARATELY IN ADDITION TO CODE FOR	225.72	225.72	7/1/2006
60520		3	THYMECTOMY, PARTIAL OR TOTAL; TRANSCERVICAL APPROACH (SEPARATE PROCEDURE)	929.74	929.74	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
60521		3	THYMECTOMY, PARTIAL OR TOTAL;	1,059.36	1,059.36	7/1/2006
60522		3	THYMECTOMY, PARTIAL OR TOTAL;	1,279.29	1,279.29	7/1/2006
60540		3	EXPLORATION ADRENAL GLAND	903.87	903.87	7/1/2006
60545		3	EXPLORATION ADRENAL GLAND	1,045.55	1,045.55	7/1/2006
60600		3	REMOVAL CAROTID BODY LESION	1,058.92	1,058.92	7/1/2006
60605		3	REMOVAL CAROTID BODY LESION	1,192.06	1,192.06	7/1/2006
60650		3	LAPAROSCOPY, SURGICAL, WITH ADRENALECTOMY, PARTIAL OR COMPLETE, OR EXPLORATION	1,036.49	1,036.49	7/1/2006
61000		3	SUBDURAL TAP THROUGH FONTANELLE, OR SUTURE, INFANT, UNILATERAL OR BILATERAL;	91.35	91.35	7/1/2006
61001		3	SUBDURAL TAP THROUGH FONTANELLE, OR SUTURE, INFANT, UNILATERAL OR BILATERAL;	92.44	92.44	7/1/2006
61020		3	VENTRICULAR PUNCTURE THROUGH PREVIOUS BURR HOLE, FONTANELLE,	105.67	105.67	7/1/2006
61026		3	VENTRICULAR PUNCTURE THROUGH PREVIOUS BURR HOLE, FONTANELLE, SUTURE, OR	113.59	113.59	7/1/2006
61050		3	REMOVAL BRAIN CANAL FLUID	98.96	98.96	7/1/2006
61055		3	CISTERNAL OR LATERAL CERVICAL (C1-C2) PUNCTURE; WITH INJECTION OF MEDICATION OR	126.56	126.56	7/1/2006
61070		3	PUNCTURE OF SHUNT TUBING OR RESERVOIR FOR ASPIRATION OR INJECTION PROCEDURE	69.13	69.13	7/1/2006
61105		3	TWIST DRILL HOLE FOR SUBDURAL OR VENTRICULAR PUNCTURE;	345.07	345.07	7/1/2006
61107		3	TWIST DRILL HOLE FOR IMPLANT VENTRIC CATH/RECORDIN	292.25	292.25	7/1/2006
61108		3	TWIST DRILL HOLE FOR EVAC OF SUBDURAL HEMATOMA	662.22	662.22	7/1/2006
61120		3	BURR HOLE(S) FOR VENTRICULAR PUNCTURE (INCLUDING INJECTION OF GAS, CONTRAST	558.51	558.51	7/1/2006
61140		3	INCISE SKULL BRAIN BIOPSY	993.61	993.61	7/1/2006
61150		3	INCISE SKULL FOR DRAINAGE	1,075.27	1,075.27	7/1/2006
61151		3	INCISE SKULL FOR DRAINAGE	774.91	774.91	7/1/2006
61154		3	INCISE SKULL FOR DRAINAGE	948.45	948.45	7/1/2006
61156		3	INCISE SKULL FOR DRAINAGE	1,007.52	1,007.52	7/1/2006
61210		3	RELIEVE/MEASURE BRAIN FLUID	340.22	340.22	7/1/2006
61215		3	INSERTION OF SUBCUTANEOUS RESERVOIR TO VENTR CATH	336.55	336.55	7/1/2006
61250		3	BURR HOLES TREPHINE, SUPRATENTORIAL, EXPLORATORY	665.45	665.45	7/1/2006
61253		3	BURR HOLE OR TREPHINE INFRATENTORIAL UNILATERAL/BI	760.78	760.78	7/1/2006
61304		3	INCISE SKULL FOR EXPLORATION	1,336.39	1,336.39	7/1/2006
61305		3	INCISE SKULL FOR EXPLORATION	1,599.63	1,599.63	7/1/2006
61312		3	CRANIECTOMY FOR EVAC OF HEMATOMA, SUPRATENTORIAL	1,525.49	1,525.49	7/1/2006
61313		3	CRANIECTOMY FOR EVAC OF HEMATOMA, INTRACEREBRAL	1,533.22	1,533.22	7/1/2006
61314		3	CRANIECTOMY FOR EVAC OF HEMATOMA, INFRATENTORIAL	1,445.85	1,445.85	7/1/2006
61315		3	CRANIECTOMY FOR EVAC OF HEMATOMA, INTRACEREBELLAR	1,687.50	1,687.50	7/1/2006
61316		3	INCISION AND SUBCUTANEOUS PLACEMENT OF CRANIAL BONE GRAFT (LIST SEPARATELY IN	77.86	77.86	7/1/2006
61320		3	INCISE SKULL FOR DRAINAGE	1,555.94	1,555.94	7/1/2006
61321		3	CRANIECTOMY DRAINAGE OF INTRACRANIAL ABSCESS INFRA	1,720.92	1,720.92	7/1/2006
61322		3	CRANIECTOMY OR CRANIOTOMY, DECOMPRESSIVE, WITH OR WITHOUT DURAPLASTY, FOR	1,749.44	1,749.44	7/1/2006
61323		3	CRANIECTOMY OR CRANIOTOMY, DECOMPRESSIVE, WITH OR WITHOUT DURAPLASTY, FOR	1,829.74	1,829.74	7/1/2006
61330		3	INCISE SKULL FOR EXPLORATION	1,347.49	1,347.49	7/1/2006
61332		3	EXPLORATION OR DECOMPRESSION OF ORBIT TRANSCCRANIA	1,606.12	1,606.12	7/1/2006
61333		3	EXPLOR DECOMPRESS ORBIT TRANSCRAN APPROACH REMOVE	1,611.14	1,611.14	7/1/2006
61334		3	EXPLORATION/DECOMPRESSION ORBIT TRANSCRAN W/REMOVA	1,049.87	1,049.87	7/1/2006
61340		3	OTHER CRANIAL DECOMPRESSION EG SUBTEMPORAL SUPRATE	1,146.81	1,146.81	7/1/2006
61343		3	CRANIECTOMY W/ CERVICAL LAMINECTOMY	1,800.35	1,800.35	7/1/2006
61345		3	OTHER CRANIAL DECOMPRESSION POSTERIOR FOSSA	1,644.27	1,644.27	7/1/2006
61440		3	CRANIOTOMY FOR SECTION OF TENTORIUM CEREBELLI	1,587.50	1,587.50	7/1/2006
61450		3	CRANIECTOMY FOR SECTION COMP OR DECOMP OR SENSORY	1,540.09	1,540.09	7/1/2006
61458		3	CRANIECTOMY EXPLORATION/DECOMPRESS CRANIAL NERVES	1,652.43	1,652.43	7/1/2006
61460		3	CRANIECTOMY SUBOCCIPITAL FOR SECTION OF 1 OR MORE	1,702.65	1,702.65	7/1/2006
61470		3	INCISE SKULL FOR SURGERY	1,532.34	1,532.34	7/1/2006
61480		3	INCISE SKULL FOR SURGERY	1,613.98	1,613.98	7/1/2006
61490		3	CRANIOTOMY FOR LOBOTOMY, INCLUDING CINGULOTOMY	1,557.01	1,557.01	7/1/2006
61500		3	REMOVAL OF SKULL LESION	1,094.31	1,094.31	7/1/2006
61501		3	CRANIECTOMY FOR OSTEOMYELITIS	909.30	909.30	7/1/2006
61510		3	REMOVAL OF BRAIN LESION	1,742.02	1,742.02	7/1/2006
61512		3	REMOVE BRAIN LINING LESION	2,118.44	2,118.44	7/1/2006
61514		3	REMOVAL OF BRAIN ABSCESS	1,532.78	1,532.78	7/1/2006
61516		3	REMOVAL OF BRAIN LESION	1,502.11	1,502.11	7/1/2006
61517		3	IMPLANTATION OF BRAIN INTRACAVITARY CHEMOTHERAPY AGENT (LIST SEPARATELY IN	78.83	78.83	7/1/2006
61518		3	REMOVAL OF BRAIN LESION	2,258.09	2,258.09	7/1/2006
61519		3	REMOVE BRAIN LINING LESION	2,474.68	2,474.68	7/1/2006
61520		3	CRANIECTOMY CEREBELLOPONTINE ANGLE TUMOR	3,228.24	3,228.24	7/1/2006
61521		3	CRANIECTOMY EXCISION BRAIN TUMOR,MIDLINE TUMOR SKU	2,647.53	2,647.53	7/1/2006
61522		3	REMOVAL OF BRAIN ABSCESS	1,776.53	1,776.53	7/1/2006
61524		3	REMOVAL OF BRAIN LESION	1,676.57	1,676.57	7/1/2006
61526		3	REMOVAL SKULL CAVITY LESION	3,014.28	3,014.28	7/1/2006
61530		3	REMOVAL SKULL CAVITY LESION	2,549.03	2,549.03	7/1/2006
61531		3	SUBDURAL IMPLANT OF STRIP ELECTRODES,LNG TERM MONI	915.20	915.20	7/1/2006
61533		3	CRANIECTOMY FOR INSERTION EPIDURAL ELECTRODE ARRAY	1,205.87	1,205.87	7/1/2006
61534		3	REMOVAL OF BRAIN LESION	1,279.00	1,279.00	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
61535		3	CRANIECTOMY REMOVAL EPIDURAL ELECTRO ARRAY WO TISS	732.38	732.38	7/1/2006
61536		3	REMOVAL OF BRAIN LESION	2,135.74	2,135.74	7/1/2006
61537		3	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR LOBECTOMY, TEMPORAL LOBE, WITHOUT	1,545.03	1,545.03	7/1/2006
61538		3	REMOVAL OF BRAIN TISSUE	1,629.18	1,629.18	7/1/2006
61539		3	CRAN F LOBECTOMY W/ELECTROCORTICOGR PARTIAL OR TOT	1,934.02	1,934.02	7/1/2006
61540		3	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR LOBECTOMY, OTHER THAN TEMPORAL	1,842.18	1,842.18	7/1/2006
61541		3	CRANIECTOMY FOR TRANSECTION OF CORPUS CALLOSUM	1,727.09	1,727.09	7/1/2006
61542		3	REMOVAL OF BRAIN TISSUE	1,891.46	1,891.46	7/1/2006
61543		3	CRANIECTOMY FOR PART OR SUBTOTAL HEMISPHERECTOMY	1,768.49	1,768.49	7/1/2006
61544		3	REMOVE/TREAT BRAIN LESION	1,512.80	1,512.80	7/1/2006
61545		3	BONE FLAP CRANIECTOMY TO EXCISE CRANIOPHARYNGIOMA	2,609.22	2,609.22	7/1/2006
61546		3	REMOVAL OF PITUITARY GLAND	1,879.66	1,879.66	7/1/2006
61548		3	REMOVAL OF PITUITARY GLAND	1,276.62	1,276.62	7/1/2006
61550		3	RELEASE SKULL CLOSURE	779.50	779.50	7/1/2006
61552		3	CRANIECTOMY FOR CRANIOSTENOSIS MULTIPLE SUTURES ON	1,030.29	1,030.29	7/1/2006
61556		3	CRANIOTOMY FOR CRANIOSYNOSTOSIS, FRONTAL/PARIETAL	1,284.52	1,284.52	7/1/2006
61557		3	CRANIOTOMY FOR CRANIOSYNOSTOSIS, BIFRONTAL BONE	1,390.29	1,390.29	7/1/2006
61558		3	EXT. CRANIECTOMY FOR MULT CRANIAL SUT. CRANIOSYNOS	1,422.18	1,422.18	7/1/2006
61559		3	EXT. CRANIECTOMY FOR CRANIOSYNOSTOSIS W RECONTOURI	2,015.35	2,015.35	7/1/2006
61563		3	EXC. TUMOR OF CRANIAL BONE W/O OPTIC NERVE DECOMPR	1,589.29	1,589.29	7/1/2006
61564		3	EXC. TUMOR OF CRANIAL BONE W OPTIC NERVE DECOMPRES	2,024.71	2,024.71	7/1/2006
61566		3	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR SELECTIVE AMYGDALOHIPPOCAMPECTOMY	1,861.60	1,861.60	7/1/2006
61567		3	CRANIOTOMY WITH ELEVATION OF BONE FLAP; FOR MULTIPLE SUBPIAL TRANSECTIONS, WITH	2,113.15	2,113.15	7/1/2006
61570		3	CRANIECTOMY OR CRANIOTOMY FOR EXCISION FOREIGN BOD	1,470.04	1,470.04	7/1/2006
61571		3	CRANIECTOMY OR CRANIOTOMY PENETRATING WOUND BRAIN	1,607.46	1,607.46	7/1/2006
61575		3	TRANSORAL APPROACH TO SKULL BASE, BRAIN STEM	2,006.49	2,006.49	7/1/2006
61576		3	TRANSORAL APPROACH TO SKULL BASE W/ SPLIT TONGUE	3,166.50	3,166.50	7/1/2006
61580		3	CRANIOFACIAL APPROACH TO ANTERIOR CRANIAL FOSSA;	2,017.89	2,017.89	7/1/2006
61581		3	CRANIOFACIAL APPROACH TO ANTERIOR CRANIAL FOSSA;	2,112.69	2,112.69	7/1/2006
61582		3	CRANIOFACIAL APPROACH TO ANTERIOR CRANIAL FOSSA;	2,206.42	2,206.42	7/1/2006
61583		3	CRANIOFACIAL APPROACH TO ANTERIOR CRANIAL FOSSA;	2,329.79	2,329.79	7/1/2006
61584		3	ORBITOCRANIAL APPROACH TO ANTERIOR CRANIAL FOSSA, EXTRADURAL,	2,239.46	2,239.46	7/1/2006
61585		3	ORBITOCRANIAL APPROACH TO ANTERIOR CRANIAL FOSSA, EXTRADURAL,	2,429.49	2,429.49	7/1/2006
61586		3	BICORONAL, TRANSZYGOMATIC AND/OR LEFORT I OSTEOTOMY APPROACH TO ANTERIOR	1,752.91	1,752.91	7/1/2006
61590		3	INFRATEMPORAL PRE-AURICULAR APPROACH TO MIDDLE CRANIAL FOSSA	2,574.50	2,574.50	7/1/2006
61591		3	INFRATEMPORAL POST-AURICULAR APPROACH TO MIDDLE CRANIAL FOSSA	2,679.43	2,679.43	7/1/2006
61592		3	ORBITOCRANIAL ZYGOMATIC APPROACH TO MIDDLE CRANIAL FOSSA (CAVERNOUS	2,522.02	2,522.02	7/1/2006
61595		3	TRANSTEMPORAL APPROACH TO POSTERIOR CRANIAL FOSSA, JUGULAR	1,896.41	1,896.41	7/1/2006
61596		3	TRANSCOCHLEAR APPROACH TO POSTERIOR CRANIAL FOSSA, JUGULAR	2,170.92	2,170.92	7/1/2006
61597		3	TRANSCONDYLAR (FAR LATERAL) APPROACH TO POSTERIOR CRANIAL FOSSA,	2,321.60	2,321.60	7/1/2006
61598		3	TRANSPETROSAL APPROACH TO POSTERIOR CRANIAL FOSSA, CLIVUS OR	2,102.08	2,102.08	7/1/2006
61600		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	1,671.03	1,671.03	7/1/2006
61601		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	1,831.12	1,831.12	7/1/2006
61605		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	1,849.54	1,849.54	7/1/2006
61606		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	2,430.85	2,430.85	7/1/2006
61607		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	2,250.10	2,250.10	7/1/2006
61608		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	2,627.53	2,627.53	7/1/2006
61609		3	TRANSECTION OR LIGATION, CAROTID ARTERY IN CAVERNOUS SINUS; WITHOUT REPAIR	575.44	575.44	7/1/2006
61610		3	TRANSECTION OR LIGATION, CAROTID ARTERY IN CAVERNOUS SINUS; WITH REPAIR BY	1,679.47	1,679.47	7/1/2006
61611		3	TRANSECTION OR LIGATION, CAROTID ARTERY IN PETROUS CANAL; WITHOUT REPAIR (LIST	436.96	436.96	7/1/2006
61612		3	TRANSECTION OR LIGATION, CAROTID ARTERY IN PETROUS CANAL; WITH REPAIR BY	1,543.58	1,543.58	7/1/2006
61613		3	OBLITERATION OF CAROTID ANEURYSM, ARTERIOVENOUS MALFORMATION,	2,535.36	2,535.36	7/1/2006
61615		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	2,016.42	2,016.42	7/1/2006
61616		3	RESECTION OR EXCISION OF NEOPLASTIC, VASCULAR OR INFECTIOUS	2,693.75	2,693.75	7/1/2006
61618		3	SECONDARY REPAIR OF DURA FOR CEREBROSPINAL FLUID LEAK, ANTERIOR, MIDDLE OR	1,041.69	1,041.69	7/1/2006
61619		3	SECONDARY REPAIR OF DURA FOR CSF LEAK, ANTERIOR, MIDDLE OR	1,241.79	1,241.79	7/1/2006
61623		3	ENDOVASCULAR TEMPORARY BALLOON ARTERIAL OCCLUSION, HEAD OR NECK	517.89	517.89	7/1/2006
61624		3	TRANSCATH.OCCULSION/EMBOLIZATION,PERCUTANEOUS; CNS	998.07	998.07	7/1/2006
61626		3	TRANSCATH.OCCULSION/EMBOLIZATION,PERCU; NON-CNS	809.38	809.38	7/1/2006
61680		3	SURG OF MALFORMATION, SUPRATENTORIAL, SIMPLE	1,859.42	1,859.42	7/1/2006
61682		3	SURG OF MALFORMATION, SUPRATENTORIAL, COMPLEX	3,643.26	3,643.26	7/1/2006
61684		3	SURG OF MALFORMATION, INFRATENTORIAL, SIMPLE	2,398.65	2,398.65	7/1/2006
61686		3	SURG OF MALFORMATION, INFRATENTORIAL, COMPLEX	3,846.59	3,846.59	7/1/2006
61690		3	SURG OF MALFORMATION, DURAL, SIMPLE	1,768.71	1,768.71	7/1/2006
61692		3	SURG OF MALFORMATION, DURAL, COMPLEX	3,085.62	3,085.62	7/1/2006
61697		3	SURGERY OF COMPLEX INTRACRANIAL ANEURYSM, INTRACRANIAL APPROACH; CAROTID	3,035.41	3,035.41	7/1/2006
61698		3	SURGERY OF COMPLEX INTRACRANIAL ANEURYSM, INTRACRANIAL APPROACH;	2,907.55	2,907.55	7/1/2006
61700		3	SURGERY OF SIMPLE INTRACRANIAL ANEURYSM, INTRACRANIAL APPROACH; CAROTID	3,031.87	3,031.87	7/1/2006
61702		3	INCISE SKULL/VESSEL SURGERY	2,845.02	2,845.02	7/1/2006
61703		3	SURGERY INTRACRANIAL ANEURYSM CERVICAL APPROACH	1,067.01	1,067.01	7/1/2006

Physician Fee Schedule

Provider Specialty 001

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
61705		3	REVISE CIRCULATION TO HEAD	2,144.41	2,144.41	7/1/2006
61708		3	REVISE CIRCULATION TO HEAD	1,829.83	1,829.83	7/1/2006
61710		3	REVISE CIRCULATION TO HEAD	1,623.79	1,623.79	7/1/2006
61711		3	ANASTOMOSIS ARTERIAL EXTRACRANIAL INTRACRANIAL ART	2,176.63	2,176.63	7/1/2006
61720		3	INCISE SKULL/BRAIN SURGERY	997.38	997.38	7/1/2006
61735		3	INCISE SKULL/BRAIN SURGERY	1,201.22	1,201.22	7/1/2006
61750		3	STEREOTACTIC BIOPSY ASPIRATION OR EXCISION	1,111.19	1,111.19	7/1/2006
61751		3	STEREOTACTIC BIOPSY, ASPIRATION, OR EXCISION, INCLUDING BURR HOLE(S), FOR	1,094.77	1,094.77	7/1/2006
61760		3	STEREOTACTIC IMPLANT DEPTH ELECTRODE; LONG TERM MON	1,207.58	1,207.58	7/1/2006
61770		3	STEREOTACTIC LOCALIZATION, INCLUDING BURR HOLE(S), WITH INSERTION OF	1,259.46	1,259.46	7/1/2006
61790		3	STEREOTACTIC LESION OF GAS GANGLION PERCUTANEOUS B	648.84	648.84	7/1/2006
61791		3	STEREOTACTIC LESION TRIGEMINAL MEDULLARY TRACT	892.74	892.74	7/1/2006
61793		3	STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY OR LINEAR ACCELERATOR), ONE	1,054.32	1,054.32	7/1/2006
61795		3	STEREOTACTIC COMPUTER ASSISTED VOLUMETRIC (NAVIGATIONAL) PROCEDURE,	230.44	230.44	7/1/2006
61850		3	BURR TWIST DRILL HOLE IMPLANT NEUROSTIM ELEC CORTI	774.03	774.03	7/1/2006
61860		3	CRANIECTOMY OR CRANIOTOMY IMPLANT NEUROSTIM CORTIC	1,264.57	1,264.57	7/1/2006
61863		3	TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC	1,194.99	1,194.99	7/1/2006
61864		3	TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC	357.63	357.63	7/1/2006
61867		3	TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC	1,846.68	1,846.68	7/1/2006
61868		3	TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC	538.37	538.37	7/1/2006
61870		3	CRANIECTOMY IMPLANT NEUROSTIM CEREBELLAR/CORTICAL	948.38	948.38	7/1/2006
61875		3	CRANIECTOMY IMPLANT NEUROSTIM CEREBEL/SUBCORTICAL	893.74	893.74	7/1/2006
61880		3	REVISION REMOVAL INTRACRAN NEURO STIM ELECTRODESTR	414.69	414.69	7/1/2006
61885		3	INCISION AND SUBCUTANEOUS PLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATO	419.48	419.48	7/1/2006
61886		3	INCISION AND SUBCUTANEOUS PLACEMENT OF CRANIAL NEUROSTIMULATOR PULSE GENERATO	543.37	543.37	7/1/2006
61888		3	REVISON/REMOVAL CRANIAL NEUROSTIMULATOR PULSE GEN./RECEIVER	332.73	332.73	7/1/2006
62000		3	REPAIR OF SKULL FRACTURE	657.85	657.85	7/1/2006
62005		3	REPAIR OF SKULL FRACTURE	960.35	960.35	7/1/2006
62010		3	ELEVATION OF DEPRESSED SKULL FRACTURE WITH DEBRIDE	1,212.70	1,212.70	7/1/2006
62100		3	CRANIOTOMY FOR REPAIR OF DURAL/CEREBROSPINAL FLUID LEAK, INCLUDING SURGERY FOR	1,326.19	1,326.19	7/1/2006
62115		3	REDUCE CRANIOMEGALIC SKULL W/O GRAFT/CRANIOPLASTY	1,291.77	1,291.77	7/1/2006
62116		3	REDUCE CRANIOMEGALIC SKULL WITH CRANIOPLASTY	1,432.03	1,432.03	7/1/2006
62117		3	REDUCE CRANIOMEGALIC SKULL W CRANIOTOMY/RECONSTRUC	1,570.79	1,570.79	7/1/2006
62120		3	REPAIR SKULL CAVITY LESION	1,521.87	1,521.87	7/1/2006
62121		3	CRANIOTOMY W REPAIR ENCEPHALOCELE, SKULL BASE	1,384.39	1,384.39	7/1/2006
62140		3	REPAIR OF SKULL	836.95	836.95	7/1/2006
62141		3	REPAIR OF SKULL	917.55	917.55	7/1/2006
62142		3	REMOVAL BONE FLAP OR PROSTHETIC PLATE OF SKULL	679.29	679.29	7/1/2006
62143		3	REPLACE BONE FLAP OR PROSTHETIC PLATE OF SKULL	810.14	810.14	7/1/2006
62145		3	REPAIR OF SKULL & BRAIN	1,138.23	1,138.23	7/1/2006
62146		3	CRANIOPLASTY W AUTOGRAFT UP TO 5 CM DIAMETER	981.45	981.45	7/1/2006
62147		3	CRANIOPLASTY W AUTOGRAFT LARGER THAN 5CM DIAMETER	1,168.30	1,168.30	7/1/2006
62148		3	INCISION AND RETRIEVAL OF SUBCUTANEOUS CRANIAL BONE GRAFT FOR CRANIOPLASTY	111.47	111.47	7/1/2006
62160		3	NEUROENDOSCOPY, INTRACRANIAL, FOR PLACEMENT OR REPLACEMENT OF VENTRICULAR	176.24	176.24	7/1/2006
62161		3	NEUROENDOSCOPY, INTRACRANIAL; WITH DISSECTION OF ADHESIONS, FENESTRATION OF	1,237.27	1,237.27	7/1/2006
62162		3	NEUROENDOSCOPY, INTRACRANIAL; WITH FENERATION OR EXCISION OF COLLOID CYST,	1,536.53	1,536.53	7/1/2006
62163		3	NEUROENDOSCOPY, INTRACRANIAL; WITH RETRIEVAL OF FOREIGN BODY	979.06	979.06	7/1/2006
62164		3	NEUROENDOSCOPY, INTRACRANIAL; WITH EXCISION OF BRAIN TUMOR, INCLUDING PLACEMENT	1,608.64	1,608.64	7/1/2006
62165		3	NEUROENDOSCOPY, INTRACRANIAL; WITH EXCISION OF PITUITARY TUMOR, TRANSNASAL OR	1,304.54	1,304.54	7/1/2006
62180		3	ESTABLISH BRAIN CAVITY SHUNT	1,276.00	1,276.00	7/1/2006
62190		3	CREATION SHUNT SUBDURAL ARIAL JUGULAR AURICULAR	697.21	697.21	7/1/2006
62192		3	ESTABLISH BRAIN CAVITY SHUNT	761.59	761.59	7/1/2006
62194		3	REPLACEMENT OR IRRIGATION SUBDURAL CATHETER	282.17	282.17	7/1/2006
62200		3	ESTABLISH BRAIN CAVITY SHUNT	1,122.94	1,122.94	7/1/2006
62201		3	VENTRICULOCISTERNOSTOMY, STEREOTACTIC METHOD	927.23	927.23	7/1/2006
62220		3	ESTABLISH BRAIN CAVITY SHUNT	803.57	803.57	7/1/2006
62223		3	ESTABLISH BRAIN CAVITY SHUNT	806.63	806.63	7/1/2006
62225		3	REPLACEMENT OR IRRIGATION VENTRICULAR CATHETER	361.27	361.27	7/1/2006
62230		3	REPLACEMENT OR REVISION OF CEREBROSPINAL FLUID SHUNT, OBSTRUCTED VALVE, OR	653.07	653.07	7/1/2006
62252		3	REPROGRAMMING OF PROGRAMMABLE CEREBROSPINAL SHUNT	80.17	80.17	7/1/2006
62252	26	5	REPROGRAMMING OF PROGRAMMABLE CEREBROSPINAL SHUNT	43.11	43.11	7/1/2006
62252	TC	T	REPROGRAMMING OF PROGRAMMABLE CEREBROSPINAL SHUNT	36.90	36.90	7/1/2006
62256		3	REMOVAL OF COMPLETE CEREBROSPINAL FLUID SHUNT SYSTEM; WITHOUT REPLACEMENT	431.46	431.46	7/1/2006
62258		3	REPLACE BRAIN CAVITY SHUNT	894.85	894.85	7/1/2006
62263		3	PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG,	651.79	336.13	7/1/2006
62264		3	PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG,	422.05	212.39	7/1/2006
62268		3	PERCUTANEOUS ASPIRATION, SPINAL CORD CYST OR SYRINX	563.10	251.41	7/1/2006
62269		3	BIOPSY OF SPINAL CORD, PERCUTANEOUS NEEDLE	676.46	254.48	7/1/2006
62270		3	SPINAL PUNCTURE, LUMBAR, DIAGNOSTIC	141.89	61.07	7/1/2006
62272		3	SPINAL PUNCTURE, THERAPEUTIC, FOR DRAINAGE OF CEREBROSPINAL FLUID (BY NEEDLE OR	172.65	76.17	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
62273		3	INJECTION, EPIDURAL, OF BLOOD OR CLOT PATCH	170.49	103.92	7/1/2006
62280		3	INJECTION/INFUSION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED SALINE	331.80	135.05	7/1/2006
62281		3	INJECTION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED	287.95	129.55	7/1/2006
62282		3	INJECTION/INFUSION OF NEUROLYTIC SUBSTANCE (EG, ALCOHOL, PHENOL, ICED SALINE	365.37	118.28	7/1/2006
62284		3	INJECTION FOR SPINE X-RAY	223.06	80.96	7/1/2006
62287		3	ASPIRATION OR DECOMPRESSION PROCEDURE, PERCUTANEOUS, OF NUCLEUS PULPOSUS OF	488.40	488.40	7/1/2006
62290		3	INJECTION FOR DISC X-RAY	350.13	159.02	7/1/2006
62291		3	INJECTION PROCEDURE FOR DISKOGRAPHY, EACH LEVEL; CERVICAL OR THORACIC	307.84	151.50	7/1/2006
62292		3	INJ PROC CHEMONUCLEOLYSIS LUMBAR 1 OR MORE LEVELS	449.90	449.90	7/1/2006
62294		3	INTRATHECAL INJECTION INTO SPINE	639.25	639.25	7/1/2006
62310		3	INJECTION, SINGLE (NOT VIA INDWELLING CATHETER), NOT INCLUDING NEUROLYTIC	231.18	93.06	7/1/2006
62311		3	INJECTION, SINGLE (NOT VIA INDWELLING CATHETER), NOT INCLUDING NEUROLYTIC	220.81	77.06	7/1/2006
62318		3	INJECTION, INCLUDING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT	266.33	97.74	7/1/2006
62319		3	INJECTION, INCLUDING CATHETER PLACEMENT, CONTINUOUS INFUSION OR INTERMITTENT	235.14	90.06	7/1/2006
62350		3	IMPLANTATION, REVISION OR REPOSITIONING OF TUNNELED INTRATHECAL OR EPIDURAL	400.77	400.77	7/1/2006
62351		3	IMPLANTATION, REVISION OR REPOSITIONING OF INTRATHECAL OR EPIDURAL CATHETER,	646.78	646.78	7/1/2006
62355		3	REMOVAL OF PREVIOUSLY IMPLANTED INTRATHECAL OR EPIDURAL CATHETER	317.21	317.21	7/1/2006
62360		3	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG	191.26	191.26	7/1/2006
62361		3	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG	343.06	343.06	7/1/2006
62362		3	IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG	424.79	424.79	7/1/2006
62365		3	REMOVAL OF SUBCUTANEOUS RESERVOIR OR PUMP, PREVIOUSLY IMPLANTED FOR INTRATHECA	333.12	333.12	7/1/2006
62367		3	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURA	38.18	21.28	7/1/2006
62368		3	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURA	51.24	34.02	7/1/2006
62368	26	5	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURA	34.63	34.68	7/1/2006
62368	TC	T	ELECTRONIC ANALYSIS OF PROGRAMMABLE, IMPLANTED PUMP FOR INTRATHECAL OR EPIDURA	7.14	7.14	7/1/2006
63001		3	DECOMPRESSION OF SPINAL CORD	969.65	969.65	7/1/2006
63003		3	LAMIN F/DECOMP SPIN CORD A/O CAUDA EQ ONE/TWO SEGM	985.53	985.53	7/1/2006
63005		3	REVISION OF SPINAL COLUMN	943.81	943.81	7/1/2006
63011		3	LAMINECTOMY SACRAL DECOMPRESSION SPINAL CORD	873.72	873.72	7/1/2006
63012		3	LAMINECTOMY, LUMBAR W DECOMPRESSION CAUDA EQUINA	969.31	969.31	7/1/2006
63015		3	LAMINECTOMY MORE THAN TWO SEGS CERVICAL	1,197.78	1,197.78	7/1/2006
63016		3	LAMINOTOMY THORACIC	1,185.01	1,185.01	7/1/2006
63017		3	LAMINOTOMY LUMBAR	1,001.20	1,001.20	7/1/2006
63020		3	LAMINOTOMY, CERVICAL, ONE INTERSPACE	937.46	937.46	7/1/2006
63030		3	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING	778.77	778.77	7/1/2006
63035		3	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING	184.10	184.10	7/1/2006
63040		3	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING	1,162.56	1,162.56	7/1/2006
63042		3	REVISION OF SPINAL COLUMN	1,099.55	1,099.55	7/1/2006
63043		3	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING	209.96	209.96	7/1/2006
63044		3	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING	237.99	237.99	7/1/2006
63045		3	LAMINECTOMY, SINGLE SEGMENT, CERVICAL	1,027.64	1,027.64	7/1/2006
63046		3	LAMINECTOMY, SINGLE SEGMENT, THORACIC	987.09	987.09	7/1/2006
63047		3	LAMINECTOMY, SINGLE SEGMENT, LUMBAR	927.22	927.22	7/1/2006
63048		3	LAMINECTOMY, FACETECTOMY AND FORAMINOTOMY (UNILATERAL OR BILATERAL WITH	188.94	188.94	7/1/2006
63055		3	DECOMPRESSION SPINAL CORD, SINGLE SEGMENT,THORACIC	1,346.08	1,346.08	7/1/2006
63056		3	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE	1,255.51	1,255.51	7/1/2006
63057		3	TRANSPEDICULAR APPROACH WITH DECOMPRESSION OF SPINAL CORD, EQUINA AND/OR NERVE	303.79	303.79	7/1/2006
63064		3	HEMILAMINECTOMY THORACIC COSTOVERTEBRAL APPROACH	1,490.38	1,490.38	7/1/2006
63066		3	COSTOVERTEBRAL APPROACH WITH DECOMPRESSION OF SPINAL CORD OR NERVE ROOT(S),	188.09	188.09	7/1/2006
63075		3	DISKECTOMY CERVICAL ANTE APPR W/O ARTHRODESIS	1,203.48	1,203.48	7/1/2006
63076		3	DISKECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/ OR NERVE ROOT(S),	235.15	235.15	7/1/2006
63077		3	DISKECTOMY, SINGLE SPACE, THORACIC	1,282.01	1,282.01	7/1/2006
63078		3	DISKECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/ OR NERVE ROOT(S),	187.22	187.22	7/1/2006
63081		3	VERTEBRAL CORPECTOMY, SINGLE SEGMENT, CERVICAL	1,453.30	1,453.30	7/1/2006
63082		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, ANTERIOR	253.94	253.94	7/1/2006
63085		3	VERTEBRAL CORPECTOMY, SINGLE SEGMENT, THORACIC	1,579.25	1,579.25	7/1/2006
63086		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE,	180.47	180.47	7/1/2006
63087		3	VERTEBRAL CORPECTOMY, SINGLE SEGMENT, LUMBAR	2,056.73	2,056.73	7/1/2006
63088		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, COMBINED	245.77	245.77	7/1/2006
63090		3	VERTEBRAL CORPECTOMY, SINGLE SEGMENT, LUMBAR	1,639.78	1,639.78	7/1/2006
63091		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE,	168.51	168.51	7/1/2006
63101		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, LATERAL	1,917.60	1,917.60	7/1/2006
63102		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, LATERAL	1,917.60	1,917.60	7/1/2006
63103		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, LATERAL	272.23	272.23	7/1/2006
63170		3	LAMINECTOMY FOR MYELOTOMY THORACIC OR THORACOLUMBA	1,218.65	1,218.65	7/1/2006
63172		3	LAMINECTOMY W/ DRAINAGE TO SUBARACHNOID SPACE	1,089.76	1,089.76	7/1/2006
63173		3	LAMINECTOMY W/ DRAINAGE TO PERITONEAL SPACE	1,346.79	1,346.79	7/1/2006
63180		3	LAMINECTOMY CERVICAL ONE OR TWO SEGEMENTS	1,112.38	1,112.38	7/1/2006
63182		3	LAMIN AND SECTION OF DENTATE LIGAMENTS MORE THAN T	1,222.60	1,222.60	7/1/2006
63185		3	REVISE SPINAL COLUMN/NERVES	871.47	871.47	7/1/2006

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63190		3	LAMINECTOMY FOR RHIZOTOMY MORE THAN TWO SEGMENTS	1,038.34	1,038.34	7/1/2006
63191		3	LAMINECTOMY W SECTION OF SPINAL ACCESSORY NERVE	1,124.01	1,124.01	7/1/2006
63194		3	LAMIWECTOMY CORDOTOMY UNILATERAL CERVICAL	1,153.78	1,153.78	7/1/2006
63195		3	REVISE SPINAL COLUMN/CORD	1,156.09	1,156.09	7/1/2006
63196		3	REVISE SPINAL COLUMN/CORD	1,379.00	1,379.00	7/1/2006
63197		3	LAMINECTOMY COROTOMY BILATERAL CERVICAL	1,287.86	1,287.86	7/1/2006
63198		3	REVISE SPINAL COLUMN/CORD	1,340.35	1,340.35	7/1/2006
63199		3	LAMINECTOMY CORDOTOMY BILATERAL THORACIC	1,498.08	1,498.08	7/1/2006
63200		3	LAMINECTOMY FOR TETHERED SPINAL CORD, LUMBAR	1,174.42	1,174.42	7/1/2006
63250		3	REVISE SPINAL CORD VESSELS	2,334.45	2,334.45	7/1/2006
63251		3	LAMINECTOMY ARTERIOVENOVS MALFUNCTION THORACIC	2,461.69	2,461.69	7/1/2006
63252		3	LAMINECTOMY FOR MALFORMATION, THORACOLUMBAR	2,453.13	2,453.13	7/1/2006
63265		3	LAMINECTOMY FOR INTRASPINAL LESION, CERVICAL	1,321.74	1,321.74	7/1/2006
63266		3	LAMINECTOMY FOR INTRASPINAL LESION, THORACIC	1,364.11	1,364.11	7/1/2006
63267		3	EXCISE INTRASPINAL LESION LUMBAR	1,111.98	1,111.98	7/1/2006
63268		3	EXCISE INTRASPINAL LESION, SACRAL	1,093.88	1,093.88	7/1/2006
63270		3	EXCISE INTRASPINAL LESION, CERVICAL	1,629.44	1,629.44	7/1/2006
63271		3	EXCISE INTRASPINAL LESION, THORACIC	1,635.02	1,635.02	7/1/2006
63272		3	EXCISE INTRASPINAL LESION, LUMBAR	1,538.20	1,538.20	7/1/2006
63273		3	EXCISE INTRASPINAL LESION, SACRAL	1,481.29	1,481.29	7/1/2006
63275		3	BIOPSY/EXCISE SPINAL TUMOR, CERVICAL	1,438.61	1,438.61	7/1/2006
63276		3	BIOPSY/EXCISE SPINAL TUMOR, THORACIC	1,427.10	1,427.10	7/1/2006
63277		3	BIOPSY/ EXCISE SPINAL TUMOR, LUMBAR	1,277.45	1,277.45	7/1/2006
63278		3	BIOPSY/ EXCISE SPINAL TUMOR, SACRAL	1,252.80	1,252.80	7/1/2006
63280		3	BIOPSY/ EXCISE SPINAL TUMOR, CERVICAL	1,723.59	1,723.59	7/1/2006
63281		3	BIOPSY/ EXCISE SPINAL TUMOR, THORACIC	1,705.59	1,705.59	7/1/2006
63282		3	BIOPSY/ EXCISE SPINAL TUMOR, LUMBAR	1,606.33	1,606.33	7/1/2006
63283		3	BIOPSY/ EXCISE SPINAL TUMOR, SACRAL	1,529.43	1,529.43	7/1/2006
63285		3	BIOPSY/ EXCISE SPINAL TUMOR, CERVICAL	2,164.93	2,164.93	7/1/2006
63286		3	BIOPSY, EXCISE SPINAL TUMOR	2,147.74	2,147.74	7/1/2006
63287		3	BIOPSY, EXCISE SPINAL TUMOR	2,201.84	2,201.84	7/1/2006
63290		3	BIOPSY, EXCISE SPINAL TUMOR	2,230.37	2,230.37	7/1/2006
63295		3	OSTEOPLASTIC RECONSTRUCTION OF DORSAL SPINAL ELEMENTS, FOLLOWING PRIMARY	283.96	283.96	7/1/2006
63300		3	REMOVAL VERTEBRAL BODY	1,482.11	1,482.11	7/1/2006
63301		3	REMOVAL OF VERTEBRAL BODY	1,622.89	1,622.89	7/1/2006
63302		3	REMOVAL OF VERTEBRAL BODY	1,647.58	1,647.58	7/1/2006
63303		3	REMOVAL OF VERTEBRAL BODY	1,762.55	1,762.55	7/1/2006
63304		3	REMOVAL OF VERTEBRAL BODY	1,811.21	1,811.21	7/1/2006
63305		3	REMOVAL OF VERTEBRAL BODY	1,882.12	1,882.12	7/1/2006
63306		3	REMOVAL OF VERTEBRAL BODY	1,940.98	1,940.98	7/1/2006
63307		3	REMOVAL OF VERTEBRAL BODY	1,797.84	1,797.84	7/1/2006
63308		3	VERTEBRAL CORPECTOMY (VERTEBRAL BODY RESECTION), PARTIAL OR COMPLETE, FOR	304.27	304.27	7/1/2006
63600		3	EXAMINE SPINAL CORD LESION	717.87	717.87	7/1/2006
63610		3	STEREOTACTIC STIM OF SPINAL CORD PERCU NOT FOLLOWE	2,316.14	408.62	7/1/2006
63615		3	STEREOTACTIC BIOPSY ASPIRATION/EXC LESION	954.61	954.61	7/1/2006
63650		3	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY, EPIDURAL	359.84	359.84	7/1/2006
63655		3	LAMINECTOMY FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES, PLATE/PADDLE,	652.89	652.89	7/1/2006
63660		3	REVISION OR REMOVAL OF SPINAL NEUROSTIMULATOR ELECTRODE PERCUTANEOUS ARRAY(S)	359.29	359.29	7/1/2006
63685		3	INCISION SUBCUT PLACEMENT NEU/STIMULATOR RECEIVER	414.47	414.47	7/1/2006
63688		3	REVISION REMOVAL SPINAL NEUROSTIMULATOR RECEIVERR	331.50	331.50	7/1/2006
63700		3	REPAIR OF SPINAL HERNIATION	1,016.22	1,016.22	7/1/2006
63702		3	REPAIR OF SPINAL HERNIATION	1,125.51	1,125.51	7/1/2006
63704		3	REPAIR OF SPINAL HERNIATION	1,295.69	1,295.69	7/1/2006
63706		3	REPAIR OF SPINAL HERNIATION	1,460.89	1,460.89	7/1/2006
63707		3	REPAIR OF DURAL/CEREBROSPINAL FLUID LEAK, NOT REQUIRING LAMINECTOMY	716.63	716.63	7/1/2006
63709		3	REPAIR OF DURAL/CEREBROSPINAL FLUID LEAK OR PSEUDOMENINGOCELE, WITH LAMINECTOMY	897.13	897.13	7/1/2006
63710		3	DURAL GRAFT SPINAL	883.52	883.52	7/1/2006
63740		3	CREATION OF SHUNT, INCLUDING LAMINECTOMY	714.46	714.46	7/1/2006
63741		3	CREATION SHUNT, LUMBAR, PERCUTANEO W/O LAMINECTOMY	491.48	491.48	7/1/2006
63744		3	REPLACEMENT IRRIGATION OR REVISION OF LUMBAR SUBAR	506.65	506.65	7/1/2006
63746		3	REMOVAL SHUNT SYSTEM WITHOUT REPLACEMENT	391.02	391.02	7/1/2006
64400		3	INJECTION, ANESTHETIC AGENT;	104.51	55.82	7/1/2006
64402		3	INJECTION, ANESTHETIC AGENT;	100.40	66.95	7/1/2006
64405		3	INJECTION, ANESTHETIC AGENT;	97.73	64.60	7/1/2006
64408		3	INJECTION, ANESTHETIC AGENT;	105.40	81.22	7/1/2006
64410		3	INJECTION, ANESTHETIC AGENT;	136.69	68.79	7/1/2006
64412		3	INJECTION, ANESTHETIC AGENT;	132.43	58.57	7/1/2006
64413		3	INJECTION, ANESTHETIC AGENT;	113.52	68.81	7/1/2006
64415		3	INJECTION, ANESTHETIC AGENT;	148.43	70.59	7/1/2006
64416		3	INJECTION, ANESTHETIC AGENT; BRACHIAL PLEXUS, CONTINUOUS INFUSION BY CATHETER	158.96	158.96	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
64417		3	INJECTION, ANESTHETIC AGENT;	155.07	70.61	7/1/2006
64418		3	INJECTION, ANESTHETIC AGENT;	136.25	63.71	7/1/2006
64420		3	INJECTION, ANESTHETIC AGENT;	173.17	58.24	7/1/2006
64421		3	INJECTION, ANESTHETIC AGENT;	265.07	80.24	7/1/2006
64425		3	INJECTION, ANESTHETIC AGENT;	120.65	83.89	7/1/2006
64430		3	INJECTION, ANESTHETIC AGENT;	138.34	73.09	7/1/2006
64435		3	INJECTION, ANESTHETIC AGENT;	139.58	78.64	7/1/2006
64445		3	INJECTION, ANESTHETIC AGENT;	144.36	72.15	7/1/2006
64446		3	INJECTION, ANESTHETIC AGENT; SCIATIC NERVE, CONTINUOUS INFUSION BY CATHETER,	154.74	154.74	7/1/2006
64447		3	INJECTION, ANESTHETIC AGENT; FEMORAL NERVE, SINGLE	70.32	70.32	7/1/2006
64448		3	INJECTION, ANESTHETIC AGENT; FEMORAL NERVE, CONTINUOUS INFUSION BY CATHETER	138.98	138.98	7/1/2006
64449		3	INJECTION, ANESTHETIC AGENT; LUMBAR PLEXUS, POSTERIOR APPROACH, CONTINUOUS	143.26	143.26	7/1/2006
64450		3	INJECTION, ANESTHETIC AGENT;	89.79	64.62	7/1/2006
64470		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, PARAVERTEBRAL FACET JOINT OR FACET	309.28	92.66	7/1/2006
64472		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, PARAVERTEBRAL FACET JOINT OR FACET	125.79	59.55	7/1/2006
64475		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, PARAVERTEBRAL FACET JOINT OR FACET	281.61	73.93	7/1/2006
64476		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, PARAVERTEBRAL FACET JOINT OR FACET	107.45	44.84	7/1/2006
64479		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL; CERVICAL	330.72	111.45	7/1/2006
64480		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL; CERVICAL	152.15	73.32	7/1/2006
64483		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL; LUMBAR OR	332.94	98.43	7/1/2006
64484		3	INJECTION, ANESTHETIC AGENT AND/OR STEROID, TRANSFORAMINAL EPIDURAL; LUMBAR OR	158.70	61.98	7/1/2006
64505		3	INJECTION, ANESTHETIC AGENT;	92.34	73.13	7/1/2006
64508		3	INJECTION, ANESTHETIC AGENT;	152.23	66.45	7/1/2006
64510		3	INJECTION, ANESTHETIC AGENT;	160.14	62.43	7/1/2006
64517		3	INJECTION, ANESTHETIC AGENT; SUPERIOR HYPOGASTRIC PLEXUS	172.16	110.56	7/1/2006
64520		3	INJECTION, ANESTHETIC AGENT;	221.03	68.66	7/1/2006
64530		3	INJECTION, ANESTHETIC AGENT;	206.91	80.72	7/1/2006
64555		3	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; PERIPHERAL NERVE	189.11	125.52	7/1/2006
64561		3	PERCUTANEOUS IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; SACRAL NERVE	1,252.36	346.13	7/1/2006
64573		3	INCISION IMPLANT NEU/STIM ELECTROD CRANIAL NERVE	479.42	479.42	7/1/2006
64575		3	INCISION FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; PERIPHERAL NERVE	258.76	258.76	7/1/2006
64577		3	INCISION FOR IMPLANTATION OF ELECTRODES NEUROMUSCU	298.91	298.91	7/1/2006
64581		3	INCISION FOR IMPLANTATION OF NEUROSTIMULATOR ELECTRODES; SACRAL NERVE	688.04	688.04	7/1/2006
64585		3	REVISION OR REMOVAL PERIPHERAL STIMULATOR ELECTODE	453.39	149.66	7/1/2006
64590		3	INCISION FOR PLACEMENT STIMULATOR RECEIVER	327.94	166.63	7/1/2006
64595		3	REVISION REMOVAL PERIPHERAL NEU/STIM RECEIVER	411.80	130.59	7/1/2006
64600		3	INJECTION TREATMENT OF NERVE	442.37	186.34	7/1/2006
64605		3	INJECTION TREATMENT OF NERVE	537.13	291.96	7/1/2006
64610		3	INJECTION TREATMENT OF NERVE	586.58	415.07	7/1/2006
64612		3	CHEMODENERVATION OF MUSCLE(S); MUSCLE(S) INNERVATED BY FACIAL NERVE (EG, FOR	155.57	116.82	7/1/2006
64613		3	DESTUCTION BY NEURO.AGENT; CERVICO-SPINAL MUSCLES	170.48	113.51	7/1/2006
64614		3	CHEMODENERVATION OF MUSCLE(S); EXTREMITY(S) AND/OR TRUNK MUSCLE(S) (EG, FOR	188.50	124.90	7/1/2006
64620		3	INJECTION TREATMENT OF NERVE	274.79	150.91	7/1/2006
64622		3	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE; LUMBAR OR	369.85	157.53	7/1/2006
64623		3	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE; LUMBAR OR	135.40	44.31	7/1/2006
64626		3	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE; CERVICAL OR	381.05	187.95	7/1/2006
64627		3	DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE; CERVICAL OR	193.75	52.32	7/1/2006
64630		3	DESTRUCTION BY NEUROLYTIC AGENT; PUDENDAL NERVE	203.83	159.78	7/1/2006
64640		3	INJECTION TREATMENT OF NERVE	244.83	167.10	7/1/2006
64680		3	DESTRUCTION BY NEUROLYTIC AGENT COLIAC PLEXUS W/W	321.39	145.84	7/1/2006
64681		3	DESTRUCTION BY NEUROLYTIC AGENT, WITH OR WITHOUT RADIOLOGIC MONITORING;	442.60	202.46	7/1/2006
64702		3	REVISION OF NERVE,FINGER/TOE	294.17	294.17	7/1/2006
64704		3	REVISION OF NERVE, HAND/FOOT	288.19	288.19	7/1/2006
64708		3	REVISION OF NERVE, ARM/LEG	403.40	403.40	7/1/2006
64712		3	REVISION OF SCIATIC NERVE	465.17	465.17	7/1/2006
64713		3	REVISION OF ARM NERVES	630.89	630.89	7/1/2006
64714		3	REVISION OF LOW BACK NERVES	538.05	538.05	7/1/2006
64716		3	NEUROZYSIS A/O TRANSPOSITION CRANIAL NERVE	439.74	439.74	7/1/2006
64718		3	REVISE ULNAR NERVE AT ELBOW	438.56	438.56	7/1/2006
64719		3	REVISE ULNAR NERVE AT WRIST	342.04	342.04	7/1/2006
64721		3	NEUROLYSIS AND/OR TRANSPOSITION MEDIAN NERVE AT CA	349.11	349.11	7/1/2006
64722		3	REVISE FOREARM NERVE	280.94	280.94	7/1/2006
64726		3	REVISE FOOT/TOE NERVE	255.32	255.32	7/1/2006
64727		3	INTERNAL NERVE REVISION	172.35	172.35	7/1/2006
64732		3	INCISION OF BROW NERVE	296.63	296.63	7/1/2006
64734		3	INCISION OF CHEEK NERVE	331.76	331.76	7/1/2006
64736		3	INCISION OF CHIN NERVE	310.72	310.72	7/1/2006
64738		3	TRANSECTION OR AVULSION OF INFERIOR ALVEOLAR NERVE	383.85	383.85	7/1/2006
64740		3	TRANSECTION OR AVULSION OF LINGUAL NERVE	386.71	386.71	7/1/2006
64742		3	INCISION OF FACIAL NERVE	396.40	396.40	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
64744		3	INCISE NERVE, BACK OF HEAD	338.96	338.96	7/1/2006
64746		3	INCISE DIAPHRAGM NERVE	381.41	381.41	7/1/2006
64752		3	INCISION OF VAGUS NERVE	417.34	417.34	7/1/2006
64755		3	TRANSECTION OR AVULSION OF; VAGUS NERVES LIMITED TO PROXIMAL STOMACH (SELECTIVE	715.23	715.23	7/1/2006
64760		3	INCISION OF VAGUS NERVE	383.08	383.08	7/1/2006
64761		3	INCISE NERVE IN PELVIS	359.55	359.55	7/1/2006
64763		3	INCISE HIP/THIGH NERVE	443.37	443.37	7/1/2006
64766		3	INCISE HIP/THIGH NERVE	510.43	510.43	7/1/2006
64771		3	TRANSECTION/AVULSION CRANIAL NERVE EXTRADURAL	477.09	477.09	7/1/2006
64772		3	INCISE SPINAL NERVE	452.79	452.79	7/1/2006
64774		3	REMOVE LESION, SKIN NERVE	330.01	330.01	7/1/2006
64776		3	REMOVE NERVE LESION, DIGIT	323.35	323.35	7/1/2006
64778		3	EXCISION OF NEUROMA; DIGITAL NERVE, EACH ADDITIONAL DIGIT (LIST SEPARATELY IN	172.25	172.25	7/1/2006
64782		3	REMOVE NERVE LESION	368.95	368.95	7/1/2006
64783		3	EXCISION OF NEUROMA; HAND OR FOOT, EACH ADDITIONAL NERVE, EXCEPT SAME DIGIT	206.26	206.26	7/1/2006
64784		3	REMOVE NERVE LESION	603.92	603.92	7/1/2006
64786		3	REMOVE SCIATIC NERVE LESION	941.54	941.54	7/1/2006
64787		3	REMOVE NERVE LESION/IMPLANT	238.37	238.37	7/1/2006
64788		3	REMOVAL OF NERVE LESION	296.51	296.51	7/1/2006
64790		3	REMOVAL OF NERVE LESION	692.10	692.10	7/1/2006
64792		3	REMOVAL OF NERVE LESION	884.54	884.54	7/1/2006
64795		3	BIOPSY OF NERVE	171.84	171.84	7/1/2006
64802		3	REMOVE SYMPATHETIC NERVES	529.04	529.04	7/1/2006
64804		3	REMOVE SYMPATHETIC NERVES	812.96	812.96	7/1/2006
64809		3	REMOVE SYMPATHETIC NERVES	717.45	717.45	7/1/2006
64818		3	REMOVE SYMPATHETIC NERVES	576.30	576.30	7/1/2006
64820		3	SYMPATHECTOMY; DIGITAL ARTERIES, EACH DIGIT	643.45	643.45	7/1/2006
64821		3	SYMPATHECTOMY; RADIAL ARTERY	587.02	587.02	7/1/2006
64822		3	SYMPATHECTOMY; ULNAR ARTERY	584.70	584.70	7/1/2006
64823		3	SYMPATHECTOMY; SUPERFICIAL PALMAR ARCH	678.75	678.75	7/1/2006
64831		3	REPAIR OF NERVE, DIGITAL	606.83	606.83	7/1/2006
64832		3	SUTURE OF DIGITAL NERVE, HAND OR FOOT; EACH ADDITIONAL DIGITAL NERVE (LIST	320.35	320.35	7/1/2006
64834		3	REPAIR OF NERVE, HAND	637.13	637.13	7/1/2006
64835		3	REPAIR OF NERVE, HAND	687.72	687.72	7/1/2006
64836		3	REPAIR OF NERVE, HAND	686.01	686.01	7/1/2006
64837		3	SUTURE OF EACH ADDITIONAL NERVE, HAND OR FOOT (LIST SEPARATELY IN ADDITION TO	354.68	354.68	7/1/2006
64840		3	REPAIR OF NERVE, FOOT	773.52	773.52	7/1/2006
64856		3	REPAIR/TRANSPOSE NERVE	849.76	849.76	7/1/2006
64857		3	SUTURE MAJOR PERIPH NERVE ARM/LEG EXC SCIATIC W/O	891.84	891.84	7/1/2006
64858		3	REPAIR SCIATIC NERVE	1,027.41	1,027.41	7/1/2006
64859		3	SUTURE OF EACH ADDITIONAL MAJOR PERIPHERAL NERVE (LIST SEPARATELY IN ADDITION	241.32	241.32	7/1/2006
64861		3	REPAIR OF ARM NERVES	1,176.46	1,176.46	7/1/2006
64862		3	REPAIR OF LOW BACK NERVES	1,194.26	1,194.26	7/1/2006
64864		3	REPAIR OF FACIAL NERVE	771.29	771.29	7/1/2006
64865		3	SUTURE FACIAL NERVE INTRATEMPORAL W/WO GRAFTING	1,031.66	1,031.66	7/1/2006
64866		3	FUSION OF FACIAL/OTHER NERVE	1,050.18	1,050.18	7/1/2006
64868		3	FUSION OF FACIAL/OTHER NERVE	917.29	917.29	7/1/2006
64870		3	FUSION OF FACIAL/OTHER NERVE	894.74	894.74	7/1/2006
64872		3	REPAIR OF NERVE	114.10	114.10	7/1/2006
64874		3	REPAIR & REVISE NERVE	167.64	167.64	7/1/2006
64876		3	SUTURE OF NERVE;	190.10	190.10	7/1/2006
64885		3	NERVE GRAFT,HEAD/NECK; UP TO 4CM.	1,052.82	1,052.82	7/1/2006
64886		3	NERVE GRAFT, HEAD/NECK; MORE THAN 4 CM.	1,243.70	1,243.70	7/1/2006
64890		3	NERVE GRAFT, HAND OR FOOT	929.37	929.37	7/1/2006
64891		3	NERVE GRAFT SINGLE STRAND HAND OR FOOT MORE THAN 4	869.65	869.65	7/1/2006
64892		3	NERVE GRAFT, ARM OR LEG	878.09	878.09	7/1/2006
64893		3	NERVE GRAFT SINGLE STRAND ARM OR LEG MORE THAN 4 C	948.64	948.64	7/1/2006
64895		3	NERVE GRAFT, HAND OR FOOT	1,071.81	1,071.81	7/1/2006
64896		3	NERVE GRAFT MULTIPLE STRANDS HAND OR FOOT MORE THA	1,174.10	1,174.10	7/1/2006
64897		3	NERVE GRAFT, ARM OR LEG	1,069.21	1,069.21	7/1/2006
64898		3	NERVE GRAFT SINGLE STRAND MORE THAN 4 CM	1,156.30	1,156.30	7/1/2006
64901		3	NERVE GRAFT, EACH ADDITIONAL NERVE; SINGLE STRAND (LIST SEPARATELY IN ADDITION	573.68	573.68	7/1/2006
64902		3	NERVE GRAFT, EACH ADDITIONAL NERVE; MULTIPLE STRANDS (CABLE) (LIST SEPARATELY	658.98	658.98	7/1/2006
64905		3	NERVE PEDICLE TRANSFER FIRST STAGE	831.99	831.99	7/1/2006
64907		3	NERVE PEDICLE TRANSFER SECOND STAGE	1,165.68	1,165.68	7/1/2006
65091		3	REVISE EYEBALL	516.82	516.82	7/1/2006
65101		3	REMOVAL OF EYEBALL	577.12	577.12	7/1/2006
65110		3	REMOVAL OF EYEBALL	974.29	974.29	7/1/2006
65112		3	REMOVE EYE, REVISE SOCKET	1,154.88	1,154.88	7/1/2006
65114		3	REMOVE EYE, REVISE SOCKET	1,196.42	1,196.42	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
65205		3	REMOVAL OF FOREIGN BODY, EXTERNAL EYE;	47.45	35.86	7/1/2006
65210		3	REMOVE FOREIGN BODY FROM EYE	57.99	43.75	7/1/2006
65220		3	REMOVAL OF FOREIGN BODY, EXTERNAL EYE;	47.91	35.99	7/1/2006
65222		3	REMOVAL OF FOREIGN BODY, EXTERNAL EYE;	63.88	46.99	7/1/2006
65235		3	REMOVAL OF FOREIGN BODY, INTRAOCULAR; FROM ANTERIOR CHAMBER OF EYE OR LENS	504.61	504.61	7/1/2006
65260		3	REMOVE FOREIGN BODY FROM EYE	727.63	727.63	7/1/2006
65265		3	REMOVE FOREIGN BODY FROM EYE	819.59	819.59	7/1/2006
65270		3	REPAIR WOUND OF EYE	244.04	116.52	7/1/2006
65272		3	REPAIR WOUND OF EYE	397.58	250.85	7/1/2006
65273		3	REP LACERATION CONJUCTIVA BY MOBILAZATION REARR W	280.59	280.59	7/1/2006
65275		3	REPAIR WOUND OF EYE	407.55	328.72	7/1/2006
65280		3	REPAIR WOUND OF EYE	491.19	491.19	7/1/2006
65285		3	REPAIR WOUND OF EYE	784.51	784.51	7/1/2006
65286		3	REPAIR OF LACERATION BY APPLICATION OF TISSUE GLUE	574.21	357.59	7/1/2006
65290		3	REPAIR WOUND OF EYE SOCKET	358.89	358.89	7/1/2006
65400		3	REMOVAL OF EYE LESION	501.30	428.10	7/1/2006
65410		3	BIOPSY OF CORNEA OF EYE	124.76	86.67	7/1/2006
65420		3	REMOVAL OF EYE LESION	448.74	302.00	7/1/2006
65426		3	REMOVE/REPAIR EYE LESION	532.26	357.71	7/1/2006
65430		3	SCRAPING OF CORNEA, DIAGNOSTIC, FOR SMEAR AND/OR CULTURE	97.26	87.00	7/1/2006
65435		3	REMOVAL OF CORNEAL EPITHELIUM;	67.17	57.56	7/1/2006
65436		3	CURETTE/TREAT CORNEA	291.13	277.22	7/1/2006
65450		3	DESTRUCTION OF LESION OF CORNEA BY CRYOTHERAPY, PHOTOCOAGULATION	256.55	252.25	7/1/2006
65600		3	MULTIPLE PUNCTURES OF ANTERIOR CORNEA (EG, FOR CORNEAL EROSION, TATTOO)	292.24	237.26	7/1/2006
65710		3	CORNEAL TRANSPLANT	829.93	829.93	7/1/2006
65730		3	CORNEAL TRANSPLANT	927.57	927.57	7/1/2006
65750		3	CORNEAL TRANSPLANT	953.84	953.84	7/1/2006
65755		3	KERATOPLASTY, PENETRATING	947.00	947.00	7/1/2006
65770		3	KERATOPROSTHESIS	1,089.71	1,089.71	7/1/2006
65772		3	CORNEAL RELAXING INCISION	342.76	296.06	7/1/2006
65775		3	CORNEAL WEDGE RESECTION	412.29	412.29	7/1/2006
65800		3	PARACENTESIS OF ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE);	130.45	109.92	7/1/2006
65805		3	DRAINAGE OF EYEBALL	143.05	110.25	7/1/2006
65810		3	DRAINAGE OF EYEBALL	336.51	336.51	7/1/2006
65815		3	DRAINAGE OF EYEBALL	519.43	346.86	7/1/2006
65820		3	RELIEVE INNER EYE PRESSURE	602.31	602.31	7/1/2006
65850		3	INCISION OF EYEBALL	670.22	670.22	7/1/2006
65855		3	TRABECULOPLASTY BY LASER ONE OR MORE SESSIONS	285.72	245.64	7/1/2006
65860		3	SEVERING ASHESIONS OF ANTER. SEGMT. LASER TECHNIQ.	265.74	214.73	7/1/2006
65865		3	RELIEVE INNER EYE ADHESIONS	394.52	394.52	7/1/2006
65870		3	RELIEVE INNER EYE ADHESIONS	445.50	445.50	7/1/2006
65875		3	RELIEVE INNER EYE ADHESIONS	468.03	468.03	7/1/2006
65880		3	RELIEVE INNER EYE ADHESIONS	496.48	496.48	7/1/2006
65900		3	REMOVAL OF EPITHELIAL DOWNGROWTH, ANTERIOR CHAMBER OF EYE	745.73	745.73	7/1/2006
65920		3	REMOVAL OF IMPLANTED MATERIAL, ANTERIOR SEGMENT OF EYE	582.78	582.78	7/1/2006
65930		3	REMOVAL OF BLOOD CLOT, ANTERIOR SEGMENT OF EYE	502.91	502.91	7/1/2006
66020		3	INJECTION, ANTERIOR CHAMBER OF EYE (SEPARATE PROCEDURE); AIR OR LIQUID	162.76	106.78	7/1/2006
66030		3	INJECTION, ANTERIOR CHAMBER (SEPARATE PROCEDURE);	144.76	88.78	7/1/2006
66130		3	REMOVE EYEBALL LESION	604.89	471.74	7/1/2006
66150		3	INCISION OF EYEBALL	621.41	621.41	7/1/2006
66155		3	INCISION OF EYEBALL	618.24	618.24	7/1/2006
66160		3	INCISION OF EYEBALL	715.46	715.46	7/1/2006
66165		3	INCISION OF EYEBALL	604.28	604.28	7/1/2006
66170		3	FISTULIZATION OF SCLERA FOR GLAUCOMA; TRABECULECTOMY AB EXTERNO IN ABSENCE OF	856.98	856.98	7/1/2006
66172		3	FISTULIZATION OF SCLERA FOR GLAUCOMA;	1,062.60	1,062.60	7/1/2006
66180		3	AQUEOUS SHUNT TO EXTRAOCULAR RESERVOIR	896.87	896.87	7/1/2006
66185		3	REVISION OF AQUEOUS SHUNT TO EXTRAOCULAR RESERVOIR	547.02	547.02	7/1/2006
66220		3	REPAIR EYEBALL LESION	524.43	524.43	7/1/2006
66225		3	REPAIR/GRAFT EYEBALL LESION	699.93	699.93	7/1/2006
66250		3	FOLLOW-UP SURGERY OF EYEBALL	610.04	404.02	7/1/2006
66500		3	INCISION OF IRIS	291.38	291.38	7/1/2006
66505		3	INCISION OF IRIS	316.75	316.75	7/1/2006
66600		3	REMOVAL OF IRIS LESION	594.98	594.98	7/1/2006
66605		3	REMOVAL OF IRIS	810.38	810.38	7/1/2006
66625		3	REMOVAL OF IRIS	347.32	347.32	7/1/2006
66630		3	REMOVAL OF IRIS	418.35	418.35	7/1/2006
66635		3	REMOVAL OF IRIS	422.58	422.58	7/1/2006
66680		3	REPAIR OF IRIS	376.93	376.93	7/1/2006
66682		3	SUTURE OF IRIS CILIARY BODY W/RETRIEVAL OF SUTURE	449.96	449.96	7/1/2006
66700		3	CILIARY BODY DESTRUCTION; DIATHERMY.	351.49	307.76	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
66710		3	CILIARY BODY DISTRUCTION; CYCLOPHOTCOAGULATION.	348.61	304.55	7/1/2006
66711		3	CILIARY BODY DESTRUCTION; CYCLOPHOTOCOAGULATION, ENDOSCOPIC	459.49	459.49	7/1/2006
66720		3	CILIARY BODY DESTRUCTION; CRYTHERAPY.	370.16	334.39	7/1/2006
66740		3	CILIARY BODY DESTRUCTION; CYCLODIALYSIS.	345.96	308.86	7/1/2006
66761		3	REVISION OF IRIS	336.60	293.87	7/1/2006
66762		3	REVISION OF IRIS	357.64	312.26	7/1/2006
66770		3	REMOVAL OF INNER EYE LESION	394.17	351.44	7/1/2006
66820		3	INCISION OF LENS LESION	337.17	337.17	7/1/2006
66821		3	DISCISSION SECONDARY CATARACT; LASER	222.94	207.38	7/1/2006
66825		3	REPOSITIONING INTRAOCULAR LENS PROS; INCISIONAL	606.24	606.24	7/1/2006
66830		3	REMOVAL OF LENS LESION	534.02	534.02	7/1/2006
66840		3	REMOVAL LENS MATERIAL ASPIRATION TECHNIQUE ONE OR	521.29	521.29	7/1/2006
66850		3	REMOVAL OF LENS	591.71	591.71	7/1/2006
66852		3	REMOVAL OF LENS MATERIAL, PARS PLANA W/WO VITRECTO	638.83	638.83	7/1/2006
66920		3	EXTRACTION OF LENS	571.22	571.22	7/1/2006
66930		3	EXTRACTION OF LENS	647.36	647.36	7/1/2006
66940		3	EXTRACTION OF LENS	583.44	583.44	7/1/2006
66982		3	EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS	827.41	827.41	7/1/2006
66983		3	INTRACAPSULAR EXTRACTION WITH INSERTION OF PROSTHE	529.57	529.57	7/1/2006
66984		3	EXTRACAPSULAR CATARACT REMOVAL WITH LENS PROSTHESI	623.00	623.00	7/1/2006
66985		3	INSERT LENS PROSTHESIS	557.42	557.42	7/1/2006
66986		3	EXCHANGE OF INTRAOCULAR LENS.	759.94	759.94	7/1/2006
66990		3	USE OF OPHTHALMIC ENDOSCOPE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY	78.83	78.83	7/1/2006
67005		3	PARTIAL REMOVAL OF EYE FLUID	372.61	372.61	7/1/2006
67010		3	PARTIAL REMOVAL OF EYE FLUID	434.67	434.67	7/1/2006
67015		3	RELEASE OF EYE FLUID	470.91	470.91	7/1/2006
67025		3	REPLACE EYE FLUID	560.11	460.42	7/1/2006
67027		3	IMPLANTATION OF INTRAVITREAL DRUG DELIVERY SYSTEM (EG, GANCICLOVIR IMPLANT),	667.99	667.99	7/1/2006
67028		3	INTRAVITREAL INJECTION OF A PHARMACOLOGIC AGENT (SEPARATE PROCEDURE)	183.25	141.85	7/1/2006
67030		3	INCISE INNER EYE STRANDS	373.85	373.85	7/1/2006
67031		3	SEVERING OF VITREOUS STRANDS, LASER SURGERY	288.61	256.81	7/1/2006
67036		3	VITRECTOMY, PARS PLANA APPROACH	743.79	743.79	7/1/2006
67038		3	STRIP RETINAL MEMBRANE	1,301.97	1,301.97	7/1/2006
67039		3	VITRECTOMY, MECH., W FOCAL ENDOLASER PHOTOCOAGULAT	943.15	943.15	7/1/2006
67040		3	LASER TREATMENT OF RETINA	1,093.27	1,093.27	7/1/2006
67101		3	REPAIR OF RETINAL DETACHMENT, ONE OR MORE SESSIONS	582.34	496.22	7/1/2006
67105		3	REPAIR OF RETINAL DETACHMENT, ONE OR MORE SESSIONS; PHOTOCOAGULATION, WITH OR	543.24	479.31	7/1/2006
67107		3	REPAIR OF RETINAL DETACHMENT; SCLERAL BUCKLING (SUCH AS LAMELLAR SCLERAL	925.66	925.66	7/1/2006
67108		3	REPAIR OF RETINAL DETACHMENT; WITH VITRECTOMY, ANY METHOD, WITH OR WITHOUT AIR	1,250.95	1,250.95	7/1/2006
67110		3	REPAIR OF RETINAL DETACHMENT; BY INJECTION OF AIR OR OTHER GAS (EG, PNEUMATIC	666.80	572.40	7/1/2006
67112		3	REPAIR OF RETINAL DETACHMENT; BY SCLERAL BUCKLING OR VITRECTOMY, ON PATIENT	1,017.22	1,017.22	7/1/2006
67115		3	RELEASE OF ENCIRCLING MATERIAL	353.65	353.65	7/1/2006
67120		3	REVISION OF INNER EYE	506.47	405.45	7/1/2006
67121		3	REMOVAL OF IMPLANTED MATERIAL, INTRAOCULAR	678.84	678.84	7/1/2006
67141		3	PROPHYLAXIS OF RETINAL DETACHMENT	387.27	354.15	7/1/2006
67145		3	PROPHYLAXIS OF RETINAL DETACHMENT;PHOTOCOAGULATION	389.32	362.82	7/1/2006
67208		3	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR	451.83	431.63	7/1/2006
67210		3	DESTRUCTION OF LOCALIZED LESION OF RETINA (EG, MACULAR EDEMA, TUMORS), ONE OR	545.60	522.74	7/1/2006
67218		3	TREATMENT INNER EYE LESION	1,091.01	1,091.01	7/1/2006
67220		3	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION),	833.10	786.40	7/1/2006
67221		3	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION);	292.37	208.56	7/1/2006
67225		3	DESTRUCTION OF LOCALIZED LESION OF CHOROID (EG, CHOROIDAL NEOVASCULARIZATION);	25.66	24.34	7/1/2006
67227		3	DESTRUCTION OF RETINOPATHY, ONE OR MORE SESSIONS	462.75	427.64	7/1/2006
67228		3	DESTRUCTION OF RETINOPATHY, PHOTOCOAGULATION	853.71	756.00	7/1/2006
67250		3	REINFORCE EYEBALL WALL	626.98	626.98	7/1/2006
67255		3	REINFORCE/GRAFT EYEBALL WALL	658.78	658.78	7/1/2006
67311		3	STRABISMUS SURGERY, RECESSION OR RESECTION PROCEDURE; ONE HORIZONTAL MUSCLE	447.64	447.64	7/1/2006
67312		3	STRABISMUS SURGERY, TWO HORIZONTAL MUSCLES	541.25	541.25	7/1/2006
67314		3	STRABISMUS SURGERY, ONE VERTICAL MUSCLE	496.98	496.98	7/1/2006
67316		3	STRABISMUS SURGERY, 2 OR MORE VERTICAL MUSCLES	607.80	607.80	7/1/2006
67318		3	STRABISMUS SURGERY, ANY PROCEDURE, SUPERIOR OBLIQUE MUSCLE	521.91	521.91	7/1/2006
67320		3	TRANSPOSITION PROCEDURE (EG, FOR PARETIC EXTRAOCULAR MUSCLE), ANY EXTRAOCULAR	225.52	225.52	7/1/2006
67331		3	STRABISMUS SURGERY ON PATIENT WITH PREVIOUS EYE SURGERY OR INJURY THAT DID NOT	211.59	211.59	7/1/2006
67332		3	STRABISMUS SURGERY ON PATIENT WITH SCARRING OF EXTRAOCULAR MUSCLES (EG, PRIOR	233.83	233.83	7/1/2006
67334		3	STRABISMUS SURGERY BY POSTERIOR FIXATION SUTURE TECHNIQUE, WITH OR WITHOUT	207.15	207.15	7/1/2006
67335		3	PLACEMENT OF ADJUSTABLE SUTURE(S) DURING STRABISMUS SURGERY, INCLUDING	129.74	129.74	7/1/2006
67340		3	STRABISMUS SURGERY INVOLVING EXPLORATION AND/OR REPAIR OF DETACHED EXTRAOCULAR	256.09	256.09	7/1/2006
67343		3	RELEASE EXTENSIVE SCAR TISSUE W/O DETACHING MUSCLE	489.07	489.07	7/1/2006
67345		3	CHEMODENERVATION OF EXTRAOCULAR MUSCLE	196.27	177.39	7/1/2006
67350		3	BIOPSY EYE BALL MUSCLE	169.05	169.05	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
67400		3	ORBITOTOMY WITHOUT BONE FLAP (FRONTAL OR TRANSCONJUNCTIVAL APPROACH); FOR	737.88	737.88	7/1/2006
67405		3	EXPLORE/TREAT EYE SOCKET	619.88	619.88	7/1/2006
67412		3	EXPLORE/TREAT EYE SOCKET	715.75	715.75	7/1/2006
67413		3	EXPLORE/TREAT EYE SOCKET	728.91	728.91	7/1/2006
67414		3	ORBITOTOMY WO FLAP;W BONE REMOVAL FOR DECOMPRESS.	814.75	814.75	7/1/2006
67415		3	EXPLORE/TREAT EYE SOCKET	90.61	90.61	7/1/2006
67420		3	EXPLORE/TREAT EYE SOCKET	1,325.29	1,325.29	7/1/2006
67430		3	EXPLORE/TREAT EYE SOCKET	995.69	995.69	7/1/2006
67440		3	EXPLORE/TREAT EYE SOCKET	960.33	960.33	7/1/2006
67445		3	ORBITOTOMY W FLAP/WINDOW; W BONE REMOVAL.	1,001.23	1,001.23	7/1/2006
67450		3	EXPLORE/TREAT EYE SOCKET	989.24	989.24	7/1/2006
67500		3	INJECT/TREAT EYE SOCKET	51.79	39.20	7/1/2006
67505		3	INJECT/TREAT EYE SOCKET	53.53	40.94	7/1/2006
67515		3	INJECTION OF MEDICATION OR OTHER SUBSTANCE INTO TENON'S CAPSULE	42.20	35.24	7/1/2006
67560		3	REVISE EYE SOCKET IMPLANT	772.33	772.33	7/1/2006
67570		3	OPTIC NERVE DECOMPRESSION.	954.99	954.99	7/1/2006
67700		3	BLEPHAROTOMY, DRAINAGE OF ABSCESS, EYELID	250.28	92.28	7/1/2006
67710		3	INCISION OF EYELID	216.40	77.95	7/1/2006
67715		3	INCISION OF EYELID	223.84	88.03	7/1/2006
67800		3	REMOVE EYELID LESION	104.95	85.74	7/1/2006
67801		3	REMOVE EYELID LESIONS	135.01	111.49	7/1/2006
67805		3	REMOVE EYELID LESIONS	166.26	137.11	7/1/2006
67808		3	REMOVE EYELID LESION(S)	266.03	266.03	7/1/2006
67810		3	BIOPSY OF EYELID	165.30	77.19	7/1/2006
67820		3	CORRECTION OF TRICHIASIS;	52.84	51.51	7/1/2006
67825		3	CORRECTION OF TRICHIASIS; EPILATION BY OTHER THAN FORCEPS (EG, BY	108.91	98.00	7/1/2006
67830		3	REVISE EYELASHES	246.88	112.73	7/1/2006
67835		3	REVISE EYELASHES	359.62	359.62	7/1/2006
67840		3	EXCISION EYELID LESION WITHOUT CLOSURE OR WITH SIM	257.59	130.40	7/1/2006
67850		3	DESTRUCTION OF LESION OF LID MARGIN (UP TO 1 CM)	174.41	111.15	7/1/2006
67875		3	TEMPORARY CLOSURE OF EYELIDS BY SUTURE	159.85	81.35	7/1/2006
67880		3	REVISION OF EYELID(S)	360.43	267.02	7/1/2006
67882		3	CONSTRUCTION INTERMARGINAL ADHESIONS WITH TRANSPOS	441.32	347.58	7/1/2006
67901		3	REPAIR EYELID DEFECT	442.16	442.16	7/1/2006
67902		3	REPAIR EYELID DEFECT	444.94	444.94	7/1/2006
67903		3	REPAIR EYELID DEFECT	557.45	422.97	7/1/2006
67904		3	REPAIR BLEPHAROPTOSIS LEVATOR RESECTION EXTERNAL A	554.43	408.36	7/1/2006
67906		3	REPAIR EYELID DEFECT	433.23	421.63	7/1/2006
67908		3	REPAIR BLEPHAROPTOSIS CONJUCTIVO-TARSO-LEVATOR RES	411.05	368.32	7/1/2006
67909		3	REVISE EYELID DEFECT	467.83	365.48	7/1/2006
67911		3	REVISE EYELID DEFECT	355.17	355.17	7/1/2006
67912		3	CORRECTION OF LAGOPHTHALMOS, WITH IMPLANTATION OF UPPER EYELID LID LOAD (EG,	839.25	394.42	7/1/2006
67914		3	REPAIR EYELID DEFECT	347.17	237.86	7/1/2006
67915		3	REPAIR EYELID DEFECT	316.91	211.25	7/1/2006
67916		3	REPAIR EYELID DEFECT	464.56	355.26	7/1/2006
67917		3	REPAIR EYELID DEFECT	505.55	392.93	7/1/2006
67921		3	REPAIR EYELID DEFECT	331.66	222.02	7/1/2006
67922		3	REPAIR EYELID DEFECT	310.04	205.04	7/1/2006
67923		3	REPAIR EYELID DEFECT	487.86	383.20	7/1/2006
67924		3	REPAIR EYELID DEFECT	511.45	370.35	7/1/2006
67930		3	REPAIR EYELID WOUND	323.78	206.19	7/1/2006
67935		3	REPAIR EYELID WOUND	515.43	378.96	7/1/2006
67938		3	REMOVE FOREIGN BODY, EYELID	228.13	91.00	7/1/2006
67950		3	REVISION OF EYELIDS	504.31	390.70	7/1/2006
67961		3	REVISION OF EYELIDS	500.59	379.04	7/1/2006
67966		3	REVISION OF EYELIDS	548.10	429.53	7/1/2006
67971		3	RECONSTRUCTION OF EYELID	606.11	606.11	7/1/2006
67973		3	RECONSTRUCTION OF EYELID	789.28	789.28	7/1/2006
67974		3	RECONSTRUCTION OF EYELID	785.55	785.55	7/1/2006
67975		3	RECONSTRUCTION OF EYELID	570.73	570.73	7/1/2006
68020		3	INCISE/DRAIN EYELID LESION	97.41	90.78	7/1/2006
68040		3	TREATMENT OF EYELID LESIONS	55.04	45.77	7/1/2006
68100		3	BIOPSY EYELID LINING	158.20	81.68	7/1/2006
68110		3	REMOVE EYELID LINING LESION	201.93	120.45	7/1/2006
68115		3	REMOVE EYELID LINING LESION	285.80	151.33	7/1/2006
68130		3	REMOVE EYELID LINING LESION	472.15	335.36	7/1/2006
68135		3	REMOVE EYELID LINING LESION	128.60	122.97	7/1/2006
68200		3	SUBCONJUNCTIVAL INJECTION	35.99	29.03	7/1/2006
68320		3	REVISE/GRAFT EYELID LINING	573.81	382.69	7/1/2006
68325		3	REVISE/GRAFT EYELID LINING	492.04	492.04	7/1/2006

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68326		3	REVISE EYELID LINING	478.10	478.10	7/1/2006
68328		3	REVISE/GRAFT EYELID LINING	548.71	548.71	7/1/2006
68330		3	REVISE EYELID LINING	491.74	335.73	7/1/2006
68335		3	REVISE/GRAFT EYELID LINING	478.78	478.78	7/1/2006
68340		3	SEPARATE EYELID ADHESIONS	449.40	290.74	7/1/2006
68360		3	REVISE EYELID LINING	429.01	300.82	7/1/2006
68362		3	REVISE EYELID LINING	484.84	484.84	7/1/2006
68400		3	INCISE/DRAIN TEAR GLAND	258.77	123.30	7/1/2006
68420		3	INCISE/DRAIN TEAR SAC	291.03	155.23	7/1/2006
68440		3	INCISE TEAR DUCT OPENING	104.22	77.06	7/1/2006
68500		3	REMOVAL OF TEAR GLAND	731.98	731.98	7/1/2006
68505		3	PARTIAL REMOVAL TEAR GLAND	759.57	759.57	7/1/2006
68510		3	BIOPSY OF TEAR GLAND	414.36	240.47	7/1/2006
68520		3	REMOVAL OF TEAR SAC	524.98	524.98	7/1/2006
68525		3	BIOPSY OF TEAR SAC	231.44	231.44	7/1/2006
68530		3	CLEARANCE OF TEAR DUCT	406.83	223.33	7/1/2006
68540		3	REMOVE TEAR GLAND LESION	704.90	704.90	7/1/2006
68550		3	REMOVE TEAR GLAND LESION	872.04	872.04	7/1/2006
68700		3	REPAIR TEAR DUCTS	443.37	443.37	7/1/2006
68705		3	REVISE TEAR DUCT OPENING	214.92	136.08	7/1/2006
68720		3	INCISE TEAR DUCTS	593.37	593.37	7/1/2006
68745		3	INCISE TEAR DUCTS	583.33	583.33	7/1/2006
68750		3	ESTABLISH TEAR DUCT CHANNEL	595.92	595.92	7/1/2006
68760		3	CLOSE TEAR DUCT OPENING	181.94	118.35	7/1/2006
68761		3	CLOSURE OF LACRIMAL PUNCTUM; BY PLUG, EACH	125.87	94.07	7/1/2006
68770		3	CLOSE TEAR SYSTEM FISTULA	366.10	366.10	7/1/2006
68801		3	DILATION OF LACRIMAL PUNCTUM, WITH OR WITHOUT IRRIGATION	99.58	84.02	7/1/2006
68810		3	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION;	192.27	159.48	7/1/2006
68811		3	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; REQUIRING GENERAL	167.76	167.76	7/1/2006
68815		3	PROBING OF NASOLACRIMAL DUCT, WITH OR WITHOUT IRRIGATION; WITH INSERTION OF	392.72	212.53	7/1/2006
68840		3	EXPLORATION OF TEAR DUCTS	99.38	83.48	7/1/2006
68850		3	INJECTION OF CONTRAST MEDIUM FOR DACRYOCYSTOGRAPHY	58.87	52.25	7/1/2006
69000		3	DRAIN EXTERNAL EAR LESION	150.69	100.02	7/1/2006
69005		3	DRAIN EXTERNAL EAR LESION	177.26	140.83	7/1/2006
69020		3	DRAIN OUTER EAR CANAL LESION	188.54	124.61	7/1/2006
69100		3	BIOPSY EXTERNAL EAR	86.49	42.77	7/1/2006
69105		3	BIOPSY EXTERNAL AUDITORY CANAL	110.05	57.72	7/1/2006
69110		3	PARTIAL REMOVAL EXTERNAL EAR	354.31	278.79	7/1/2006
69120		3	REMOVAL OF EXTERNAL EAR	359.57	359.57	7/1/2006
69140		3	REMOVE EAR CANAL LESION(S)	742.75	742.75	7/1/2006
69145		3	REMOVE EAR CANAL LESION(S)	291.28	208.80	7/1/2006
69150		3	EXTENSIVE OUTER EAR SURGERY	956.07	956.07	7/1/2006
69155		3	EXTENSIVE EAR/NECK SURGERY	1,441.21	1,441.21	7/1/2006
69200		3	REMOVAL FOREIGN BODY FROM EXTERNAL AUDITORY CANAL;	108.27	47.32	7/1/2006
69205		3	CLEAR OUTER EAR CANAL	90.55	90.55	7/1/2006
69210		3	REMOVE IMPACTED EAR WAX	43.98	30.73	7/1/2006
69220		3	DEBRIDEMENT, MASTOIDECTOMY CAVITY, SIMPLE	110.00	55.67	7/1/2006
69222		3	DEBRIDEMENT, MASTOIDECTOMY CAVITY, COMPLEX	181.02	121.73	7/1/2006
69310		3	RECONSTRUCTION OF EXTERNAL AUDITORY CANAL (MEATOPLASTY) (EG, FOR STENOSIS DUE	948.22	948.22	7/1/2006
69320		3	REBUILD OUTER EAR CANAL	1,366.47	1,366.47	7/1/2006
69400		3	EUSTACHIAN TUBE INFLATION, TRANSNASAL;	103.37	53.69	7/1/2006
69401		3	EUSTACHIAN TUBE INFLATION, TRANSNASAL;	64.91	45.36	7/1/2006
69405		3	EUSTACHIAN TUBE CATHETERIZATION, TRANSTYMPANIC	215.79	176.37	7/1/2006
69420		3	INCISION OF EARDRUM	155.08	103.08	7/1/2006
69421		3	INCISION OF EARDRUM	137.62	137.62	7/1/2006
69424		3	REMOVAL VENTILATING TUBE INSERT BY OTHER PHYSICIAN	104.75	54.74	7/1/2006
69433		3	TYMPANOSTOMY, LOCAL OR TOPICAL ANESTHESIA	160.40	112.04	7/1/2006
69436		3	TYMPANOSTOMY, GENERAL ANESTHESIA	151.12	151.12	7/1/2006
69440		3	EXPLORATION OF MIDDLE EAR	577.71	577.71	7/1/2006
69450		3	TYMPANOLYSIS TRANSCANAL	444.06	444.06	7/1/2006
69501		3	REMOVAL OF MASTOID BONE	642.10	642.10	7/1/2006
69502		3	MASTOIDECTOMY COMPLETE	852.92	852.92	7/1/2006
69505		3	REMOVAL MASTOID STRUCTURES	1,062.18	1,062.18	7/1/2006
69511		3	REMOVAL MASTOID STRUCTURES	1,091.46	1,091.46	7/1/2006
69530		3	REMOVE PART OF TEMPORAL BONE	1,443.72	1,443.72	7/1/2006
69535		3	REMOVE PART OF TEMPORAL BONE	2,428.19	2,428.19	7/1/2006
69540		3	REMOVE EAR LESION	169.72	111.09	7/1/2006
69550		3	REMOVE EAR LESION	908.98	908.98	7/1/2006
69552		3	REMOVE EAR LESION	1,422.79	1,422.79	7/1/2006
69554		3	REMOVE EAR LESION	2,266.68	2,266.68	7/1/2006

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69601		3	REVISE MASTOID SURGERY	921.60	921.60	7/1/2006
69602		3	REVISE MASTOID SURGERY	953.08	953.08	7/1/2006
69603		3	REVISE MASTOID SURGERY	1,140.09	1,140.09	7/1/2006
69604		3	REVISE MASTOID SURGERY	985.08	985.08	7/1/2006
69605		3	REVISE MASTOID SURGERY	1,395.07	1,395.07	7/1/2006
69610		3	REPAIR OF EARDRUM	351.92	276.07	7/1/2006
69620		3	REPAIR OF EARDRUM	592.07	431.76	7/1/2006
69631		3	REPAIR EARDRUM STRUCTURES	745.02	745.02	7/1/2006
69632		3	REBUILD EARDRUM STRUCTURES	929.53	929.53	7/1/2006
69633		3	TYMPANOPLASTY W/O MASTOIDECTOMY WITH OSSICULAR CHA	891.06	891.06	7/1/2006
69635		3	REPAIR EARDRUM STRUCTURES	1,060.21	1,060.21	7/1/2006
69636		3	REBUILD EARDRUM STRUCTURES	1,216.83	1,216.83	7/1/2006
69637		3	TYMPAN ANTRO/MASTOID W OSSICULAR CHAIN RECON AND S	1,209.99	1,209.99	7/1/2006
69641		3	REVISE MIDDLE EAR & MASTOID	905.24	905.24	7/1/2006
69642		3	REVISE MIDDLE EAR & MASTOID	1,177.43	1,177.43	7/1/2006
69643		3	REVISE MIDDLE EAR & MASTOID	1,071.61	1,071.61	7/1/2006
69644		3	REVISE MIDDLE EAR & MASTOID	1,319.14	1,319.14	7/1/2006
69645		3	REVISE MIDDLE EAR & MASTOID	1,284.75	1,284.75	7/1/2006
69646		3	REVISE MIDDLE EAR & MASTOID	1,369.86	1,369.86	7/1/2006
69650		3	RELEASE MIDDLE EAR BONE	694.63	694.63	7/1/2006
69660		3	REVISE MIDDLE EAR BONE	821.13	821.13	7/1/2006
69661		3	STAPEDECTOMY WITH FOOT PLATE DRILL OUT	1,083.45	1,083.45	7/1/2006
69662		3	REVISION STAPEDECTOMY OR STAPEDOTOMY	1,040.72	1,040.72	7/1/2006
69666		3	REPAIR MIDDLE EAR STRUCTURES	700.09	700.09	7/1/2006
69667		3	REPAIR MIDDLE EAR STRUCTURES	700.78	700.78	7/1/2006
69670		3	REMOVE MASTOID AIR CELLS	823.96	823.96	7/1/2006
69676		3	TYMPANIC NEURECTOMY	718.11	718.11	7/1/2006
69700		3	CLOSE MASTOID FISTULA	618.42	618.42	7/1/2006
69720		3	RELEASE FACIAL NERVE	1,025.99	1,025.99	7/1/2006
69725		3	RELEASE FACIAL NERVE	1,637.27	1,637.27	7/1/2006
69740		3	REPAIR FACIAL NERVE	1,048.64	1,048.64	7/1/2006
69745		3	REPAIR FACIAL NERVE	1,123.24	1,123.24	7/1/2006
69801		3	LABYRINTHOTOMY, WITH OR WITHOUT CRYOSURGERY INCLUDING OTHER NONEXCISIONAL	638.05	638.05	7/1/2006
69802		3	INCISE INNER EAR	904.73	904.73	7/1/2006
69805		3	EXPLORE INNER EAR	917.13	917.13	7/1/2006
69806		3	EXPLORE INNER EAR	833.62	833.62	7/1/2006
69820		3	ESTABLISH INNER EAR WINDOW	764.91	764.91	7/1/2006
69840		3	REVISE INNER EAR WINDOW	824.42	824.42	7/1/2006
69905		3	REMOVE INNER EAR	796.58	796.58	7/1/2006
69910		3	REMOVE INNER EAR & MASTOID	910.46	910.46	7/1/2006
69915		3	INCISE INNER EAR NERVE	1,349.05	1,349.05	7/1/2006
69930		3	COCHLEAR DEVICE IMPLANTATION WITH OR W/O MASTOIDECTOMY	1,125.34	1,125.34	7/1/2006
69950		3	INCISE INNER EAR NERVE	1,601.87	1,601.87	7/1/2006
69955		3	RELEASE FACIAL NERVE	1,739.36	1,739.36	7/1/2006
69960		3	RELEASE INNER EAR CANAL	1,688.16	1,688.16	7/1/2006
69970		3	REMOVE INNER EAR LESION	1,908.33	1,908.33	7/1/2006
69990		3	MICROSURGICAL TECHNIQUES, REQUIRING USE OF OPERATING MICROSCOPE (LIST	203.31	203.31	7/1/2006
70010		3	MYELOGRAPHY, POSTERIOR FOSSA	205.73	205.73	7/1/2006
70010	26	5	MYELOGRAPHY, POSTERIOR FOSSA	56.91	56.91	7/1/2006
70010	TC	T	MYELOGRAPHY, POSTERIOR FOSSA	148.82	148.82	7/1/2006
70015		3	CISTERNOGRAPHY, POSITIVE CONTRAST	104.16	104.16	7/1/2006
70015	26	5	CISTERNOGRAPHY, POSITIVE CONTRAST	57.60	57.60	7/1/2006
70015	TC	T	CISTERNOGRAPHY, POSITIVE CONTRAST	46.56	46.56	7/1/2006
70030		3	RADIOLOGIC EXAM EYE	22.71	22.71	7/1/2006
70030	26	5	RADIOLOGIC EXAM EYE	8.34	8.34	7/1/2006
70030	TC	T	RADIOLOGIC EXAM EYE	14.37	14.37	7/1/2006
70100		3	RADIOLOGIC EXAM MANDIBLE PARTIAL	26.38	26.38	7/1/2006
70100	26	5	RADIOLOGIC EXAM MANDIBLE PARTIAL	8.70	8.70	7/1/2006
70100	TC	T	RADIOLOGIC EXAM MANDIBLE PARTIAL	17.68	17.68	7/1/2006
70110		3	RADIOLOGIC EXAM MANDIBLE COMPLETE	33.34	33.34	7/1/2006
70110	26	5	RADIOLOGIC EXAM MANDIBLE COMPLETE	11.88	11.88	7/1/2006
70110	TC	T	RADIOLOGIC EXAM MANDIBLE COMPLETE	21.46	21.46	7/1/2006
70120		3	RADIOLOGIC EXAM MASTOID	30.16	30.16	7/1/2006
70120	26	5	RADIOLOGIC EXAM MASTOID	8.70	8.70	7/1/2006
70120	TC	T	RADIOLOGIC EXAM MASTOID	21.46	21.46	7/1/2006
70130		3	RADIOLOGIC EXAM MASTOIDS, COMPLETE	43.33	43.33	7/1/2006
70130	26	5	RADIOLOGIC EXAM MASTOIDS, COMPLETE	16.35	16.35	7/1/2006
70130	TC	T	RADIOLOGIC EXAM MASTOIDS, COMPLETE	26.99	26.99	7/1/2006
70134		3	RADIOLOGIC EXAM INTERNAL AUDITORY COMPLETE	41.68	41.68	7/1/2006
70134	26	5	RADIOLOGIC EXAM INTERNAL AUDITORY COMPLETE	16.35	16.35	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
70134	TC	T	RADIOLOGIC EXAM INTERNAL AUDITORY COMPLETE	25.33	25.33	7/1/2006
70140		3	RADIOLOGIC EXAM, FACIAL BONES	30.52	30.52	7/1/2006
70140	26	5	RADIOLOGIC EXAM, FACIAL BONES	9.06	9.06	7/1/2006
70140	TC	T	RADIOLOGIC EXAM, FACIAL BONES	21.46	21.46	7/1/2006
70150		3	RADIOLOGIC EXAM FACIAL BONES, COMPLETE	39.23	39.23	7/1/2006
70150	26	5	RADIOLOGIC EXAM FACIAL BONES, COMPLETE	12.24	12.24	7/1/2006
70150	TC	T	RADIOLOGIC EXAM FACIAL BONES, COMPLETE	26.99	26.99	7/1/2006
70160		3	RADIOLOGIC EXAM NASAL BONES	26.02	26.02	7/1/2006
70160	26	5	RADIOLOGIC EXAM NASAL BONES	8.34	8.34	7/1/2006
70160	TC	T	RADIOLOGIC EXAM NASAL BONES	17.68	17.68	7/1/2006
70170		3	DACRYOCYSTOGRAPHY	47.19	47.19	7/1/2006
70170	26	5	DACRYOCYSTOGRAPHY	14.34	14.34	7/1/2006
70170	TC	T	DACRYOCYSTOGRAPHY	32.85	32.85	7/1/2006
70190		3	RADIOLOGIC EXAM, OPTIC FORAMINA	31.57	31.57	7/1/2006
70190	26	5	RADIOLOGIC EXAM, OPTIC FORAMINA	10.11	10.11	7/1/2006
70190	TC	T	RADIOLOGIC EXAM, OPTIC FORAMINA	21.46	21.46	7/1/2006
70200		3	RADIOLOGIC EXAM, ORBITS, COMPLETE	40.28	40.28	7/1/2006
70200	26	5	RADIOLOGIC EXAM, ORBITS, COMPLETE	13.29	13.29	7/1/2006
70200	TC	T	RADIOLOGIC EXAM, ORBITS, COMPLETE	26.99	26.99	7/1/2006
70210		3	RADIOLOGIC EXAM SINUSES	29.80	29.80	7/1/2006
70210	26	5	RADIOLOGIC EXAM SINUSES	8.34	8.34	7/1/2006
70210	TC	T	RADIOLOGIC EXAM SINUSES	21.46	21.46	7/1/2006
70220		3	RADIOLOGIC EXAM SINUSES COMPLETE	38.87	38.87	7/1/2006
70220	26	5	RADIOLOGIC EXAM SINUSES COMPLETE	11.88	11.88	7/1/2006
70220	TC	T	RADIOLOGIC EXAM SINUSES COMPLETE	26.99	26.99	7/1/2006
70240		3	RADIOLOGIC EXAM SELLA TURCICA	23.43	23.43	7/1/2006
70240	26	5	RADIOLOGIC EXAM SELLA TURCICA	9.06	9.06	7/1/2006
70240	TC	T	RADIOLOGIC EXAM SELLA TURCICA	14.37	14.37	7/1/2006
70250		3	RADIOLOGIC EXAM SKULL	32.98	32.98	7/1/2006
70250	26	5	RADIOLOGIC EXAM SKULL	11.52	11.52	7/1/2006
70250	TC	T	RADIOLOGIC EXAM SKULL	21.46	21.46	7/1/2006
70260		3	RADIOLOGIC EXAM SKULL COMPLETE	47.21	47.21	7/1/2006
70260	26	5	RADIOLOGIC EXAM SKULL COMPLETE	16.35	16.35	7/1/2006
70260	TC	T	RADIOLOGIC EXAM SKULL COMPLETE	30.86	30.86	7/1/2006
70300		3	RADIOLOGIC EXAM TEETH	14.56	14.56	7/1/2006
70300	26	5	RADIOLOGIC EXAM TEETH	5.49	5.49	7/1/2006
70300	TC	T	RADIOLOGIC EXAM TEETH	9.07	9.07	7/1/2006
70310		3	RADIOLOGIC EXAM, TEETH PARTIAL EXAM	23.01	23.01	7/1/2006
70310	26	5	RADIOLOGIC EXAM, TEETH PARTIAL EXAM	8.64	8.64	7/1/2006
70310	TC	T	RADIOLOGIC EXAM, TEETH PARTIAL EXAM	14.37	14.37	7/1/2006
70320		3	RADIOLOGIC EXAM TEETH COMPLETE	37.79	37.79	7/1/2006
70320	26	5	RADIOLOGIC EXAM TEETH COMPLETE	10.80	10.80	7/1/2006
70320	TC	T	RADIOLOGIC EXAM TEETH COMPLETE	26.99	26.99	7/1/2006
70328		3	RADIOLOGIC EXAM TEMPOROMANDIBULAR JOINT	25.39	25.39	7/1/2006
70328	26	5	RADIOLOGIC EXAM TEMPOROMANDIBULAR JOINT	8.70	8.70	7/1/2006
70328	TC	T	RADIOLOGIC EXAM TEMPOROMANDIBULAR JOINT	16.69	16.69	7/1/2006
70330		3	RADIOLOGIC EXAM TEETH	40.50	40.50	7/1/2006
70330	26	5	RADIOLOGIC EXAM TEETH	11.52	11.52	7/1/2006
70330	TC	T	RADIOLOGIC EXAM TEETH	28.97	28.97	7/1/2006
70332		3	TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	99.18	99.18	7/1/2006
70332	26	5	TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	26.53	26.53	7/1/2006
70332	TC	T	TEMPOROMANDIBULAR JOINT ARTHROGRAPHY	72.65	72.65	7/1/2006
70336		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)	456.69	456.69	7/1/2006
70336	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)	71.13	71.13	7/1/2006
70336	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)	385.56	385.56	7/1/2006
70350		3	CEPHALOGRAM, ORTHODONTIC	21.72	21.72	7/1/2006
70350	26	5	CEPHALOGRAM, ORTHODONTIC	8.67	8.67	7/1/2006
70350	TC	T	CEPHALOGRAM, ORTHODONTIC	13.05	13.05	7/1/2006
70355		3	ORTHOPANTOGRAM	29.55	29.55	7/1/2006
70355	26	5	ORTHOPANTOGRAM	9.75	9.75	7/1/2006
70355	TC	T	ORTHOPANTOGRAM	19.80	19.80	7/1/2006
70360		3	RADIOLOGIC EXAM; NECK	22.71	22.71	7/1/2006
70360	26	5	RADIOLOGIC EXAM; NECK	8.34	8.34	7/1/2006
70360	TC	T	RADIOLOGIC EXAM; NECK	14.37	14.37	7/1/2006
70370		3	RADIOLOGIC EXAM; PHARYNX OR LARYNX	60.07	60.07	7/1/2006
70370	26	5	RADIOLOGIC EXAM; PHARYNX OR LARYNX	15.06	15.06	7/1/2006
70370	TC	T	RADIOLOGIC EXAM; PHARYNX OR LARYNX	45.00	45.00	7/1/2006
70373		3	LARYNGOGRAPHY	82.76	82.76	7/1/2006
70373	26	5	LARYNGOGRAPHY	20.94	20.94	7/1/2006
70373	TC	T	LARYNGOGRAPHY	61.81	61.81	7/1/2006

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70380		3	RADIOLOGIC EXAM, SALIVARY GLAND	31.45	31.45	7/1/2006
70380	26	5	RADIOLOGIC EXAM, SALIVARY GLAND	8.34	8.34	7/1/2006
70380	TC	T	RADIOLOGIC EXAM, SALIVARY GLAND	23.11	23.11	7/1/2006
70390		3	SIALOGRAPHY	79.94	79.94	7/1/2006
70390	26	5	SIALOGRAPHY	18.12	18.12	7/1/2006
70390	TC	T	SIALOGRAPHY	61.81	61.81	7/1/2006
70450		3	COMPUTERIZED AXIAL TOMOGRAPHY, HEAD OR BRAIN	203.23	203.23	7/1/2006
70450	26	5	COMPUTERIZED AXIAL TOMOGRAPHY, HEAD OR BRAIN	40.80	40.80	7/1/2006
70450	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY, HEAD OR BRAIN	162.43	162.43	7/1/2006
70460		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	249.14	249.14	7/1/2006
70460	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	54.09	54.09	7/1/2006
70460	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	195.05	195.05	7/1/2006
70470		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	304.38	304.38	7/1/2006
70470	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	61.02	61.02	7/1/2006
70470	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	243.36	243.36	7/1/2006
70480		3	COMPUTERIZED AXIAL TOMOGRAPHY ORBIT	223.81	223.81	7/1/2006
70480	26	5	COMPUTERIZED AXIAL TOMOGRAPHY ORBIT	61.38	61.38	7/1/2006
70480	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY ORBIT	162.43	162.43	7/1/2006
70481		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	261.02	261.02	7/1/2006
70481	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	65.97	65.97	7/1/2006
70481	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	195.05	195.05	7/1/2006
70482		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	312.85	312.85	7/1/2006
70482	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	69.49	69.49	7/1/2006
70482	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	243.36	243.36	7/1/2006
70486		3	COMPUTERIZED AXIAL TOMOGRAPHY	216.88	216.88	7/1/2006
70486	26	5	COMPUTERIZED AXIAL TOMOGRAPHY	54.45	54.45	7/1/2006
70486	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY	162.43	162.43	7/1/2006
70487		3	COMPUTERIZED AXIAL TOMOGRAPHY, WITH CONTRAST	257.48	257.48	7/1/2006
70487	26	5	COMPUTERIZED AXIAL TOMOGRAPHY, WITH CONTRAST	62.43	62.43	7/1/2006
70487	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY, WITH CONTRAST	195.05	195.05	7/1/2006
70488		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	311.11	311.11	7/1/2006
70488	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	67.74	67.74	7/1/2006
70488	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	243.36	243.36	7/1/2006
70490		3	COMPUTERIZED AXIAL TOMOGRAPHY,NECK	223.81	223.81	7/1/2006
70490	26	5	COMPUTERIZED AXIAL TOMOGRAPHY,NECK	61.38	61.38	7/1/2006
70490	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY,NECK	162.43	162.43	7/1/2006
70491		3	COMPUTERIZED AXIAL TOMOGRAPHY NECK WITH CONTRAST	261.02	261.02	7/1/2006
70491	26	5	COMPUTERIZED AXIAL TOMOGRAPHY NECK WITH CONTRAST	65.97	65.97	7/1/2006
70491	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY NECK WITH CONTRAST	195.05	195.05	7/1/2006
70492		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	312.52	312.52	7/1/2006
70492	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	69.15	69.15	7/1/2006
70492	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH/WITHOUT CONTRAS	243.36	243.36	7/1/2006
70496		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	449.18	449.18	7/1/2006
70496	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	83.73	83.73	7/1/2006
70496	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	365.46	365.46	7/1/2006
70498		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	449.18	449.18	7/1/2006
70498	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	83.73	83.73	7/1/2006
70498	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITHOUT CONTRAST MATERIAL(S), FOLLOWE	365.46	365.46	7/1/2006
70540		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	445.51	445.51	7/1/2006
70540	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	64.56	64.56	7/1/2006
70540	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	380.95	380.95	7/1/2006
70542		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITH CONTRAST	534.81	534.81	7/1/2006
70542	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITH CONTRAST	77.49	77.49	7/1/2006
70542	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITH CONTRAST	457.32	457.32	7/1/2006
70543		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	948.99	948.99	7/1/2006
70543	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	103.23	103.23	7/1/2006
70543	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	845.76	845.76	7/1/2006
70544		3	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)	443.16	443.16	7/1/2006
70544	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)	57.60	57.60	7/1/2006
70544	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)	385.56	385.56	7/1/2006
70545		3	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)	442.83	442.83	7/1/2006
70545	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)	57.27	57.27	7/1/2006
70545	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)	385.56	385.56	7/1/2006
70546		3	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	844.05	844.05	7/1/2006
70546	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	86.19	86.19	7/1/2006
70546	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	757.86	757.86	7/1/2006
70547		3	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)	442.83	442.83	7/1/2006
70547	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)	57.27	57.27	7/1/2006
70547	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)	385.56	385.56	7/1/2006
70548		3	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)	442.83	442.83	7/1/2006

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70548	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)	57.27	57.27	7/1/2006
70548	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)	385.56	385.56	7/1/2006
70549		3	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	844.05	844.05	7/1/2006
70549	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	86.19	86.19	7/1/2006
70549	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED B	757.86	757.86	7/1/2006
70551		3	MAGNETIC RESONANCE, BRAIN	456.69	456.69	7/1/2006
70551	26	5	MAGNETIC RESONANCE, BRAIN	71.13	71.13	7/1/2006
70551	TC	T	MAGNETIC RESONANCE, BRAIN	385.56	385.56	7/1/2006
70552		3	MAGNETIC RESONANCE, BRAIN WITH CONTRAST	548.09	548.09	7/1/2006
70552	26	5	MAGNETIC RESONANCE, BRAIN WITH CONTRAST	85.47	85.47	7/1/2006
70552	TC	T	MAGNETIC RESONANCE, BRAIN WITH CONTRAST	462.62	462.62	7/1/2006
70553		3	MAGNETIC RESONANCE, BRAIN WITH/WITHOUT CONTRAST	969.69	969.69	7/1/2006
70553	26	5	MAGNETIC RESONANCE, BRAIN WITH/WITHOUT CONTRAST	113.11	113.11	7/1/2006
70553	TC	T	MAGNETIC RESONANCE, BRAIN WITH/WITHOUT CONTRAST	856.59	856.59	7/1/2006
70557		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	574.72	574.72	7/1/2006
70557	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	143.68	143.68	7/1/2006
70557	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	431.04	431.04	7/1/2006
70558		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	634.34	634.34	7/1/2006
70558	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	158.58	158.58	7/1/2006
70558	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	475.75	475.75	7/1/2006
70559		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	636.18	636.18	7/1/2006
70559	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	159.05	159.05	7/1/2006
70559	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	477.14	477.14	7/1/2006
71010		3	RADIOLOGIC EXAM, CHEST	24.73	24.73	7/1/2006
71010	26	5	RADIOLOGIC EXAM, CHEST	8.70	8.70	7/1/2006
71010	TC	T	RADIOLOGIC EXAM, CHEST	16.03	16.03	7/1/2006
71015		3	RADIOLOGIC EXAM STEREO, FRONTAL	27.79	27.79	7/1/2006
71015	26	5	RADIOLOGIC EXAM STEREO, FRONTAL	10.11	10.11	7/1/2006
71015	TC	T	RADIOLOGIC EXAM STEREO, FRONTAL	17.68	17.68	7/1/2006
71020		3	RADILOGICAL EXAM CHEST TWO VIEWS FRONTAL/LATERAL	31.93	31.93	7/1/2006
71020	26	5	RADILOGICAL EXAM CHEST TWO VIEWS FRONTAL/LATERAL	10.47	10.47	7/1/2006
71020	TC	T	RADILOGICAL EXAM CHEST TWO VIEWS FRONTAL/LATERAL	21.46	21.46	7/1/2006
71021		3	RADIOLOGICAL EXAM CHEST WITH APICAL LORDTIC	38.26	38.26	7/1/2006
71021	26	5	RADIOLOGICAL EXAM CHEST WITH APICAL LORDTIC	12.93	12.93	7/1/2006
71021	TC	T	RADIOLOGICAL EXAM CHEST WITH APICAL LORDTIC	25.33	25.33	7/1/2006
71022		3	RADIOLOGIC EXAM CHEST WITH OBLIQUE PROJECTIONS	40.03	40.03	7/1/2006
71022	26	5	RADIOLOGIC EXAM CHEST WITH OBLIQUE PROJECTIONS	14.70	14.70	7/1/2006
71022	TC	T	RADIOLOGIC EXAM CHEST WITH OBLIQUE PROJECTIONS	25.33	25.33	7/1/2006
71023		3	RADIOLOGIC EXAM CHEST WITH FLUROSCOPY	45.20	45.20	7/1/2006
71023	26	5	RADIOLOGIC EXAM CHEST WITH FLUROSCOPY	18.22	18.22	7/1/2006
71023	TC	T	RADIOLOGIC EXAM CHEST WITH FLUROSCOPY	26.99	26.99	7/1/2006
71030		3	RADILOGICAL EXAM CHEST COMPLETE	41.69	41.69	7/1/2006
71030	26	5	RADILOGICAL EXAM CHEST COMPLETE	14.70	14.70	7/1/2006
71030	TC	T	RADILOGICAL EXAM CHEST COMPLETE	26.99	26.99	7/1/2006
71034		3	RADILOGIC EXAM, CHEST WITH FLUOROSCOPY	71.86	71.86	7/1/2006
71034	26	5	RADILOGIC EXAM, CHEST WITH FLUOROSCOPY	22.32	22.32	7/1/2006
71034	TC	T	RADILOGIC EXAM, CHEST WITH FLUOROSCOPY	49.54	49.54	7/1/2006
71035		3	RADIOLOGIC EXAM CHEST, SPECIAL VIEWS	26.38	26.38	7/1/2006
71035	26	5	RADIOLOGIC EXAM CHEST, SPECIAL VIEWS	8.70	8.70	7/1/2006
71035	TC	T	RADIOLOGIC EXAM CHEST, SPECIAL VIEWS	17.68	17.68	7/1/2006
71040		3	BRONCHOGRAPHY, UNILATERAL	78.07	78.07	7/1/2006
71040	26	5	BRONCHOGRAPHY, UNILATERAL	27.87	27.87	7/1/2006
71040	TC	T	BRONCHOGRAPHY, UNILATERAL	50.20	50.20	7/1/2006
71060		3	BRONCHOGRAPHY, BILATERAL	111.48	111.48	7/1/2006
71060	26	5	BRONCHOGRAPHY, BILATERAL	35.28	35.28	7/1/2006
71060	TC	T	BRONCHOGRAPHY, BILATERAL	76.20	76.20	7/1/2006
71090		3	INSERTION PACEMAKER	85.04	85.04	7/1/2006
71090	26	5	INSERTION PACEMAKER	26.86	26.86	7/1/2006
71090	TC	T	INSERTION PACEMAKER	58.18	58.18	7/1/2006
71100		3	RADIOLOGIC EXAM, RIBS	30.27	30.27	7/1/2006
71100	26	5	RADIOLOGIC EXAM, RIBS	10.47	10.47	7/1/2006
71100	TC	T	RADIOLOGIC EXAM, RIBS	19.80	19.80	7/1/2006
71101		3	RADIOLOGIC EXAM RIBS /POSTEROANTERIOR CHEST	36.05	36.05	7/1/2006
71101	26	5	RADIOLOGIC EXAM RIBS /POSTEROANTERIOR CHEST	12.93	12.93	7/1/2006
71101	TC	T	RADIOLOGIC EXAM RIBS /POSTEROANTERIOR CHEST	23.11	23.11	7/1/2006
71110		3	RADIOLOGIC EXAM, RIBS BILATERAL	39.92	39.92	7/1/2006
71110	26	5	RADIOLOGIC EXAM, RIBS BILATERAL	12.93	12.93	7/1/2006
71110	TC	T	RADIOLOGIC EXAM, RIBS BILATERAL	26.99	26.99	7/1/2006
71111		3	RADIOLOGIC EXAM INCLUDING POSTEROANTERIOR	45.92	45.92	7/1/2006
71111	26	5	RADIOLOGIC EXAM INCLUDING POSTEROANTERIOR	15.06	15.06	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
71111	TC	T	RADIOLOGIC EXAM INCLUDING POSTEROANTERIOR	30.86	30.86	7/1/2006
71120		3	RADIOLOGIC EXAM STERNUM	32.20	32.20	7/1/2006
71120	26	5	RADIOLOGIC EXAM STERNUM	9.75	9.75	7/1/2006
71120	TC	T	RADIOLOGIC EXAM STERNUM	22.45	22.45	7/1/2006
71130		3	RADIOLOGIC EXAM STERNOCLAVICULAR JOINT(S)	34.91	34.91	7/1/2006
71130	26	5	RADIOLOGIC EXAM STERNOCLAVICULAR JOINT(S)	10.47	10.47	7/1/2006
71130	TC	T	RADIOLOGIC EXAM STERNOCLAVICULAR JOINT(S)	24.44	24.44	7/1/2006
71250		3	COMPUTERIZED AXIAL TOMOGRAPHY	259.06	259.06	7/1/2006
71250	26	5	COMPUTERIZED AXIAL TOMOGRAPHY	55.50	55.50	7/1/2006
71250	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY	203.56	203.56	7/1/2006
71260		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	302.74	302.74	7/1/2006
71260	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	59.38	59.38	7/1/2006
71260	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	243.36	243.36	7/1/2006
71270		3	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	370.70	370.70	7/1/2006
71270	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	65.97	65.97	7/1/2006
71270	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	304.73	304.73	7/1/2006
71275		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST, WITHOUT CONTRAST MATERIAL(S), FOLLOWI	512.43	512.43	7/1/2006
71275	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST, WITHOUT CONTRAST MATERIAL(S), FOLLOWI	92.07	92.07	7/1/2006
71275	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST, WITHOUT CONTRAST MATERIAL(S), FOLLOWI	420.37	420.37	7/1/2006
71550		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	452.18	452.18	7/1/2006
71550	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	69.85	69.85	7/1/2006
71550	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	382.33	382.33	7/1/2006
71551		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	541.48	541.48	7/1/2006
71551	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	83.01	83.01	7/1/2006
71551	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	458.47	458.47	7/1/2006
71552		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	950.25	950.25	7/1/2006
71552	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	108.18	108.18	7/1/2006
71552	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	842.07	842.07	7/1/2006
72010		3	RADILOGIC EXAM SPINE	56.80	56.80	7/1/2006
72010	26	5	RADILOGIC EXAM SPINE	21.63	21.63	7/1/2006
72010	TC	T	RADILOGIC EXAM SPINE	35.17	35.17	7/1/2006
72020		3	RADIOLOGIC EXAM SPINE /SPECIFY LEVEL	21.66	21.66	7/1/2006
72020	26	5	RADIOLOGIC EXAM SPINE /SPECIFY LEVEL	7.29	7.29	7/1/2006
72020	TC	T	RADIOLOGIC EXAM SPINE /SPECIFY LEVEL	14.37	14.37	7/1/2006
72040		3	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; TWO OR THREE VIEWS	31.26	31.26	7/1/2006
72040	26	5	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; TWO OR THREE VIEWS	10.47	10.47	7/1/2006
72040	TC	T	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; TWO OR THREE VIEWS	20.80	20.80	7/1/2006
72050		3	RADIOLOGIC EXAM SPINE. 4 VIEWS	45.56	45.56	7/1/2006
72050	26	5	RADIOLOGIC EXAM SPINE. 4 VIEWS	14.70	14.70	7/1/2006
72050	TC	T	RADIOLOGIC EXAM SPINE. 4 VIEWS	30.86	30.86	7/1/2006
72052		3	RADIOLOGIC EXAM SPINE, COMPLETE	56.21	56.21	7/1/2006
72052	26	5	RADIOLOGIC EXAM SPINE, COMPLETE	17.40	17.40	7/1/2006
72052	TC	T	RADIOLOGIC EXAM SPINE, COMPLETE	38.81	38.81	7/1/2006
72069		3	RADIOLOGIC EXAM SPINE THORACOLUMBAR	27.49	27.49	7/1/2006
72069	26	5	RADIOLOGIC EXAM SPINE THORACOLUMBAR	10.80	10.80	7/1/2006
72069	TC	T	RADIOLOGIC EXAM SPINE THORACOLUMBAR	16.69	16.69	7/1/2006
72070		3	RADIOLOGIC EXAMINATION, SPINE; THORACIC, TWO VIEWS	32.92	32.92	7/1/2006
72070	26	5	RADIOLOGIC EXAMINATION, SPINE; THORACIC, TWO VIEWS	10.47	10.47	7/1/2006
72070	TC	T	RADIOLOGIC EXAMINATION, SPINE; THORACIC, TWO VIEWS	22.45	22.45	7/1/2006
72072		3	RADIOLOGIC EXAMINATION, SPINE; THORACIC, THREE VIEWS	35.80	35.80	7/1/2006
72072	26	5	RADIOLOGIC EXAMINATION, SPINE; THORACIC, THREE VIEWS	10.47	10.47	7/1/2006
72072	TC	T	RADIOLOGIC EXAMINATION, SPINE; THORACIC, THREE VIEWS	25.33	25.33	7/1/2006
72074		3	RADIOLOGIC EXAMINATION, SPINE; THORACIC, MINIMUM OF FOUR VIEWS	41.99	41.99	7/1/2006
72074	26	5	RADIOLOGIC EXAMINATION, SPINE; THORACIC, MINIMUM OF FOUR VIEWS	10.47	10.47	7/1/2006
72074	TC	T	RADIOLOGIC EXAMINATION, SPINE; THORACIC, MINIMUM OF FOUR VIEWS	31.52	31.52	7/1/2006
72080		3	RADIOLOGIC EXAMINATION, SPINE; THORACOLUMBAR, TWO VIEWS	33.58	33.58	7/1/2006
72080	26	5	RADIOLOGIC EXAMINATION, SPINE; THORACOLUMBAR, TWO VIEWS	10.47	10.47	7/1/2006
72080	TC	T	RADIOLOGIC EXAMINATION, SPINE; THORACOLUMBAR, TWO VIEWS	23.11	23.11	7/1/2006
72090		3	RADIOLOGIC EXAM SPINE. SCOLIIOSIS	36.41	36.41	7/1/2006
72090	26	5	RADIOLOGIC EXAM SPINE. SCOLIIOSIS	13.29	13.29	7/1/2006
72090	TC	T	RADIOLOGIC EXAM SPINE. SCOLIIOSIS	23.11	23.11	7/1/2006
72100		3	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; TWO OR THREE VIEWS	33.58	33.58	7/1/2006
72100	26	5	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; TWO OR THREE VIEWS	10.47	10.47	7/1/2006
72100	TC	T	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; TWO OR THREE VIEWS	23.11	23.11	7/1/2006
72110		3	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; MINIMUM OF FOUR VIEWS	46.23	46.23	7/1/2006
72110	26	5	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; MINIMUM OF FOUR VIEWS	14.70	14.70	7/1/2006
72110	TC	T	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; MINIMUM OF FOUR VIEWS	31.52	31.52	7/1/2006
72114		3	RADIOLOGIC EXAM SPINE COMPLETE /BENDING VIEW	58.19	58.19	7/1/2006
72114	26	5	RADIOLOGIC EXAM SPINE COMPLETE /BENDING VIEW	17.40	17.40	7/1/2006
72114	TC	T	RADIOLOGIC EXAM SPINE COMPLETE /BENDING VIEW	40.80	40.80	7/1/2006

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72120		3	RADIOLOGIC EXAM SPINE BENDING VIEW	41.33	41.33	7/1/2006
72120	26	5	RADIOLOGIC EXAM SPINE BENDING VIEW	10.47	10.47	7/1/2006
72120	TC	T	RADIOLOGIC EXAM SPINE BENDING VIEW	30.86	30.86	7/1/2006
72125		3	COMPUTERIZED AXIAL TOMOGRAPHY	259.06	259.06	7/1/2006
72125	26	5	COMPUTERIZED AXIAL TOMOGRAPHY	55.50	55.50	7/1/2006
72125	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY	203.56	203.56	7/1/2006
72126		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	301.69	301.69	7/1/2006
72126	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	58.32	58.32	7/1/2006
72126	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	243.36	243.36	7/1/2006
72127		3	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	365.74	365.74	7/1/2006
72127	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	61.02	61.02	7/1/2006
72127	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITHOUT CONTRAST	304.73	304.73	7/1/2006
72128		3	COMPUTERIZED AXIAL TOMOGRAPHY THORACIC SPINE	259.06	259.06	7/1/2006
72128	26	5	COMPUTERIZED AXIAL TOMOGRAPHY THORACIC SPINE	55.50	55.50	7/1/2006
72128	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY THORACIC SPINE	203.56	203.56	7/1/2006
72129		3	COMP. AXIAL TOMOGRAPHY/THORACIC SPINE WITH CONTRAS	301.69	301.69	7/1/2006
72129	26	5	COMP. AXIAL TOMOGRAPHY/THORACIC SPINE WITH CONTRAS	58.32	58.32	7/1/2006
72129	TC	T	COMP. AXIAL TOMOGRAPHY/THORACIC SPINE WITH CONTRAS	243.36	243.36	7/1/2006
72130		3	COMP. TOMOGRAPHY/THORACIC SPINE WITHOUT CONTRAST	365.74	365.74	7/1/2006
72130	26	5	COMP. TOMOGRAPHY/THORACIC SPINE WITHOUT CONTRAST	61.02	61.02	7/1/2006
72130	TC	T	COMP. TOMOGRAPHY/THORACIC SPINE WITHOUT CONTRAST	304.73	304.73	7/1/2006
72131		3	COMPUTERIZED AXIAL TOMOGRAPHY/ LUMBAR SPINE	259.06	259.06	7/1/2006
72131	26	5	COMPUTERIZED AXIAL TOMOGRAPHY/ LUMBAR SPINE	55.50	55.50	7/1/2006
72131	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY/ LUMBAR SPINE	203.56	203.56	7/1/2006
72132		3	COMPUTERIZED AXIAL TOMOGRAPHY LUMBAR SPINE/CONTRAS	301.69	301.69	7/1/2006
72132	26	5	COMPUTERIZED AXIAL TOMOGRAPHY LUMBAR SPINE/CONTRAS	58.32	58.32	7/1/2006
72132	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY LUMBAR SPINE/CONTRAS	243.36	243.36	7/1/2006
72133		3	COMPUTERIZED TOMOGRAPHY LUMBAR SPINE W/WO CONTRAST	365.74	365.74	7/1/2006
72133	26	5	COMPUTERIZED TOMOGRAPHY LUMBAR SPINE W/WO CONTRAST	61.02	61.02	7/1/2006
72133	TC	T	COMPUTERIZED TOMOGRAPHY LUMBAR SPINE W/WO CONTRAST	304.73	304.73	7/1/2006
72141		3	MAGNETIC RESONANCE SPINAL CANAL	462.33	462.33	7/1/2006
72141	26	5	MAGNETIC RESONANCE SPINAL CANAL	76.77	76.77	7/1/2006
72141	TC	T	MAGNETIC RESONANCE SPINAL CANAL	385.56	385.56	7/1/2006
72142		3	MAGNETIC RESONANCE /SPINE CANAL WITH CONTRAST	555.02	555.02	7/1/2006
72142	26	5	MAGNETIC RESONANCE /SPINE CANAL WITH CONTRAST	92.40	92.40	7/1/2006
72142	TC	T	MAGNETIC RESONANCE /SPINE CANAL WITH CONTRAST	462.62	462.62	7/1/2006
72146		3	MAGNETIC RESONANCE/ SPINAL CANAL AND CONTENTS	504.89	504.89	7/1/2006
72146	26	5	MAGNETIC RESONANCE/ SPINAL CANAL AND CONTENTS	76.77	76.77	7/1/2006
72146	TC	T	MAGNETIC RESONANCE/ SPINAL CANAL AND CONTENTS	428.11	428.11	7/1/2006
72147		3	MAGNETIC RESONANCE/SPINAL CANAL WITH CONTRAST	554.69	554.69	7/1/2006
72147	26	5	MAGNETIC RESONANCE/SPINAL CANAL WITH CONTRAST	92.07	92.07	7/1/2006
72147	TC	T	MAGNETIC RESONANCE/SPINAL CANAL WITH CONTRAST	462.62	462.62	7/1/2006
72148		3	MAGNETIC RESONANCE LUMBAR	499.24	499.24	7/1/2006
72148	26	5	MAGNETIC RESONANCE LUMBAR	71.13	71.13	7/1/2006
72148	TC	T	MAGNETIC RESONANCE LUMBAR	428.11	428.11	7/1/2006
72149		3	MAGNETIC RESONANCE LUMBAR WITH CONTRAST	548.42	548.42	7/1/2006
72149	26	5	MAGNETIC RESONANCE LUMBAR WITH CONTRAST	85.80	85.80	7/1/2006
72149	TC	T	MAGNETIC RESONANCE LUMBAR WITH CONTRAST	462.62	462.62	7/1/2006
72156		3	MAGNETIC RESONANCE WITH /WITHOUT CONTRAST	979.80	979.80	7/1/2006
72156	26	5	MAGNETIC RESONANCE WITH /WITHOUT CONTRAST	123.22	123.22	7/1/2006
72156	TC	T	MAGNETIC RESONANCE WITH /WITHOUT CONTRAST	856.59	856.59	7/1/2006
72157		3	MRI; SPINAL CANAL, WO THEN W CONTRAST; THORACIC	979.47	979.47	7/1/2006
72157	26	5	MRI; SPINAL CANAL, WO THEN W CONTRAST; THORACIC	122.88	122.88	7/1/2006
72157	TC	T	MRI; SPINAL CANAL, WO THEN W CONTRAST; THORACIC	856.59	856.59	7/1/2006
72158		3	MAGNETIC RESONANCE LUMBAR WITH/WITHOUT CONTRAST	969.69	969.69	7/1/2006
72158	26	5	MAGNETIC RESONANCE LUMBAR WITH/WITHOUT CONTRAST	113.11	113.11	7/1/2006
72158	TC	T	MAGNETIC RESONANCE LUMBAR WITH/WITHOUT CONTRAST	856.59	856.59	7/1/2006
72170		3	RADIOLOGIC EXAMINATION, PELVIS; ONE OR TWO VIEWS	26.02	26.02	7/1/2006
72170	26	5	RADIOLOGIC EXAMINATION, PELVIS; ONE OR TWO VIEWS	8.34	8.34	7/1/2006
72170	TC	T	RADIOLOGIC EXAMINATION, PELVIS; ONE OR TWO VIEWS	17.68	17.68	7/1/2006
72190		3	RADIOLOGIC EXAM PELVIC COMPLETE	33.22	33.22	7/1/2006
72190	26	5	RADIOLOGIC EXAM PELVIC COMPLETE	10.11	10.11	7/1/2006
72190	TC	T	RADIOLOGIC EXAM PELVIC COMPLETE	23.11	23.11	7/1/2006
72191		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITHOUT CONTRAST MATERIAL(S),	495.32	495.32	7/1/2006
72191	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITHOUT CONTRAST MATERIAL(S),	86.88	86.88	7/1/2006
72191	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITHOUT CONTRAST MATERIAL(S),	408.44	408.44	7/1/2006
72192		3	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC	255.88	255.88	7/1/2006
72192	26	5	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC	52.32	52.32	7/1/2006
72192	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC	203.56	203.56	7/1/2006
72193		3	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC WITH CONTRAS	291.02	291.02	7/1/2006

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72193	26	5	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC WITH CONTRAS	55.50	55.50	7/1/2006
72193	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY; PELVIC WITH CONTRAS	235.51	235.51	7/1/2006
72194		3	TOMOGRAPHY; PELVIC WITH/WITHOUT CONTRAST	350.10	350.10	7/1/2006
72194	26	5	TOMOGRAPHY; PELVIC WITH/WITHOUT CONTRAST	58.32	58.32	7/1/2006
72194	TC	T	TOMOGRAPHY; PELVIC WITH/WITHOUT CONTRAST	291.78	291.78	7/1/2006
72195		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)	452.18	452.18	7/1/2006
72195	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)	69.85	69.85	7/1/2006
72195	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)	382.33	382.33	7/1/2006
72196		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)	541.48	541.48	7/1/2006
72196	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)	83.01	83.01	7/1/2006
72196	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)	458.47	458.47	7/1/2006
72197		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S),	955.78	955.78	7/1/2006
72197	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S),	108.18	108.18	7/1/2006
72197	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S),	847.60	847.60	7/1/2006
72200		3	RADIOLOGIC EXAM SACRUM, COCCYX	26.02	26.02	7/1/2006
72200	26	5	RADIOLOGIC EXAM SACRUM, COCCYX	8.34	8.34	7/1/2006
72200	TC	T	RADIOLOGIC EXAM SACRUM, COCCYX	17.68	17.68	7/1/2006
72202		3	X-RAY EXAM OF SACROILIAC JOINTS, 3 OR MORE VIEWS	30.52	30.52	7/1/2006
72202	26	5	X-RAY EXAM OF SACROILIAC JOINTS, 3 OR MORE VIEWS	9.06	9.06	7/1/2006
72202	TC	T	X-RAY EXAM OF SACROILIAC JOINTS, 3 OR MORE VIEWS	21.46	21.46	7/1/2006
72220		3	SACRUM AND COCCYX	28.14	28.14	7/1/2006
72220	26	5	SACRUM AND COCCYX	8.34	8.34	7/1/2006
72220	TC	T	SACRUM AND COCCYX	19.80	19.80	7/1/2006
72240		3	MYELOGRAPH, CERVICAL	206.71	206.71	7/1/2006
72240	26	5	MYELOGRAPH, CERVICAL	43.29	43.29	7/1/2006
72240	TC	T	MYELOGRAPH, CERVICAL	163.42	163.42	7/1/2006
72255		3	MYELOGRAPHY, THORACIC	191.45	191.45	7/1/2006
72255	26	5	MYELOGRAPHY, THORACIC	42.63	42.63	7/1/2006
72255	TC	T	MYELOGRAPHY, THORACIC	148.82	148.82	7/1/2006
72265		3	MYELOGRAPHY, LUMBO SACRAL	179.29	179.29	7/1/2006
72265	26	5	MYELOGRAPHY, LUMBO SACRAL	39.08	39.08	7/1/2006
72265	TC	T	MYELOGRAPHY, LUMBO SACRAL	140.21	140.21	7/1/2006
72270		3	MYELOGRAPHY, ENTIRE SPINAL CANAL	273.49	273.49	7/1/2006
72270	26	5	MYELOGRAPHY, ENTIRE SPINAL CANAL	63.18	63.18	7/1/2006
72270	TC	T	MYELOGRAPHY, ENTIRE SPINAL CANAL	210.31	210.31	7/1/2006
72275		3	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	109.87	109.87	7/1/2006
72275	26	5	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	34.91	34.91	7/1/2006
72275	TC	T	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	74.96	74.96	7/1/2006
72285		3	DISKOGRAPHY, CERVICAL OR THORACIC, RADIOLOGICAL SUPERVISION AND INTERPRETATION	343.44	343.44	7/1/2006
72285	26	5	DISKOGRAPHY, CERVICAL OR THORACIC, RADIOLOGICAL SUPERVISION AND INTERPRETATION	55.30	55.30	7/1/2006
72285	TC	T	DISKOGRAPHY, CERVICAL OR THORACIC, RADIOLOGICAL SUPERVISION AND INTERPRETATION	288.14	288.14	7/1/2006
72295		3	DISDOGRAPHY, LUMBAR	310.43	310.43	7/1/2006
72295	26	5	DISDOGRAPHY, LUMBAR	40.21	40.21	7/1/2006
72295	TC	T	DISDOGRAPHY, LUMBAR	270.22	270.22	7/1/2006
73000		3	RADIOLOGIC EXAM CLAVICLE, COMPLETE	25.33	25.33	7/1/2006
73000	26	5	RADIOLOGIC EXAM CLAVICLE, COMPLETE	7.65	7.65	7/1/2006
73000	TC	T	RADIOLOGIC EXAM CLAVICLE, COMPLETE	17.68	17.68	7/1/2006
73010		3	RADIOLOGIC EXAM, SCAPULA/ COMPLETE	26.02	26.02	7/1/2006
73010	26	5	RADIOLOGIC EXAM, SCAPULA/ COMPLETE	8.34	8.34	7/1/2006
73010	TC	T	RADIOLOGIC EXAM, SCAPULA/ COMPLETE	17.68	17.68	7/1/2006
73020		3	RADIOLOGIC EXAM SHOULDER	23.32	23.32	7/1/2006
73020	26	5	RADIOLOGIC EXAM SHOULDER	7.29	7.29	7/1/2006
73020	TC	T	RADIOLOGIC EXAM SHOULDER	16.03	16.03	7/1/2006
73030		3	RADIOLOGIC EXAM SHOULDER COMPLETE	28.50	28.50	7/1/2006
73030	26	5	RADIOLOGIC EXAM SHOULDER COMPLETE	8.70	8.70	7/1/2006
73030	TC	T	RADIOLOGIC EXAM SHOULDER COMPLETE	19.80	19.80	7/1/2006
73040		3	RADIOLOGIC EXAM SHOULDER, ARTHROGRAPHY	98.52	98.52	7/1/2006
73040	26	5	RADIOLOGIC EXAM SHOULDER, ARTHROGRAPHY	25.86	25.86	7/1/2006
73040	TC	T	RADIOLOGIC EXAM SHOULDER, ARTHROGRAPHY	72.65	72.65	7/1/2006
73050		3	RADIOLOGIC EXAM, ACROMIOCLAVICULAR JOINTS	32.86	32.86	7/1/2006
73050	26	5	RADIOLOGIC EXAM, ACROMIOCLAVICULAR JOINTS	9.75	9.75	7/1/2006
73050	TC	T	RADIOLOGIC EXAM, ACROMIOCLAVICULAR JOINTS	23.11	23.11	7/1/2006
73060		3	RADIOLOGIC EXAM HUMERUS	28.14	28.14	7/1/2006
73060	26	5	RADIOLOGIC EXAM HUMERUS	8.34	8.34	7/1/2006
73060	TC	T	RADIOLOGIC EXAM HUMERUS	19.80	19.80	7/1/2006
73070		3	RADIOLOGIC EXAMINATION, ELBOW; TWO VIEWS	24.97	24.97	7/1/2006
73070	26	5	RADIOLOGIC EXAMINATION, ELBOW; TWO VIEWS	7.29	7.29	7/1/2006
73070	TC	T	RADIOLOGIC EXAMINATION, ELBOW; TWO VIEWS	17.68	17.68	7/1/2006
73080		3	RADILOGIC EXAM ELBOW, COMPLETE	28.14	28.14	7/1/2006
73080	26	5	RADILOGIC EXAM ELBOW, COMPLETE	8.34	8.34	7/1/2006

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73080	TC	T	RADILOGIC EXAM ELBOW, COMPLETE	19.80	19.80	7/1/2006
73085		3	RADIOLOGIC EXAM ELBOW, ARTHROGRAPHY	98.85	98.85	7/1/2006
73085	26	5	RADIOLOGIC EXAM ELBOW, ARTHROGRAPHY	26.20	26.20	7/1/2006
73085	TC	T	RADIOLOGIC EXAM ELBOW, ARTHROGRAPHY	72.65	72.65	7/1/2006
73090		3	RADIOLOGIC EXAMINATION; FOREARM, TWO VIEWS	25.33	25.33	7/1/2006
73090	26	5	RADIOLOGIC EXAMINATION; FOREARM, TWO VIEWS	7.65	7.65	7/1/2006
73090	TC	T	RADIOLOGIC EXAMINATION; FOREARM, TWO VIEWS	17.68	17.68	7/1/2006
73092		3	RADIOLOGIC EXAM FOREARM INFANT	24.34	24.34	7/1/2006
73092	26	5	RADIOLOGIC EXAM FOREARM INFANT	7.65	7.65	7/1/2006
73092	TC	T	RADIOLOGIC EXAM FOREARM INFANT	16.69	16.69	7/1/2006
73100		3	RADIOLOGIC EXAMINATION, WRIST; TWO VIEWS	24.34	24.34	7/1/2006
73100	26	5	RADIOLOGIC EXAMINATION, WRIST; TWO VIEWS	7.65	7.65	7/1/2006
73100	TC	T	RADIOLOGIC EXAMINATION, WRIST; TWO VIEWS	16.69	16.69	7/1/2006
73110		3	RADIOLOGIC EXAM WRIST, COMPLETE	26.35	26.35	7/1/2006
73110	26	5	RADIOLOGIC EXAM WRIST, COMPLETE	8.34	8.34	7/1/2006
73110	TC	T	RADIOLOGIC EXAM WRIST, COMPLETE	18.02	18.02	7/1/2006
73115		3	RADIOLOGIC EXAM WRIST ARTHROGRAPHY	80.50	80.50	7/1/2006
73115	26	5	RADIOLOGIC EXAM WRIST ARTHROGRAPHY	25.86	25.86	7/1/2006
73115	TC	T	RADIOLOGIC EXAM WRIST ARTHROGRAPHY	54.64	54.64	7/1/2006
73120		3	RADIOLOGIC EXAM, HAND	24.34	24.34	7/1/2006
73120	26	5	RADIOLOGIC EXAM, HAND	7.65	7.65	7/1/2006
73120	TC	T	RADIOLOGIC EXAM, HAND	16.69	16.69	7/1/2006
73130		3	RADIOLOGIC EXAM HAND MIN/3 VIEWS	26.35	26.35	7/1/2006
73130	26	5	RADIOLOGIC EXAM HAND MIN/3 VIEWS	8.34	8.34	7/1/2006
73130	TC	T	RADIOLOGIC EXAM HAND MIN/3 VIEWS	18.02	18.02	7/1/2006
73140		3	RADIOLOGIC EXAM FINGER(S)	20.61	20.61	7/1/2006
73140	26	5	RADIOLOGIC EXAM FINGER(S)	6.24	6.24	7/1/2006
73140	TC	T	RADIOLOGIC EXAM FINGER(S)	14.37	14.37	7/1/2006
73200		3	TOMOGRAPHY, UPPER EXTREMITY	222.70	222.70	7/1/2006
73200	26	5	TOMOGRAPHY, UPPER EXTREMITY	52.32	52.32	7/1/2006
73200	TC	T	TOMOGRAPHY, UPPER EXTREMITY	170.38	170.38	7/1/2006
73201		3	TOMOGRAPHY UPPER EXTREMITY, WITH CONTRAST	259.06	259.06	7/1/2006
73201	26	5	TOMOGRAPHY UPPER EXTREMITY, WITH CONTRAST	55.50	55.50	7/1/2006
73201	TC	T	TOMOGRAPHY UPPER EXTREMITY, WITH CONTRAST	203.56	203.56	7/1/2006
73202		3	TOMOGRAPHY UPPER EXTREMITY, WITHOUT CONTRAST	313.74	313.74	7/1/2006
73202	26	5	TOMOGRAPHY UPPER EXTREMITY, WITHOUT CONTRAST	58.32	58.32	7/1/2006
73202	TC	T	TOMOGRAPHY UPPER EXTREMITY, WITHOUT CONTRAST	255.42	255.42	7/1/2006
73206		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITHOUT CONTRAST	459.55	459.55	7/1/2006
73206	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITHOUT CONTRAST	86.55	86.55	7/1/2006
73206	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITHOUT CONTRAST	373.00	373.00	7/1/2006
73218		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	445.51	445.51	7/1/2006
73218	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	64.56	64.56	7/1/2006
73218	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	380.95	380.95	7/1/2006
73219		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	535.14	535.14	7/1/2006
73219	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	77.82	77.82	7/1/2006
73219	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	457.32	457.32	7/1/2006
73220		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	948.99	948.99	7/1/2006
73220	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	103.23	103.23	7/1/2006
73220	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	845.76	845.76	7/1/2006
73221		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	445.51	445.51	7/1/2006
73221	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	64.56	64.56	7/1/2006
73221	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	380.95	380.95	7/1/2006
73222		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH	534.81	534.81	7/1/2006
73222	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH	77.49	77.49	7/1/2006
73222	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH	457.32	457.32	7/1/2006
73223		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	948.99	948.99	7/1/2006
73223	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	103.23	103.23	7/1/2006
73223	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	845.76	845.76	7/1/2006
73500		3	RADIOLOGIC EXAM HIP	24.37	24.37	7/1/2006
73500	26	5	RADIOLOGIC EXAM HIP	8.34	8.34	7/1/2006
73500	TC	T	RADIOLOGIC EXAM HIP	16.03	16.03	7/1/2006
73510		3	RADIOLOGIC EXAM, HIP	29.91	29.91	7/1/2006
73510	26	5	RADIOLOGIC EXAM, HIP	10.11	10.11	7/1/2006
73510	TC	T	RADIOLOGIC EXAM, HIP	19.80	19.80	7/1/2006
73520		3	RADILOGIC EXAM HIP BILATERAL	35.69	35.69	7/1/2006
73520	26	5	RADILOGIC EXAM HIP BILATERAL	12.57	12.57	7/1/2006
73520	TC	T	RADILOGIC EXAM HIP BILATERAL	23.11	23.11	7/1/2006
73525		3	RADIOLOGIC EXAM HIP, AUTHROGRAPH	98.75	98.75	7/1/2006
73525	26	5	RADIOLOGIC EXAM HIP, AUTHROGRAPH	26.09	26.09	7/1/2006
73525	TC	T	RADIOLOGIC EXAM HIP, AUTHROGRAPH	72.65	72.65	7/1/2006

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73530		3	RAD. EXAM HIP DURING OPERATIVE PROCEDURE	31.67	31.67	7/1/2006
73530	26	5	RAD. EXAM HIP DURING OPERATIVE PROCEDURE	13.98	13.98	7/1/2006
73530	TC	T	RAD. EXAM HIP DURING OPERATIVE PROCEDURE	17.68	17.68	7/1/2006
73540		3	RADIOLOGIC EXAM HIP/ PELVIS; CHILD	29.55	29.55	7/1/2006
73540	26	5	RADIOLOGIC EXAM HIP/ PELVIS; CHILD	9.75	9.75	7/1/2006
73540	TC	T	RADIOLOGIC EXAM HIP/ PELVIS; CHILD	19.80	19.80	7/1/2006
73542		3	RADIOLOGICAL EXAMINATION, SACROILIAC JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERV	99.89	99.89	7/1/2006
73542	26	5	RADIOLOGICAL EXAMINATION, SACROILIAC JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERV	27.23	27.23	7/1/2006
73542	TC	T	RADIOLOGICAL EXAMINATION, SACROILIAC JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERV	72.65	72.65	7/1/2006
73550		3	RADIOLOGIC EXAMINATION, FEMUR, TWO VIEWS	28.14	28.14	7/1/2006
73550	26	5	RADIOLOGIC EXAMINATION, FEMUR, TWO VIEWS	8.34	8.34	7/1/2006
73550	TC	T	RADIOLOGIC EXAMINATION, FEMUR, TWO VIEWS	19.80	19.80	7/1/2006
73560		3	RADIOLOGIC EXAMINATION, KNEE; ONE OR TWO VIEWS	26.02	26.02	7/1/2006
73560	26	5	RADIOLOGIC EXAMINATION, KNEE; ONE OR TWO VIEWS	8.34	8.34	7/1/2006
73560	TC	T	RADIOLOGIC EXAMINATION, KNEE; ONE OR TWO VIEWS	17.68	17.68	7/1/2006
73562		3	RADIOLOGIC EXAMINATION, KNEE; THREE VIEWS	28.50	28.50	7/1/2006
73562	26	5	RADIOLOGIC EXAMINATION, KNEE; THREE VIEWS	8.70	8.70	7/1/2006
73562	TC	T	RADIOLOGIC EXAMINATION, KNEE; THREE VIEWS	19.80	19.80	7/1/2006
73564		3	RADIOLOGIC EXAMINATION, KNEE; COMPLETE, FOUR OR MORE VIEWS	31.93	31.93	7/1/2006
73564	26	5	RADIOLOGIC EXAMINATION, KNEE; COMPLETE, FOUR OR MORE VIEWS	10.47	10.47	7/1/2006
73564	TC	T	RADIOLOGIC EXAMINATION, KNEE; COMPLETE, FOUR OR MORE VIEWS	21.46	21.46	7/1/2006
73565		3	RADIOLOGIC EXAM KNEE (BOTH)	25.03	25.03	7/1/2006
73565	26	5	RADIOLOGIC EXAM KNEE (BOTH)	8.34	8.34	7/1/2006
73565	TC	T	RADIOLOGIC EXAM KNEE (BOTH)	16.69	16.69	7/1/2006
73580		3	RADIOLOGIC EXAM KNEE, ARTHROGRAPHY	116.10	116.10	7/1/2006
73580	26	5	RADIOLOGIC EXAM KNEE, ARTHROGRAPHY	25.76	25.76	7/1/2006
73580	TC	T	RADIOLOGIC EXAM KNEE, ARTHROGRAPHY	90.34	90.34	7/1/2006
73590		3	RADIOLOGIC EXAMINATION; TIBIA AND FIBULA, TWO VIEWS	26.02	26.02	7/1/2006
73590	26	5	RADIOLOGIC EXAMINATION; TIBIA AND FIBULA, TWO VIEWS	8.34	8.34	7/1/2006
73590	TC	T	RADIOLOGIC EXAMINATION; TIBIA AND FIBULA, TWO VIEWS	17.68	17.68	7/1/2006
73592		3	RAD EXAM LOWER EXTREMITY INFANT	24.34	24.34	7/1/2006
73592	26	5	RAD EXAM LOWER EXTREMITY INFANT	7.65	7.65	7/1/2006
73592	TC	T	RAD EXAM LOWER EXTREMITY INFANT	16.69	16.69	7/1/2006
73600		3	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS	24.34	24.34	7/1/2006
73600	26	5	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS	7.65	7.65	7/1/2006
73600	TC	T	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS	16.69	16.69	7/1/2006
73610		3	RADIOLOGIC EXAM COMPLETE	26.35	26.35	7/1/2006
73610	26	5	RADIOLOGIC EXAM COMPLETE	8.34	8.34	7/1/2006
73610	TC	T	RADIOLOGIC EXAM COMPLETE	18.02	18.02	7/1/2006
73615		3	RADIOLOGIC EXAM ANKLE, ARTHROGRAPHY	98.75	98.75	7/1/2006
73615	26	5	RADIOLOGIC EXAM ANKLE, ARTHROGRAPHY	26.09	26.09	7/1/2006
73615	TC	T	RADIOLOGIC EXAM ANKLE, ARTHROGRAPHY	72.65	72.65	7/1/2006
73620		3	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS	24.34	24.34	7/1/2006
73620	26	5	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS	7.65	7.65	7/1/2006
73620	TC	T	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS	16.69	16.69	7/1/2006
73630		3	RADIOLOGIC EXAM FOOT COMPLETE	26.35	26.35	7/1/2006
73630	26	5	RADIOLOGIC EXAM FOOT COMPLETE	8.34	8.34	7/1/2006
73630	TC	T	RADIOLOGIC EXAM FOOT COMPLETE	18.02	18.02	7/1/2006
73650		3	RADIOLOGIC EXAM CALCANEUS	23.68	23.68	7/1/2006
73650	26	5	RADIOLOGIC EXAM CALCANEUS	7.65	7.65	7/1/2006
73650	TC	T	RADIOLOGIC EXAM CALCANEUS	16.03	16.03	7/1/2006
73660		3	RADIOLOGIC EXAM CALCANEUS TOE OR TOES	20.61	20.61	7/1/2006
73660	26	5	RADIOLOGIC EXAM CALCANEUS TOE OR TOES	6.24	6.24	7/1/2006
73660	TC	T	RADIOLOGIC EXAM CALCANEUS TOE OR TOES	14.37	14.37	7/1/2006
73700		3	COMPUTERIZED AXIAL TOMOGRAPHY LOWER EXTREMITY	222.70	222.70	7/1/2006
73700	26	5	COMPUTERIZED AXIAL TOMOGRAPHY LOWER EXTREMITY	52.32	52.32	7/1/2006
73700	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY LOWER EXTREMITY	170.38	170.38	7/1/2006
73701		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	259.06	259.06	7/1/2006
73701	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	55.50	55.50	7/1/2006
73701	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH CONTRAST	203.56	203.56	7/1/2006
73702		3	COMPUTERIZED AXIAL TOMOGRAPHY WITH & WITHOUT CONTR	313.74	313.74	7/1/2006
73702	26	5	COMPUTERIZED AXIAL TOMOGRAPHY WITH & WITHOUT CONTR	58.32	58.32	7/1/2006
73702	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY WITH & WITHOUT CONTR	255.42	255.42	7/1/2006
73706		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITHOUT CONTRAST	463.79	463.79	7/1/2006
73706	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITHOUT CONTRAST	90.78	90.78	7/1/2006
73706	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITHOUT CONTRAST	373.00	373.00	7/1/2006
73718		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	445.51	445.51	7/1/2006
73718	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	64.56	64.56	7/1/2006
73718	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	380.95	380.95	7/1/2006
73719		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH	534.81	534.81	7/1/2006

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73719	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH	77.49	77.49	7/1/2006
73719	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH	457.32	457.32	7/1/2006
73720		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	948.65	948.65	7/1/2006
73720	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	102.90	102.90	7/1/2006
73720	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	845.76	845.76	7/1/2006
73721		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	445.51	445.51	7/1/2006
73721	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	64.56	64.56	7/1/2006
73721	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	380.95	380.95	7/1/2006
73722		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH	534.81	534.81	7/1/2006
73722	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH	77.49	77.49	7/1/2006
73722	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH	457.32	457.32	7/1/2006
73723		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	948.99	948.99	7/1/2006
73723	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	103.23	103.23	7/1/2006
73723	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	845.76	845.76	7/1/2006
73725		3	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT	472.80	472.80	7/1/2006
73725	26	5	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT	87.24	87.24	7/1/2006
73725	TC	T	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT	385.56	385.56	7/1/2006
74000		3	RADIOLOGIC EXAM ABDOMEN	26.38	26.38	7/1/2006
74000	26	5	RADIOLOGIC EXAM ABDOMEN	8.70	8.70	7/1/2006
74000	TC	T	RADIOLOGIC EXAM ABDOMEN	17.68	17.68	7/1/2006
74010		3	RADIOLOGIC EXAM ABDOMEN ANTEROPOSTERIOR/ OBLIQUE	30.96	30.96	7/1/2006
74010	26	5	RADIOLOGIC EXAM ABDOMEN ANTEROPOSTERIOR/ OBLIQUE	11.16	11.16	7/1/2006
74010	TC	T	RADIOLOGIC EXAM ABDOMEN ANTEROPOSTERIOR/ OBLIQUE	19.80	19.80	7/1/2006
74020		3	RADIOLOGIC EXAM ABDOMEN, COMPLETE	34.39	34.39	7/1/2006
74020	26	5	RADIOLOGIC EXAM ABDOMEN, COMPLETE	12.93	12.93	7/1/2006
74020	TC	T	RADIOLOGIC EXAM ABDOMEN, COMPLETE	21.46	21.46	7/1/2006
74022		3	RAD EXAM ABDOMEN. COMPLETE ABDOMEN SERIES	40.39	40.39	7/1/2006
74022	26	5	RAD EXAM ABDOMEN. COMPLETE ABDOMEN SERIES	15.06	15.06	7/1/2006
74022	TC	T	RAD EXAM ABDOMEN. COMPLETE ABDOMEN SERIES	25.33	25.33	7/1/2006
74150		3	COMPUTER TOMOGRAPHY WITHOUT CONTRAST MATER	251.96	251.96	7/1/2006
74150	26	5	COMPUTER TOMOGRAPHY WITHOUT CONTRAST MATER	56.91	56.91	7/1/2006
74150	TC	T	COMPUTER TOMOGRAPHY WITHOUT CONTRAST MATER	195.05	195.05	7/1/2006
74160		3	TOMOGRAPHY, ABDOMEN WITH CONTRAST	296.53	296.53	7/1/2006
74160	26	5	TOMOGRAPHY, ABDOMEN WITH CONTRAST	61.02	61.02	7/1/2006
74160	TC	T	TOMOGRAPHY, ABDOMEN WITH CONTRAST	235.51	235.51	7/1/2006
74170		3	TOMOGRAPHY, WITHOUT/WITH CONTRAST	358.80	358.80	7/1/2006
74170	26	5	TOMOGRAPHY, WITHOUT/WITH CONTRAST	67.02	67.02	7/1/2006
74170	TC	T	TOMOGRAPHY, WITHOUT/WITH CONTRAST	291.78	291.78	7/1/2006
74175		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITHOUT CONTRAST MATERIAL(S),	499.23	499.23	7/1/2006
74175	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITHOUT CONTRAST MATERIAL(S),	90.78	90.78	7/1/2006
74175	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITHOUT CONTRAST MATERIAL(S),	408.44	408.44	7/1/2006
74181		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)	452.18	452.18	7/1/2006
74181	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)	69.85	69.85	7/1/2006
74181	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)	382.33	382.33	7/1/2006
74182		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)	541.48	541.48	7/1/2006
74182	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)	83.01	83.01	7/1/2006
74182	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)	458.47	458.47	7/1/2006
74183		3	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S),	955.78	955.78	7/1/2006
74183	26	5	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S),	108.18	108.18	7/1/2006
74183	TC	T	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S),	847.60	847.60	7/1/2006
74190		3	PERITONEOGRAM (EG, AFTER INJECTION OF AIR OR CONTRAST), RADIOLOGICAL	68.04	68.04	7/1/2006
74190	26	5	PERITONEOGRAM (EG, AFTER INJECTION OF AIR OR CONTRAST), RADIOLOGICAL	23.04	23.04	7/1/2006
74190	TC	T	PERITONEOGRAM (EG, AFTER INJECTION OF AIR OR CONTRAST), RADIOLOGICAL	45.00	45.00	7/1/2006
74210		3	RADIOLOGIC EXAM, PHARYNX	58.19	58.19	7/1/2006
74210	26	5	RADIOLOGIC EXAM, PHARYNX	17.40	17.40	7/1/2006
74210	TC	T	RADIOLOGIC EXAM, PHARYNX	40.80	40.80	7/1/2006
74220		3	RADIOLOGIC EXAM; ESOPHAGUS	62.79	62.79	7/1/2006
74220	26	5	RADIOLOGIC EXAM; ESOPHAGUS	21.99	21.99	7/1/2006
74220	TC	T	RADIOLOGIC EXAM; ESOPHAGUS	40.80	40.80	7/1/2006
74230		3	SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY	70.18	70.18	7/1/2006
74230	26	5	SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY	25.17	25.17	7/1/2006
74230	TC	T	SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY	45.00	45.00	7/1/2006
74235		3	REMOVAL OF FOREIGN BODY(S)	146.92	146.92	7/1/2006
74235	26	5	REMOVAL OF FOREIGN BODY(S)	56.91	56.91	7/1/2006
74235	TC	T	REMOVAL OF FOREIGN BODY(S)	90.01	90.01	7/1/2006
74240		3	RADIOLOGIC EXAM; GASTROINTESTINAL TRACT	83.35	83.35	7/1/2006
74240	26	5	RADIOLOGIC EXAM; GASTROINTESTINAL TRACT	33.15	33.15	7/1/2006
74240	TC	T	RADIOLOGIC EXAM; GASTROINTESTINAL TRACT	50.20	50.20	7/1/2006
74241		3	RADIOLOGIC EXAM, GASTROINTESTINAL TRACT (FILMS)	84.35	84.35	7/1/2006
74241	26	5	RADIOLOGIC EXAM, GASTROINTESTINAL TRACT (FILMS)	33.15	33.15	7/1/2006

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74241	TC	T	RADIOLOGIC EXAM, GASTROINTESTINAL TRACT (FILMS)	51.20	51.20	7/1/2006
74245		3	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH SMALL INTESTINE,	125.78	125.78	7/1/2006
74245	26	5	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH SMALL INTESTINE,	43.62	43.62	7/1/2006
74245	TC	T	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH SMALL INTESTINE,	82.16	82.16	7/1/2006
74246		3	RAD EXAM, GASTROINTESTINAL TRACT UPPER AIR CONTRAS	89.78	89.78	7/1/2006
74246	26	5	RAD EXAM, GASTROINTESTINAL TRACT UPPER AIR CONTRAS	33.15	33.15	7/1/2006
74246	TC	T	RAD EXAM, GASTROINTESTINAL TRACT UPPER AIR CONTRAS	56.62	56.62	7/1/2006
74247		3	RAD EXAM, GASTROINTESTINAL TRACT WITH/WITHOUT FILM	91.33	91.33	7/1/2006
74247	26	5	RAD EXAM, GASTROINTESTINAL TRACT WITH/WITHOUT FILM	33.15	33.15	7/1/2006
74247	TC	T	RAD EXAM, GASTROINTESTINAL TRACT WITH/WITHOUT FILM	58.18	58.18	7/1/2006
74249		3	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	132.30	132.30	7/1/2006
74249	26	5	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	43.62	43.62	7/1/2006
74249	TC	T	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	88.68	88.68	7/1/2006
74250		3	RADIOLOGIC EXAMINATION, SMALL INTESTINE, INCLUDES MULTIPLE SERIAL FILMS;	67.35	67.35	7/1/2006
74250	26	5	RADIOLOGIC EXAMINATION, SMALL INTESTINE, INCLUDES MULTIPLE SERIAL FILMS;	22.35	22.35	7/1/2006
74250	TC	T	RADIOLOGIC EXAMINATION, SMALL INTESTINE, INCLUDES MULTIPLE SERIAL FILMS;	45.00	45.00	7/1/2006
74251		3	RADIOLOGIC EXAMINATION, SMALL BOWEL, INCLUDES MULTIPLE SERIAL FILMS;	78.15	78.15	7/1/2006
74251	26	5	RADIOLOGIC EXAMINATION, SMALL BOWEL, INCLUDES MULTIPLE SERIAL FILMS;	33.15	33.15	7/1/2006
74251	TC	T	RADIOLOGIC EXAMINATION, SMALL BOWEL, INCLUDES MULTIPLE SERIAL FILMS;	45.00	45.00	7/1/2006
74260		3	DUODENOGRAPHY, HYPOTONIC	74.96	74.96	7/1/2006
74260	26	5	DUODENOGRAPHY, HYPOTONIC	23.76	23.76	7/1/2006
74260	TC	T	DUODENOGRAPHY, HYPOTONIC	51.20	51.20	7/1/2006
74270		3	RADIOLOGIC EXAMINATION, COLON; BARIUM ENEMA, WITH OR WITHOUT KUB	91.99	91.99	7/1/2006
74270	26	5	RADIOLOGIC EXAMINATION, COLON; BARIUM ENEMA, WITH OR WITHOUT KUB	33.15	33.15	7/1/2006
74270	TC	T	RADIOLOGIC EXAMINATION, COLON; BARIUM ENEMA, WITH OR WITHOUT KUB	58.84	58.84	7/1/2006
74280		3	RADIOLOGIC EXAM, AIR CONTRAST/ HIGH DENSITY	124.35	124.35	7/1/2006
74280	26	5	RADIOLOGIC EXAM, AIR CONTRAST/ HIGH DENSITY	47.16	47.16	7/1/2006
74280	TC	T	RADIOLOGIC EXAM, AIR CONTRAST/ HIGH DENSITY	77.19	77.19	7/1/2006
74283		3	THERAPEUTIC ENEMA, CONTRAST OR AIR, FOR REDUCTION OF INTUSSUSCEPTION OR OTHER	185.01	185.01	7/1/2006
74283	26	5	THERAPEUTIC ENEMA, CONTRAST OR AIR, FOR REDUCTION OF INTUSSUSCEPTION OR OTHER	96.66	96.66	7/1/2006
74283	TC	T	THERAPEUTIC ENEMA, CONTRAST OR AIR, FOR REDUCTION OF INTUSSUSCEPTION OR OTHER	88.35	88.35	7/1/2006
74290		3	CHOLECYSTOGRAPHY, ORAL CONTRAST	40.39	40.39	7/1/2006
74290	26	5	CHOLECYSTOGRAPHY, ORAL CONTRAST	15.06	15.06	7/1/2006
74290	TC	T	CHOLECYSTOGRAPHY, ORAL CONTRAST	25.33	25.33	7/1/2006
74291		3	CHOLECYSTOGRAPHY, ADDITIONAL EXAM	24.12	24.12	7/1/2006
74291	26	5	CHOLECYSTOGRAPHY, ADDITIONAL EXAM	9.75	9.75	7/1/2006
74291	TC	T	CHOLECYSTOGRAPHY, ADDITIONAL EXAM	14.37	14.37	7/1/2006
74300		3	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; INTRAOPERATIVE, RADIOLOGICAL	49.73	49.73	7/1/2006
74300	26	5	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; INTRAOPERATIVE, RADIOLOGICAL	32.33	32.33	7/1/2006
74301	26	5	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; ADDITIONAL SET INTRAOPERATIVE,	10.11	10.11	7/1/2006
74305		3	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; THROUGH EXISTING CATHETER, RADIOLOGIC	47.21	47.21	7/1/2006
74305	26	5	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; THROUGH EXISTING CATHETER, RADIOLOGIC	20.22	20.22	7/1/2006
74320		3	CHOLANGIOGRAPHY, PERCUTANEOUS, TRANSHEPATIC	134.45	134.45	7/1/2006
74320	26	5	CHOLANGIOGRAPHY, PERCUTANEOUS, TRANSHEPATIC	25.86	25.86	7/1/2006
74320	TC	T	CHOLANGIOGRAPHY, PERCUTANEOUS, TRANSHEPATIC	108.58	108.58	7/1/2006
74327		3	POSTOPERATIVE BILIARY DUCT CALCULUS REMOVAL, PERCUTANEOUS VIA T-TUBE TRACT,	94.67	94.67	7/1/2006
74327	26	5	POSTOPERATIVE BILIARY DUCT CALCULUS REMOVAL, PERCUTANEOUS VIA T-TUBE TRACT,	33.51	33.51	7/1/2006
74327	TC	T	POSTOPERATIVE BILIARY DUCT CALCULUS REMOVAL, PERCUTANEOUS VIA T-TUBE TRACT,	61.15	61.15	7/1/2006
74328		3	ENDOSCOPIC CATHETERIZATION	142.10	142.10	7/1/2006
74328	26	5	ENDOSCOPIC CATHETERIZATION	33.51	33.51	7/1/2006
74328	TC	T	ENDOSCOPIC CATHETERIZATION	108.58	108.58	7/1/2006
74329		3	ENDOSCOPIC CATH OF THE PANCREATIC DUCTAL SYSTEM	142.21	142.21	7/1/2006
74329	26	5	ENDOSCOPIC CATH OF THE PANCREATIC DUCTAL SYSTEM	33.51	33.51	7/1/2006
74329	TC	T	ENDOSCOPIC CATH OF THE PANCREATIC DUCTAL SYSTEM	108.69	108.69	7/1/2006
74330		3	COMBINED ENDOSCOPIC CATHETERIZATION	151.51	151.51	7/1/2006
74330	26	5	COMBINED ENDOSCOPIC CATHETERIZATION	42.93	42.93	7/1/2006
74330	TC	T	COMBINED ENDOSCOPIC CATHETERIZATION	108.58	108.58	7/1/2006
74340	26	5	INTRODUCTION OF LONG GASTROINTESTINAL TUBE (EG, MILLER-ABBOTT), INCLUDING	25.86	25.86	7/1/2006
74350		3	PERCUTANEOUS PLACEMENT OF GASTROSTOMY TUBE	144.92	144.92	7/1/2006
74350	26	5	PERCUTANEOUS PLACEMENT OF GASTROSTOMY TUBE	36.33	36.33	7/1/2006
74350	TC	T	PERCUTANEOUS PLACEMENT OF GASTROSTOMY TUBE	108.58	108.58	7/1/2006
74355		3	PLACEMENT OF ENTEROCLYSIS TUBE	126.67	126.67	7/1/2006
74355	26	5	PLACEMENT OF ENTEROCLYSIS TUBE	36.33	36.33	7/1/2006
74355	TC	T	PLACEMENT OF ENTEROCLYSIS TUBE	90.34	90.34	7/1/2006
74360		3	INTRALUMINAL DILATION OF STRICTURES/OBSTRUCTIONS	134.78	134.78	7/1/2006
74360	26	5	INTRALUMINAL DILATION OF STRICTURES/OBSTRUCTIONS	26.20	26.20	7/1/2006
74360	TC	T	INTRALUMINAL DILATION OF STRICTURES/OBSTRUCTIONS	108.58	108.58	7/1/2006
74363		3	PERCUTANEOUS TRANSHEPATIC DILATION OF BILIARY DUCT STRICTURE WITH OR WITHOUT	252.71	252.71	7/1/2006
74363	26	5	PERCUTANEOUS TRANSHEPATIC DILATION OF BILIARY DUCT STRICTURE WITH OR WITHOUT	42.21	42.21	7/1/2006
74400		3	UROGRAPHY, INTRAVENOUS	81.58	81.58	7/1/2006

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74400	26	5	UROGRAPHY, INTRAVENOUS	23.40	23.40	7/1/2006
74400	TC	T	UROGRAPHY, INTRAVENOUS	58.18	58.18	7/1/2006
74410		3	UROGRAPHY, INFUSION, DRIP TECHNIQUE	90.86	90.86	7/1/2006
74410	26	5	UROGRAPHY, INFUSION, DRIP TECHNIQUE	23.40	23.40	7/1/2006
74410	TC	T	UROGRAPHY, INFUSION, DRIP TECHNIQUE	67.45	67.45	7/1/2006
74415		3	UROGRAPHY, WITH MEPHROTOMOGRAPHY	96.72	96.72	7/1/2006
74415	26	5	UROGRAPHY, WITH MEPHROTOMOGRAPHY	23.40	23.40	7/1/2006
74415	TC	T	UROGRAPHY, WITH MEPHROTOMOGRAPHY	73.32	73.32	7/1/2006
74420		3	UROGRAPHY, RETROGRADE	107.73	107.73	7/1/2006
74420	26	5	UROGRAPHY, RETROGRADE	17.40	17.40	7/1/2006
74420	TC	T	UROGRAPHY, RETROGRADE	90.34	90.34	7/1/2006
74425		3	UROGRAPHY, ANTEGRADE	62.40	62.40	7/1/2006
74425	26	5	UROGRAPHY, ANTEGRADE	17.40	17.40	7/1/2006
74425	TC	T	UROGRAPHY, ANTEGRADE	45.00	45.00	7/1/2006
74430		3	CYSTOGRAPHY, MINIMUM 3 VIEWS	51.45	51.45	7/1/2006
74430	26	5	CYSTOGRAPHY, MINIMUM 3 VIEWS	15.29	15.29	7/1/2006
74430	TC	T	CYSTOGRAPHY, MINIMUM 3 VIEWS	36.16	36.16	7/1/2006
74440		3	VASOGRAPH	56.93	56.93	7/1/2006
74440	26	5	VASOGRAPH	18.12	18.12	7/1/2006
74440	TC	T	VASOGRAPH	38.81	38.81	7/1/2006
74445		3	CORPORA CAVERNOSOGRAPHY	93.72	93.72	7/1/2006
74445	26	5	CORPORA CAVERNOSOGRAPHY	54.91	54.91	7/1/2006
74445	TC	T	CORPORA CAVERNOSOGRAPHY	38.81	38.81	7/1/2006
74450		3	URETHROCYSTOGRAPHY	66.19	66.19	7/1/2006
74450	26	5	URETHROCYSTOGRAPHY	15.99	15.99	7/1/2006
74450	TC	T	URETHROCYSTOGRAPHY	50.20	50.20	7/1/2006
74455		3	URETHROCYSTOGRAPHY, VOIDING	70.62	70.62	7/1/2006
74455	26	5	URETHROCYSTOGRAPHY, VOIDING	15.99	15.99	7/1/2006
74455	TC	T	URETHROCYSTOGRAPHY, VOIDING	54.64	54.64	7/1/2006
74470		3	RADIOLOGIC EXAM; RENAL CYST STUDY	68.88	68.88	7/1/2006
74470	26	5	RADIOLOGIC EXAM; RENAL CYST STUDY	25.86	25.86	7/1/2006
74470	TC	T	RADIOLOGIC EXAM; RENAL CYST STUDY	43.02	43.02	7/1/2006
74475		3	INTRODUCTION CATHETER INTO RENAL PELVIS	166.07	166.07	7/1/2006
74475	26	5	INTRODUCTION CATHETER INTO RENAL PELVIS	25.86	25.86	7/1/2006
74475	TC	T	INTRODUCTION CATHETER INTO RENAL PELVIS	140.21	140.21	7/1/2006
74480		3	INTRODUCTION OF URETERAL CATHETER OR STENT	166.07	166.07	7/1/2006
74480	26	5	INTRODUCTION OF URETERAL CATHETER OR STENT	25.86	25.86	7/1/2006
74480	TC	T	INTRODUCTION OF URETERAL CATHETER OR STENT	140.21	140.21	7/1/2006
74485		3	DILATION OF NEPHROSTOMY, URETERS	134.35	134.35	7/1/2006
74485	26	5	DILATION OF NEPHROSTOMY, URETERS	25.76	25.76	7/1/2006
74485	TC	T	DILATION OF NEPHROSTOMY, URETERS	108.58	108.58	7/1/2006
74710		3	PELVIMENTRY, WITH/WITHOUT PLACENTAL LOCALIZATION	52.51	52.51	7/1/2006
74710	26	5	PELVIMENTRY, WITH/WITHOUT PLACENTAL LOCALIZATION	16.35	16.35	7/1/2006
74710	TC	T	PELVIMENTRY, WITH/WITHOUT PLACENTAL LOCALIZATION	36.16	36.16	7/1/2006
74775		3	PERINEOGRAM	80.17	80.17	7/1/2006
74775	26	5	PERINEOGRAM	29.97	29.97	7/1/2006
74775	TC	T	PERINEOGRAM	50.20	50.20	7/1/2006
75552		3	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY; WITHOUT CONTRAST MATERIAL	462.33	462.33	7/1/2006
75552	26	5	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY; WITHOUT CONTRAST MATERIAL	76.77	76.77	7/1/2006
75552	TC	T	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY; WITHOUT CONTRAST MATERIAL	385.56	385.56	7/1/2006
75553		3	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY;	480.71	480.71	7/1/2006
75553	26	5	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY;	95.15	95.15	7/1/2006
75553	TC	T	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY;	385.56	385.56	7/1/2006
75554		3	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	474.26	474.26	7/1/2006
75554	26	5	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	88.70	88.70	7/1/2006
75554	TC	T	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	385.56	385.56	7/1/2006
75555		3	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	471.02	471.02	7/1/2006
75555	26	5	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	85.46	85.46	7/1/2006
75555	TC	T	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	385.56	385.56	7/1/2006
75600		3	AORTOGRAPHY, THORACIC WITHOUT SERIALOGRAPHY	458.04	458.04	7/1/2006
75600	26	5	AORTOGRAPHY, THORACIC WITHOUT SERIALOGRAPHY	24.40	24.40	7/1/2006
75600	TC	T	AORTOGRAPHY, THORACIC WITHOUT SERIALOGRAPHY	433.64	433.64	7/1/2006
75605		3	AORTOGRAPHY, THORACIC BY SERIALOGRAPHY	489.09	489.09	7/1/2006
75605	26	5	AORTOGRAPHY, THORACIC BY SERIALOGRAPHY	55.44	55.44	7/1/2006
75605	TC	T	AORTOGRAPHY, THORACIC BY SERIALOGRAPHY	433.64	433.64	7/1/2006
75625		3	AORTOGRAPHY, ABDOMINAL BY SERIALOGRAPHY	488.66	488.66	7/1/2006
75625	26	5	AORTOGRAPHY, ABDOMINAL BY SERIALOGRAPHY	55.01	55.01	7/1/2006
75625	TC	T	AORTOGRAPHY, ABDOMINAL BY SERIALOGRAPHY	433.64	433.64	7/1/2006
75630		3	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL LOWER EXTREM	539.30	539.30	7/1/2006
75630	26	5	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL LOWER EXTREM	87.18	87.18	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
75630	TC	T	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL LOWER EXTREM	452.12	452.12	7/1/2006
75635		3	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL	652.73	652.73	7/1/2006
75635	26	5	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL	115.11	115.11	7/1/2006
75635	TC	T	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL	537.62	537.62	7/1/2006
75650		3	ANGIOGRAPHY, CERVICOCEREBRAL	505.13	505.13	7/1/2006
75650	26	5	ANGIOGRAPHY, CERVICOCEREBRAL	71.49	71.49	7/1/2006
75650	TC	T	ANGIOGRAPHY, CERVICOCEREBRAL	433.64	433.64	7/1/2006
75658		3	ANGIOGRAPHY, BRACHIAL	497.99	497.99	7/1/2006
75658	26	5	ANGIOGRAPHY, BRACHIAL	64.34	64.34	7/1/2006
75658	TC	T	ANGIOGRAPHY, BRACHIAL	433.64	433.64	7/1/2006
75660		3	ANGIOGRAPHY, EXTERNAL CAROTID UNILATERAL	496.76	496.76	7/1/2006
75660	26	5	ANGIOGRAPHY, EXTERNAL CAROTID UNILATERAL	63.12	63.12	7/1/2006
75660	TC	T	ANGIOGRAPHY, EXTERNAL CAROTID UNILATERAL	433.64	433.64	7/1/2006
75662		3	ANGIOGRAPHY, EXTERNAL CAROTID, BILATERAL	514.33	514.33	7/1/2006
75662	26	5	ANGIOGRAPHY, EXTERNAL CAROTID, BILATERAL	80.69	80.69	7/1/2006
75662	TC	T	ANGIOGRAPHY, EXTERNAL CAROTID, BILATERAL	433.64	433.64	7/1/2006
75665		3	ANGIOGRAPHY, CAROTID, CEREBRAL, UNILATERAL	497.46	497.46	7/1/2006
75665	26	5	ANGIOGRAPHY, CAROTID, CEREBRAL, UNILATERAL	63.81	63.81	7/1/2006
75665	TC	T	ANGIOGRAPHY, CAROTID, CEREBRAL, UNILATERAL	433.64	433.64	7/1/2006
75671		3	ANGIOGRAPHY, CARODID, CEREBRAL, BILATERAL	513.24	513.24	7/1/2006
75671	26	5	ANGIOGRAPHY, CARODID, CEREBRAL, BILATERAL	79.59	79.59	7/1/2006
75671	TC	T	ANGIOGRAPHY, CARODID, CEREBRAL, BILATERAL	433.64	433.64	7/1/2006
75676		3	ANGIOGRAPHY, CAROTID, CERVICAL, UNILATERAL	496.99	496.99	7/1/2006
75676	26	5	ANGIOGRAPHY, CAROTID, CERVICAL, UNILATERAL	63.35	63.35	7/1/2006
75676	TC	T	ANGIOGRAPHY, CAROTID, CERVICAL, UNILATERAL	433.64	433.64	7/1/2006
75680		3	ANGIOGRAPHY, CAROTID, CERVICAL, BILATERAL	513.24	513.24	7/1/2006
75680	26	5	ANGIOGRAPHY, CAROTID, CERVICAL, BILATERAL	79.59	79.59	7/1/2006
75680	TC	T	ANGIOGRAPHY, CAROTID, CERVICAL, BILATERAL	433.64	433.64	7/1/2006
75685		3	ANGIOGRAPHY, VERTEBRAL, CERVICAL	496.43	496.43	7/1/2006
75685	26	5	ANGIOGRAPHY, VERTEBRAL, CERVICAL	62.79	62.79	7/1/2006
75685	TC	T	ANGIOGRAPHY, VERTEBRAL, CERVICAL	433.64	433.64	7/1/2006
75705		3	ANGIOGRAPHY, SPINAL, SELECTIVE	539.30	539.30	7/1/2006
75705	26	5	ANGIOGRAPHY, SPINAL, SELECTIVE	105.66	105.66	7/1/2006
75705	TC	T	ANGIOGRAPHY, SPINAL, SELECTIVE	433.64	433.64	7/1/2006
75710		3	ANGIOGRAPHY, EXTREMITY, UNILATERAL	489.22	489.22	7/1/2006
75710	26	5	ANGIOGRAPHY, EXTREMITY, UNILATERAL	55.57	55.57	7/1/2006
75710	TC	T	ANGIOGRAPHY, EXTREMITY, UNILATERAL	433.64	433.64	7/1/2006
75716		3	ANGIOGRAPHY, EXTREMITY, BILATERAL	496.66	496.66	7/1/2006
75716	26	5	ANGIOGRAPHY, EXTREMITY, BILATERAL	63.02	63.02	7/1/2006
75716	TC	T	ANGIOGRAPHY, EXTREMITY, BILATERAL	433.64	433.64	7/1/2006
75722		3	ANGIOGRAPHY, RENAL, UNILATERAL	489.09	489.09	7/1/2006
75722	26	5	ANGIOGRAPHY, RENAL, UNILATERAL	55.44	55.44	7/1/2006
75722	TC	T	ANGIOGRAPHY, RENAL, UNILATERAL	433.64	433.64	7/1/2006
75724		3	ANGIOGRAPHY RENAL BILATERAL SELECTIVE	506.99	506.99	7/1/2006
75724	26	5	ANGIOGRAPHY RENAL BILATERAL SELECTIVE	73.34	73.34	7/1/2006
75724	TC	T	ANGIOGRAPHY RENAL BILATERAL SELECTIVE	433.64	433.64	7/1/2006
75726		3	ANGIOGRAPHY VISCERAL SELECTIVE OR SUPRASELECTIVE	488.09	488.09	7/1/2006
75726	26	5	ANGIOGRAPHY VISCERAL SELECTIVE OR SUPRASELECTIVE	54.45	54.45	7/1/2006
75726	TC	T	ANGIOGRAPHY VISCERAL SELECTIVE OR SUPRASELECTIVE	433.64	433.64	7/1/2006
75731		3	ANGIOGRAPHY ADRENAL UNILATERAL, SELECTIVE	488.33	488.33	7/1/2006
75731	26	5	ANGIOGRAPHY ADRENAL UNILATERAL, SELECTIVE	54.68	54.68	7/1/2006
75731	TC	T	ANGIOGRAPHY ADRENAL UNILATERAL, SELECTIVE	433.64	433.64	7/1/2006
75733		3	ANGIOGRAPHY ADRENAL BILATERAL SELECTIVE	496.76	496.76	7/1/2006
75733	26	5	ANGIOGRAPHY ADRENAL BILATERAL SELECTIVE	63.12	63.12	7/1/2006
75733	TC	T	ANGIOGRAPHY ADRENAL BILATERAL SELECTIVE	433.64	433.64	7/1/2006
75736		3	ANGIOGRAPHY PELVIC,SELECTIVE OR SUPRASELECTIVE	488.66	488.66	7/1/2006
75736	26	5	ANGIOGRAPHY PELVIC,SELECTIVE OR SUPRASELECTIVE	55.01	55.01	7/1/2006
75736	TC	T	ANGIOGRAPHY PELVIC,SELECTIVE OR SUPRASELECTIVE	433.64	433.64	7/1/2006
75741		3	ANGIOGRAPHY PULMONARY UNILATERAL SELECTIVE	496.43	496.43	7/1/2006
75741	26	5	ANGIOGRAPHY PULMONARY UNILATERAL SELECTIVE	62.79	62.79	7/1/2006
75741	TC	T	ANGIOGRAPHY PULMONARY UNILATERAL SELECTIVE	433.64	433.64	7/1/2006
75743		3	ANGIOGRAPHY PULMONARY BILATERAL SELECTIVE	512.91	512.91	7/1/2006
75743	26	5	ANGIOGRAPHY PULMONARY BILATERAL SELECTIVE	79.26	79.26	7/1/2006
75743	TC	T	ANGIOGRAPHY PULMONARY BILATERAL SELECTIVE	433.64	433.64	7/1/2006
75746		3	ANGIOGRAPHY PULMONARY BY NONSEL CATH OR VEN INJ.	488.43	488.43	7/1/2006
75746	26	5	ANGIOGRAPHY PULMONARY BY NONSEL CATH OR VEN INJ.	54.78	54.78	7/1/2006
75746	TC	T	ANGIOGRAPHY PULMONARY BY NONSEL CATH OR VEN INJ.	433.64	433.64	7/1/2006
75756		3	ANGIOGRAPHY,INTERNAL MAMMARY	490.51	490.51	7/1/2006
75756	26	5	ANGIOGRAPHY,INTERNAL MAMMARY	56.87	56.87	7/1/2006
75756	TC	T	ANGIOGRAPHY,INTERNAL MAMMARY	433.64	433.64	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
75774		3	ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION,	451.04	451.04	7/1/2006
75774	26	5	ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION,	17.40	17.40	7/1/2006
75774	TC	T	ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION,	433.64	433.64	7/1/2006
75790		3	ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PT)	134.75	134.75	7/1/2006
75790	26	5	ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PT)	88.19	88.19	7/1/2006
75790	TC	T	ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PT)	46.56	46.56	7/1/2006
75801		3	LYMPHANGIOGRAPHY, EXTEMITY ONLY UNILATERAL	226.49	226.49	7/1/2006
75801	26	5	LYMPHANGIOGRAPHY, EXTEMITY ONLY UNILATERAL	39.77	39.77	7/1/2006
75801	TC	T	LYMPHANGIOGRAPHY, EXTEMITY ONLY UNILATERAL	186.54	186.54	7/1/2006
75803		3	LYMPHANGIOGRAPHY, EXTEMITY ONLY, BILATERAL	242.40	242.40	7/1/2006
75803	26	5	LYMPHANGIOGRAPHY, EXTEMITY ONLY, BILATERAL	55.86	55.86	7/1/2006
75803	TC	T	LYMPHANGIOGRAPHY, EXTEMITY ONLY, BILATERAL	186.54	186.54	7/1/2006
75805		3	LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL	249.57	249.57	7/1/2006
75805	26	5	LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL	39.26	39.26	7/1/2006
75805	TC	T	LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL	210.31	210.31	7/1/2006
75807		3	LYMPHANGIOGRAPHY, PELVIC;ABDOMINAL, BILATERAL	266.35	266.35	7/1/2006
75807	26	5	LYMPHANGIOGRAPHY, PELVIC;ABDOMINAL, BILATERAL	55.86	55.86	7/1/2006
75807	TC	T	LYMPHANGIOGRAPHY, PELVIC;ABDOMINAL, BILATERAL	210.49	210.49	7/1/2006
75809		3	SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED INDWELLING NONVASCULAR SHUN	49.34	49.34	7/1/2006
75809	26	5	SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED INDWELLING NONVASCULAR SHUN	22.35	22.35	7/1/2006
75809	TC	T	SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED INDWELLING NONVASCULAR SHUN	26.99	26.99	7/1/2006
75810		3	SPLENOPORTOGRAPHY	488.09	488.09	7/1/2006
75810	26	5	SPLENOPORTOGRAPHY	54.45	54.45	7/1/2006
75810	TC	T	SPLENOPORTOGRAPHY	433.64	433.64	7/1/2006
75820		3	VENOGRAPHY, EXTREMITY, UNILATERAL	66.36	66.36	7/1/2006
75820	26	5	VENOGRAPHY, EXTREMITY, UNILATERAL	33.51	33.51	7/1/2006
75820	TC	T	VENOGRAPHY, EXTREMITY, UNILATERAL	32.85	32.85	7/1/2006
75822		3	VENOGRAPHY, EXTREMITY, BILATERAL	101.77	101.77	7/1/2006
75822	26	5	VENOGRAPHY, EXTREMITY, BILATERAL	50.91	50.91	7/1/2006
75822	TC	T	VENOGRAPHY, EXTREMITY, BILATERAL	50.86	50.86	7/1/2006
75825		3	VENOGRAPHY, CAVAL, INFERIOR WITH SERIALOGRAPHY	488.56	488.56	7/1/2006
75825	26	5	VENOGRAPHY, CAVAL, INFERIOR WITH SERIALOGRAPHY	54.91	54.91	7/1/2006
75825	TC	T	VENOGRAPHY, CAVAL, INFERIOR WITH SERIALOGRAPHY	433.64	433.64	7/1/2006
75827		3	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERALOGRAPHY	488.09	488.09	7/1/2006
75827	26	5	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERALOGRAPHY	54.45	54.45	7/1/2006
75827	TC	T	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERALOGRAPHY	433.64	433.64	7/1/2006
75831		3	VENOGRAPHY, RENAL, UNILATERAL, SELECTIVE	488.33	488.33	7/1/2006
75831	26	5	VENOGRAPHY, RENAL, UNILATERAL, SELECTIVE	54.68	54.68	7/1/2006
75831	TC	T	VENOGRAPHY, RENAL, UNILATERAL, SELECTIVE	433.64	433.64	7/1/2006
75833		3	VENOGRAPHY, RENAL, BILATERAL, SELECTIVE	505.59	505.59	7/1/2006
75833	26	5	VENOGRAPHY, RENAL, BILATERAL, SELECTIVE	71.95	71.95	7/1/2006
75833	TC	T	VENOGRAPHY, RENAL, BILATERAL, SELECTIVE	433.64	433.64	7/1/2006
75840		3	VENOGRAPHY, ADRENAL, UNILATERAL, SELECTIVE	488.89	488.89	7/1/2006
75840	26	5	VENOGRAPHY, ADRENAL, UNILATERAL, SELECTIVE	55.24	55.24	7/1/2006
75840	TC	T	VENOGRAPHY, ADRENAL, UNILATERAL, SELECTIVE	433.64	433.64	7/1/2006
75842		3	VENOGRAPHY, ADRENAL, BILATERAL, SELECTIVE	504.80	504.80	7/1/2006
75842	26	5	VENOGRAPHY, ADRENAL, BILATERAL, SELECTIVE	71.16	71.16	7/1/2006
75842	TC	T	VENOGRAPHY, ADRENAL, BILATERAL, SELECTIVE	433.64	433.64	7/1/2006
75860		3	VENOGRAPHY, SINUS OR JUGULAR, CATHETER	488.53	488.53	7/1/2006
75860	26	5	VENOGRAPHY, SINUS OR JUGULAR, CATHETER	54.88	54.88	7/1/2006
75860	TC	T	VENOGRAPHY, SINUS OR JUGULAR, CATHETER	433.64	433.64	7/1/2006
75870		3	VENOGRAPHY, SUPERIOR SAGITTAL SINUS	488.76	488.76	7/1/2006
75870	26	5	VENOGRAPHY, SUPERIOR SAGITTAL SINUS	55.11	55.11	7/1/2006
75870	TC	T	VENOGRAPHY, SUPERIOR SAGITTAL SINUS	433.64	433.64	7/1/2006
75872		3	VENOGRAPHY, EPIDURAL	490.17	490.17	7/1/2006
75872	26	5	VENOGRAPHY, EPIDURAL	56.36	56.36	7/1/2006
75872	TC	T	VENOGRAPHY, EPIDURAL	433.64	433.64	7/1/2006
75880		3	VENOGRAPHY, ORBITAL	66.36	66.36	7/1/2006
75880	26	5	VENOGRAPHY, ORBITAL	33.51	33.51	7/1/2006
75880	TC	T	VENOGRAPHY, ORBITAL	32.85	32.85	7/1/2006
75885		3	PERCUTANEOUS TRANSHEPATIC PORTO W HEMODYNAMUC EVAL	502.44	502.44	7/1/2006
75885	26	5	PERCUTANEOUS TRANSHEPATIC PORTO W HEMODYNAMUC EVAL	68.79	68.79	7/1/2006
75885	TC	T	PERCUTANEOUS TRANSHEPATIC PORTO W HEMODYNAMUC EVAL	433.64	433.64	7/1/2006
75887		3	PERCUTANEOUS TRANSHEPATIC PORTOG WO HEMODY EVAL	502.44	502.44	7/1/2006
75887	26	5	PERCUTANEOUS TRANSHEPATIC PORTOG WO HEMODY EVAL	68.79	68.79	7/1/2006
75887	TC	T	PERCUTANEOUS TRANSHEPATIC PORTOG WO HEMODY EVAL	433.64	433.64	7/1/2006
75889		3	HEPATIC VENOG WEDGED OR FREE W HEMODYNAMIC EVAL	488.09	488.09	7/1/2006
75889	26	5	HEPATIC VENOG WEDGED OR FREE W HEMODYNAMIC EVAL	54.45	54.45	7/1/2006
75889	TC	T	HEPATIC VENOG WEDGED OR FREE W HEMODYNAMIC EVAL	433.64	433.64	7/1/2006
75891		3	HEPATIC VENOGRAPHY WEDGED OR FREE WO HEMODY EVA	488.09	488.09	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
75891	26	5	HEPATIC VENOGRAPHY WEDGED OR FREE WO HEMODY EVA	54.45	54.45	7/1/2006
75891	TC	T	HEPATIC VENOGRAPHY WEDGED OR FREE WO HEMODY EVA	433.64	433.64	7/1/2006
75893		3	VENOUS SAMPLING THRU CATH W OR WO ANGIOGRAPHY	459.51	459.51	7/1/2006
75893	26	5	VENOUS SAMPLING THRU CATH W OR WO ANGIOGRAPHY	25.86	25.86	7/1/2006
75893	TC	T	VENOUS SAMPLING THRU CATH W OR WO ANGIOGRAPHY	433.64	433.64	7/1/2006
75894		3	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD	894.07	894.07	7/1/2006
75894	26	5	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD	63.25	63.25	7/1/2006
75894	TC	T	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD	830.83	830.83	7/1/2006
75896		3	TRANSCATHETER THERAPY, INFUSION, ANY METHOD	785.79	785.79	7/1/2006
75896	26	5	TRANSCATHETER THERAPY, INFUSION, ANY METHOD	63.22	63.22	7/1/2006
75896	TC	T	TRANSCATHETER THERAPY, INFUSION, ANY METHOD	722.57	722.57	7/1/2006
75898		3	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER	115.40	115.40	7/1/2006
75898	26	5	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER	79.23	79.23	7/1/2006
75898	TC	T	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER	36.16	36.16	7/1/2006
75900		3	EXCHANGE OF A PREVIOUSLY PLACED ARTERIAL CATHETER DURING	746.71	746.71	7/1/2006
75900	26	5	EXCHANGE OF A PREVIOUSLY PLACED ARTERIAL CATHETER DURING	23.63	23.63	7/1/2006
75900	TC	T	EXCHANGE OF A PREVIOUSLY PLACED ARTERIAL CATHETER DURING	723.08	723.08	7/1/2006
75901		3	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH)	85.92	85.92	7/1/2006
75901	26	5	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH)	23.40	23.40	7/1/2006
75901	TC	T	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH)	62.51	62.51	7/1/2006
75902		3	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	81.32	81.32	7/1/2006
75902	26	5	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	18.81	18.81	7/1/2006
75902	TC	T	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	62.51	62.51	7/1/2006
75940		3	PERCUTANEOUS PLACEMENT OF IVC FILTER	459.97	459.97	7/1/2006
75940	26	5	PERCUTANEOUS PLACEMENT OF IVC FILTER	26.33	26.33	7/1/2006
75940	TC	T	PERCUTANEOUS PLACEMENT OF IVC FILTER	433.64	433.64	7/1/2006
75945		3	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	176.86	176.86	7/1/2006
75945	26	5	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	19.96	19.96	7/1/2006
75945	TC	T	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	156.90	156.90	7/1/2006
75946		3	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	99.32	99.32	7/1/2006
75946	26	5	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	20.19	20.19	7/1/2006
75946	TC	T	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	79.14	79.14	7/1/2006
75952	26	5	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION,	220.91	220.91	7/1/2006
75953	26	5	PLACEMENT OF PROXIMAL OR DISTAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF	66.86	66.86	7/1/2006
75954	26	5	ENDOVASCULAR REPAIR OF ILIAC ARTERY ANEURYSM, PSEUDOANEURYSM, ARTERIOVENOUS	75.86	75.86	7/1/2006
75960		3	TRANSCATH. INTRO. INTRAVASC.STENT PERCU.&/OR OPEN	552.54	552.54	7/1/2006
75960	26	5	TRANSCATH. INTRO. INTRAVASC.STENT PERCU.&/OR OPEN	39.95	39.95	7/1/2006
75960	TC	T	TRANSCATH. INTRO. INTRAVASC.STENT PERCU.&/OR OPEN	512.59	512.59	7/1/2006
75961		3	TRANSCATH RETRVL, PERCUTANEOUS OF INTRAV FORGN BOD	564.29	564.29	7/1/2006
75961	26	5	TRANSCATH RETRVL, PERCUTANEOUS OF INTRAV FORGN BOD	202.84	202.84	7/1/2006
75961	TC	T	TRANSCATH RETRVL, PERCUTANEOUS OF INTRAV FORGN BOD	361.45	361.45	7/1/2006
75962		3	TRANSLUMINAL ANGIOPLASTY, ANY METH, PERIPH ARTERY	568.22	568.22	7/1/2006
75962	26	5	TRANSLUMINAL ANGIOPLASTY, ANY METH, PERIPH ARTERY	26.09	26.09	7/1/2006
75962	TC	T	TRANSLUMINAL ANGIOPLASTY, ANY METH, PERIPH ARTERY	542.13	542.13	7/1/2006
75964		3	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL PERIPHERAL ARTERY,	306.09	306.09	7/1/2006
75964	26	5	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL PERIPHERAL ARTERY,	17.63	17.63	7/1/2006
75964	TC	T	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL PERIPHERAL ARTERY,	288.47	288.47	7/1/2006
75966		3	TRANSLUMINAL ANGIOPLASTY ANY METH RENL/VISCERL ART	605.91	605.91	7/1/2006
75966	26	5	TRANSLUMINAL ANGIOPLASTY ANY METH RENL/VISCERL ART	63.78	63.78	7/1/2006
75966	TC	T	TRANSLUMINAL ANGIOPLASTY ANY METH RENL/VISCERL ART	542.13	542.13	7/1/2006
75968		3	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	306.20	306.20	7/1/2006
75968	26	5	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	17.73	17.73	7/1/2006
75968	TC	T	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	288.47	288.47	7/1/2006
75970		3	TRANSCATHETER BIOPSY	437.13	437.13	7/1/2006
75970	26	5	TRANSCATHETER BIOPSY	40.08	40.08	7/1/2006
75970	TC	T	TRANSCATHETER BIOPSY	397.05	397.05	7/1/2006
75978		3	TRANSLUMINAL ANGIOPLASTY, VENOUS	567.99	567.99	7/1/2006
75978	26	5	TRANSLUMINAL ANGIOPLASTY, VENOUS	25.86	25.86	7/1/2006
75980		3	PERCUTANEOUS TRANSHEPATICBILIARY GRAING W CONT MON	255.33	255.33	7/1/2006
75980	26	5	PERCUTANEOUS TRANSHEPATICBILIARY GRAING W CONT MON	68.79	68.79	7/1/2006
75980	TC	T	PERCUTANEOUS TRANSHEPATICBILIARY GRAING W CONT MON	186.54	186.54	7/1/2006
75982		3	PERCUT PLCMENT OF DRNG CATH F/COMB INT&EXT BIL DRN	279.28	279.28	7/1/2006
75982	26	5	PERCUT PLCMENT OF DRNG CATH F/COMB INT&EXT BIL DRN	68.79	68.79	7/1/2006
75982	TC	T	PERCUT PLCMENT OF DRNG CATH F/COMB INT&EXT BIL DRN	210.49	210.49	7/1/2006
75984		3	CHANGE OF PERCUTANEOUS TUBE OR DRAINAGE CATHETER WITH CONTRAST MONITORING (EG	101.69	101.69	7/1/2006
75984	26	5	CHANGE OF PERCUTANEOUS TUBE OR DRAINAGE CATHETER WITH CONTRAST MONITORING (EG	34.23	34.23	7/1/2006
75984	TC	T	CHANGE OF PERCUTANEOUS TUBE OR DRAINAGE CATHETER WITH CONTRAST MONITORING (EG	67.45	67.45	7/1/2006
75989		3	RADIOLOGICAL GUIDANCE FOR PERCUTANEOUS DRAINAGE OF ABSCESS, OR SPECIMEN	165.50	165.50	7/1/2006
75989	26	5	RADIOLOGICAL GUIDANCE FOR PERCUTANEOUS DRAINAGE OF ABSCESS, OR SPECIMEN	56.91	56.91	7/1/2006
75989	TC	T	RADIOLOGICAL GUIDANCE FOR PERCUTANEOUS DRAINAGE OF ABSCESS, OR SPECIMEN	108.58	108.58	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
75992		3	TRANSLUMINAL ATHERECTOMY, PERIPHERAL ARTERY	568.55	568.55	7/1/2006
75992	26	5	TRANSLUMINAL ATHERECTOMY, PERIPHERAL ARTERY	26.43	26.43	7/1/2006
75992	TC	T	TRANSLUMINAL ATHERECTOMY, PERIPHERAL ARTERY	542.13	542.13	7/1/2006
75993		3	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL PERIPHERAL ARTERY, RADIOLOGICAL	306.68	306.68	7/1/2006
75993	26	5	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL PERIPHERAL ARTERY, RADIOLOGICAL	17.73	17.73	7/1/2006
75993	TC	T	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL PERIPHERAL ARTERY, RADIOLOGICAL	288.96	288.96	7/1/2006
75994		3	TRANSLUMINAL ATHERECTOMY, RENAL RADIO. SUP.& INTER	606.57	606.57	7/1/2006
75994	26	5	TRANSLUMINAL ATHERECTOMY, RENAL RADIO. SUP.& INTER	64.01	64.01	7/1/2006
75994	TC	T	TRANSLUMINAL ATHERECTOMY, RENAL RADIO. SUP.& INTER	542.56	542.56	7/1/2006
75995		3	TRANSLUMINAL ATHERECTOMY VISCERAL,RAD. SUP & INTER	606.44	606.44	7/1/2006
75995	26	5	TRANSLUMINAL ATHERECTOMY VISCERAL,RAD. SUP & INTER	63.88	63.88	7/1/2006
75995	TC	T	TRANSLUMINAL ATHERECTOMY VISCERAL,RAD. SUP & INTER	542.56	542.56	7/1/2006
75996		3	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	306.32	306.32	7/1/2006
75996	26	5	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	17.40	17.40	7/1/2006
75996	TC	T	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	288.93	288.93	7/1/2006
75998		3	FLUOROSCOPIC GUIDANCE FOR CENTRAL VENOUS ACCESS DEVICE PLACEMENT, REPLACEMEN	63.91	63.91	7/1/2006
75998	26	5	FLUOROSCOPIC GUIDANCE FOR CENTRAL VENOUS ACCESS DEVICE PLACEMENT, REPLACEMEN	18.22	18.22	7/1/2006
75998	TC	T	FLUOROSCOPIC GUIDANCE FOR CENTRAL VENOUS ACCESS DEVICE PLACEMENT, REPLACEMEN	45.69	45.69	7/1/2006
76000		3	FLUOROSCOPY (SEPARATE PROCEDURE), UP TO ONE HOUR PHYSICIAN TIME, OTHER THAN	53.01	53.01	7/1/2006
76000	26	5	FLUOROSCOPY (SEPARATE PROCEDURE), UP TO ONE HOUR PHYSICIAN TIME, OTHER THAN	8.01	8.01	7/1/2006
76000	TC	T	FLUOROSCOPY (SEPARATE PROCEDURE), UP TO ONE HOUR PHYSICIAN TIME, OTHER THAN	45.00	45.00	7/1/2006
76001		3	FLUOROSCOPE EXAM. EXTENSIVE	122.90	122.90	7/1/2006
76001	26	5	FLUOROSCOPE EXAM. EXTENSIVE	32.56	32.56	7/1/2006
76001	TC	T	FLUOROSCOPE EXAM. EXTENSIVE	90.34	90.34	7/1/2006
76003		3	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	70.54	70.54	7/1/2006
76003	26	5	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	25.53	25.53	7/1/2006
76003	TC	T	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	45.00	45.00	7/1/2006
76005		3	FLUOROSCOPIC GUIDANCE AND LOCALIZATION OF NEEDLE OR CATHETER TIP FOR SPINE OR	72.26	72.26	7/1/2006
76005	26	5	FLUOROSCOPIC GUIDANCE AND LOCALIZATION OF NEEDLE OR CATHETER TIP FOR SPINE OR	27.26	27.26	7/1/2006
76005	TC	T	FLUOROSCOPIC GUIDANCE AND LOCALIZATION OF NEEDLE OR CATHETER TIP FOR SPINE OR	45.00	45.00	7/1/2006
76010		3	RADIOLOGIC EXAMINATION FROM NOSE TO RECTUM FOR FOREIGN BODY, SINGLE VIEW, CHILD	26.38	26.38	7/1/2006
76010	26	5	RADIOLOGIC EXAMINATION FROM NOSE TO RECTUM FOR FOREIGN BODY, SINGLE VIEW, CHILD	8.70	8.70	7/1/2006
76010	TC	T	RADIOLOGIC EXAMINATION FROM NOSE TO RECTUM FOR FOREIGN BODY, SINGLE VIEW, CHILD	17.68	17.68	7/1/2006
76012	26	5	RADIOLOGICAL SUPERVISION AND INTERPRETATION, PERCUTANEOUS VERTEBROPLASTY, PER	65.04	65.04	7/1/2006
76013	26	5	RADIOLOGICAL SUPERVISION AND INTERPRETATION, PERCUTANEOUS VERTEBROPLASTY, PER	67.20	67.20	7/1/2006
76020		3	BONE AGE STUDIES	26.74	26.74	7/1/2006
76020	26	5	BONE AGE STUDIES	9.06	9.06	7/1/2006
76020	TC	T	BONE AGE STUDIES	17.68	17.68	7/1/2006
76040		3	BONE LENGTH STUDIES	39.92	39.92	7/1/2006
76040	26	5	BONE LENGTH STUDIES	12.93	12.93	7/1/2006
76040	TC	T	BONE LENGTH STUDIES	26.99	26.99	7/1/2006
76061		3	RADIOLOGIC EXAM OSSEOUS SURVEY; LIMITED	56.14	56.14	7/1/2006
76061	26	5	RADIOLOGIC EXAM OSSEOUS SURVEY; LIMITED	21.63	21.63	7/1/2006
76061	TC	T	RADIOLOGIC EXAM OSSEOUS SURVEY; LIMITED	34.50	34.50	7/1/2006
76062		3	COMPLETE (AXIAL AND APPENDICULAR SKELETON)	75.40	75.40	7/1/2006
76062	26	5	COMPLETE (AXIAL AND APPENDICULAR SKELETON)	25.86	25.86	7/1/2006
76062	TC	T	COMPLETE (AXIAL AND APPENDICULAR SKELETON)	49.54	49.54	7/1/2006
76065		3	RADIOLOGIC EXAMINATION OSSIOUS SURVEY; INFANT	58.84	58.84	7/1/2006
76065	26	5	RADIOLOGIC EXAMINATION OSSIOUS SURVEY; INFANT	33.51	33.51	7/1/2006
76065	TC	T	RADIOLOGIC EXAMINATION OSSIOUS SURVEY; INFANT	25.33	25.33	7/1/2006
76066		3	JOINT SURVEY, SINGLE VIEW, TWO OR MORE JOINTS (SPECIFY)	53.08	53.08	7/1/2006
76066	26	5	JOINT SURVEY, SINGLE VIEW, TWO OR MORE JOINTS (SPECIFY)	14.93	14.93	7/1/2006
76066	TC	T	JOINT SURVEY, SINGLE VIEW, TWO OR MORE JOINTS (SPECIFY)	38.15	38.15	7/1/2006
76070		3	COMPUTERIZED AXIAL TOMOGRAPHY BONE DENSITY STUDY, ONE OR MORE SITES	113.61	113.61	7/1/2006
76070	26	5	COMPUTERIZED AXIAL TOMOGRAPHY BONE DENSITY STUDY, ONE OR MORE SITES	11.88	11.88	7/1/2006
76070	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY BONE DENSITY STUDY, ONE OR MORE SITES	101.73	101.73	7/1/2006
76071		3	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, ONE OR MORE SITES;	109.66	109.66	7/1/2006
76071	26	5	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, ONE OR MORE SITES;	10.47	10.47	7/1/2006
76075		3	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY	120.94	120.94	7/1/2006
76075	26	5	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY	14.34	14.34	7/1/2006
76075	TC	T	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY	106.60	106.60	7/1/2006
76076		3	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY, ONE OR MORE SITES;	36.79	36.79	7/1/2006
76076	26	5	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY, ONE OR MORE SITES;	10.80	10.80	7/1/2006
76076	TC	T	DUAL ENERGY X-RAY ABSORPTIOMETRY (DEXA), BONE DENSITY STUDY, ONE OR MORE SITES;	25.99	25.99	7/1/2006
76077		3	DUAL ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, ONE OR MORE SITES;	34.33	34.33	7/1/2006
76077	26	5	DUAL ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, ONE OR MORE SITES;	8.34	8.34	7/1/2006
76077	TC	T	DUAL ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, ONE OR MORE SITES;	25.99	25.99	7/1/2006
76078		3	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHOTODENSITOMETRY, RADIOGRAMMETRY), ONE OR	35.74	35.74	7/1/2006
76078	26	5	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHOTODENSITOMETRY, RADIOGRAMMETRY), ONE OR	9.75	9.75	7/1/2006
76078	TC	T	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHOTODENSITOMETRY, RADIOGRAMMETRY), ONE OR	25.99	25.99	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
76080		3	RADIOLOGIC EXAMINATION, ABSCESS, FISTULA OR SINUS TRACT STUDY, RADIOLOGICAL	62.03	62.03	7/1/2006
76080	26	5	RADIOLOGIC EXAMINATION, ABSCESS, FISTULA OR SINUS TRACT STUDY, RADIOLOGICAL	25.86	25.86	7/1/2006
76080	TC	T	RADIOLOGIC EXAMINATION, ABSCESS, FISTULA OR SINUS TRACT STUDY, RADIOLOGICAL	36.16	36.16	7/1/2006
76082		3	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	17.19	17.19	7/1/2006
76082	26	5	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	3.05	3.05	7/1/2006
76082	TC	T	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	14.14	14.14	7/1/2006
76083		3	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	17.19	17.19	7/1/2006
76083	26	5	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	3.05	3.05	7/1/2006
76083	TC	T	COMPUTER AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	14.14	14.14	7/1/2006
76086		3	MAMMARY DUCTOGRAM OR GALACTOGRAM,SINGLE DUCT	107.73	107.73	7/1/2006
76086	26	5	MAMMARY DUCTOGRAM OR GALACTOGRAM,SINGLE DUCT	17.40	17.40	7/1/2006
76086	TC	T	MAMMARY DUCTOGRAM OR GALACTOGRAM,SINGLE DUCT	90.34	90.34	7/1/2006
76088		3	MAMMARY DUCTOGRAM OR GALACTOGRAM, MULTIPLE DUCTS	147.57	147.57	7/1/2006
76088	26	5	MAMMARY DUCTOGRAM OR GALACTOGRAM, MULTIPLE DUCTS	21.63	21.63	7/1/2006
76088	TC	T	MAMMARY DUCTOGRAM OR GALACTOGRAM, MULTIPLE DUCTS	125.94	125.94	7/1/2006
76090		3	MAMMOGRAPHY; UNILATERAL	69.67	69.67	7/1/2006
76090	26	5	MAMMOGRAPHY; UNILATERAL	33.51	33.51	7/1/2006
76090	TC	T	MAMMOGRAPHY; UNILATERAL	36.16	36.16	7/1/2006
76091		3	MAMMOGRAPHY; BILATERAL	86.52	86.52	7/1/2006
76091	26	5	MAMMOGRAPHY; BILATERAL	41.52	41.52	7/1/2006
76091	TC	T	MAMMOGRAPHY; BILATERAL	45.00	45.00	7/1/2006
76092		3	SCREENING MAMMOGRAPHY, BILATERAL	75.86	75.86	7/1/2006
76092	26	5	SCREENING MAMMOGRAPHY, BILATERAL	33.51	33.51	7/1/2006
76092	TC	T	SCREENING MAMMOGRAPHY, BILATERAL	42.35	42.35	7/1/2006
76093		3	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	684.32	684.32	7/1/2006
76093	26	5	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	77.85	77.85	7/1/2006
76093	TC	T	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	606.47	606.47	7/1/2006
76094		3	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	900.70	900.70	7/1/2006
76094	26	5	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	77.85	77.85	7/1/2006
76094	TC	T	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH	822.85	822.85	7/1/2006
76095		3	STEREOTACTIC LOCALIZATION GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (EG,	322.89	322.89	7/1/2006
76095	26	5	STEREOTACTIC LOCALIZATION GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (EG,	76.54	76.54	7/1/2006
76095	TC	T	STEREOTACTIC LOCALIZATION GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (EG,	246.34	246.34	7/1/2006
76096		3	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (EG, FOR WIRE LOCALIZATION	71.59	71.59	7/1/2006
76096	26	5	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (EG, FOR WIRE LOCALIZATION	26.58	26.58	7/1/2006
76096	TC	T	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (EG, FOR WIRE LOCALIZATION	45.00	45.00	7/1/2006
76098		3	RADIOLOGICAL EXAMINATION, SURGICAL SPECIMEN	22.02	22.02	7/1/2006
76098	26	5	RADIOLOGICAL EXAMINATION, SURGICAL SPECIMEN	7.65	7.65	7/1/2006
76098	TC	T	RADIOLOGICAL EXAMINATION, SURGICAL SPECIMEN	14.37	14.37	7/1/2006
76100		3	XRAY EXAM, SNGL PLANE BODY SCTN OTHER THAN W UROGR	70.88	70.88	7/1/2006
76100	26	5	XRAY EXAM, SNGL PLANE BODY SCTN OTHER THAN W UROGR	27.87	27.87	7/1/2006
76100	TC	T	XRAY EXAM, SNGL PLANE BODY SCTN OTHER THAN W UROGR	43.02	43.02	7/1/2006
76101		3	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KIDY; UNI	76.74	76.74	7/1/2006
76101	26	5	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KIDY; UNI	27.87	27.87	7/1/2006
76101	TC	T	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KIDY; UNI	48.88	48.88	7/1/2006
76102		3	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KID; BILT	88.03	88.03	7/1/2006
76102	26	5	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KID; BILT	27.87	27.87	7/1/2006
76102	TC	T	XRAY EXAM COMPLEX MOTION BDY SECT OTHR W KID; BILT	60.15	60.15	7/1/2006
76120		3	CINERADIOGRAPHY/VIDEORADIOGRAPHY, EXCEPT WHERE SPECIFICALLY INCLUDED	54.61	54.61	7/1/2006
76120	26	5	CINERADIOGRAPHY/VIDEORADIOGRAPHY, EXCEPT WHERE SPECIFICALLY INCLUDED	18.45	18.45	7/1/2006
76120	TC	T	CINERADIOGRAPHY/VIDEORADIOGRAPHY, EXCEPT WHERE SPECIFICALLY INCLUDED	36.16	36.16	7/1/2006
76125		3	CINERADIOGRAPHY/VIDEORADIOGRAPHY TO COMPLEMENT ROUTINE EXAMINATION (LIST	39.92	39.92	7/1/2006
76125	26	5	CINERADIOGRAPHY/VIDEORADIOGRAPHY TO COMPLEMENT ROUTINE EXAMINATION (LIST	12.93	12.93	7/1/2006
76125	TC	T	CINERADIOGRAPHY/VIDEORADIOGRAPHY TO COMPLEMENT ROUTINE EXAMINATION (LIST	26.99	26.99	7/1/2006
76140		3	CONSULT ON X-RAY EXAM MADE ELSEWHERE,WRITTEN REPOR	33.16	33.16	7/1/2006
76150		3	XERORADIOGRAPHY	14.37	14.37	7/1/2006
76350		3	SUBTRACTION IN CONJUNCTION W/CONTRAST STUDIES	129.31	129.31	7/1/2006
76355		3	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR STEREOTACTIC LOCALIZATION	341.90	341.90	7/1/2006
76355	26	5	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR STEREOTACTIC LOCALIZATION	57.96	57.96	7/1/2006
76355	TC	T	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR STEREOTACTIC LOCALIZATION	283.93	283.93	7/1/2006
76360		3	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR NEEDLE BIOPSY, RADIOLOGICAL	339.43	339.43	7/1/2006
76360	26	5	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR NEEDLE BIOPSY, RADIOLOGICAL	55.50	55.50	7/1/2006
76360	TC	T	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR NEEDLE BIOPSY, RADIOLOGICAL	283.93	283.93	7/1/2006
76362		3	COMPUTED TOMOGRAPHY GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	498.75	498.75	7/1/2006
76362	26	5	COMPUTED TOMOGRAPHY GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	190.86	190.86	7/1/2006
76362	TC	T	COMPUTED TOMOGRAPHY GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	307.89	307.89	7/1/2006
76370		3	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY	142.53	142.53	7/1/2006
76370	26	5	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY	40.80	40.80	7/1/2006
76370	TC	T	COMPUTERIZED AXIAL TOMOGRAPHIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY	101.73	101.73	7/1/2006
76376		3	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	125.43	125.43	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
76376	26	5	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	9.98	9.98	7/1/2006
76376	TC	T	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	115.45	115.45	7/1/2006
76377		3	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	159.98	159.98	7/1/2006
76377	26	5	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	39.23	39.23	7/1/2006
76377	TC	T	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNE	120.75	120.75	7/1/2006
76380		3	COMPUTERIZED AXIAL TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY	167.21	167.21	7/1/2006
76380	26	5	COMPUTERIZED AXIAL TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY	46.80	46.80	7/1/2006
76380	TC	T	COMPUTERIZED AXIAL TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY	120.41	120.41	7/1/2006
76390		3	MAGNETIC RESONANCE SPECTROSCOPY	446.85	446.85	7/1/2006
76390	26	5	MAGNETIC RESONANCE SPECTROSCOPY	67.58	67.58	7/1/2006
76390	TC	T	MAGNETIC RESONANCE SPECTROSCOPY	379.27	379.27	7/1/2006
76393		3	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE	457.28	457.28	7/1/2006
76393	26	5	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE	72.64	72.64	7/1/2006
76393	TC	T	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE	384.64	384.64	7/1/2006
76394		3	MAGNETIC RESONANCE GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	612.03	612.03	7/1/2006
76394	26	5	MAGNETIC RESONANCE GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	203.89	203.89	7/1/2006
76394	TC	T	MAGNETIC RESONANCE GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	408.14	408.14	7/1/2006
76400		3	MAGNETIC RESONANCE IMAGING,BONE MARROW BLOOD SUPLY	462.00	462.00	7/1/2006
76400	26	5	MAGNETIC RESONANCE IMAGING,BONE MARROW BLOOD SUPLY	76.44	76.44	7/1/2006
76400	TC	T	MAGNETIC RESONANCE IMAGING,BONE MARROW BLOOD SUPLY	385.56	385.56	7/1/2006
76506		3	ECHOENCEPHALOGRAPHY,B-SCAN INCLUDING A-MODE	80.89	80.89	7/1/2006
76506	26	5	ECHOENCEPHALOGRAPHY,B-SCAN INCLUDING A-MODE	31.83	31.83	7/1/2006
76506	TC	T	ECHOENCEPHALOGRAPHY,B-SCAN INCLUDING A-MODE	48.88	48.88	7/1/2006
76510		3	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED	153.17	153.17	7/1/2006
76510	26	5	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED	79.02	79.02	7/1/2006
76510	TC	T	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED	74.15	74.15	7/1/2006
76511		3	OPHTHALMIC ALTRASND, ECHOG A-SCAN W AMPLITUD QUALI	116.97	116.97	7/1/2006
76511	26	5	OPHTHALMIC ALTRASND, ECHOG A-SCAN W AMPLITUD QUALI	47.78	47.78	7/1/2006
76511	TC	T	OPHTHALMIC ALTRASND, ECHOG A-SCAN W AMPLITUD QUALI	69.18	69.18	7/1/2006
76512		3	OPTHALMIC ULTRASND, ECHOG; CONSTRAST B-SCAN	110.80	110.80	7/1/2006
76512	26	5	OPTHALMIC ULTRASND, ECHOG; CONSTRAST B-SCAN	48.21	48.21	7/1/2006
76512	TC	T	OPTHALMIC ULTRASND, ECHOG; CONSTRAST B-SCAN	62.58	62.58	7/1/2006
76513		3	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND,	86.48	86.48	7/1/2006
76513	26	5	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND,	33.83	33.83	7/1/2006
76513	TC	T	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND,	52.65	52.65	7/1/2006
76514		3	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL	10.89	10.89	7/1/2006
76514	26	5	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL	9.00	9.00	7/1/2006
76514	TC	T	OPHTHALMIC ULTRASOUND, ECHOGRAPHY, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL	1.89	1.89	7/1/2006
76516		3	OPHTHALMIC BIOMETRY BY ULTRSND ECHOGRAPHY A-SCAN	69.64	69.64	7/1/2006
76516	26	5	OPHTHALMIC BIOMETRY BY ULTRSND ECHOGRAPHY A-SCAN	27.62	27.62	7/1/2006
76516	TC	T	OPHTHALMIC BIOMETRY BY ULTRSND ECHOGRAPHY A-SCAN	42.02	42.02	7/1/2006
76519		3	OPHTHALMIC BILM BY ULTRASND ECHOG, A-SCAN W/INTRAO	72.62	72.62	7/1/2006
76519	26	5	OPHTHALMIC BILM BY ULTRASND ECHOG, A-SCAN W/INTRAO	27.62	27.62	7/1/2006
76519	TC	T	OPHTHALMIC BILM BY ULTRASND ECHOG, A-SCAN W/INTRAO	45.00	45.00	7/1/2006
76529		3	OPHTHALMIC ULTRASONIC FOREIGN BODY LOCALIZATION	68.20	68.20	7/1/2006
76529	26	5	OPHTHALMIC ULTRASONIC FOREIGN BODY LOCALIZATION	28.93	28.93	7/1/2006
76529	TC	T	OPHTHALMIC ULTRASONIC FOREIGN BODY LOCALIZATION	39.27	39.27	7/1/2006
76536		3	ULTRASOUND, SOFT TISSUES OF HEAD AND NECK (EG, THYROID, PARATHYROID, PAROTID),	75.46	75.46	7/1/2006
76536	26	5	ULTRASOUND, SOFT TISSUES OF HEAD AND NECK (EG, THYROID, PARATHYROID, PAROTID),	26.58	26.58	7/1/2006
76536	TC	T	ULTRASOUND, SOFT TISSUES OF HEAD AND NECK (EG, THYROID, PARATHYROID, PAROTID),	48.88	48.88	7/1/2006
76604		3	ULTRASOUND, CHEST, B-SCAN (INCLUDES MEDIASTINUM) AND/OR REAL TIME WITH IMAGE	71.23	71.23	7/1/2006
76604	26	5	ULTRASOUND, CHEST, B-SCAN (INCLUDES MEDIASTINUM) AND/OR REAL TIME WITH IMAGE	26.22	26.22	7/1/2006
76604	TC	T	ULTRASOUND, CHEST, B-SCAN (INCLUDES MEDIASTINUM) AND/OR REAL TIME WITH IMAGE	45.00	45.00	7/1/2006
76645		3	ULTRASOUND, BREAST(S) (UNILATERAL OR BILATERAL), B-SCAN AND/OR REAL TIME WITH	62.03	62.03	7/1/2006
76645	26	5	ULTRASOUND, BREAST(S) (UNILATERAL OR BILATERAL), B-SCAN AND/OR REAL TIME WITH	25.86	25.86	7/1/2006
76645	TC	T	ULTRASOUND, BREAST(S) (UNILATERAL OR BILATERAL), B-SCAN AND/OR REAL TIME WITH	36.16	36.16	7/1/2006
76700		3	ULTRASOUND, ABDOMINAL, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	107.14	107.14	7/1/2006
76700	26	5	ULTRASOUND, ABDOMINAL, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	39.03	39.03	7/1/2006
76700	TC	T	ULTRASOUND, ABDOMINAL, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	68.12	68.12	7/1/2006
76705		3	ECHOG, ABD, B-SCAN &/OR REAL TIME W/ IMG DOCUMNTN	77.10	77.10	7/1/2006
76705	26	5	ECHOG, ABD, B-SCAN &/OR REAL TIME W/ IMG DOCUMNTN	28.23	28.23	7/1/2006
76705	TC	T	ECHOG, ABD, B-SCAN &/OR REAL TIME W/ IMG DOCUMNTN	48.88	48.88	7/1/2006
76770		3	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), B-SCAN AND/OR REAL TIME	103.40	103.40	7/1/2006
76770	26	5	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), B-SCAN AND/OR REAL TIME	35.28	35.28	7/1/2006
76770	TC	T	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), B-SCAN AND/OR REAL TIME	68.12	68.12	7/1/2006
76775		3	ECHOG,RETROPRTNL,B-SCAN&/OR REL TM W/IMG DOC; LMTD	76.74	76.74	7/1/2006
76775	26	5	ECHOG,RETROPRTNL,B-SCAN&/OR REL TM W/IMG DOC; LMTD	27.87	27.87	7/1/2006
76775	TC	T	ECHOG,RETROPRTNL,B-SCAN&/OR REL TM W/IMG DOC; LMTD	48.88	48.88	7/1/2006
76778		3	ULTRASOUND, TRANSPLANTED KIDNEY, B-SCAN AND/OR REAL TIME WITH IMAGE	103.40	103.40	7/1/2006
76778	26	5	ULTRASOUND, TRANSPLANTED KIDNEY, B-SCAN AND/OR REAL TIME WITH IMAGE	35.28	35.28	7/1/2006

Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
76778	TC	T	ULTRASOUND, TRANSPLANTED KIDNEY, B-SCAN AND/OR REAL TIME WITH IMAGE	68.12	68.12	7/1/2006
76800		3	ULTRASOUND, SPINAL CANAL AND CONTENTS	101.97	101.97	7/1/2006
76800	26	5	ULTRASOUND, SPINAL CANAL AND CONTENTS	53.10	53.10	7/1/2006
76800	TC	T	ULTRASOUND, SPINAL CANAL AND CONTENTS	48.88	48.88	7/1/2006
76801		3	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	120.48	120.48	7/1/2006
76801	26	5	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	47.83	47.83	7/1/2006
76801	TC	T	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	72.65	72.65	7/1/2006
76802		3	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	77.95	77.95	7/1/2006
76802	26	5	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	40.41	40.41	7/1/2006
76802	TC	T	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	37.54	37.54	7/1/2006
76805		3	ULTRASOUND, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	120.48	120.48	7/1/2006
76805	26	5	ULTRASOUND, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	47.83	47.83	7/1/2006
76805	TC	T	ULTRASOUND, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	72.65	72.65	7/1/2006
76810		3	ECHOGRAPHY; COMPLETE WITH MULTIPLE GESTATION	87.31	87.31	7/1/2006
76810	26	5	ECHOGRAPHY; COMPLETE WITH MULTIPLE GESTATION	47.47	47.47	7/1/2006
76810	TC	T	ECHOGRAPHY; COMPLETE WITH MULTIPLE GESTATION	39.85	39.85	7/1/2006
76811		3	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	221.16	221.16	7/1/2006
76811	26	5	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	94.00	94.00	7/1/2006
76811	TC	T	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	127.16	127.16	7/1/2006
76812		3	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	132.01	132.01	7/1/2006
76812	26	5	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	87.79	87.79	7/1/2006
76812	TC	T	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	44.23	44.23	7/1/2006
76815		3	ECHOGRAPHY, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	80.59	80.59	7/1/2006
76815	26	5	ECHOGRAPHY, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	31.71	31.71	7/1/2006
76815	TC	T	ECHOGRAPHY, PREGNANT UTERUS, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	48.88	48.88	7/1/2006
76816		3	ECHOGRAPH PREGNANT UTERUS FOLLOW UP	80.27	80.27	7/1/2006
76816	26	5	ECHOGRAPH PREGNANT UTERUS FOLLOW UP	42.12	42.12	7/1/2006
76816	TC	T	ECHOGRAPH PREGNANT UTERUS FOLLOW UP	38.15	38.15	7/1/2006
76817		3	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, TRANSVAGINAL	88.03	88.03	7/1/2006
76817	26	5	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, TRANSVAGINAL	36.31	36.31	7/1/2006
76817	TC	T	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, TRANSVAGINAL	51.73	51.73	7/1/2006
76818		3	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING	107.50	107.50	7/1/2006
76818	26	5	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING	51.87	51.87	7/1/2006
76818	TC	T	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING	55.63	55.63	7/1/2006
76819		3	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING	93.32	93.32	7/1/2006
76819	26	5	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING	37.69	37.69	7/1/2006
76819	TC	T	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING	55.63	55.63	7/1/2006
76825		3	ECHOCARDIOGRAPHY FETAL	149.73	149.73	7/1/2006
76825	26	5	ECHOCARDIOGRAPHY FETAL	81.61	81.61	7/1/2006
76825	TC	T	ECHOCARDIOGRAPHY FETAL	68.12	68.12	7/1/2006
76826		3	ECHOCARDIOGRAPHY, FETAL HEART IN UTERO	64.85	64.85	7/1/2006
76826	26	5	ECHOCARDIOGRAPHY, FETAL HEART IN UTERO	40.18	40.18	7/1/2006
76826	TC	T	ECHOCARDIOGRAPHY, FETAL HEART IN UTERO	24.67	24.67	7/1/2006
76827		3	DOPPLER ECG, FETAL HEART PULSED &/OR CONT. WAVE COMP.	88.03	88.03	7/1/2006
76827	26	5	DOPPLER ECG, FETAL HEART PULSED &/OR CONT. WAVE COMP.	28.30	28.30	7/1/2006
76827	TC	T	DOPPLER ECG, FETAL HEART PULSED &/OR CONT. WAVE COMP.	59.74	59.74	7/1/2006
76828		3	DOPPLER ECG, FETAL HEART PULS.&/OR CONT WAVE FOLUP	66.75	66.75	7/1/2006
76828	26	5	DOPPLER ECG, FETAL HEART PULS.&/OR CONT WAVE FOLUP	28.14	28.14	7/1/2006
76828	TC	T	DOPPLER ECG, FETAL HEART PULS.&/OR CONT WAVE FOLUP	38.61	38.61	7/1/2006
76830		3	ULTRASOUND, TRANSVAGINAL	85.80	85.80	7/1/2006
76830	26	5	ULTRASOUND, TRANSVAGINAL	33.15	33.15	7/1/2006
76830	TC	T	ULTRASOUND, TRANSVAGINAL	52.65	52.65	7/1/2006
76831		3	HYSTEROSONOGRAPHY, WITH OR WITHOUT COLOR FLOW DOPPLER	87.54	87.54	7/1/2006
76831	26	5	HYSTEROSONOGRAPHY, WITH OR WITHOUT COLOR FLOW DOPPLER	34.89	34.89	7/1/2006
76831	TC	T	HYSTEROSONOGRAPHY, WITH OR WITHOUT COLOR FLOW DOPPLER	52.65	52.65	7/1/2006
76856		3	ULTRASOUND, PELVIC (NONOBSTETRIC), B-SCAN AND/OR REAL TIME WITH IMAGE	85.80	85.80	7/1/2006
76856	26	5	ULTRASOUND, PELVIC (NONOBSTETRIC), B-SCAN AND/OR REAL TIME WITH IMAGE	33.15	33.15	7/1/2006
76856	TC	T	ULTRASOUND, PELVIC (NONOBSTETRIC), B-SCAN AND/OR REAL TIME WITH IMAGE	52.65	52.65	7/1/2006
76857		3	ECHO, PELV (NON-OB) B-SCAN&/OR REL TM W/IMG D;LTD/	76.14	76.14	7/1/2006
76857	26	5	ECHO, PELV (NON-OB) B-SCAN&/OR REL TM W/IMG D;LTD/	18.12	18.12	7/1/2006
76857	TC	T	ECHO, PELV (NON-OB) B-SCAN&/OR REL TM W/IMG D;LTD/	58.02	58.02	7/1/2006
76870		3	ULTRASOUND, SCROTUM AND CONTENTS	83.34	83.34	7/1/2006
76870	26	5	ULTRASOUND, SCROTUM AND CONTENTS	30.69	30.69	7/1/2006
76870	TC	T	ULTRASOUND, SCROTUM AND CONTENTS	52.65	52.65	7/1/2006
76872		3	ECHOGRAPHY, TRANSRECTAL	102.59	102.59	7/1/2006
76872	26	5	ECHOGRAPHY, TRANSRECTAL	33.05	33.05	7/1/2006
76872	TC	T	ECHOGRAPHY, TRANSRECTAL	69.54	69.54	7/1/2006
76873		3	ECHOGRAPHY, TRANSRECTAL; PROSTATE VOLUME STUDY FOR BRACHYTHERAPY TREATMENT	148.01	148.01	7/1/2006
76873	26	5	ECHOGRAPHY, TRANSRECTAL; PROSTATE VOLUME STUDY FOR BRACHYTHERAPY TREATMENT	74.44	74.44	7/1/2006
76873	TC	T	ECHOGRAPHY, TRANSRECTAL; PROSTATE VOLUME STUDY FOR BRACHYTHERAPY TREATMENT	73.57	73.57	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
76880		3	ULTRASOUND, EXTREMITY, NON-VASCULAR, B-SCAN AND/OR REAL TIME WITH IMAGE	77.10	77.10	7/1/2006
76880	26	5	ULTRASOUND, EXTREMITY, NON-VASCULAR, B-SCAN AND/OR REAL TIME WITH IMAGE	28.23	28.23	7/1/2006
76880	TC	T	ULTRASOUND, EXTREMITY, NON-VASCULAR, B-SCAN AND/OR REAL TIME WITH IMAGE	48.88	48.88	7/1/2006
76885		3	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; DYNAMIC	87.93	87.93	7/1/2006
76885	26	5	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; DYNAMIC	35.28	35.28	7/1/2006
76885	TC	T	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; DYNAMIC	52.65	52.65	7/1/2006
76886		3	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; LIMITED, STATIC	78.51	78.51	7/1/2006
76886	26	5	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; LIMITED, STATIC	29.64	29.64	7/1/2006
76886	TC	T	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; LIMITED, STATIC	48.88	48.88	7/1/2006
76930		3	ULTRASONIC GUIDANCE FOR PERICARDIOCENTESIS, IMAGING SUPERVISION AND	85.51	85.51	7/1/2006
76930	26	5	ULTRASONIC GUIDANCE FOR PERICARDIOCENTESIS, IMAGING SUPERVISION AND	32.86	32.86	7/1/2006
76930	TC	T	ULTRASONIC GUIDANCE FOR PERICARDIOCENTESIS, IMAGING SUPERVISION AND	52.65	52.65	7/1/2006
76932		3	ULTRASONIC GUIDANCE FOR ENDOMYOCARDIAL BIOPSY, IMAGING SUPERVISION AND	85.51	85.51	7/1/2006
76932	26	5	ULTRASONIC GUIDANCE FOR ENDOMYOCARDIAL BIOPSY, IMAGING SUPERVISION AND	32.86	32.86	7/1/2006
76932	TC	T	ULTRASONIC GUIDANCE FOR ENDOMYOCARDIAL BIOPSY, IMAGING SUPERVISION AND	52.65	52.65	7/1/2006
76936		3	ULTRASOUND GUIDED COMPRESSION REPAIR OF ARTERIAL PSEUDO-ANEURYSM	313.34	313.34	7/1/2006
76936	26	5	ULTRASOUND GUIDED COMPRESSION REPAIR OF ARTERIAL PSEUDO-ANEURYSM	96.50	96.50	7/1/2006
76936	TC	T	ULTRASOUND GUIDED COMPRESSION REPAIR OF ARTERIAL PSEUDO-ANEURYSM	216.84	216.84	7/1/2006
76937		3	ULTRASOUND GUIDANCE FOR VASCULAR ACCESS REQUIRING ULTRASOUND EVALUATION OF	29.69	29.69	7/1/2006
76937	26	5	ULTRASOUND GUIDANCE FOR VASCULAR ACCESS REQUIRING ULTRASOUND EVALUATION OF	14.80	14.80	7/1/2006
76937	TC	T	ULTRASOUND GUIDANCE FOR VASCULAR ACCESS REQUIRING ULTRASOUND EVALUATION OF	14.89	14.89	7/1/2006
76940		3	ULTRASOUND GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	157.64	157.64	7/1/2006
76940	26	5	ULTRASOUND GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	100.33	100.33	7/1/2006
76940	TC	T	ULTRASOUND GUIDANCE FOR, AND MONITORING OF, VISCERAL TISSUE ABLATION	57.03	57.03	7/1/2006
76941		3	ULTRASONIC GUIDANCE FOR INTRAUTERINE FETAL TRANSFUSION OR CORDOCENTESIS,	117.94	117.94	7/1/2006
76941	26	5	ULTRASONIC GUIDANCE FOR INTRAUTERINE FETAL TRANSFUSION OR CORDOCENTESIS,	65.42	65.42	7/1/2006
76941	TC	T	ULTRASONIC GUIDANCE FOR INTRAUTERINE FETAL TRANSFUSION OR CORDOCENTESIS,	52.52	52.52	7/1/2006
76942		3	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	127.81	127.81	7/1/2006
76942	26	5	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	32.10	32.10	7/1/2006
76942	TC	T	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	95.71	95.71	7/1/2006
76945		3	ULTRASONIC GUIDANCE FOR CHORIONIC VILLUS SAMPLING, IMAGING SUPERVISION AND	84.62	84.62	7/1/2006
76945	26	5	ULTRASONIC GUIDANCE FOR CHORIONIC VILLUS SAMPLING, IMAGING SUPERVISION AND	32.10	32.10	7/1/2006
76945	TC	T	ULTRASONIC GUIDANCE FOR CHORIONIC VILLUS SAMPLING, IMAGING SUPERVISION AND	52.52	52.52	7/1/2006
76946		3	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION	71.43	71.43	7/1/2006
76946	26	5	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION	18.78	18.78	7/1/2006
76946	TC	T	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION	52.65	52.65	7/1/2006
76950		3	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	72.87	72.87	7/1/2006
76950	26	5	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	27.87	27.87	7/1/2006
76950	TC	T	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	45.00	45.00	7/1/2006
76965		3	ULTRASONIC GUIDANCE FOR INTERSTITIAL RADIOELEMENT APPLICATION	256.17	256.17	7/1/2006
76965	26	5	ULTRASONIC GUIDANCE FOR INTERSTITIAL RADIOELEMENT APPLICATION	64.33	64.33	7/1/2006
76965	TC	T	ULTRASONIC GUIDANCE FOR INTERSTITIAL RADIOELEMENT APPLICATION	191.84	191.84	7/1/2006
76970		3	ULTRASOUND STUDY FOLLOW-UP (SPECIFY)	55.33	55.33	7/1/2006
76970	26	5	ULTRASOUND STUDY FOLLOW-UP (SPECIFY)	19.17	19.17	7/1/2006
76970	TC	T	ULTRASOUND STUDY FOLLOW-UP (SPECIFY)	36.16	36.16	7/1/2006
76975		3	GASTROINTESTINAL ENDOSCOPIC ULTRASOUND, SUPERVISION AND INTERPRETATION	92.01	92.01	7/1/2006
76975	26	5	GASTROINTESTINAL ENDOSCOPIC ULTRASOUND, SUPERVISION AND INTERPRETATION	39.36	39.36	7/1/2006
76975	TC	T	GASTROINTESTINAL ENDOSCOPIC ULTRASOUND, SUPERVISION AND INTERPRETATION	52.65	52.65	7/1/2006
76977		3	ULTRASOUND BONE DENSITY MEASUREMENT AND INTERPRETATION, PERIPHERAL SITE(S), ANY	31.01	31.01	7/1/2006
76977	26	5	ULTRASOUND BONE DENSITY MEASUREMENT AND INTERPRETATION, PERIPHERAL SITE(S), ANY	2.69	2.69	7/1/2006
76977	TC	T	ULTRASOUND BONE DENSITY MEASUREMENT AND INTERPRETATION, PERIPHERAL SITE(S), ANY	28.31	28.31	7/1/2006
76986		3	ULTRASONIC GUIDANCE, INTRAOPERATIVE	149.77	149.77	7/1/2006
76986	26	5	ULTRASONIC GUIDANCE, INTRAOPERATIVE	59.29	59.29	7/1/2006
76986	TC	T	ULTRASONIC GUIDANCE, INTRAOPERATIVE	90.34	90.34	7/1/2006
77261		3	THERAPEUTIC RADIOLOGY TREATMENT PLANNING;	68.55	68.55	7/1/2006
77262		3	THERAPEUTIC RADIOLOGY TREATMENT PLANNING;	103.34	103.34	7/1/2006
77263		3	THERAPEUTIC RADIOLOGY TREATMENT PLANNING;	153.50	153.50	7/1/2006
77280		3	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING SIMPLE	152.82	152.82	7/1/2006
77280	26	5	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING SIMPLE	33.41	33.41	7/1/2006
77280	TC	T	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING SIMPLE	119.41	119.41	7/1/2006
77285		3	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING INTERMEDIATE	242.28	242.28	7/1/2006
77285	26	5	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING INTERMEDIATE	50.22	50.22	7/1/2006
77285	TC	T	RADIATION THERAPEUTIC SIMULATOR AIDED FIELD SETTING INTERMEDIATE	192.07	192.07	7/1/2006
77290		3	RADIATION THERAPY SIMULATOR AIDED FIELD SETTING COMPLEX	298.92	298.92	7/1/2006
77290	26	5	RADIATION THERAPY SIMULATOR AIDED FIELD SETTING COMPLEX	74.57	74.57	7/1/2006
77290	TC	T	RADIATION THERAPY SIMULATOR AIDED FIELD SETTING COMPLEX	224.35	224.35	7/1/2006
77295		3	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; THREE-DIMENSIONAL	1,179.69	1,179.69	7/1/2006
77295	26	5	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; THREE-DIMENSIONAL	217.83	217.83	7/1/2006
77295	TC	T	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; THREE-DIMENSIONAL	961.86	961.86	7/1/2006
77300		3	BASIC RADIATION DOSIMETRY CALCULATION, CENTRAL AXIS DEPTH DOSE CALCULATION,	75.63	75.63	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
77300	26	5	BASIC RADIATION DOSIMETRY CALCULATION, CENTRAL AXIS DEPTH DOSE CALCULATION,	29.64	29.64	7/1/2006
77300	TC	T	BASIC RADIATION DOSIMETRY CALCULATION, CENTRAL AXIS DEPTH DOSE CALCULATION,	46.00	46.00	7/1/2006
77301		3	INTENSITY MODULATED RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR	1,343.86	1,343.86	7/1/2006
77301	26	5	INTENSITY MODULATED RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR	382.00	382.00	7/1/2006
77301	TC	T	INTENSITY MODULATED RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR	961.86	961.86	7/1/2006
77305		3	RADIATION THERPY ISODOSE PLAN SIMPLE	98.22	98.22	7/1/2006
77305	26	5	RADIATION THERPY ISODOSE PLAN SIMPLE	33.74	33.74	7/1/2006
77305	TC	T	RADIATION THERPY ISODOSE PLAN SIMPLE	64.47	64.47	7/1/2006
77310		3	RADIATION THERAPY INTERMED THREE OR MORE THERAPY B	130.72	130.72	7/1/2006
77310	26	5	RADIATION THERAPY INTERMED THREE OR MORE THERAPY B	50.22	50.22	7/1/2006
77310	TC	T	RADIATION THERAPY INTERMED THREE OR MORE THERAPY B	80.50	80.50	7/1/2006
77315		3	RADIATION THERAPY COMPLEX	166.23	166.23	7/1/2006
77315	26	5	RADIATION THERAPY COMPLEX	74.57	74.57	7/1/2006
77315	TC	T	RADIATION THERAPY COMPLEX	91.66	91.66	7/1/2006
77321		3	SPECIAL TELETHERAPY PORT PART/ HEMI/ TOTAL BODY	184.28	184.28	7/1/2006
77321	26	5	SPECIAL TELETHERAPY PORT PART/ HEMI/ TOTAL BODY	45.29	45.29	7/1/2006
77321	TC	T	SPECIAL TELETHERAPY PORT PART/ HEMI/ TOTAL BODY	138.98	138.98	7/1/2006
77326		3	BRACHYTHERAPY ISODOSE CALCULATION (SIMPLE)	126.07	126.07	7/1/2006
77326	26	5	BRACHYTHERAPY ISODOSE CALCULATION (SIMPLE)	44.57	44.57	7/1/2006
77326	TC	T	BRACHYTHERAPY ISODOSE CALCULATION (SIMPLE)	81.50	81.50	7/1/2006
77327		3	BRACHYTHERAPY ISODOSE CALCULATION INTERMEDIATE	185.64	185.64	7/1/2006
77327	26	5	BRACHYTHERAPY ISODOSE CALCULATION INTERMEDIATE	66.23	66.23	7/1/2006
77327	TC	T	BRACHYTHERAPY ISODOSE CALCULATION INTERMEDIATE	119.41	119.41	7/1/2006
77328		3	BRACHYTHERAPY ISODOSE CALCULATION COMPLEX	270.35	270.35	7/1/2006
77328	26	5	BRACHYTHERAPY ISODOSE CALCULATION COMPLEX	99.97	99.97	7/1/2006
77328	TC	T	BRACHYTHERAPY ISODOSE CALCULATION COMPLEX	170.38	170.38	7/1/2006
77331		3	SPECIAL DOSIMETRY EG TLD. MICRODOSIMETRY	58.54	58.54	7/1/2006
77331	26	5	SPECIAL DOSIMETRY EG TLD. MICRODOSIMETRY	41.52	41.52	7/1/2006
77331	TC	T	SPECIAL DOSIMETRY EG TLD. MICRODOSIMETRY	17.02	17.02	7/1/2006
77332		3	TREATMENT DEVICES DESIGN & CONSTRUCTION (SIMPLE)	71.76	71.76	7/1/2006
77332	26	5	TREATMENT DEVICES DESIGN & CONSTRUCTION (SIMPLE)	25.76	25.76	7/1/2006
77332	TC	T	TREATMENT DEVICES DESIGN & CONSTRUCTION (SIMPLE)	46.00	46.00	7/1/2006
77333		3	TREATMENT DEVICES (INTERMEDIATE)	105.57	105.57	7/1/2006
77333	26	5	TREATMENT DEVICES (INTERMEDIATE)	40.11	40.11	7/1/2006
77333	TC	T	TREATMENT DEVICES (INTERMEDIATE)	65.47	65.47	7/1/2006
77334		3	TREATMENT DEVICES (COMPLEX)	171.17	171.17	7/1/2006
77334	26	5	TREATMENT DEVICES (COMPLEX)	59.27	59.27	7/1/2006
77334	TC	T	TREATMENT DEVICES (COMPLEX)	111.90	111.90	7/1/2006
77336		3	CONTINUING MEDICAL PHYSICS CONSULTATION, INCLUDING ASSESSMENT OF TREATMENT	102.72	102.72	7/1/2006
77370		3	SPECIAL MEDICAL RADIATION PHYSICS CONSULTATION	120.08	120.08	7/1/2006
77418		3	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS, VIA	601.52	601.52	7/1/2006
77421		3	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVE	132.40	132.40	7/1/2006
77421	26	5	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVE	18.81	18.81	7/1/2006
77421	TC	T	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVE	113.60	113.60	7/1/2006
77422		3	HIGH ENERGY NEUTRON RADIATION TREATMENT DELIVERY; SINGLE TREATMENT AREA USIN	59.63	59.63	7/1/2006
77423		3	HIGH ENERGY NEUTRON RADIATION TREATMENT DELIVERY; 1 OR MORE ISOCENTER(S) WIT	77.85	77.85	7/1/2006
77427		3	RADIATION TREATMENT MANAGEMENT, FIVE TREATMENTS	158.20	158.20	7/1/2006
77431		3	RADIATION THERAPY MANAGEMENT WITH COMPLETE COURSE OF THERAPY	89.76	89.76	7/1/2006
77432		3	STEREOTACTIC RADIATION TREATMENT MANAGEMENT OF CEREBRAL LESION(S)	390.97	390.97	7/1/2006
77470		3	SPECIAL TREATMENT PROCEDURE (EG, TOTAL BODY IRRADIATION, HEMIBODY RADIATION,	483.88	483.88	7/1/2006
77470	26	5	SPECIAL TREATMENT PROCEDURE (EG, TOTAL BODY IRRADIATION, HEMIBODY RADIATION,	99.97	99.97	7/1/2006
77470	TC	T	SPECIAL TREATMENT PROCEDURE (EG, TOTAL BODY IRRADIATION, HEMIBODY RADIATION,	383.90	383.90	7/1/2006
77600		3	HYPERTHERMIA, EXTERNALLY GENERATED	179.61	179.61	7/1/2006
77600	26	5	HYPERTHERMIA, EXTERNALLY GENERATED	74.57	74.57	7/1/2006
77600	TC	T	HYPERTHERMIA, EXTERNALLY GENERATED	105.04	105.04	7/1/2006
77605		3	HYPERTHERMIA, EXT; DEEP	240.67	240.67	7/1/2006
77605	26	5	HYPERTHERMIA, EXT; DEEP	100.79	100.79	7/1/2006
77605	TC	T	HYPERTHERMIA, EXT; DEEP	139.88	139.88	7/1/2006
77610		3	HYPERTHERMIA GENERATED BY INTERSTITIAL PROB.	179.94	179.94	7/1/2006
77610	26	5	HYPERTHERMIA GENERATED BY INTERSTITIAL PROB.	74.90	74.90	7/1/2006
77610	TC	T	HYPERTHERMIA GENERATED BY INTERSTITIAL PROB.	105.04	105.04	7/1/2006
77615		3	HYPERTHERMIA; MORE THAN 5 INTERSTITIAL APPLICATORS	239.52	239.52	7/1/2006
77615	26	5	HYPERTHERMIA; MORE THAN 5 INTERSTITIAL APPLICATORS	99.64	99.64	7/1/2006
77615	TC	T	HYPERTHERMIA; MORE THAN 5 INTERSTITIAL APPLICATORS	139.88	139.88	7/1/2006
77620		3	INTRACAVITARY HYPERTHERMIA GENERATED BY PROBE(S)	183.04	183.04	7/1/2006
77620	26	5	INTRACAVITARY HYPERTHERMIA GENERATED BY PROBE(S)	78.00	78.00	7/1/2006
77620	TC	T	INTRACAVITARY HYPERTHERMIA GENERATED BY PROBE(S)	105.04	105.04	7/1/2006
77750		3	INFUSION OR INSTILLATION OF RADIOELEMENT SOULTION	280.17	280.17	7/1/2006
77750	26	5	INFUSION OR INSTILLATION OF RADIOELEMENT SOULTION	234.51	234.51	7/1/2006
77750	TC	T	INFUSION OR INSTILLATION OF RADIOELEMENT SOULTION	45.67	45.67	7/1/2006

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77761		3	INTRACAVITARY RADIATION SOURCE APPLICATION; SIMPLE	263.65	263.65	7/1/2006
77761	26	5	INTRACAVITARY RADIATION SOURCE APPLICATION; SIMPLE	177.29	177.29	7/1/2006
77761	TC	T	INTRACAVITARY RADIATION SOURCE APPLICATION; SIMPLE	86.36	86.36	7/1/2006
77762		3	INTRACAVITY RADIOELEMENT APPLICATION INTERMEDIATE	397.48	397.48	7/1/2006
77762	26	5	INTRACAVITY RADIOELEMENT APPLICATION INTERMEDIATE	273.20	273.20	7/1/2006
77762	TC	T	INTRACAVITY RADIOELEMENT APPLICATION INTERMEDIATE	124.28	124.28	7/1/2006
77763		3	INTERSTITAL RADIOELEMENT APPLICATION; COMPLEX	563.53	563.53	7/1/2006
77763	26	5	INTERSTITAL RADIOELEMENT APPLICATION; COMPLEX	409.18	409.18	7/1/2006
77763	TC	T	INTERSTITAL RADIOELEMENT APPLICATION; COMPLEX	154.35	154.35	7/1/2006
77776		3	INTERSTITIAL RADIATION SOURCE APPLICATION; SIMPLE	284.55	284.55	7/1/2006
77776	26	5	INTERSTITIAL RADIATION SOURCE APPLICATION; SIMPLE	208.96	208.96	7/1/2006
77776	TC	T	INTERSTITIAL RADIATION SOURCE APPLICATION; SIMPLE	75.53	75.53	7/1/2006
77777		3	INTERSTITIAL RADIOELEMENT APPLICATION (INTERMEDIATE)	502.27	502.27	7/1/2006
77777	26	5	INTERSTITIAL RADIOELEMENT APPLICATION (INTERMEDIATE)	356.76	356.76	7/1/2006
77777	TC	T	INTERSTITIAL RADIOELEMENT APPLICATION (INTERMEDIATE)	145.51	145.51	7/1/2006
77778		3	INTERSTITIAL RADIOELEMENT APPLICATION COMPLEX	710.33	710.33	7/1/2006
77778	26	5	INTERSTITIAL RADIOELEMENT APPLICATION COMPLEX	533.86	533.86	7/1/2006
77778	TC	T	INTERSTITIAL RADIOELEMENT APPLICATION COMPLEX	176.47	176.47	7/1/2006
77781		3	REMOTE AFTERLOAD HIGH INTENSE BRACHYTHER 1-4 POS, OR CATHETERS	777.96	777.96	7/1/2006
77781	26	5	REMOTE AFTERLOAD HIGH INTENSE BRACHYTHER 1-4 POS, OR CATHETERS	79.16	79.16	7/1/2006
77781	TC	T	REMOTE AFTERLOAD HIGH INTENSE BRACHYTHER 1-4 POS, OR CATHETERS	698.80	698.80	7/1/2006
77782		3	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	817.94	817.94	7/1/2006
77782	26	5	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	119.14	119.14	7/1/2006
77782	TC	T	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	698.80	698.80	7/1/2006
77783		3	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	876.52	876.52	7/1/2006
77783	26	5	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	177.72	177.72	7/1/2006
77783	TC	T	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY	698.80	698.80	7/1/2006
77784		3	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; OVER 12 POS OR CATHETERS	966.71	966.71	7/1/2006
77784	26	5	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; OVER 12 POS OR CATHETERS	267.91	267.91	7/1/2006
77784	TC	T	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; OVER 12 POS OR CATHETERS	698.80	698.80	7/1/2006
77789		3	SURFACE APPLICATION OF RADIATION SOURCE	69.24	69.24	7/1/2006
77789	26	5	SURFACE APPLICATION OF RADIATION SOURCE	53.80	53.80	7/1/2006
77789	TC	T	SURFACE APPLICATION OF RADIATION SOURCE	15.37	15.37	7/1/2006
77790		3	SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE	67.24	67.24	7/1/2006
77790	26	5	SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE	50.22	50.22	7/1/2006
77790	TC	T	SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE	17.02	17.02	7/1/2006
78000		3	THROID UPTAKE; SINGLE DETERMINATION	42.57	42.57	7/1/2006
78000	26	5	THROID UPTAKE; SINGLE DETERMINATION	9.06	9.06	7/1/2006
78000	TC	T	THROID UPTAKE; SINGLE DETERMINATION	33.51	33.51	7/1/2006
78001		3	THYROID UPTAKE; MULTIPLE DETERMINATIONS	57.58	57.58	7/1/2006
78001	26	5	THYROID UPTAKE; MULTIPLE DETERMINATIONS	12.57	12.57	7/1/2006
78001	TC	T	THYROID UPTAKE; MULTIPLE DETERMINATIONS	45.00	45.00	7/1/2006
78003		3	THYROID UPTAKE STIMULATION, SUPPRESION OR DISCHARG	49.27	49.27	7/1/2006
78003	26	5	THYROID UPTAKE STIMULATION, SUPPRESION OR DISCHARG	15.75	15.75	7/1/2006
78003	TC	T	THYROID UPTAKE STIMULATION, SUPPRESION OR DISCHARG	33.51	33.51	7/1/2006
78006		3	THYROID IMAGING, W/UPTAKE; SINGLE DETERMINATION	105.56	105.56	7/1/2006
78006	26	5	THYROID IMAGING, W/UPTAKE; SINGLE DETERMINATION	23.40	23.40	7/1/2006
78006	TC	T	THYROID IMAGING, W/UPTAKE; SINGLE DETERMINATION	82.16	82.16	7/1/2006
78007		3	THYROID IMAGING, W/UPTAKE; MULTPL DETERMINATIONS	112.77	112.77	7/1/2006
78007	26	5	THYROID IMAGING, W/UPTAKE; MULTPL DETERMINATIONS	24.09	24.09	7/1/2006
78007	TC	T	THYROID IMAGING, W/UPTAKE; MULTPL DETERMINATIONS	88.68	88.68	7/1/2006
78010		3	THYROID IMAGING; ONLY	81.96	81.96	7/1/2006
78010	26	5	THYROID IMAGING; ONLY	18.81	18.81	7/1/2006
78010	TC	T	THYROID IMAGING; ONLY	63.15	63.15	7/1/2006
78011		3	THYROID IMAGING; WITH VASCULAR FLOW	104.78	104.78	7/1/2006
78011	26	5	THYROID IMAGING; WITH VASCULAR FLOW	21.63	21.63	7/1/2006
78011	TC	T	THYROID IMAGING; WITH VASCULAR FLOW	83.15	83.15	7/1/2006
78015		3	THYROID CARCINOMA METASTASES IMAGING; LIMITED AREA	121.11	121.11	7/1/2006
78015	26	5	THYROID CARCINOMA METASTASES IMAGING; LIMITED AREA	32.43	32.43	7/1/2006
78015	TC	T	THYROID CARCINOMA METASTASES IMAGING; LIMITED AREA	88.68	88.68	7/1/2006
78016		3	THYROID CARCINOMA METASTES IMAGING W/ADD'L STUDIES	159.23	159.23	7/1/2006
78016	26	5	THYROID CARCINOMA METASTES IMAGING W/ADD'L STUDIES	39.49	39.49	7/1/2006
78016	TC	T	THYROID CARCINOMA METASTES IMAGING W/ADD'L STUDIES	119.74	119.74	7/1/2006
78018		3	THYROID CARCINOMA METASTASES IMAGING; WHOLE BODY	228.69	228.69	7/1/2006
78018	26	5	THYROID CARCINOMA METASTASES IMAGING; WHOLE BODY	41.82	41.82	7/1/2006
78018	TC	T	THYROID CARCINOMA METASTASES IMAGING; WHOLE BODY	186.87	186.87	7/1/2006
78020		3	THYROID CARCINOMA METASTASES UPTAKE (LIST SEPARATELY IN ADDITION TO CODE FOR	75.63	75.63	7/1/2006
78020	26	5	THYROID CARCINOMA METASTASES UPTAKE (LIST SEPARATELY IN ADDITION TO CODE FOR	29.02	29.02	7/1/2006
78020	TC	T	THYROID CARCINOMA METASTASES UPTAKE (LIST SEPARATELY IN ADDITION TO CODE FOR	46.62	46.62	7/1/2006
78070		3	PARATHYROID IMAGING	184.02	184.02	7/1/2006

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78070	26	5	PARATHYROID IMAGING	39.72	39.72	7/1/2006
78070	TC	T	PARATHYROID IMAGING	144.30	144.30	7/1/2006
78075		3	ADRENAL IMAGING, CORTEX &/OR MEDULLA	222.81	222.81	7/1/2006
78075	26	5	ADRENAL IMAGING, CORTEX &/OR MEDULLA	35.95	35.95	7/1/2006
78075	TC	T	ADRENAL IMAGING, CORTEX &/OR MEDULLA	186.87	186.87	7/1/2006
78102		3	BONE MARROW IMAGING; LIMITED AREA	97.22	97.22	7/1/2006
78102	26	5	BONE MARROW IMAGING; LIMITED AREA	26.56	26.56	7/1/2006
78102	TC	T	BONE MARROW IMAGING; LIMITED AREA	70.67	70.67	7/1/2006
78103		3	BONE MARROW IMAGING; MULTIPLE AREAS	145.55	145.55	7/1/2006
78103	26	5	BONE MARROW IMAGING; MULTIPLE AREAS	36.31	36.31	7/1/2006
78103	TC	T	BONE MARROW IMAGING; MULTIPLE AREAS	109.25	109.25	7/1/2006
78104		3	BONE MARROW IMAGING; WHOLE BODY	178.65	178.65	7/1/2006
78104	26	5	BONE MARROW IMAGING; WHOLE BODY	38.44	38.44	7/1/2006
78104	TC	T	BONE MARROW IMAGING; WHOLE BODY	140.21	140.21	7/1/2006
78110		3	PLASMA VOLUME, RADIOPHARMACEUTICAL VOLUME-DILUTION TECHNIQUE (SEPARATE	42.24	42.24	7/1/2006
78110	26	5	PLASMA VOLUME, RADIOPHARMACEUTICAL VOLUME-DILUTION TECHNIQUE (SEPARATE	9.39	9.39	7/1/2006
78110	TC	T	PLASMA VOLUME, RADIOPHARMACEUTICAL VOLUME-DILUTION TECHNIQUE (SEPARATE	32.85	32.85	7/1/2006
78111		3	PLASMA VOLUME RADIONUCLIDE VOL-DILUT TECH;MULT SAM	99.48	99.48	7/1/2006
78111	26	5	PLASMA VOLUME RADIONUCLIDE VOL-DILUT TECH;MULT SAM	10.80	10.80	7/1/2006
78111	TC	T	PLASMA VOLUME RADIONUCLIDE VOL-DILUT TECH;MULT SAM	88.68	88.68	7/1/2006
78120		3	RED CELL VOLUME DETERMINATION; SINGLE SAMPLING	71.32	71.32	7/1/2006
78120	26	5	RED CELL VOLUME DETERMINATION; SINGLE SAMPLING	11.16	11.16	7/1/2006
78120	TC	T	RED CELL VOLUME DETERMINATION; SINGLE SAMPLING	60.15	60.15	7/1/2006
78121		3	RED CELL VOLUME DETERMINATION; MULTIPLE SAMPLING	115.34	115.34	7/1/2006
78121	26	5	RED CELL VOLUME DETERMINATION; MULTIPLE SAMPLING	15.39	15.39	7/1/2006
78121	TC	T	RED CELL VOLUME DETERMINATION; MULTIPLE SAMPLING	99.94	99.94	7/1/2006
78122		3	WHOLE BLOOD VOLUME DETERMINATION, INCLUDING SEPARATE MEASUREMENT OF PLASMA	180.19	180.19	7/1/2006
78122	26	5	WHOLE BLOOD VOLUME DETERMINATION, INCLUDING SEPARATE MEASUREMENT OF PLASMA	21.96	21.96	7/1/2006
78122	TC	T	WHOLE BLOOD VOLUME DETERMINATION, INCLUDING SEPARATE MEASUREMENT OF PLASMA	158.22	158.22	7/1/2006
78130		3	RED CELL SURVIVAL STUDY	127.56	127.56	7/1/2006
78130	26	5	RED CELL SURVIVAL STUDY	29.61	29.61	7/1/2006
78130	TC	T	RED CELL SURVIVAL STUDY	97.96	97.96	7/1/2006
78135		3	RED CELL SURVIVAL STUDY PLUS SPLENIC AND/OR HEPAT	198.42	198.42	7/1/2006
78135	26	5	RED CELL SURVIVAL STUDY PLUS SPLENIC AND/OR HEPAT	31.02	31.02	7/1/2006
78135	TC	T	RED CELL SURVIVAL STUDY PLUS SPLENIC AND/OR HEPAT	167.40	167.40	7/1/2006
78140		3	RED CELL SPLENIC AND/OR HEPATIC SEQUESTRATION	164.62	164.62	7/1/2006
78140	26	5	RED CELL SPLENIC AND/OR HEPATIC SEQUESTRATION	29.28	29.28	7/1/2006
78140	TC	T	RED CELL SPLENIC AND/OR HEPATIC SEQUESTRATION	135.34	135.34	7/1/2006
78185		3	SPLEEN IMAGING ONLY, WITH OR WITHOUT VASCULAR FLOW	100.99	100.99	7/1/2006
78185	26	5	SPLEEN IMAGING ONLY, WITH OR WITHOUT VASCULAR FLOW	19.50	19.50	7/1/2006
78185	TC	T	SPLEEN IMAGING ONLY, WITH OR WITHOUT VASCULAR FLOW	81.50	81.50	7/1/2006
78190		3	KINETICS, PLATELET SURVIVAL, W/WO DIFF ORG/TIS LOC	250.71	250.71	7/1/2006
78190	26	5	KINETICS, PLATELET SURVIVAL, W/WO DIFF ORG/TIS LOC	54.00	54.00	7/1/2006
78190	TC	T	KINETICS, PLATELET SURVIVAL, W/WO DIFF ORG/TIS LOC	196.70	196.70	7/1/2006
78191		3	PLATELET SURVIVAL STUDY	281.58	281.58	7/1/2006
78191	26	5	PLATELET SURVIVAL STUDY	29.28	29.28	7/1/2006
78191	TC	T	PLATELET SURVIVAL STUDY	252.31	252.31	7/1/2006
78195		3	LYMPHATICS AND LYMPH NODES IMAGING	198.37	198.37	7/1/2006
78195	26	5	LYMPHATICS AND LYMPH NODES IMAGING	58.17	58.17	7/1/2006
78195	TC	T	LYMPHATICS AND LYMPH NODES IMAGING	140.21	140.21	7/1/2006
78201		3	LIVER IMAGING; STATIC ONLY	102.77	102.77	7/1/2006
78201	26	5	LIVER IMAGING; STATIC ONLY	21.27	21.27	7/1/2006
78201	TC	T	LIVER IMAGING; STATIC ONLY	81.50	81.50	7/1/2006
78202		3	LIVER IMAGING; WITH VASCULAR FLOW	123.40	123.40	7/1/2006
78202	26	5	LIVER IMAGING; WITH VASCULAR FLOW	24.45	24.45	7/1/2006
78202	TC	T	LIVER IMAGING; WITH VASCULAR FLOW	98.95	98.95	7/1/2006
78205		3	LIVER IMAGING (SPECT)	237.76	237.76	7/1/2006
78205	26	5	LIVER IMAGING (SPECT)	34.20	34.20	7/1/2006
78205	TC	T	LIVER IMAGING (SPECT)	203.56	203.56	7/1/2006
78206		3	LIVER IMAGING (SPECT); WITH VASCULAR FLOW	245.37	245.37	7/1/2006
78206	26	5	LIVER IMAGING (SPECT); WITH VASCULAR FLOW	46.41	46.41	7/1/2006
78206	TC	T	LIVER IMAGING (SPECT); WITH VASCULAR FLOW	198.95	198.95	7/1/2006
78215		3	LIVER AND SPLEEN IMAGING; STATIC ONLY	124.34	124.34	7/1/2006
78215	26	5	LIVER AND SPLEEN IMAGING; STATIC ONLY	23.40	23.40	7/1/2006
78215	TC	T	LIVER AND SPLEEN IMAGING; STATIC ONLY	100.94	100.94	7/1/2006
78216		3	LIVER AND SPLEEN IMAGING WITH VASCULAR FLOW	147.02	147.02	7/1/2006
78216	26	5	LIVER AND SPLEEN IMAGING WITH VASCULAR FLOW	27.28	27.28	7/1/2006
78216	TC	T	LIVER AND SPLEEN IMAGING WITH VASCULAR FLOW	119.74	119.74	7/1/2006
78220		3	LIVER FUNCTN STDY W/HEPATOBILIARY AGNTS, W/SER IMA	151.33	151.33	7/1/2006
78220	26	5	LIVER FUNCTN STDY W/HEPATOBILIARY AGNTS, W/SER IMA	23.40	23.40	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
78220	TC	T	LIVER FUNCTN STDY W/HEPATOBILIARY AGNTS, W/SER IMA	127.92	127.92	7/1/2006
78223		3	HEPATOBILIARY DUCTAL SYS IMAGING,INCL GALLBLADDER	166.38	166.38	7/1/2006
78223	26	5	HEPATOBILIARY DUCTAL SYS IMAGING,INCL GALLBLADDER	40.44	40.44	7/1/2006
78223	TC	T	HEPATOBILIARY DUCTAL SYS IMAGING,INCL GALLBLADDER	125.94	125.94	7/1/2006
78230		3	SALIVARY GLAND IMAGING	97.16	97.16	7/1/2006
78230	26	5	SALIVARY GLAND IMAGING	21.63	21.63	7/1/2006
78230	TC	T	SALIVARY GLAND IMAGING	75.53	75.53	7/1/2006
78231		3	SALIVARY GLAND IMAGING; WITH SERIAL IMAGES	134.39	134.39	7/1/2006
78231	26	5	SALIVARY GLAND IMAGING; WITH SERIAL IMAGES	25.14	25.14	7/1/2006
78231	TC	T	SALIVARY GLAND IMAGING; WITH SERIAL IMAGES	109.25	109.25	7/1/2006
78232		3	SALIVARY GLAND FUNCTION STUDY	144.41	144.41	7/1/2006
78232	26	5	SALIVARY GLAND FUNCTION STUDY	22.68	22.68	7/1/2006
78232	TC	T	SALIVARY GLAND FUNCTION STUDY	121.73	121.73	7/1/2006
78258		3	ESOPHAGEAL MOTILITY	134.56	134.56	7/1/2006
78258	26	5	ESOPHAGEAL MOTILITY	35.61	35.61	7/1/2006
78258	TC	T	ESOPHAGEAL MOTILITY	98.95	98.95	7/1/2006
78261		3	GASTRIC MUCOSA IMAGING	174.68	174.68	7/1/2006
78261	26	5	GASTRIC MUCOSA IMAGING	33.48	33.48	7/1/2006
78261	TC	T	GASTRIC MUCOSA IMAGING	141.20	141.20	7/1/2006
78262		3	GASTROESOPHAGEAL REFLUX STUDY	178.96	178.96	7/1/2006
78262	26	5	GASTROESOPHAGEAL REFLUX STUDY	32.79	32.79	7/1/2006
78262	TC	T	GASTROESOPHAGEAL REFLUX STUDY	146.17	146.17	7/1/2006
78264		3	GASTRIC EMPTYING STUDY	179.58	179.58	7/1/2006
78264	26	5	GASTRIC EMPTYING STUDY	37.39	37.39	7/1/2006
78264	TC	T	GASTRIC EMPTYING STUDY	142.20	142.20	7/1/2006
78267		3	UREA BREATH TEST, C-14; ACQUISITION FOR ANALYSIS	10.98	10.98	7/1/2006
78268		3	UREA BREATH TEST, C-14; ANALYSIS	94.11	94.11	7/1/2006
78270		3	VITAMIN B-12 ABSORPTION STUDY; WO INTRINSIC FACTOR	63.39	63.39	7/1/2006
78270	26	5	VITAMIN B-12 ABSORPTION STUDY; WO INTRINSIC FACTOR	9.75	9.75	7/1/2006
78270	TC	T	VITAMIN B-12 ABSORPTION STUDY; WO INTRINSIC FACTOR	53.64	53.64	7/1/2006
78271		3	VITAMIN B-12 ABSORPTION STUDY; W/INTRINSIC FACTOR	66.37	66.37	7/1/2006
78271	26	5	VITAMIN B-12 ABSORPTION STUDY; W/INTRINSIC FACTOR	9.75	9.75	7/1/2006
78271	TC	T	VITAMIN B-12 ABSORPTION STUDY; W/INTRINSIC FACTOR	56.62	56.62	7/1/2006
78272		3	VITAMIN B-12 ABSORPTION STDS CMBND,W&WO INTRIN FAC	93.10	93.10	7/1/2006
78272	26	5	VITAMIN B-12 ABSORPTION STDS CMBND,W&WO INTRIN FAC	12.93	12.93	7/1/2006
78272	TC	T	VITAMIN B-12 ABSORPTION STDS CMBND,W&WO INTRIN FAC	80.17	80.17	7/1/2006
78278		3	ACUTE GASTROINTESTINAL BLOOD LOSS IMAGING	214.89	214.89	7/1/2006
78278	26	5	ACUTE GASTROINTESTINAL BLOOD LOSS IMAGING	47.49	47.49	7/1/2006
78278	TC	T	ACUTE GASTROINTESTINAL BLOOD LOSS IMAGING	167.40	167.40	7/1/2006
78282		3	GASTROINTESTINAL PROTEIN LOSS	64.88	64.88	7/1/2006
78282	26	5	GASTROINTESTINAL PROTEIN LOSS	18.45	18.45	7/1/2006
78282	TC	T	GASTROINTESTINAL PROTEIN LOSS	16.22	16.22	7/1/2006
78290		3	INTESTINE IMAGING (EG, ECTOPIC GASTRIC MUCOSA, MECKELS LOCALIZATION, VOLVULUS)	137.83	137.83	7/1/2006
78290	26	5	INTESTINE IMAGING (EG, ECTOPIC GASTRIC MUCOSA, MECKELS LOCALIZATION, VOLVULUS)	32.79	32.79	7/1/2006
78290	TC	T	INTESTINE IMAGING (EG, ECTOPIC GASTRIC MUCOSA, MECKELS LOCALIZATION, VOLVULUS)	105.04	105.04	7/1/2006
78291		3	PERITONEAL-VENOUS SHUNT PATENCY TEST	147.91	147.91	7/1/2006
78291	26	5	PERITONEAL-VENOUS SHUNT PATENCY TEST	42.54	42.54	7/1/2006
78291	TC	T	PERITONEAL-VENOUS SHUNT PATENCY TEST	105.37	105.37	7/1/2006
78300		3	BONE AND/OR JOINT IMAGING; LIMITED AREA	115.67	115.67	7/1/2006
78300	26	5	BONE AND/OR JOINT IMAGING; LIMITED AREA	29.97	29.97	7/1/2006
78300	TC	T	BONE AND/OR JOINT IMAGING; LIMITED AREA	85.70	85.70	7/1/2006
78305		3	BONE AND/OR JOINT IMAGING; MULTIPLE AREAS	166.02	166.02	7/1/2006
78305	26	5	BONE AND/OR JOINT IMAGING; MULTIPLE AREAS	40.08	40.08	7/1/2006
78305	TC	T	BONE AND/OR JOINT IMAGING; MULTIPLE AREAS	125.94	125.94	7/1/2006
78306		3	BONE AND/OR JOINT IMAGING; WHOLE BODY	188.32	188.32	7/1/2006
78306	26	5	BONE AND/OR JOINT IMAGING; WHOLE BODY	41.49	41.49	7/1/2006
78306	TC	T	BONE AND/OR JOINT IMAGING; WHOLE BODY	146.83	146.83	7/1/2006
78315		3	BONE AND/OR JOINT IMAGING; THREE PHASE STUDY	213.32	213.32	7/1/2006
78315	26	5	BONE AND/OR JOINT IMAGING; THREE PHASE STUDY	48.91	48.91	7/1/2006
78315	TC	T	BONE AND/OR JOINT IMAGING; THREE PHASE STUDY	164.42	164.42	7/1/2006
78320		3	BONE AND/OR JOINT IMAGING; TOMOGRAPHIC	253.85	253.85	7/1/2006
78320	26	5	BONE AND/OR JOINT IMAGING; TOMOGRAPHIC	50.29	50.29	7/1/2006
78320	TC	T	BONE AND/OR JOINT IMAGING; TOMOGRAPHIC	203.56	203.56	7/1/2006
78350		3	BONE DENSITY STUDY; SINGLE PHOTON ABSORPTIOMETRY	36.46	36.46	7/1/2006
78350	26	5	BONE DENSITY STUDY; SINGLE PHOTON ABSORPTIOMETRY	10.47	10.47	7/1/2006
78350	TC	T	BONE DENSITY STUDY; SINGLE PHOTON ABSORPTIOMETRY	25.99	25.99	7/1/2006
78351		3	BONE DENSITY (BONE MINERAL CONTENT) STUDY, ONE OR MORE SITES; DUAL PHOTON	68.00	15.01	7/1/2006
78351	26	5	BONE DENSITY (BONE MINERAL CONTENT) STUDY, ONE OR MORE SITES; DUAL PHOTON	64.60	14.26	7/1/2006
78414		3	DETERM OF VENTRICULAR EJECTION FRCTN W/PROBE TECH	80.69	80.69	7/1/2006
78414	26	5	DETERM OF VENTRICULAR EJECTION FRCTN W/PROBE TECH	21.96	21.96	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
78414	TC	T	DETERM OF VENTRICULAR EJECTION FRCTN W/PROBE TECH	20.21	20.21	7/1/2006
78428		3	CARDIAC SHUNT DETECTION	116.23	116.23	7/1/2006
78428	26	5	CARDIAC SHUNT DETECTION	38.38	38.38	7/1/2006
78428	TC	T	CARDIAC SHUNT DETECTION	77.85	77.85	7/1/2006
78445		3	NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY)	88.21	88.21	7/1/2006
78445	26	5	NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY)	23.73	23.73	7/1/2006
78445	TC	T	NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY)	64.47	64.47	7/1/2006
78456		3	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	187.03	187.03	7/1/2006
78456	26	5	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	48.19	48.19	7/1/2006
78456	TC	T	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	138.84	138.84	7/1/2006
78457		3	VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL	128.69	128.69	7/1/2006
78457	26	5	VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL	37.03	37.03	7/1/2006
78457	TC	T	VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL	91.66	91.66	7/1/2006
78458		3	VENOUS THROMBOSIS IMAGING; BILATERAL	182.25	182.25	7/1/2006
78458	26	5	VENOUS THROMBOSIS IMAGING; BILATERAL	43.92	43.92	7/1/2006
78458	TC	T	VENOUS THROMBOSIS IMAGING; BILATERAL	138.32	138.32	7/1/2006
78459		3	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION	247.22	247.22	7/1/2006
78459	26	5	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION	74.04	74.04	7/1/2006
78459	TC	T	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION	173.08	173.08	7/1/2006
78460		3	MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS	122.98	122.98	7/1/2006
78460	26	5	MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS	41.49	41.49	7/1/2006
78460	TC	T	MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS	81.50	81.50	7/1/2006
78461		3	MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS	222.11	222.11	7/1/2006
78461	26	5	MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS	59.68	59.68	7/1/2006
78461	TC	T	MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS	162.43	162.43	7/1/2006
78464		3	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY AT REST OR	296.11	296.11	7/1/2006
78464	26	5	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY AT REST OR	52.75	52.75	7/1/2006
78464	TC	T	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY AT REST OR	243.36	243.36	7/1/2006
78465		3	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), MULTIPLE STUDIES, AT REST	476.73	476.73	7/1/2006
78465	26	5	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), MULTIPLE STUDIES, AT REST	70.94	70.94	7/1/2006
78465	TC	T	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), MULTIPLE STUDIES, AT REST	405.79	405.79	7/1/2006
78466		3	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR	123.82	123.82	7/1/2006
78466	26	5	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR	33.48	33.48	7/1/2006
78466	TC	T	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR	90.34	90.34	7/1/2006
78468		3	MYOCARDIAL IMAG;INFARCT AVID; PLANAR W/EJECT FRACT	164.37	164.37	7/1/2006
78468	26	5	MYOCARDIAL IMAG;INFARCT AVID; PLANAR W/EJECT FRACT	38.44	38.44	7/1/2006
78468	TC	T	MYOCARDIAL IMAG;INFARCT AVID; PLANAR W/EJECT FRACT	125.94	125.94	7/1/2006
78469		3	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; TOMOGRAPHIC SPECT WITH OR WITHOUT	224.09	224.09	7/1/2006
78469	26	5	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; TOMOGRAPHIC SPECT WITH OR WITHOUT	44.08	44.08	7/1/2006
78469	TC	T	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; TOMOGRAPHIC SPECT WITH OR WITHOUT	180.01	180.01	7/1/2006
78472		3	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; PLANAR, SINGLE STUDY AT REST OR	237.55	237.55	7/1/2006
78472	26	5	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; PLANAR, SINGLE STUDY AT REST OR	47.47	47.47	7/1/2006
78472	TC	T	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; PLANAR, SINGLE STUDY AT REST OR	190.08	190.08	7/1/2006
78473		3	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; MULTIPLE STUDIES, WALL MOTION	355.13	355.13	7/1/2006
78473	26	5	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; MULTIPLE STUDIES, WALL MOTION	71.20	71.20	7/1/2006
78473	TC	T	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; MULTIPLE STUDIES, WALL MOTION	283.93	283.93	7/1/2006
78478		3	MYOCARDIAL PERFUSION STUDY WITH WALL MOTION, QUALITATIVE OR QUANTITATIVE STUDY	84.38	84.38	7/1/2006
78478	26	5	MYOCARDIAL PERFUSION STUDY WITH WALL MOTION, QUALITATIVE OR QUANTITATIVE STUDY	30.40	30.40	7/1/2006
78478	TC	T	MYOCARDIAL PERFUSION STUDY WITH WALL MOTION, QUALITATIVE OR QUANTITATIVE STUDY	53.98	53.98	7/1/2006
78480		3	MYOCARDIAL PERFUSION STUDY WITH EJECTION FRACTION (LIST SEPARATELY IN ADDITION	84.04	84.04	7/1/2006
78480	26	5	MYOCARDIAL PERFUSION STUDY WITH EJECTION FRACTION (LIST SEPARATELY IN ADDITION	30.07	30.07	7/1/2006
78480	TC	T	MYOCARDIAL PERFUSION STUDY WITH EJECTION FRACTION (LIST SEPARATELY IN ADDITION	53.98	53.98	7/1/2006
78481		3	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; SINGLE STUDY, AT	227.91	227.91	7/1/2006
78481	26	5	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; SINGLE STUDY, AT	47.90	47.90	7/1/2006
78481	TC	T	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; SINGLE STUDY, AT	180.01	180.01	7/1/2006
78483		3	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; MULTIPLE STUDIES,	342.74	342.74	7/1/2006
78483	26	5	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; MULTIPLE STUDIES,	71.96	71.96	7/1/2006
78483	TC	T	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; MULTIPLE STUDIES,	270.78	270.78	7/1/2006
78491		3	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; SINGLE STUDY	300.12	300.12	7/1/2006
78491	26	5	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; SINGLE STUDY	74.93	74.93	7/1/2006
78491	TC	T	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; SINGLE STUDY	225.09	225.09	7/1/2006
78492		3	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; MULTIPLE	374.32	374.32	7/1/2006
78492	26	5	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; MULTIPLE	93.45	93.45	7/1/2006
78492	TC	T	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; MULTIPLE	280.74	280.74	7/1/2006
78494		3	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SPECT, AT REST, WALL MOTION	299.66	299.66	7/1/2006
78494	26	5	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SPECT, AT REST, WALL MOTION	57.91	57.91	7/1/2006
78494	TC	T	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SPECT, AT REST, WALL MOTION	241.75	241.75	7/1/2006
78496		3	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SINGLE STUDY, AT REST, WITH	266.17	266.17	7/1/2006
78496	26	5	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SINGLE STUDY, AT REST, WITH	24.42	24.42	7/1/2006
78496	TC	T	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SINGLE STUDY, AT REST, WITH	241.75	241.75	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
78580		3	PULMONARY PERFUSION IMAGING; PARTICULATE	153.70	153.70	7/1/2006
78580	26	5	PULMONARY PERFUSION IMAGING; PARTICULATE	35.61	35.61	7/1/2006
78580	TC	T	PULMONARY PERFUSION IMAGING; PARTICULATE	118.09	118.09	7/1/2006
78584		3	PULMONARY PERFUSION IMAG.PARTIC.W/VENT;SINGL BREAT	157.73	157.73	7/1/2006
78584	26	5	PULMONARY PERFUSION IMAG.PARTIC.W/VENT;SINGL BREAT	47.49	47.49	7/1/2006
78584	TC	T	PULMONARY PERFUSION IMAG.PARTIC.W/VENT;SINGL BREAT	110.24	110.24	7/1/2006
78585		3	PULM PERF IMGING, PART W/VENT;REBR &WSHOT W CR W S	246.70	246.70	7/1/2006
78585	26	5	PULM PERF IMGING, PART W/VENT;REBR &WSHOT W CR W S	52.32	52.32	7/1/2006
78585	TC	T	PULM PERF IMGING, PART W/VENT;REBR &WSHOT W CR W S	194.39	194.39	7/1/2006
78586		3	PULMONARY VENTILATION AEROSOL; SINGLE PROJECTION	108.51	108.51	7/1/2006
78586	26	5	PULMONARY VENTILATION AEROSOL; SINGLE PROJECTION	19.17	19.17	7/1/2006
78586	TC	T	PULMONARY VENTILATION AEROSOL; SINGLE PROJECTION	89.34	89.34	7/1/2006
78587		3	PULMONARY VENTILATION IMAGING, AEORSOL; MULT PROJ.	120.03	120.03	7/1/2006
78587	26	5	PULMONARY VENTILATION IMAGING, AEORSOL; MULT PROJ.	23.73	23.73	7/1/2006
78587	TC	T	PULMONARY VENTILATION IMAGING, AEORSOL; MULT PROJ.	96.30	96.30	7/1/2006
78588		3	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION IMAGING, AEROSOL,	162.79	162.79	7/1/2006
78588	26	5	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION IMAGING, AEROSOL,	52.32	52.32	7/1/2006
78588	TC	T	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION IMAGING, AEROSOL,	110.47	110.47	7/1/2006
78591		3	PULMONARY VENTILATION IMAG, GASEOUS, SNGL BRETH&IN	117.12	117.12	7/1/2006
78591	26	5	PULMONARY VENTILATION IMAG, GASEOUS, SNGL BRETH&IN	19.17	19.17	7/1/2006
78591	TC	T	PULMONARY VENTILATION IMAG, GASEOUS, SNGL BRETH&IN	97.96	97.96	7/1/2006
78593		3	PULMNRY VENT. IMAG, GAS W/REBR&WSHOT W/WO SI BR;SI	142.15	142.15	7/1/2006
78593	26	5	PULMNRY VENT. IMAG, GAS W/REBR&WSHOT W/WO SI BR;SI	23.40	23.40	7/1/2006
78593	TC	T	PULMNRY VENT. IMAG, GAS W/REBR&WSHOT W/WO SI BR;SI	118.75	118.75	7/1/2006
78594		3	PULM VENT IMGNG, GAS, W/REBR&SHOT W/WO SI BR;MUL P	196.55	196.55	7/1/2006
78594	26	5	PULM VENT IMGNG, GAS, W/REBR&SHOT W/WO SI BR;MUL P	25.50	25.50	7/1/2006
78594	TC	T	PULM VENT IMGNG, GAS, W/REBR&SHOT W/WO SI BR;MUL P	171.04	171.04	7/1/2006
78596		3	PULMONARY QUANTITATIVE DIFFERENTIAL FUNCTION STUDY	304.15	304.15	7/1/2006
78596	26	5	PULMONARY QUANTITATIVE DIFFERENTIAL FUNCTION STUDY	60.79	60.79	7/1/2006
78596	TC	T	PULMONARY QUANTITATIVE DIFFERENTIAL FUNCTION STUDY	243.36	243.36	7/1/2006
78600		3	BRAIN IMAGING, LIMITED PROCEDURE; STATIC	120.22	120.22	7/1/2006
78600	26	5	BRAIN IMAGING, LIMITED PROCEDURE; STATIC	21.27	21.27	7/1/2006
78600	TC	T	BRAIN IMAGING, LIMITED PROCEDURE; STATIC	98.95	98.95	7/1/2006
78601		3	BRAIN IMAGING, LTD PROCEDURE; W/VASCULAR FLOW	141.55	141.55	7/1/2006
78601	26	5	BRAIN IMAGING, LTD PROCEDURE; W/VASCULAR FLOW	24.45	24.45	7/1/2006
78601	TC	T	BRAIN IMAGING, LTD PROCEDURE; W/VASCULAR FLOW	117.09	117.09	7/1/2006
78605		3	BRAIN IMAGING, COMPLETE STUDY; STATIC	142.60	142.60	7/1/2006
78605	26	5	BRAIN IMAGING, COMPLETE STUDY; STATIC	25.50	25.50	7/1/2006
78605	TC	T	BRAIN IMAGING, COMPLETE STUDY; STATIC	117.09	117.09	7/1/2006
78606		3	BRAIN IMAGING, COMPLETE STUDY W/VASCULAR FLOW	164.04	164.04	7/1/2006
78606	26	5	BRAIN IMAGING, COMPLETE STUDY W/VASCULAR FLOW	30.69	30.69	7/1/2006
78606	TC	T	BRAIN IMAGING, COMPLETE STUDY W/VASCULAR FLOW	133.35	133.35	7/1/2006
78607		3	BRAIN IMAGING, COMPLETE STUDY; TOMOGRAPHIC	285.36	285.36	7/1/2006
78607	26	5	BRAIN IMAGING, COMPLETE STUDY; TOMOGRAPHIC	59.68	59.68	7/1/2006
78607	TC	T	BRAIN IMAGING, COMPLETE STUDY; TOMOGRAPHIC	225.68	225.68	7/1/2006
78608		3	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	1,027.04	1,027.04	7/1/2006
78608	26	5	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	72.28	72.28	7/1/2006
78608	TC	T	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	954.66	954.66	7/1/2006
78609		3	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	1,027.04	1,027.04	7/1/2006
78609	26	5	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	72.28	72.28	7/1/2006
78609	TC	T	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET);	954.66	954.66	7/1/2006
78610		3	BRAIN IMAGING, VASCULAR FLOW ONLY	69.31	69.31	7/1/2006
78610	26	5	BRAIN IMAGING, VASCULAR FLOW ONLY	14.67	14.67	7/1/2006
78610	TC	T	BRAIN IMAGING, VASCULAR FLOW ONLY	54.64	54.64	7/1/2006
78615		3	CEREBRAL VASCULAR FLOW	153.24	153.24	7/1/2006
78615	26	5	CEREBRAL VASCULAR FLOW	20.55	20.55	7/1/2006
78615	TC	T	CEREBRAL VASCULAR FLOW	132.69	132.69	7/1/2006
78630		3	CEREBROSPINAL FLUID FLOW,IMAG; CISTERNOGRAPHY	206.28	206.28	7/1/2006
78630	26	5	CEREBROSPINAL FLUID FLOW,IMAG; CISTERNOGRAPHY	32.79	32.79	7/1/2006
78630	TC	T	CEREBROSPINAL FLUID FLOW,IMAG; CISTERNOGRAPHY	173.49	173.49	7/1/2006
78635		3	CEREBROSPINAL FLUID FLOW IMAG; VENTRICULOGRAPHY	117.73	117.73	7/1/2006
78635	26	5	CEREBROSPINAL FLUID FLOW IMAG; VENTRICULOGRAPHY	30.04	30.04	7/1/2006
78635	TC	T	CEREBROSPINAL FLUID FLOW IMAG; VENTRICULOGRAPHY	87.69	87.69	7/1/2006
78645		3	CEREBROSPINAL FLUID FLOW IMAG; SHUNT EVALUATION	145.36	145.36	7/1/2006
78645	26	5	CEREBROSPINAL FLUID FLOW IMAG; SHUNT EVALUATION	27.28	27.28	7/1/2006
78645	TC	T	CEREBROSPINAL FLUID FLOW IMAG; SHUNT EVALUATION	118.09	118.09	7/1/2006
78647		3	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	247.15	247.15	7/1/2006
78647	26	5	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	43.59	43.59	7/1/2006
78647	TC	T	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	203.56	203.56	7/1/2006
78650		3	CEREBROSPINAL FLUID LEAKAGE DETECTION AND LOCALIZATION	189.16	189.16	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
78650	26	5	CEREBROSPINAL FLUID LEAKAGE DETECTION AND LOCALIZATION	29.61	29.61	7/1/2006
78650	TC	T	CEREBROSPINAL FLUID LEAKAGE DETECTION AND LOCALIZATION	159.55	159.55	7/1/2006
78660		3	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	98.82	98.82	7/1/2006
78660	26	5	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	25.50	25.50	7/1/2006
78660	TC	T	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	73.32	73.32	7/1/2006
78700		3	KIDNEY IMAGING; STATIC ONLY	126.67	126.67	7/1/2006
78700	26	5	KIDNEY IMAGING; STATIC ONLY	21.63	21.63	7/1/2006
78700	TC	T	KIDNEY IMAGING; STATIC ONLY	105.04	105.04	7/1/2006
78701		3	KIDNEY IMAGING; WITH VASCULAR FLOW	145.80	145.80	7/1/2006
78701	26	5	KIDNEY IMAGING; WITH VASCULAR FLOW	23.40	23.40	7/1/2006
78701	TC	T	KIDNEY IMAGING; WITH VASCULAR FLOW	122.39	122.39	7/1/2006
78704		3	KIDNEY IMAGING; WITH FUNCTION STUDY	171.62	171.62	7/1/2006
78704	26	5	KIDNEY IMAGING; WITH FUNCTION STUDY	35.61	35.61	7/1/2006
78704	TC	T	KIDNEY IMAGING; WITH FUNCTION STUDY	136.00	136.00	7/1/2006
78707		3	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY WITHOUT	199.77	199.77	7/1/2006
78707	26	5	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY WITHOUT	46.08	46.08	7/1/2006
78707	TC	T	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY WITHOUT	153.69	153.69	7/1/2006
78708		3	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY, WITH	211.98	211.98	7/1/2006
78708	26	5	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY, WITH	58.30	58.30	7/1/2006
78708	TC	T	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; SINGLE STUDY, WITH	153.69	153.69	7/1/2006
78709		3	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; MULTIPLE STUDIES, WITH AND	221.40	221.40	7/1/2006
78709	26	5	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; MULTIPLE STUDIES, WITH AND	67.71	67.71	7/1/2006
78709	TC	T	KIDNEY IMAGING WITH VASCULAR FLOW AND FUNCTION; MULTIPLE STUDIES, WITH AND	153.69	153.69	7/1/2006
78710		3	KIDNEY IMAGING, TOMOGRAPHIC (SPECT)	235.30	235.30	7/1/2006
78710	26	5	KIDNEY IMAGING, TOMOGRAPHIC (SPECT)	31.74	31.74	7/1/2006
78710	TC	T	KIDNEY IMAGING, TOMOGRAPHIC (SPECT)	203.56	203.56	7/1/2006
78715		3	KIDNEY VASCULAR FLOW ONLY	69.31	69.31	7/1/2006
78715	26	5	KIDNEY VASCULAR FLOW ONLY	14.67	14.67	7/1/2006
78715	TC	T	KIDNEY VASCULAR FLOW ONLY	54.64	54.64	7/1/2006
78725		3	KIDNEY FUNCTION STUDY, NON-IMAGING RADIOISOTOPIC STUDY	80.27	80.27	7/1/2006
78725	26	5	KIDNEY FUNCTION STUDY, NON-IMAGING RADIOISOTOPIC STUDY	18.45	18.45	7/1/2006
78725	TC	T	KIDNEY FUNCTION STUDY, NON-IMAGING RADIOISOTOPIC STUDY	61.81	61.81	7/1/2006
78730		3	URINARY BLADDER RESIDUAL STUDY	67.60	67.60	7/1/2006
78730	26	5	URINARY BLADDER RESIDUAL STUDY	17.40	17.40	7/1/2006
78730	TC	T	URINARY BLADDER RESIDUAL STUDY	50.20	50.20	7/1/2006
78740		3	URETERAL REFLUX STUDY (RADIOPHARMACEUTICAL VOIDING CYSTOGRAM)	100.82	100.82	7/1/2006
78740	26	5	URETERAL REFLUX STUDY (RADIOPHARMACEUTICAL VOIDING CYSTOGRAM)	27.51	27.51	7/1/2006
78740	TC	T	URETERAL REFLUX STUDY (RADIOPHARMACEUTICAL VOIDING CYSTOGRAM)	73.32	73.32	7/1/2006
78760		3	TESTICULAR IMAGING	124.07	124.07	7/1/2006
78760	26	5	TESTICULAR IMAGING	31.74	31.74	7/1/2006
78760	TC	T	TESTICULAR IMAGING	92.33	92.33	7/1/2006
78761		3	TESTICULAR IMAGING; WITH VASCULAR FLOW	144.44	144.44	7/1/2006
78761	26	5	TESTICULAR IMAGING; WITH VASCULAR FLOW	34.20	34.20	7/1/2006
78761	TC	T	TESTICULAR IMAGING; WITH VASCULAR FLOW	110.24	110.24	7/1/2006
78799		3	KIDNEY FUNCTION STUDY INCLUDING PHARMACOLOGIC INTERVENTION	122.72	122.72	7/1/2006
78799	26	5	KIDNEY FUNCTION STUDY INCLUDING PHARMACOLOGIC INTERVENTION	92.04	92.04	7/1/2006
78799	TC	T	KIDNEY FUNCTION STUDY INCLUDING PHARMACOLOGIC INTERVENTION	30.68	30.68	7/1/2006
78800		3	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; LIMITED AREA	149.07	149.07	7/1/2006
78800	26	5	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; LIMITED AREA	31.97	31.97	7/1/2006
78800	TC	T	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; LIMITED AREA	117.09	117.09	7/1/2006
78801		3	RADIONUCLIDE LOCALIZATION MULTIPLE AREAS	183.71	183.71	7/1/2006
78801	26	5	RADIONUCLIDE LOCALIZATION MULTIPLE AREAS	38.54	38.54	7/1/2006
78801	TC	T	RADIONUCLIDE LOCALIZATION MULTIPLE AREAS	145.18	145.18	7/1/2006
78802		3	RADIONUCLIDE LOCALIZATION WHOLE BODY	232.23	232.23	7/1/2006
78802	26	5	RADIONUCLIDE LOCALIZATION WHOLE BODY	41.49	41.49	7/1/2006
78802	TC	T	RADIONUCLIDE LOCALIZATION WHOLE BODY	190.74	190.74	7/1/2006
78803		3	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; TOMOGRAPHIC (SPECT)	278.66	278.66	7/1/2006
78803	26	5	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; TOMOGRAPHIC (SPECT)	52.98	52.98	7/1/2006
78803	TC	T	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR; TOMOGRAPHIC (SPECT)	225.68	225.68	7/1/2006
78804		3	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	425.94	425.94	7/1/2006
78804	26	5	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	51.70	51.70	7/1/2006
78804	TC	T	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	374.24	374.24	7/1/2006
78805		3	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; LIMITED AREA	152.35	152.35	7/1/2006
78805	26	5	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; LIMITED AREA	35.25	35.25	7/1/2006
78805	TC	T	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; LIMITED AREA	117.09	117.09	7/1/2006
78806		3	RADIONUCLIDE LOCALIZATION OF ABSCESS; WHOLE BODY	263.19	263.19	7/1/2006
78806	26	5	RADIONUCLIDE LOCALIZATION OF ABSCESS; WHOLE BODY	41.49	41.49	7/1/2006
78806	TC	T	RADIONUCLIDE LOCALIZATION OF ABSCESS; WHOLE BODY	221.70	221.70	7/1/2006
78807		3	RADIOPHARMACEUTICAL LOCALIZATION OF ABSCESS; TOMOGRAPHIC (SPECT)	278.76	278.76	7/1/2006
78807	26	5	RADIOPHARMACEUTICAL LOCALIZATION OF ABSCESS; TOMOGRAPHIC (SPECT)	53.08	53.08	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
78807	TC	T	RADIOPHARMACEUTICAL LOCALIZATION OF ABSCESS; TOMOGRAPHIC (SPECT)	225.68	225.68	7/1/2006
78811		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); LIMITED AREA (EG, CHEST,	231.92	231.92	7/1/2006
78811	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); LIMITED AREA (EG, CHEST,	75.53	75.53	7/1/2006
78811	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); LIMITED AREA (EG, CHEST,	173.94	173.94	7/1/2006
78812		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); SKULL BASE TO MID-THIGH	288.08	288.08	7/1/2006
78812	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); SKULL BASE TO MID-THIGH	93.88	93.88	7/1/2006
78812	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); SKULL BASE TO MID-THIGH	216.06	216.06	7/1/2006
78813		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); WHOLE BODY	298.16	298.16	7/1/2006
78813	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); WHOLE BODY	97.39	97.39	7/1/2006
78813	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); WHOLE BODY	223.62	223.62	7/1/2006
78814		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	326.96	326.96	7/1/2006
78814	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	106.91	106.91	7/1/2006
78814	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	245.22	245.22	7/1/2006
78815		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	361.52	361.52	7/1/2006
78815	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	118.20	118.20	7/1/2006
78815	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	271.14	271.14	7/1/2006
78816		3	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	370.16	370.16	7/1/2006
78816	26	5	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	121.03	121.03	7/1/2006
78816	TC	T	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	277.62	277.62	7/1/2006
78890		3	GENERATION OF AUTOMATED DATA SIMPLE MANIP <.30 MIN	47.47	47.47	7/1/2006
78890	26	5	GENERATION OF AUTOMATED DATA SIMPLE MANIP <.30 MIN	2.69	2.69	7/1/2006
78890	TC	T	GENERATION OF AUTOMATED DATA SIMPLE MANIP <.30 MIN	44.77	44.77	7/1/2006
78891		3	GENERATION OF AUTOMATED DATA: INTERACTIVE PROCESS INVOLVING	95.26	95.26	7/1/2006
78891	26	5	GENERATION OF AUTOMATED DATA: INTERACTIVE PROCESS INVOLVING	5.16	5.16	7/1/2006
79005		3	RADIOPHARMACEUTICAL THERAPY, BY ORAL ADMINISTRATION	176.86	176.86	7/1/2006
79005	26	5	RADIOPHARMACEUTICAL THERAPY, BY ORAL ADMINISTRATION	86.52	86.52	7/1/2006
79005	TC	T	RADIOPHARMACEUTICAL THERAPY, BY ORAL ADMINISTRATION	90.34	90.34	7/1/2006
79101		3	RADIOPHARMACEUTICAL THERAPY, BY INTRAVENOUS ADMINISTRATION	184.94	184.94	7/1/2006
79101	26	5	RADIOPHARMACEUTICAL THERAPY, BY INTRAVENOUS ADMINISTRATION	94.60	94.60	7/1/2006
79101	TC	T	RADIOPHARMACEUTICAL THERAPY, BY INTRAVENOUS ADMINISTRATION	90.34	90.34	7/1/2006
79200		3	INTRACAVITARY RADIOACTIVE COLLOID THERAPY	186.91	186.91	7/1/2006
79200	26	5	INTRACAVITARY RADIOACTIVE COLLOID THERAPY	96.57	96.57	7/1/2006
79200	TC	T	INTRACAVITARY RADIOACTIVE COLLOID THERAPY	90.34	90.34	7/1/2006
79300		3	INTERSTITIAL RADIOACTIVE COLLOID THERAPY	206.64	206.64	7/1/2006
79300	26	5	INTERSTITIAL RADIOACTIVE COLLOID THERAPY	79.15	79.15	7/1/2006
79300	TC	T	INTERSTITIAL RADIOACTIVE COLLOID THERAPY	50.90	50.90	7/1/2006
79403		3	RADIOPHARMACEUTICAL THERAPY, RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS	257.78	257.78	7/1/2006
79403	26	5	RADIOPHARMACEUTICAL THERAPY, RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS	112.79	112.79	7/1/2006
79403	TC	T	RADIOPHARMACEUTICAL THERAPY, RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS	144.99	144.99	7/1/2006
79440		3	INTRA-ARTICULAR RADIOPHARMACEUTICAL THERAPY	187.67	187.67	7/1/2006
79440	26	5	INTRA-ARTICULAR RADIOPHARMACEUTICAL THERAPY	97.34	97.34	7/1/2006
79440	TC	T	INTRA-ARTICULAR RADIOPHARMACEUTICAL THERAPY	90.34	90.34	7/1/2006
79445		3	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	207.16	207.16	7/1/2006
79445	26	5	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	116.33	116.33	7/1/2006
79445	TC	T	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	90.82	90.82	7/1/2006
80048		3	BASIC METABOLIC PANEL	11.20	11.20	7/1/2006
80050		3	GENERAL HEALTH SCREEN PANEL	12.37	12.13	7/1/2006
80051		3	ELECTROLYTE PANEL	9.64	9.64	7/1/2006
80053		3	COMPREHENSIVE METABOLIC PANEL	11.80	11.80	7/1/2006
80055		3	OBSTETRIC PROFILE	30.22	30.22	7/1/2006
80061		3	LIPID PROFILE	18.72	18.72	7/1/2006
80069		3	RENAL FUNCTION PANEL	11.20	11.20	7/1/2006
80074		3	ACUTE HEPATITIS PANEL	65.11	65.11	7/1/2006
80076		3	HEPATIC FUNCTION PANEL	11.20	11.20	7/1/2006
80100		3	DRUG SCREEN, QUALITATIVE; MULTIPLE DRUG CLASSES CHROMATOGRAPHIC METHOD, EACH	20.32	20.32	7/1/2006
80101		3	DRUG SCREEN, QUALITATIVE; SINGLE DRUG CLASS METHOD (EG, IMMUNOASSAY, ENZYME	19.24	19.24	7/1/2006
80102		3	DRUG CONFIRMATION	18.51	18.51	7/1/2006
80150		3	AMIKACIN	21.06	21.06	7/1/2006
80152		3	AMITRIPTYLINE	22.76	22.76	7/1/2006
80154		3	BENZODIAZEPINES	25.84	25.84	7/1/2006
80156		3	CARBAMAZEPINE; TOTAL	20.34	20.34	7/1/2006
80157		3	CARBAMAZEPINE; FREE	18.52	18.52	7/1/2006
80158		3	CYCLOSPORINE	25.23	25.23	7/1/2006
80160		3	DESIPRAMINE	24.05	24.05	7/1/2006
80162		3	DIGOXIN	18.55	18.55	7/1/2006
80164		3	DIPROPYLACETIC ACID	18.72	18.72	7/1/2006
80166		3	DOXEPIN	21.66	21.66	7/1/2006
80168		3	ETHOSUXIMIDE	22.83	22.83	7/1/2006
80170		3	GENTAMICIN	4.83	4.83	7/1/2006
80172		3	GOLD	22.76	22.76	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
80173		3	HALOPERIDOL	20.34	20.34	7/1/2006
80174		3	IMIPRAMINE	24.05	24.05	7/1/2006
80176		3	LIDOCAINE	20.52	20.52	7/1/2006
80178		3	LITHIUM	9.24	9.24	7/1/2006
80182		3	NORTRIPTYLINE	18.72	18.72	7/1/2006
80184		3	PHENOBARBITAL	16.01	16.01	7/1/2006
80185		3	PHENTOIN: TOTAL	18.52	18.52	7/1/2006
80186		3	PHENTOIN; FREE	19.23	19.23	7/1/2006
80188		3	PRIMIDONE	22.76	22.76	7/1/2006
80190		3	PROCAINAMIDE	23.41	23.41	7/1/2006
80192		3	PROCAINAMIDE: WITH ANTIBODIES	23.41	23.41	7/1/2006
80194		3	QUINIDINE	20.39	20.39	7/1/2006
80195		3	SIROLIMUS	19.17	19.17	7/1/2006
80196		3	SALICYLATE	9.92	9.92	7/1/2006
80197		3	TACROLIMUS	19.17	19.17	7/1/2006
80198		3	THEOPHYLLINE	19.77	19.77	7/1/2006
80200		3	TOBRAMYCIN	22.52	22.52	7/1/2006
80201		3	TOPIRAMATE	16.66	16.66	7/1/2006
80202		3	VANCOMYCIN	18.72	18.72	7/1/2006
80299		3	QUANTITATION OF DRUG, NOT ELSEWHERE SPECIFIED	19.13	19.13	7/1/2006
80400		3	ACTH STIMULATION PANEL;	45.56	45.56	7/1/2006
80402		3	ACTH STIMULATION PANEL;	121.46	121.46	7/1/2006
80406		3	ACTH STIMULATION PANEL;	109.34	109.34	7/1/2006
80408		3	ALDOSTERONE SUPPRESSION EVALUATION PANEL (EG, SALINE INFUSION)	175.34	175.34	7/1/2006
80410		3	CALCITONIN STIMULATION PANEL (EG, CALCIUM, PENTAGASTRIN)	112.23	112.23	7/1/2006
80412		3	CORTICOTROPIC RELEASING HORMONE (CRH) STIMULATION PANEL	460.50	460.50	7/1/2006
80418		3	COMBINED RAPID ANTERIOR PITUITARY EVALUATION PANEL	806.96	806.96	7/1/2006
80420		3	DEXAMETHASONE SUPPRESSION PANEL, 48 HOUR	100.64	100.64	7/1/2006
80422		3	GLUCAGON TOLERANCE PANEL;	64.38	64.38	7/1/2006
80424		3	GLUCAGON TOLERANCE PANEL;	70.56	70.56	7/1/2006
80428		3	GROWTH HORMONE STIMULATION PANEL (EG, ARGININE INFUSION, L-DOPA	93.16	93.16	7/1/2006
80430		3	GROWTH HORMONE SUPPRESSION PANEL (GLUCOSE ADMINISTRATION)	109.60	109.60	7/1/2006
80432		3	INSULIN-INDUCED C-PEPTIDE SUPPRESSION PANEL	154.38	154.38	7/1/2006
80434		3	INSULIN TOLERANCE PANEL;	141.30	141.30	7/1/2006
80435		3	INSULIN TOLERANCE PANEL;	143.85	143.85	7/1/2006
80436		3	METYRAPONE PANEL	127.36	127.36	7/1/2006
80438		3	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL;	68.31	68.31	7/1/2006
80439		3	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL;	91.08	91.08	7/1/2006
80440		3	THYROTROPIN RELEASING HORMONE (TRH) STIMULATION PANEL;	81.24	81.24	7/1/2006
80500		3	CLINICAL PATHOLOGY CONSULTATION; LIMITED	20.51	18.85	7/1/2006
80502		3	CLINICAL PATHOLOGY CONSULTATION; COMPREHENSIVE	66.69	66.69	7/1/2006
81000		3	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN,	4.43	4.43	7/1/2006
81001		3	URINALYSIS, BY DIP STICK OR TABLET REAGENT FOR BILIRUBIN, GLUCOSE, HEMOGLOBIN,	4.43	4.43	7/1/2006
81002		3	URINALYSIS ROUTINE WITHOUT MICROSCOPY	3.57	3.57	7/1/2006
81003		3	UA, BY DIP STICK OR TABLET; AUTOMATED, WO MICRO	3.14	3.14	7/1/2006
81005		3	URINE TESTS	3.03	3.03	7/1/2006
81007		3	URINALYSIS; BACTERIURIA SCREEN, EXCEPT BY CULTURE OR DIPSTICK	3.59	3.59	7/1/2006
81015		3	MICROSCOPIC URINE EXAM	4.24	4.24	7/1/2006
81020		3	URINALYSIS ROUTINE 2 OR 3 GLASS TEST	5.15	5.15	7/1/2006
81025		3	UA PREG. TEST - COLOR COMPARISON METHOD	8.84	8.84	7/1/2006
81050		3	VOLUME MEASUREMENT FOR TIMED COLLECTION, EACH	4.19	4.19	7/1/2006
82000		3	ACETALDEHYDE BLOOD	17.31	17.31	7/1/2006
82003		3	ACETAMINOPHEN	28.28	28.28	7/1/2006
82009		3	ACETONE QUALITATIVE	6.31	6.31	7/1/2006
82010		3	LABORATORY SERVICES,ANALYSIS	11.42	11.42	7/1/2006
82013		3	ACETYLCHOLINESTERASE	15.61	15.61	7/1/2006
82016		3	ACYLCARNITINES; QUALITATIVE, EACH SPECIMEN	19.37	19.37	7/1/2006
82017		3	ACYLCARNITINES; QUANTITATIVE, EACH SPECIMEN (FOR CARNITINE, SEE 82379)	23.57	23.57	7/1/2006
82024		3	ACTH	53.97	53.97	7/1/2006
82030		3	ADENOSINE;5'MONOPHOSPHATE,CYCLIC (CYCLIC AMP)	36.05	36.05	7/1/2006
82040		3	ALBUMIN SERUM	6.92	6.92	7/1/2006
82042		3	ALBUMIN; URINE OR OTHER SOURCE, QUANTITATIVE, EACH SPECIMEN	7.23	7.23	7/1/2006
82043		3	ALBUMIN; URINE, MICR, QUANTITATIVE	8.09	8.09	7/1/2006
82044		3	ALBUMIN; URINE, MICRO, SEMIQUANTITATIVE	4.00	4.00	7/1/2006
82045		3	ALBUMIN; ISCHEMIA MODIFIED	45.06	45.06	7/1/2006
82055		3	ALCOHOL , ANY SPECIMIN EXCEPT BREATH	15.10	15.10	7/1/2006
82075		3	ALCOHOL BREATH	16.84	16.84	7/1/2006
82085		3	ALDOLASE	13.56	13.56	7/1/2006
82088		3	ALDOSTERONE	56.94	56.94	7/1/2006
82101		3	LABORATORY SERVICES,ANALYSIS	41.94	41.94	7/1/2006

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82103		3	ALPHA-1-ANTITRYPSIN; TOTAL	18.77	18.77	7/1/2006
82104		3	ALPHA-1-ANTITRYPSIN; PHENOTYPE	20.20	20.20	7/1/2006
82105		3	ALPHA-FETOPROTEIN; SERUM	23.44	23.44	7/1/2006
82106		3	ALPHA-FETOPROTEIN; AMNIOTIC FLUID	23.44	23.44	7/1/2006
82108		3	ALUMINUM	35.60	35.60	7/1/2006
82120		3	AMINES, VAGINAL FLUID, QUALITATIVE	5.25	5.25	7/1/2006
82127		3	AMINO ACIDS; SINGLE, QUALITATIVE, EACH SPECIMEN	19.37	19.37	7/1/2006
82128		3	AMINO ACIDS; MULTIPLE, QUALITATIVE, EACH SPECIMEN	19.37	19.37	7/1/2006
82131		3	AMINO ACIDS; SINGLE, QUANTITATIVE, EACH SPECIMEN	23.57	23.57	7/1/2006
82135		3	AMINOLEVULINIC ACID DELTA	23.00	23.00	7/1/2006
82136		3	AMINO ACIDS, 2 TO 5 AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	23.57	23.57	7/1/2006
82139		3	AMINO ACIDS, 6 OR MORE AMINO ACIDS, QUANTITATIVE, EACH SPECIMEN	23.57	23.57	7/1/2006
82140		3	AMMONIA	20.36	20.36	7/1/2006
82143		3	AMNIOTIC FLUID SCAN	9.61	9.61	7/1/2006
82145		3	AMPHETAMINE OR METHAMPHETAMINE	21.72	21.72	7/1/2006
82150		3	AMYLASE	9.06	9.06	7/1/2006
82154		3	ANDROSTANEDIOL GLUCURONIDE	40.29	40.29	7/1/2006
82157		3	ANDROSTENEDIONE	40.90	40.90	7/1/2006
82160		3	ANDROSTERONE	34.94	34.94	7/1/2006
82163		3	ANGIOTENSIN II	28.68	28.68	7/1/2006
82164		3	ANGIOTENSIN I (ACE)	20.39	20.39	7/1/2006
82172		3	APOLIPOPROTEIN, EACH	21.65	21.65	7/1/2006
82175		3	ARSENIC	26.51	26.51	7/1/2006
82180		3	ASCORBIC ACID	13.81	13.81	7/1/2006
82190		3	ATOMIC ABSORPTION SPECTROSCOPY, EACH	20.83	20.83	7/1/2006
82205		3	BARBITURATES, NOT ELSEWHERE SPECIFIED	16.01	16.01	7/1/2006
82232		3	BETA-2 MICROGLOBULIN	22.61	22.61	7/1/2006
82239		3	BILE ACIDS; TOTAL	22.76	22.76	7/1/2006
82240		3	BILE ACIDS; CHOLYLGLYCINE	22.76	22.76	7/1/2006
82247		3	BILIRUBIN; TOTAL	7.02	7.02	7/1/2006
82248		3	BILIRUBIN; DIRECT	7.02	7.02	7/1/2006
82252		3	BILIRUBIN FECES QUALITATIVE	6.35	6.35	7/1/2006
82261		3	BIOTINIDASE, EACH SPECIMEN	23.57	23.57	7/1/2006
82270		3	BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIAC), QUALITATIVE; FECES, 1-3	4.54	4.54	7/1/2006
82271		3	BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIAC), QUALITATIVE; OTHER SOURC	4.54	4.54	7/1/2006
82272		3	BLOOD, OCCULT, BY PEROXIDASE ACTIVITY (EG, GUAIAC), QUALITATIVE, FECES, SING	4.54	4.54	7/1/2006
82274		3	BLOOD, OCCULT, BY FECAL HEMOGLOBIN DETERMINATION BY IMMUNOASSAY, QUALITATIVE,	22.22	22.22	7/1/2006
82286		3	BRADYKININ	9.62	9.62	7/1/2006
82300		3	CADMIUM	32.33	32.33	7/1/2006
82306		3	CALCIFEDIOL (25-OH VITAMIN D-3)	41.36	41.36	7/1/2006
82307		3	CALCIFEROL (VITAMIN D)	45.02	45.02	7/1/2006
82308		3	CALCITONIN	37.41	37.41	7/1/2006
82310		3	CALCIUM; TOTAL	7.20	7.20	7/1/2006
82330		3	CALCIUM; IONIZED	19.09	19.09	7/1/2006
82331		3	CALCIUM AFTER CALCIUM INFUSION TEST	7.23	7.23	7/1/2006
82340		3	CALCIUM URINE QUANTITATIVE TIMED SPECIMEN	7.28	7.28	7/1/2006
82355		3	CALCULUS; QUALITATIVE ANALYSIS	16.17	16.17	7/1/2006
82360		3	CALCULUS QUANTITATIVE CHEMICAL	17.99	17.99	7/1/2006
82365		3	CALCULUS QUANTITATIVE INFRARED SPECTROSCOPY	18.01	18.01	7/1/2006
82370		3	CALCULUS QUANTITATIVE X-RAY DEFRACTION	17.51	17.51	7/1/2006
82373		3	CARBOHYDRATE DEFICIENT TRANSFERRIN	25.23	25.23	7/1/2006
82374		3	CARBON DIOXIDE	6.83	6.83	7/1/2006
82375		3	LABORATORY SERVICES,ANALYSIS	15.46	15.46	7/1/2006
82376		3	CARBON DIOX COMB PARCARB MUNO QUALITATIV	8.37	8.37	7/1/2006
82378		3	CARCINOEMBRYONIC ANTIGEN (CEA)	26.51	26.51	7/1/2006
82379		3	CARNITINE (TOTAL AND FREE), QUANTITATIVE, EACH SPECIMEN	23.57	23.57	7/1/2006
82380		3	CAROTENE	12.89	12.89	7/1/2006
82382		3	CATECHOLAMINES; TOTAL URINE	24.02	24.02	7/1/2006
82383		3	CATECHOLAMINES BLOOD	35.01	35.01	7/1/2006
82384		3	CATECHOLAMINES FRACTIONATED	35.28	35.28	7/1/2006
82387		3	CATHEPSIN-D	19.37	19.37	7/1/2006
82390		3	CERULOPLASMIN	15.01	15.01	7/1/2006
82397		3	CHEMILUMINESCENT ASSAY	19.37	19.37	7/1/2006
82415		3	CHLORAMPHENICOL	17.70	17.70	7/1/2006
82435		3	CHLORIDE, SERUM	6.42	6.42	7/1/2006
82436		3	CHLORIDE, URINE	7.02	7.02	7/1/2006
82438		3	CHLORIDE; OTHER SOURCE	6.83	6.83	7/1/2006
82441		3	CHLORINATRD HYDROCARBONNS SCREEN	8.38	8.38	7/1/2006
82465		3	CHOLESTEROL, SERUM OR WHOLE BLOOD, TOTAL	6.08	6.08	7/1/2006
82480		3	CHOLINESTERASE	8.03	8.03	7/1/2006

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82482		3	CHOLINESTERASE	6.43	6.43	7/1/2006
82485		3	CHONDRUITINE B SULFATE QUANTITATIVE	28.85	28.85	7/1/2006
82486		3	CHROMATOGRAPHY, QUALITATIVE; COLUMN (EG, GAS LIQUID OR HPLC), ANALYTE NOT	25.23	25.23	7/1/2006
82487		3	CHROMATOGRAPHY PAPER	22.30	22.30	7/1/2006
82488		3	CHROMATOGRAPHY PAPER 2 DIMENSIONAL	29.85	29.85	7/1/2006
82489		3	CHROMATOGRAPHY THIN LAYER	25.84	25.84	7/1/2006
82491		3	CHROMATOGRAPHY, QUANTITATIVE, COLUMN (EG, GAS LIQUID OR HPLC); SINGLE ANALYTE	25.23	25.23	7/1/2006
82492		3	CHROMATOGRAPHY, QUANTITATIVE, COLUMN (EG, GAS LIQUID OR HPLC); MULTIPLE	25.23	25.23	7/1/2006
82495		3	CHROMIUM	28.34	28.34	7/1/2006
82507		3	CITRIC ACID	38.85	38.85	7/1/2006
82520		3	COCAINE OR METABOLITE	21.17	21.17	7/1/2006
82523		3	COLLAGEN CROSS LINKS, ANY METHOD	20.48	20.48	7/1/2006
82525		3	COPPER	17.34	17.34	7/1/2006
82528		3	CORTICOSTERONE	31.45	31.45	7/1/2006
82530		3	CORTISOL; FREE	23.35	23.35	7/1/2006
82533		3	CORTISOL; TOTAL	22.78	22.78	7/1/2006
82540		3	CREATINE	6.48	6.48	7/1/2006
82541		3	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	25.23	25.23	7/1/2006
82542		3	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	25.23	25.23	7/1/2006
82543		3	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	25.23	25.23	7/1/2006
82544		3	COLUMN CHROMATOGRAPHY/MASS SPECTROMETRY (EG, GC/MS, OR HPLC/MS), ANALYTE NOT	25.23	25.23	7/1/2006
82550		3	CREATINE KINASE (CK), (CPK); TOTAL	9.10	9.10	7/1/2006
82552		3	CPK ISOENZYME (QUALITATIVE)	18.71	18.71	7/1/2006
82553		3	CPK; MB FRACTION ONLY	16.13	16.13	7/1/2006
82554		3	CPK; ISOFORMS	16.58	16.58	7/1/2006
82565		3	CREATININE; BLOOD	7.16	7.16	7/1/2006
82570		3	CREATININE; OTHER SOURCE	7.23	7.23	7/1/2006
82575		3	CREATININE CLEARANCE	13.20	13.20	7/1/2006
82585		3	CRYOFIBRINOGEN	11.98	11.98	7/1/2006
82595		3	CRYOGLOBULIN, QUALITATIVE OR SEMI-QUANTITATIVE (EG, CRYOCRIT)	9.04	9.04	7/1/2006
82600		3	CYANIDE	27.11	27.11	7/1/2006
82607		3	CYANOCOBALAMIN (VITAMIN B-12)	21.06	21.06	7/1/2006
82608		3	CYANOCOBALAMIN UNSATURATED BINDING CAPACITY	20.01	20.01	7/1/2006
82615		3	CYSTINE	11.41	11.41	7/1/2006
82626		3	DEHYDROEPIANDROSTERONE (DHEA)	35.31	35.31	7/1/2006
82627		3	DHEA-S	31.07	31.07	7/1/2006
82633		3	DEOXYCORTICOSTERONE	43.28	43.28	7/1/2006
82634		3	DEOXYCORTISOL, 11-	40.90	40.90	7/1/2006
82638		3	DIBUCAINE NUMBER	17.11	17.11	7/1/2006
82646		3	CREATINE AND CREATININE	28.85	28.85	7/1/2006
82649		3	DIHYDROMORPHINONE	35.91	35.91	7/1/2006
82651		3	DIHYDROTESTOSTERONE	36.07	36.07	7/1/2006
82652		3	DIHYDROXYVITAMIN D	53.78	53.78	7/1/2006
82654		3	DIMETHADIONE	19.34	19.34	7/1/2006
82656		3	ELASTASE, PANCREATIC (EL-1), FECAL, QUALITATIVE OR SEMI-QUANTITATIVE	15.21	15.21	7/1/2006
82657		3	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE, NOT ELSEWHERE	25.23	25.23	7/1/2006
82658		3	ENZYME ACTIVITY IN BLOOD CELLS, CULTURED CELLS, OR TISSUE, NOT ELSEWHERE	25.23	25.23	7/1/2006
82664		3	ELECTROPHORETIC TECH	48.00	48.00	7/1/2006
82666		3	EPIANDROSTERONE	30.01	30.01	7/1/2006
82668		3	ERYTHROPOIETIN	26.26	26.26	7/1/2006
82670		3	ESTRADIOL	33.28	33.28	7/1/2006
82671		3	ESTROGENS FRACTIONATED BLOOD	45.13	45.13	7/1/2006
82672		3	ESTROGENS TOTAL BLOOD	30.30	30.30	7/1/2006
82677		3	ESTRIOL	33.79	33.79	7/1/2006
82679		3	ESTRONE	34.88	34.88	7/1/2006
82690		3	ETHCHLORVYNOL	24.15	24.15	7/1/2006
82693		3	ETHYLENE GLYCOL	19.39	19.39	7/1/2006
82696		3	ETIOCHOLANOLONE	32.95	32.95	7/1/2006
82705		3	FECAL FAT SCREEN	7.11	7.11	7/1/2006
82710		3	FAT OR LIPIDS, FECES; QUANTITATIVE	23.47	23.47	7/1/2006
82715		3	FECAL FAT	24.05	24.05	7/1/2006
82725		3	FATTY ACIDS, NONESTERIFIED	18.60	18.60	7/1/2006
82726		3	VERY LONG CHAIN FATTY ACIDS	25.23	25.23	7/1/2006
82728		3	FERRITIN SPECIFY METHOD	19.03	19.03	7/1/2006
82731		3	FETAL FIBRONECTIN, CERVICOVAGINAL SECRETIONS, SEMI-QUANTITATIVE	89.99	89.99	7/1/2006
82735		3	FLUORIDE	25.91	25.91	7/1/2006
82742		3	FLURAZEPAM	27.66	27.66	7/1/2006
82746		3	FOLIC ACID	20.54	20.54	7/1/2006
82747		3	FOLIC ACID; RBC	21.05	21.05	7/1/2006
82757		3	FRUCTOSE SEMEN	24.24	24.24	7/1/2006

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82759		3	GALACTORINASE RBC	30.01	30.01	7/1/2006
82760		3	GALACTOSE	15.64	15.64	7/1/2006
82775		3	GALACTOSE-1-PHOSDHATE URIDYL TRANSFERASE;QUAL	29.43	29.43	7/1/2006
82776		3	GALACTOSE 1 PHOSPHATE URIDYL TRANSFERASE QUANTITAT	11.71	11.71	7/1/2006
82784		3	GAMMA GLOBULIN	12.99	12.99	7/1/2006
82785		3	GAMMAGLOBULIN; IGE	23.01	23.01	7/1/2006
82787		3	GAMMAGLOBULIN; IMMUNOGLOBULIN SUBCLASSES, (IGG1, 2, 3, OR 4), EACH	11.20	11.20	7/1/2006
82800		3	OXYGEN SATURATION PH ONLY	8.97	8.97	7/1/2006
82803		3	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO3 (INCLUDING CALCULATED	27.04	27.04	7/1/2006
82805		3	GASES, BLOOD, ANY COMBINATION OF PH, PCO2, PO2, CO2, HCO2 (INCLUDING	39.65	39.65	7/1/2006
82810		3	GASES, BLOOD, O2 SATURATION ONLY, BY DIRECT MEASUREMENT, EXCEPT	12.20	12.20	7/1/2006
82820		3	HEMOGLOBIN - OXYGEN AFFINITY	13.96	13.96	7/1/2006
82926		3	GASTRIC ANALYSIS	7.61	7.61	7/1/2006
82928		3	GASTRIC ACID FREE OR TOTOAL SINGLE SPEC	9.15	9.15	7/1/2006
82938		3	GASTRIN AFTER SECRETIN STIMULATION	24.72	24.72	7/1/2006
82941		3	GASTRIN	24.64	24.64	7/1/2006
82943		3	GLUCAGON	19.97	19.97	7/1/2006
82945		3	GLUCOSE, BODY FLUID, OTHER THAN BLOOD	5.48	5.48	7/1/2006
82946		3	GLUCAGON TOLERANCE TEST	21.06	21.06	7/1/2006
82947		3	GLUCOSE; QUANTITATIVE, BLOOD (EXCEPT REAGENT STRIP)	5.48	5.48	7/1/2006
82948		3	GLUCOSE BLOOD STICK TEST	4.43	4.43	7/1/2006
82950		3	GLUCOSE POST GLUCOSE DOSE	6.64	6.64	7/1/2006
82951		3	GLUCOSE TOLERANCE	17.99	17.99	7/1/2006
82952		3	GLUCOSE TOLERANCE TEST EACH ASSIT BEYOND 3 SPEC	5.48	5.48	7/1/2006
82953		3	TOLBUTAMIDE TOLERANCE	20.28	20.28	7/1/2006
82955		3	GLUCOSE 6 PHOSPHATE DEHYDROGENASE	6.50	6.50	7/1/2006
82960		3	GLUCOSE 6 PHOSPHATE DEHYDROGENASE SCREEN	8.47	8.47	7/1/2006
82962		3	BLOOD GLUCOSE BY MONITORING DEVICE	3.27	3.27	7/1/2006
82963		3	GLUCOSIDASE BETA	30.01	30.01	7/1/2006
82965		3	GLUTAMATE DEHYDROGENASE	10.80	10.80	7/1/2006
82975		3	GLUTAMINE	22.13	22.13	7/1/2006
82977		3	G G T	10.06	10.06	7/1/2006
82978		3	GLUTATIONE LEVEL AND STABILITY	19.91	19.91	7/1/2006
82979		3	GLUTATHIONE REDUCTASE RBC	9.62	9.62	7/1/2006
82980		3	GLUTETHIMIDE	25.60	25.60	7/1/2006
82985		3	GLYCATED PROTEIN	21.06	21.06	7/1/2006
83001		3	GONADOTROPIN; FOLLICLE STIMULATING HORMONE (FSH)	25.97	25.97	7/1/2006
83002		3	LUTEINIZING HORMONE (LH)	25.88	25.88	7/1/2006
83003		3	GROWTH STIMULATING HORMONE	23.29	23.29	7/1/2006
83008		3	GUANOSINE MONOPHOSPHATE (GMP), CYCLIC	23.45	23.45	7/1/2006
83009		3	HELICOBACTER PYLORI, BLOOD TEST ANALYSIS FOR UREASE ACTIVITY, NON-RADIOACTIVE	89.40	89.40	7/1/2006
83010		3	HAPTOGLOBIN	17.58	17.58	7/1/2006
83012		3	HAPTOGLOBIN PHENOTYPES ELECTROPHORESIS	24.02	24.02	7/1/2006
83013		3	HELICOBACTER PYLORI; ANALYSIS FOR UREASE ACTIVITY, NON-RADIOACTIVE ISOTOPE	94.11	94.11	7/1/2006
83014		3	HELICOBACTER PYLORI, BREATH TEST ANALYSIS; DRUG ADMINISTRATION AND SAMPLE	10.98	10.98	7/1/2006
83015		3	HEAVY METAL SCREEN	26.31	26.31	7/1/2006
83018		3	HEAVY METAL; QUANTITATIVE, EACH	30.68	30.68	7/1/2006
83020		3	HEMOGLOBIN FRACTIONATION AND QUANTITATION; ELECTROPHORESIS (EG, A2, S, C,	17.56	17.56	7/1/2006
83020	26	5	HEMOGLOBIN FRACTIONATION AND QUANTITATION; ELECTROPHORESIS (EG, A2, S, C,	18.52	18.52	7/1/2006
83021		3	HEMOGLOBIN FRACTIONATION AND QUANTITATION; CHROMOTOGRAPHY (EG, A2, S, C, AND/OR	25.23	25.23	7/1/2006
83026		3	HEMOGLOBIN; BY COPPER SULFATE METHOD	3.30	3.30	7/1/2006
83030		3	HEMOGLOBIN F(FETAL) CHEMICAL	11.56	11.56	7/1/2006
83033		3	HEMOGLOBIN; F (FETAL), QUALITATIVE	8.33	8.33	7/1/2006
83036		3	HEMOGLOBIN; GLYCATED	13.56	13.56	7/1/2006
83045		3	METHEMOGLOBIN	6.93	6.93	7/1/2006
83050		3	METHEMOGLOBIN QUANTITATIVE	10.23	10.23	7/1/2006
83051		3	METHEMOGLOBIN PLASMA	10.21	10.21	7/1/2006
83055		3	SULFHEMOGLOBIN QUALITATIVE	6.87	6.87	7/1/2006
83060		3	SULFHEMOGLOBIN QUANTITATIVE	11.56	11.56	7/1/2006
83065		3	HEMOGLOBIN THERMOLABILE	9.62	9.62	7/1/2006
83068		3	HEMOGLOBIN UNSTABLESCREEN	4.02	4.02	7/1/2006
83069		3	HEMOGLOBIN URINE	5.51	5.51	7/1/2006
83070		3	HEMOSIDERIN	0.77	0.77	7/1/2006
83071		3	HEMOSIDERIN; QUANTITATIVE	9.61	9.61	7/1/2006
83080		3	B-HEXOSAMINIDASE, EACH ASSAY	23.57	23.57	7/1/2006
83088		3	HISTAMINE	41.26	41.26	7/1/2006
83090		3	HOMOCYSTINE	23.57	23.57	7/1/2006
83150		3	HOMOVANILLIC ACID (HVA)	27.04	27.04	7/1/2006
83491		3	HYDROXYCORTICOSTEROIDS, 17- (17-OHCS)	24.47	24.47	7/1/2006
83497		3	5 HIAA QUALITATIVE	18.01	18.01	7/1/2006

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83498		3	HYDROXYPROGESTERONE, 17-D	37.95	37.95	7/1/2006
83499		3	HYDROXYPROGESTERONE 20	35.22	35.22	7/1/2006
83500		3	HYDROXYPROLINE FREE	31.65	31.65	7/1/2006
83505		3	HYDROXYPROLINE TOTAL	33.96	33.96	7/1/2006
83516		3	IMMUNOASSAY FOR ANALYTE OTHER THAN INFECTIOUS AGENT ANTIBODY OR INFECTIOUS	16.01	16.01	7/1/2006
83518		3	IMMUNOASSAY FOR ANALYTE OTHER THAN ANTIBODY OR INFECTIOUS AGENT ANTIGEN,	10.68	10.68	7/1/2006
83519		3	IMMUNOASSAY, ANALYTE, QUANTITATIVE; BY RADIOPHARMACEUTICAL TECHNIQUE (EG, RIA)	18.88	18.88	7/1/2006
83520		3	IMMUNOASSAY ANALYTE; NOT OTHERWISE SPECIFIED	18.09	18.09	7/1/2006
83525		3	INSULIN; TOTAL	15.98	15.98	7/1/2006
83527		3	INSULIN;	17.68	17.68	7/1/2006
83528		3	INTRINSCIC FACTOR LEVEL	22.22	22.22	7/1/2006
83540		3	IRON	9.05	9.05	7/1/2006
83550		3	IBC	12.21	12.21	7/1/2006
83570		3	IDH	12.36	12.36	7/1/2006
83582		3	KETOGENIC STEROIDS; FRACTIONATION	19.80	19.80	7/1/2006
83586		3	KETOSTEROIDS, 17- (17-KS); TOTAL	17.89	17.89	7/1/2006
83593		3	KETOSTEROIDS, 17- (17-KS); FRACTIONATION	36.75	36.75	7/1/2006
83605		3	LACTATES	14.92	14.92	7/1/2006
83615		3	LACTATE DEHYDROGENASE (LD), (LDH)	8.44	8.44	7/1/2006
83625		3	LDH ISOENZYMES	13.00	13.00	7/1/2006
83632		3	LACTOGEN, HUMAN PLACENTAL (HPL)	28.24	28.24	7/1/2006
83633		3	LACTOSE URINE QUALITAITIVE	7.69	7.69	7/1/2006
83634		3	LACTOSE URINE QUANTITITIVE	16.10	16.10	7/1/2006
83655		3	LEAD	16.91	16.91	7/1/2006
83661		3	FETAL LUNG MATURITY ASSESSMENT; LECITHIN SPHINGOMYELIN (L/S) RATIO	30.71	30.71	7/1/2006
83662		3	L/S RATIO	26.43	26.43	7/1/2006
83663		3	FETAL LUNG MATURITY ASSESSMENT; FLUORESCENCE POLARIZATION	26.43	26.43	7/1/2006
83664		3	FETAL LUNG MATURITY ASSESSMENT; LAMELLAR BODY DENSITY	26.43	26.43	7/1/2006
83670		3	LEUCINE AMINOPEPTIDASE (LAP)	12.80	12.80	7/1/2006
83690		3	LIPASE	9.62	9.62	7/1/2006
83695		3	LIPOPROTEIN (A)	18.09	18.09	7/1/2006
83700		3	LIPOPROTEIN, BLOOD; ELECTROPHORETIC SEPARATION AND QUANTITATION	15.73	15.73	7/1/2006
83701		3	LIPOPROTEIN, BLOOD; HIGH RESOLUTION FRACTIONATION AND QUANTITATION OF LIPOPR	34.68	34.68	7/1/2006
83718		3	LIPOPROTEIN, DIRECT MEASUREMENT; (HDL CHOLESTEROL)	11.44	11.44	7/1/2006
83719		3	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT, VLDL CHOLESTEROL	16.26	16.26	7/1/2006
83721		3	LIPOPROTEIN, DIRECT MEASUREMENT; DIRECT MEASUREMENT, LDL CHOLESTEROL	13.33	13.33	7/1/2006
83727		3	LUTEINIZING RELEASING FACTOR (LRH)	24.02	24.02	7/1/2006
83735		3	MAGNESIUM	9.36	9.36	7/1/2006
83775		3	MALATE DEHYDROGENASE	10.30	10.30	7/1/2006
83785		3	MANGANESE BLOOD OR URINE	34.36	34.36	7/1/2006
83788		3	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY (MS, MS/ MS), ANALYTE NOT	25.23	25.23	7/1/2006
83789		3	MASS SPECTROMETRY AND TANDEM MASS SPECTROMETRY (MS, MS/ MS), ANALYTE NOT	25.23	25.23	7/1/2006
83805		3	MEPROBAMATE BLOOD/URINE	24.63	24.63	7/1/2006
83825		3	MERCURY, QUANTITATIVE	22.72	22.72	7/1/2006
83835		3	METHANEPHRINES	23.67	23.67	7/1/2006
83840		3	METHADONE OR COCAINE	22.81	22.81	7/1/2006
83857		3	METHEMALBUMIN	15.01	15.01	7/1/2006
83858		3	METHSUXIMIDE	20.71	20.71	7/1/2006
83864		3	MUCOPOLYSACCHARIDES, ACID; QUANTITATIVE	27.82	27.82	7/1/2006
83866		3	MUCOPOLYSACCHARIDES ACID URINE SCREEN	13.76	13.76	7/1/2006
83872		3	MUCIN SYNOVIAL FLUID	8.19	8.19	7/1/2006
83873		3	MYELIN BASIC PROTEIN, CEREBROSPINAL FLUID	24.04	24.04	7/1/2006
83874		3	MYOGLOBIN	18.04	18.04	7/1/2006
83880		3	NATRIURETIC PEPTIDE	47.43	47.43	7/1/2006
83883		3	NEPHELOMETRY, EACH ANALYTE	19.00	19.00	7/1/2006
83885		3	NICKEL	34.23	34.23	7/1/2006
83887		3	NICOTINE	33.09	33.09	7/1/2006
83890		3	MOLECULAR DIAGNOSTICS; MOLECULAR ISOLATION OR EXTRACTION	5.60	5.60	7/1/2006
83891		3	MOLECULAR DIAGNOSTICS; ISOLATION OR EXTRACTION OF HIGHLY PURIFIED NUCLEIC ACID	5.60	5.60	7/1/2006
83892		3	NUCLEAR MOLECULAR DX; ENZYMATIC DIGESTION	5.60	5.60	7/1/2006
83893		3	MOLECULAR DIAGNOSTICS; DOT/SLOT BLOT PRODUCTION	5.60	5.60	7/1/2006
83894		3	MOLECULAR DIAGNOSTICS; SEPARATION BY GEL ELECTROPHORESIS (EG, AGAROSE,	5.60	5.60	7/1/2006
83896		3	NUCLEAR MOLECULAR DX; EACH	5.60	5.60	7/1/2006
83897		3	MOLECULAR DIAGNOSTICS; NUCLEIC ACID TRANSFER (EG, SOUTHERN, NORTHERN)	5.60	5.60	7/1/2006
83898		3	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID (EG, PCR, LCR),	5.75	5.75	7/1/2006
83900		3	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, FIR	11.50	11.50	7/1/2006
83901		3	MOLECULAR DIAGNOSTICS; AMPLIFICATION OF PATIENT NUCLEIC ACID, MULTIPLEX, EACH	5.75	5.75	7/1/2006
83902		3	MOLECULAR DIAGNOSTICS; REVERSE TRANSCRIPTION	5.75	5.75	7/1/2006
83903		3	MOLECULAR DIAGNOSTICS; MUTATION SCANNING, BY PHYSICAL PROPERTIES (EG, SINGLE	5.75	5.75	7/1/2006
83904		3	MOLECULAR DIAGNOSTICS; MUTATION IDENTIFICATION BY SEQUENCING, SINGLE SEGMENT,	5.75	5.75	7/1/2006

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83905		3	MOLECULAR DIAGNOSTICS; MUTATION IDENTIFICATION BY ALLELE SPECIFIC	5.75	5.75	7/1/2006
83906		3	MOLECULAR DIAGNOSTICS; MUTATION IDENTIFICATION BY ALLELE SPECIFIC TRANSLATION,	5.75	5.75	7/1/2006
83907		3	MOLECULAR DIAGNOSTICS; LYSIS OF CELLS PRIOR TO NUCLEIC ACID EXTRACTION (EG,	18.66	18.66	7/1/2006
83908		3	MOLECULAR DIAGNOSTICS; SIGNAL AMPLIFICATION OF PATIENT NUCLEIC ACID, EACH NU	5.75	5.75	7/1/2006
83909		3	MOLECULAR DIAGNOSTICS; SEPARATION AND IDENTIFICATION BY HIGH RESOLUTION TECH	5.75	5.75	7/1/2006
83912		3	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	5.60	5.60	7/1/2006
83912	26	5	NUCLEAR MOLECULAR DIAGNOSTICS; INTERPRETATION AND REPORT	17.53	17.53	7/1/2006
83914		3	MUTATION IDENTIFICATION BY ENZYMATIC LIGATION OR PRIMER EXTENSION, SINGLE SE	5.75	5.75	7/1/2006
83915		3	5 NUCLEOTIDASE	15.58	15.58	7/1/2006
83916		3	OLIGOCLONAL IMMUNE (OLIGOCLONAL BANDS)	28.09	28.09	7/1/2006
83918		3	ORGANIC ACIDS; TOTAL, QUANTITATIVE, EACH SPECIMEN	23.00	23.00	7/1/2006
83919		3	ORGANIC ACIDS; QUALITATIVE, EACH SPECIMEN	23.00	23.00	7/1/2006
83921		3	ORGANIC ACID, SINGLE, QUANTITATIVE	23.00	23.00	7/1/2006
83925		3	OPIATES	27.19	27.19	7/1/2006
83930		3	OSMOLALITY BLOOD	9.24	9.24	7/1/2006
83935		3	OSMOLALITY	9.52	9.52	7/1/2006
83937		3	OSTEOCALCIN (BONE G1A PROTEIN)	39.78	39.78	7/1/2006
83945		3	OXALATE	17.99	17.99	7/1/2006
83950		3	ONCOPROTEIN, HER-2/NEU	89.99	89.99	7/1/2006
83970		3	PARATHORMONE	57.67	57.67	7/1/2006
83986		3	PH BODY FLUID EXCEPT BLOOD	5.00	5.00	7/1/2006
83992		3	PHENCYCLIDINE	20.54	20.54	7/1/2006
84022		3	PHENOTHIAZINE	21.76	21.76	7/1/2006
84030		3	PHENYLALANINE (PKU), BLOOD	7.69	7.69	7/1/2006
84035		3	PHENYLKETONES, QUALITATIVE	5.11	5.11	7/1/2006
84060		3	PHOSPHATASE ACID	10.32	10.32	7/1/2006
84061		3	PHOSPHATASE ACID; FORENSIC EXAM	11.06	11.06	7/1/2006
84066		3	PHOSPHATASE ACID; PROSTATIC	13.50	13.50	7/1/2006
84075		3	PHOSPHATASE ALKALINE	7.23	7.23	7/1/2006
84078		3	PHOSPHATASE ALKALINE BLOOD HEAT STABLE	10.20	10.20	7/1/2006
84080		3	ALKALINE PHOSPHATASE ISOENZYME	20.66	20.66	7/1/2006
84081		3	PHOSPHATYDYLGLYCEROL	23.09	23.09	7/1/2006
84085		3	PHOSPHOGLUCONAT6 6-DEHYDROGENASE RBC	9.42	9.42	7/1/2006
84087		3	PHOSPHOHEXOSE ISOMERASE	14.42	14.42	7/1/2006
84100		3	PHOSPHORUS INORGANIC (PHOSPHATE)	6.63	6.63	7/1/2006
84105		3	PHOSPHORUS (PHOSPHATE) URINE	7.23	7.23	7/1/2006
84106		3	PORPHOBILINOGEN	5.99	5.99	7/1/2006
84110		3	PORPHOBILINOGEN URINE QUANTITATIVE	11.80	11.80	7/1/2006
84119		3	PORPHYRINS QUALITATIVE	12.03	12.03	7/1/2006
84120		3	PORPHYRINS, URINE; QUANTITATION AND FRACTIONATION	20.55	20.55	7/1/2006
84126		3	PROPHYRINS FECES QUANITATIVE	35.59	35.59	7/1/2006
84127		3	PORPHYRINS, FECES; QUALITATIVE	13.00	13.00	7/1/2006
84132		3	POTASSIUM SERUM	6.42	6.42	7/1/2006
84133		3	POTASSIUM URINE	6.01	6.01	7/1/2006
84134		3	PREALBUMIN	20.38	20.38	7/1/2006
84135		3	PREGNANEDIOL	26.73	26.73	7/1/2006
84138		3	PREGNANETRIOL	26.46	26.46	7/1/2006
84140		3	PREGNENOLONE	27.97	27.97	7/1/2006
84143		3	17-HYDROXYPREGNENOLONE	31.89	31.89	7/1/2006
84144		3	PROGESTERONE	29.15	29.15	7/1/2006
84146		3	PROLACTIN	27.08	27.08	7/1/2006
84150		3	PROSTAGLANDIN, EACH	34.88	34.88	7/1/2006
84152		3	PROSTATE SPECIFIC ANTIGEN (PSA); COMPLEXED (DIRECT MEASUREMENT)	25.70	25.70	7/1/2006
84153		3	PROSTATE SPECIFIC ANTIGEN (PSA); TOTAL	25.70	25.70	7/1/2006
84154		3	PROSTATE SPECIFIC ANTIGEN (PSA); FREE	25.70	25.70	7/1/2006
84155		3	PROTEIN; TOTAL, EXCEPT REFRACTOMETRY	5.12	5.12	7/1/2006
84156		3	PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY; URINE	5.12	5.12	7/1/2006
84157		3	PROTEIN, TOTAL, EXCEPT BY REFRACTOMETRY; OTHER SOURCE (EG, SYNOVIAL FLUID, CEREB	5.12	5.12	7/1/2006
84160		3	PROTEIN REFRACTOMETRIC	7.23	7.23	7/1/2006
84163		3	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A (PAPP-A)	11.61	11.61	7/1/2006
84165		3	PROTEIN ELECTROPHORESIS	14.95	14.95	7/1/2006
84165	26	5	PROTEIN ELECTROPHORESIS	18.19	18.19	7/1/2006
84166		3	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH	23.67	23.67	7/1/2006
84166	26	5	PROTEIN; ELECTROPHORETIC FRACTIONATION AND QUANTITATION, OTHER FLUIDS WITH	18.19	18.19	7/1/2006
84181		3	PROTEIN; WESTERN BLOT, W REPORT & INTERP	16.43	16.43	7/1/2006
84181	26	5	PROTEIN; WESTERN BLOT, W REPORT & INTERP	16.43	16.43	7/1/2006
84182		3	PROTEIN; IMMUNO PROBE FOR BAND ID, EACH	16.43	16.43	7/1/2006
84182	26	5	PROTEIN; IMMUNO PROBE FOR BAND ID, EACH	16.43	16.43	7/1/2006
84202		3	PROTOPORPHYRIN RBC QUANTITATIVE	20.05	20.05	7/1/2006
84203		3	PROTOPORPHYRIN RBC SCREEN	12.03	12.03	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
84206		3	PROINSULIN	24.89	24.89	7/1/2006
84207		3	PYRIDOXINE VITAMINE B-6	39.25	39.25	7/1/2006
84210		3	PYRUVATE	15.17	15.17	7/1/2006
84220		3	PYRUVATE KINASE	13.18	13.18	7/1/2006
84228		3	QUININE	16.26	16.26	7/1/2006
84233		3	RECEPTOR ASSAY ESTROGEN (ESTRADIOL)	89.99	89.99	7/1/2006
84234		3	RECEPTOR ASSAY PROGESTERONE	90.64	90.64	7/1/2006
84235		3	RECEPTOR ASSAY ENDOCRINE NOT ESTROGEN OR PROGESTER	73.12	73.12	7/1/2006
84238		3	RECEPTOR ASSAY NON-ENDOCRINE	51.09	51.09	7/1/2006
84244		3	RENIN	30.73	30.73	7/1/2006
84252		3	RIBOFLAVIN	28.28	28.28	7/1/2006
84255		3	SELENIUM	35.67	35.67	7/1/2006
84260		3	SEROTONIN	22.76	22.76	7/1/2006
84270		3	SHBG	30.36	30.36	7/1/2006
84275		3	SIALIC ACID	18.77	18.77	7/1/2006
84285		3	SILICA	32.90	32.90	7/1/2006
84295		3	SODIUM BLOOD	6.72	6.72	7/1/2006
84300		3	SODIUM URINE	6.79	6.79	7/1/2006
84302		3	SODIUM; OTHER SOURCE	6.79	6.79	7/1/2006
84305		3	SOMATOMEDIN	19.37	19.37	7/1/2006
84307		3	SOMATOSTATIN	19.37	19.37	7/1/2006
84311		3	SPECTROPHOMETRY, NOT ELSEWHERE SPECIFIED	9.77	9.77	7/1/2006
84315		3	SPECIFIC GRAVITY CEXCE PT URINE	3.50	3.50	7/1/2006
84375		3	SUGAR CHOMATOGRAPHIC TLC/PAPER CHOMATOGA PHY	27.39	27.39	7/1/2006
84376		3	SUGARS (MON-, DI, AND OLIGOSACCHARIDES); SINGLE QUALITATIVE, EACH SPECIMEN	7.69	7.69	7/1/2006
84377		3	SUGARS (MON-, DI, AND OLIGOSACCHARIDES); MULTIPLE QUALITATIVE, EACH SPECIMEN	7.69	7.69	7/1/2006
84378		3	SUGARS (MON-, DI, AND OLIGOSACCHARIDES); SINGLE QUANTITATIVE, EACH SPECIMEN	16.10	16.10	7/1/2006
84379		3	SUGARS (MON-, DI, AND OLIGOSACCHARIDES); MULTIPLE QUANTITATIVE, EACH SPECIMEN	16.10	16.10	7/1/2006
84392		3	SULFATE, URINE	6.64	6.64	7/1/2006
84402		3	TESTOSTERONE; FREE	35.57	35.57	7/1/2006
84403		3	TESTOSTERONE; TOTAL	36.08	36.08	7/1/2006
84425		3	THIAMINE	29.67	29.67	7/1/2006
84430		3	THIOCYANATE	8.06	8.06	7/1/2006
84432		3	THYROGLOBULIN	22.44	22.44	7/1/2006
84436		3	THYROXINE; TOTAL	8.06	8.06	7/1/2006
84437		3	THYROXINE; REQUIRING ELUTION (EG, NEONATAL)	9.04	9.04	7/1/2006
84439		3	THYROXINE; FREE	12.60	12.60	7/1/2006
84442		3	TBG BY RIA	20.66	20.66	7/1/2006
84443		3	TSH	22.77	22.77	7/1/2006
84445		3	THYROID STIMULATING IMMUNE GLOBULINS (TSI)	71.05	71.05	7/1/2006
84446		3	VITAMIN E	19.81	19.81	7/1/2006
84449		3	TRANSCORTIN (CORTISOL BINDING GLOBULIN)	25.15	25.15	7/1/2006
84450		3	TRANSFERASE; ASPARTATE AMINO (AST) (SGOT)	7.22	7.22	7/1/2006
84460		3	TRANSFERASE; ALANINE AMINO (ALT) (SGPT)	7.40	7.40	7/1/2006
84466		3	TRANSFERRIN	17.84	17.84	7/1/2006
84478		3	TRIGLYCERIDES	8.04	8.04	7/1/2006
84479		3	THYROID HORMONE (T3 OR T4) UPTAKE OR THYROID HORMONE BINDING RATIO (THBR)	8.33	8.33	7/1/2006
84480		3	TRIIODOTHYRONINE T3; TOTAL (TT-3)	19.81	19.81	7/1/2006
84481		3	TRIDOTHYRONINE (T-3); FREE	23.67	23.67	7/1/2006
84482		3	T-3; REVERSE	22.02	22.02	7/1/2006
84484		3	TROPONIN, QUANTITATIVE	13.75	13.75	7/1/2006
84485		3	TRYPSIN DUODENAL FLUID	10.49	10.49	7/1/2006
84488		3	TRYPSIN; FECES, QUALITATIVE	10.20	10.20	7/1/2006
84490		3	TRYPSIN FECES QUANTITATIVE	10.63	10.63	7/1/2006
84510		3	TYROSINE	14.53	14.53	7/1/2006
84512		3	TROPONIN, QUALITATIVE	8.69	8.69	7/1/2006
84520		3	UREA NITROGEN; QUANTITATIVE	5.51	5.51	7/1/2006
84525		3	UREA NITROGEN; SEMIQUANTITATIVE (EG, REAGENT STRIP TEST)	5.25	5.25	7/1/2006
84540		3	LABORATORY SERVICES,ANALYSIS	6.64	6.64	7/1/2006
84545		3	UREA CLEARANCE	8.06	8.06	7/1/2006
84550		3	URIC ACID; BLOOD	6.31	6.31	7/1/2006
84560		3	URIC ACID; OTHER SOURCE	6.64	6.64	7/1/2006
84577		3	FECAL UROBILINOGEN QUANTITATIVE	17.43	17.43	7/1/2006
84578		3	UROBILINOGEN QUALITATIVE	3.28	3.28	7/1/2006
84580		3	UROBILINOGEN URINE QUANTITATIVE	9.92	9.92	7/1/2006
84583		3	UROBILINOGEN URINE SEMIQUANTITATIVE	7.02	7.02	7/1/2006
84585		3	UMA	21.66	21.66	7/1/2006
84586		3	VASOACTIVE INTESTINAL PEPTIDE (VIP)	22.33	22.33	7/1/2006
84588		3	VASOPRESSIN (ANTIDIURETIC HORMONE, ADH)	47.43	47.43	7/1/2006
84590		3	VITAMIN A	16.20	16.20	7/1/2006

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84591		3	VITAMIN, NOT OTHERWISE SPECIFIED	16.20	16.20	7/1/2006
84597		3	VITAMIN K	19.15	19.15	7/1/2006
84600		3	VOLATILES	19.45	19.45	7/1/2006
84620		3	D-XYLOSE TOLERANCE	16.55	16.55	7/1/2006
84630		3	ZINC	15.91	15.91	7/1/2006
84681		3	C-PEPTIDE ANY METHOD	22.20	22.20	7/1/2006
84702		3	GONADOTROPIN CHORIONIC QUANTITATIVE	12.22	12.22	7/1/2006
84703		3	GONADOTROPIN CHORIONIC QUALITATIVE	10.49	10.49	7/1/2006
85002		3	BLEEDING TIME	6.29	6.29	7/1/2006
85004		3	BLOOD COUNT; AUTOMATED DIFFERENTIAL WBC COUNT	9.04	9.04	7/1/2006
85007		3	BLOOD COUNT DIFF WBC COUNT	4.81	4.81	7/1/2006
85008		3	BLOOD COUNT; MANUAL SMEAR EXAM	4.81	4.81	7/1/2006
85009		3	DIFFERENTIAL WBC COUNT	5.19	5.19	7/1/2006
85013		3	BLOOD COUNT; SPUN MICROHEMATOCRIT	3.31	3.31	7/1/2006
85014		3	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT	3.31	3.31	7/1/2006
85018		3	HEMOGLOBIN	3.31	3.31	7/1/2006
85025		3	BLOOD COUNT HEMOGRAM/PLATELET COUNT AUTO/AUTO COMP	10.86	10.86	7/1/2006
85027		3	BLOOD COUNT HEMOGRAM AUTOMATED W PLATELET COUNT	9.04	9.04	7/1/2006
85032		3	BLOOD COUNT; MANUAL CELL COUNT (ERYTHROCYTE, LEUKOCYTE, OR PLATELET) EACH	6.01	6.01	7/1/2006
85041		3	RBC	4.20	4.20	7/1/2006
85044		3	RETICULOCYTE COUNT	6.01	6.01	7/1/2006
85045		3	BLOOD COUNT, RETICULOCYTE COUNT, FLOW CYTOMETRY	5.59	5.59	7/1/2006
85046		3	BLOOD COUNT; RETICULOCYTES, HEMOGLOBIN CONCENTRATION	7.80	7.80	7/1/2006
85048		3	WBC	3.55	3.55	7/1/2006
85049		3	BLOOD COUNT; PLATELET, AUTOMATED	6.25	6.25	7/1/2006
85055		3	RETICULATED PLATELET ASSAY	37.41	37.41	7/1/2006
85060		3	BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSICIAN	22.62	22.62	7/1/2006
85060	26	5	BLOOD SMEAR, PERIPHERAL, INTERP BY PHYSICIAN	16.12	16.12	7/1/2006
85097		3	BONE MARROW, SMEAR INTERPRETATION	98.36	48.34	7/1/2006
85097	26	5	BONE MARROW, SMEAR INTERPRETATION	73.27	36.01	7/1/2006
85130		3	CHROMOGENIC SUBSTRATE ASSAY	16.62	16.62	7/1/2006
85170		3	CLOT RETRACTION	5.05	5.05	7/1/2006
85175		3	CLOT LYSIS TIME WHOLE BLOOD DILUTION	6.35	6.35	7/1/2006
85210		3	CLOTTING FACTOR II PROTHROMBIN SPECIFIC	18.14	18.14	7/1/2006
85220		3	CLOTTING FACTOR V LABILE FACTOR	24.66	24.66	7/1/2006
85230		3	CLOTTING FACTOR VII	25.02	25.02	7/1/2006
85240		3	CLOTTING FACTOR VIII ONE STAGE	25.02	25.02	7/1/2006
85244		3	CLOTTING; FACTOR VIII RELATED ANTIGEN	28.53	28.53	7/1/2006
85245		3	CLOTTING; FACTOR 8	32.06	32.06	7/1/2006
85246		3	CLOTTING; FACTOR 8, VW FACTOR ANTIGEN	32.06	32.06	7/1/2006
85247		3	CLOTTING; FACTOR 8, MULTIMETRIC ANALYSIS	32.06	32.06	7/1/2006
85250		3	CLOTTING FACTOR IX	26.60	26.60	7/1/2006
85260		3	CLOTTING FACTOR X	25.02	25.02	7/1/2006
85270		3	CLOTTING FACTOR XI	25.02	25.02	7/1/2006
85280		3	CLOTTING FACTOR XII	27.04	27.04	7/1/2006
85290		3	CLOTTING FACTOR XIII	22.83	22.83	7/1/2006
85291		3	CLOTTING FACTOR XIII FIBRIN STABILIZING SCREEN SOL	12.42	12.42	7/1/2006
85292		3	CLOTTING; FACTOR II PREKALLIKREIN ASSAY	26.46	26.46	7/1/2006
85293		3	CLOTTING; FACTOR II MOLECULAR WEIGHT ASSAY	26.46	26.46	7/1/2006
85300		3	CLOTTING INHIBITORS OR ANTICOAGULANTS ANTITHROMBIN	16.55	16.55	7/1/2006
85301		3	CLOTTING INHIBITORS; ANTITHROMBIN III, ANTIGEN ASS	15.11	15.11	7/1/2006
85302		3	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN C, ANTIGEN	16.80	16.80	7/1/2006
85303		3	CLOTTING INHIBITORS OR ANTICOAG; PROTEIN C	19.32	19.32	7/1/2006
85305		3	CLOTTING INHIBITORS OR ANTICOAGULANTS; PROTEIN S, TOTAL	16.20	16.20	7/1/2006
85306		3	CLOTTING INHIBITORS OR ANTICOAG; PROTEIN S FREE	19.97	19.97	7/1/2006
85307		3	ACTIVATED PROTEIN C (APC) RESISTANCE ASSAY	19.97	19.97	7/1/2006
85335		3	FACTOR INHIBITOR TEST	17.99	17.99	7/1/2006
85337		3	THROMBOMODULIN	14.56	14.56	7/1/2006
85345		3	COAGULATION TIME	6.01	6.01	7/1/2006
85347		3	COAGULATION TIME OTHER METHODS	5.95	5.95	7/1/2006
85348		3	COAGULATION TIME OTHER METHODS	5.20	5.20	7/1/2006
85360		3	EUGLOBULIN LYSIS	11.74	11.74	7/1/2006
85362		3	FIBRIN DEGREDATION PRODUCTS	9.62	9.62	7/1/2006
85370		3	FDP; QUANTITATIVE	12.87	12.87	7/1/2006
85378		3	FDP, D-DIMER; SEMIQUANTITATIVE	9.97	9.97	7/1/2006
85379		3	FDP, D-DIMER; QUANTITATIVE	12.87	12.87	7/1/2006
85380		3	FIBRIN DEGRADATION PRODUCTS, D-DIMER; ULTRASENSITIVE (EG, FOR EVALUATION FOR	12.87	12.87	7/1/2006
85384		3	FIBRINOGEN; ACTIVITY	11.87	11.87	7/1/2006
85385		3	FIBRINOGEN; ANTIGEN	11.87	11.87	7/1/2006
85390		3	FIBRINOLYSINS OR COAGULOPATHY SCREEN, INTERPRETATION AND REPORT	7.22	7.22	7/1/2006

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85390	26	5	FIBRINOLYSINS OR COAGULOPATHY SCREEN, INTERPRETATION AND REPORT	17.86	17.86	7/1/2006
85396		3	COAGULATION/FIBRINOLYSIS ASSAY, WHOLE BLOOD (EG, VISCOELASTIC CLOT ASSESSMENT),	19.54	19.54	7/1/2006
85400		3	FIBRINOLYTIC MECHANISMS PLASMIN	12.36	12.36	7/1/2006
85410		3	FIBRINOLYTIC MECHANISMS ANTIPLASMIN	10.77	10.77	7/1/2006
85415		3	FIBRINOLYTIC FACTORS & INHIBITORS	24.02	24.02	7/1/2006
85420		3	FIBRINOLYTIC MECHANISMS PLASMINOGEN	9.13	9.13	7/1/2006
85421		3	PLASMINOGEN, ANTIGENIC ASSAY	14.23	14.23	7/1/2006
85441		3	HEINZ BODIES DIRECT	5.88	5.88	7/1/2006
85445		3	HEINZ BODIES INDUCED ACETYL PHENYLHYDRAZINE	9.52	9.52	7/1/2006
85460		3	HEMOGLOBIN OR RBCS, FETAL, FOR FETOMATERNAL HEMORRHAGE;	10.53	10.53	7/1/2006
85461		3	HEMOGLOBIN OR RBCS, FETAL, FOR FETOMATERNAL HEMORRHAGE;	9.26	9.26	7/1/2006
85475		3	HEMOLYSIN, ACID	10.53	10.53	7/1/2006
85520		3	HEPARIN ASSAY	18.29	18.29	7/1/2006
85525		3	HEPARIN NEUTRALIZATION	16.55	16.55	7/1/2006
85530		3	HEPARIN-PROTAMINE TOLERANCE TEST	19.81	19.81	7/1/2006
85536		3	IRON STAIN, PERIPHERAL BLOOD	9.04	9.04	7/1/2006
85540		3	LEUKOCYTE ALKALINE PHOSPHATASE	12.02	12.02	7/1/2006
85547		3	RBC FRAGILITY	5.73	5.73	7/1/2006
85549		3	MURAMIDASE	26.21	26.21	7/1/2006
85555		3	OSMOTIC FRAGILITY, RBC; UNINCUBATED	9.34	9.34	7/1/2006
85557		3	OSMOTIC FRAGILITY INCUBATED QUANTITATIVE	18.66	18.66	7/1/2006
85576		3	PLATELET; AGGREGATION (IN VITRO), EACH AGENT	30.01	30.01	7/1/2006
85576	26	5	PLATELET; AGGREGATION (IN VITRO), EACH AGENT	18.85	18.85	7/1/2006
85597		3	PLATELET NEUTRALIZATION	25.12	25.12	7/1/2006
85610		3	PROTHROMBIN TIME	5.49	5.49	7/1/2006
85611		3	PROTHROMBIN TIME	5.51	5.51	7/1/2006
85612		3	RUSSELL VIPER VENOM TIME (INCLUDES VENOM); UNDILUTED	13.37	13.37	7/1/2006
85613		3	RUSSELL VIPOR VENOM TIME; DULUTED	13.37	13.37	7/1/2006
85635		3	REPTILASE TEST	13.76	13.76	7/1/2006
85651		3	SEDIMENTATION RATE, ERYTHROCYTE, NON-AUTOMATED	4.96	4.96	7/1/2006
85652		3	SEDIMENTATION RATE, ERYTHROCYTE; AUTOMATED	3.77	3.77	7/1/2006
85660		3	SICKLING RBC REDUCTION SLIDE METHOD	7.71	7.71	7/1/2006
85670		3	THROMBIN TIME PLASMA	8.07	8.07	7/1/2006
85675		3	THROMBIN TIME TITER	9.58	9.58	7/1/2006
85705		3	THROMBOPLASTIN INHIBITION; TISSUE	13.45	13.45	7/1/2006
85730		3	PTT	8.38	8.38	7/1/2006
85732		3	THROMBOPLASTIN TIME, PARTIAL (PTT); SUBSTITUTION, PLASMA FRACTIONS, EACH	9.04	9.04	7/1/2006
85810		3	VISCOSITY	14.16	14.16	7/1/2006
86000		3	AGGLUTINS FEBRILE EA	9.75	9.75	7/1/2006
86001		3	ALLERGEN SPECIFIC IGG QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	7.30	7.30	7/1/2006
86003		3	ALLERGEN SPECIFIC IGE; QUANTITATIVE OR SEMIQUANTITATIVE, EACH ALLERGEN	7.30	7.30	7/1/2006
86005		3	ALLERGEN SPECIFIC IGE; QUALITATIVE, MULTIALLERGEN SCREEN (DIPSTICK, PADDLE OR	11.14	11.14	7/1/2006
86021		3	ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBODIES	21.03	21.03	7/1/2006
86022		3	ANTIBODY IDENTIFICATION PLATELET ANTIBODIES	25.66	25.66	7/1/2006
86023		3	ANTIBODY ID PLATELET ASSOCIATED IMMUNOGLOBULIN	17.40	17.40	7/1/2006
86038		3	ANTINUCLEAR ANTIBODIES (ANA);	16.89	16.89	7/1/2006
86039		3	ANA; TITER	15.60	15.60	7/1/2006
86060		3	ASO TITER	10.20	10.20	7/1/2006
86063		3	ANTISTREPTOLYSIN SCREEN	8.07	8.07	7/1/2006
86077		3	BLOOD BANK SERVICES; EVALUATION OF IRREGULAR ANTIB	47.45	47.45	7/1/2006
86077	26	5	BLOOD BANK SERVICES; EVALUATION OF IRREGULAR ANTIB	34.64	34.60	7/1/2006
86078		3	BLOOD BANK IRREGULAR ANTIB INVESTIGATION OF TRANSF	49.77	47.78	7/1/2006
86078	26	5	BLOOD BANK IRREGULAR ANTIB INVESTIGATION OF TRANSF	36.32	34.87	7/1/2006
86079		3	BLOOD BANK AUTHORIZATION FOR DEVIATION STAND PROCE	49.44	48.11	7/1/2006
86079	26	5	BLOOD BANK AUTHORIZATION FOR DEVIATION STAND PROCE	35.82	34.86	7/1/2006
86140		3	CRP	7.23	7.23	7/1/2006
86141		3	C-REACTIVE PROTEIN; HIGH SENSITIVITY (HSCRP)	18.09	18.09	7/1/2006
86146		3	BETA 2 GLYCOPROTEIN I ANTIBODY, EACH	20.28	20.28	7/1/2006
86147		3	CARDIOLIPIN (PHOSPHOLIPID) ANTIBODY, EACH IG CLASS	20.28	20.28	7/1/2006
86148		3	ANTI-PHOSPHATIDYLSERINE (PHOSPHOLIPID) ANTIBODY	20.86	20.86	7/1/2006
86155		3	CHEMOTHAXIS ASSAY SPECIFY METHOD	22.33	22.33	7/1/2006
86156		3	COLD AGGLUTININ; SCREEN	8.97	8.97	7/1/2006
86157		3	COLD AGGULTININ; TITER	8.97	8.97	7/1/2006
86160		3	COMPLEMENT; ANTIGEN, EACH COMPONENT	16.78	16.78	7/1/2006
86161		3	COMPLEMENT; FUNCTIONAL ACTIVITY, EACH	16.78	16.78	7/1/2006
86162		3	COMPLEMENT TOTAL	28.39	28.39	7/1/2006
86171		3	COMPLEMENT FIXATION TEST, EACH	14.00	14.00	7/1/2006
86185		3	COUNTERIMMUNOELECTROPHORESIS, EACH ANTIGEN	12.50	12.50	7/1/2006
86200		3	CYCLIC CITRULLINATED PEPTIDE (CCP), ANTIBODY	18.09	18.09	7/1/2006
86215		3	ASH TITER	18.51	18.51	7/1/2006

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86225		3	DEOXYRIBONUCLEIC ACID (DNA) ANTIBODY; NATIVE OR DOUBLE STRANDED	19.20	19.20	7/1/2006
86226		3	DNA ANTIBODY; SINGLE STRANDED	16.92	16.92	7/1/2006
86235		3	EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY	25.06	25.06	7/1/2006
86243		3	FC RECEPTOR	28.68	28.68	7/1/2006
86255		3	FLUORESCENT NONINFECTIOUS AGENT ANTIBODY; SCREEN, EACH ANTIBODY	16.84	16.84	7/1/2006
86255	26	5	FLUORESCENT NONINFECTIOUS AGENT ANTIBODY; SCREEN, EACH ANTIBODY	16.84	16.84	7/1/2006
86256		3	FLOURESCENT ANTIBODY TITER	16.84	16.84	7/1/2006
86256	26	5	FLOURESCENT ANTIBODY TITER	18.52	18.52	7/1/2006
86277		3	GROWTH HORMONE, HUMAN (HGH), ANTIBODY	21.99	21.99	7/1/2006
86280		3	HEMAGGLUTINATION INHIBITON	11.44	11.44	7/1/2006
86294		3	IMMUNOASSAY FOR TUMOR ANTIGEN, QUALITATIVE OR SEMIQUANTITATIVE (EG, BLADDER	27.41	27.41	7/1/2006
86300		3	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 15-3 (27.29)	29.07	29.07	7/1/2006
86301		3	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 19-9	29.07	29.07	7/1/2006
86304		3	IMMUNOASSAY FOR TUMOR ANTIGEN, QUANTITATIVE; CA 125	29.07	29.07	7/1/2006
86308		3	HETEROPHILE ANTIBODIES; SCREENING	7.23	7.23	7/1/2006
86309		3	HETEROPHILE ANTIBODIES; TITER	9.04	9.04	7/1/2006
86310		3	HETEROPHILE ABSORPTION	10.30	10.30	7/1/2006
86316		3	IMMUNOASSAY FOR TUMOR ANTIGEN; OTHER ANTIGEN, QUANTITATIVE (EG, CA 50, 72-4,	29.07	29.07	7/1/2006
86317		3	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUANTITATIVE, NOT OTHERWISE SPECIFIED	20.28	20.28	7/1/2006
86318		3	IMMUNOASSAY FOR INFECTIOUS AGENT ANTIBODY, QUALITATIVE OR SEMIQUANTITATIVE,	18.09	18.09	7/1/2006
86320		3	IMMUNOELECTROPHORESIS; SERUM	31.24	31.24	7/1/2006
86320	26	5	IMMUNOELECTROPHORESIS; SERUM	18.52	18.52	7/1/2006
86325		3	IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG, URINE, CEREBROSPINAL FLUID) WITH	31.24	31.24	7/1/2006
86325	26	5	IMMUNOELECTROPHORESIS; OTHER FLUIDS (EG, URINE, CEREBROSPINAL FLUID) WITH	17.86	17.86	7/1/2006
86327		3	IMMUNOELECTROPHORESIS SERUM EACH SPECIMEN PLATE	31.70	31.70	7/1/2006
86327	26	5	IMMUNOELECTROPHORESIS SERUM EACH SPECIMEN PLATE	21.54	21.54	7/1/2006
86329		3	IMMUNODIFFUSION, NOT ELSEWHERE SPECIFIED	19.62	19.62	7/1/2006
86331		3	GEL DIFFUSION QUALITATIVE OUCHTERLONY	15.86	15.86	7/1/2006
86332		3	IMMUNE COMPLEX ASSAY	34.05	34.05	7/1/2006
86334		3	IMMUNOFIXATION ELECTOPHORESIS	31.21	31.21	7/1/2006
86334	26	5	IMMUNOFIXATION ELECTOPHORESIS	18.52	18.52	7/1/2006
86335		3	IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)	38.95	38.95	7/1/2006
86335	26	5	IMMUNOFIXATION ELECTROPHORESIS; OTHER FLUIDS WITH CONCENTRATION (EG, URINE, CSF)	18.19	18.19	7/1/2006
86337		3	INSULIN ANTIBODIES	29.92	29.92	7/1/2006
86340		3	INTRINSIC FACTOR ANTIBODIES	21.06	21.06	7/1/2006
86341		3	ISLET CELL ANTIBODY	18.77	18.77	7/1/2006
86343		3	LEUKOCYTE HISTAMINE RELEASE	17.41	17.41	7/1/2006
86344		3	LEUKOCYTE PHAGOCYTOSIS	11.16	11.16	7/1/2006
86353		3	LYMPHOCYTE TRANSFORMATION, MITOGEN (PHYTOMITOGEN) OR ANTIGEN INDUCED BLASTOGE	68.49	68.49	7/1/2006
86355		3	B CELLS, TOTAL COUNT	52.70	52.70	7/1/2006
86357		3	NATURAL KILLER (NK) CELLS, TOTAL COUNT	52.70	52.70	7/1/2006
86359		3	T CELLS;	52.70	52.70	7/1/2006
86360		3	T CELLS; ABSOLUTE CD4 AND CD8 COUNT, INCLUDING RATIO	65.65	65.65	7/1/2006
86361		3	T CELLS; ABSOLUTE CD4 COUNT	37.41	37.41	7/1/2006
86367		3	STEM CELLS (IE, CD34), TOTAL COUNT	52.70	52.70	7/1/2006
86376		3	MICROSOMAL ANTIBODIES (EG, THRYOID OR LIVER-KIDNEY), EACH	19.36	19.36	7/1/2006
86378		3	MIGRATION INHIBITORY FACTOR TEST	27.51	27.51	7/1/2006
86382		3	NEUTRALIZATION TEST VIRAL	23.62	23.62	7/1/2006
86384		3	NBT TEST	15.91	15.91	7/1/2006
86403		3	PARTICLE AGGLUTINATION; SCREEN, EACH ANTIBODY	14.24	14.24	7/1/2006
86406		3	PARTICLE AGGLUTINATION;	14.87	14.87	7/1/2006
86430		3	RHEUMATOID FACTOR; QUALITATIVE	7.93	7.93	7/1/2006
86431		3	RHEUMATOID FACTOR; QUANTITATIVE	7.93	7.93	7/1/2006
86480		3	TUBERCULOSIS TEST, CELL MEDIATED IMMUNITY MEASUREMENT OF GAMMA INTERFERON AN	86.59	86.59	7/1/2006
86485		3	SKIN TEAT; CANDIDA	7.74	7.74	7/1/2006
86490		3	SENSITIVITY TEST COCCIDIOIDOMYCOSIS	10.07	10.07	7/1/2006
86510		3	SENSITIVITY TEST HISTOPLASMOSIS	11.06	11.06	7/1/2006
86580		3	SENSITIVITY TEST TUBERCULOSIS	8.74	8.74	7/1/2006
86590		3	STREPTOKINASE ANTIBODY	15.41	15.41	7/1/2006
86592		3	SYPHILIS, PRECIPITATION OR FLOCCULATION TESTS	5.96	5.96	7/1/2006
86593		3	SYPHILLIS PRECIPITATION FLOCCULATION TEST QUANTITI	6.16	6.16	7/1/2006
86602		3	ANTIBODY; ACTINOMYCES	14.22	14.22	7/1/2006
86603		3	ANTIBODY; ADENOVIRUS	17.81	17.81	7/1/2006
86606		3	ANTIBODY; ASPIRGILLUS	17.81	17.81	7/1/2006
86609		3	ANTIBODY; BACTERIUM, NOT ELSEWHERE SPECIFIED	17.81	17.81	7/1/2006
86611		3	ANTIBODY; BARTONELLA	14.22	14.22	7/1/2006
86612		3	ANTIBODY; BLASTOMYCES	17.81	17.81	7/1/2006
86615		3	ANTIBODY; BORDETELLA	18.43	18.43	7/1/2006
86617		3	ANTIBODY;	16.54	16.54	7/1/2006
86618		3	ANTIBODY; LYME DISEASE	20.28	20.28	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
86619		3	ANTIBODY; BORRELIA	18.69	18.69	7/1/2006
86622		3	ANTIBODY; BRUCELLA	10.53	10.53	7/1/2006
86625		3	ANTIBODY; CAMPYLOBACTOR	10.53	10.53	7/1/2006
86628		3	ANTIBODY; CANDIDA	15.86	15.86	7/1/2006
86631		3	ANTIBODY; CHLAMYDIA	16.52	16.52	7/1/2006
86632		3	ANTIBODY; CHLAMIDA, IGM	17.74	17.74	7/1/2006
86635		3	ANTIBODY, COCCIDIOIDES	16.03	16.03	7/1/2006
86638		3	ANTIBODY; Q FEVER	16.94	16.94	7/1/2006
86641		3	ANTIBODY; CRYPTOCOCCUS	20.14	20.14	7/1/2006
86644		3	ANTIBODY; CMV	20.08	20.08	7/1/2006
86645		3	ANTIBODY; CMV, IGM	20.28	20.28	7/1/2006
86648		3	ANTIBODY; DIPTHERIA	20.28	20.28	7/1/2006
86651		3	ANTIBODY; ENCEPHALITIS, CALIFORNIA	18.43	18.43	7/1/2006
86652		3	ANTIBODY; ENCEPHALITIS, EASTERN EQUINE	18.43	18.43	7/1/2006
86653		3	ANTIBODY; ENCEPHALITIS ST, LOUIS	18.43	18.43	7/1/2006
86654		3	ANTIBODY;ENCEPHALITIS WESTERN EQUINE	18.43	18.43	7/1/2006
86658		3	ANTIBODY; ENTEROVIRUS	17.81	17.81	7/1/2006
86663		3	ANTIBODY; EPSTEIN-BARR, EARLY ANTIGEN	18.33	18.33	7/1/2006
86664		3	ANTIBODY; EPSTEIN-BARR, NUCLEAR ANTIGEN	20.28	20.28	7/1/2006
86665		3	ANTIBODY; EPSTEIN-BARR VIRAL CAPSID	22.70	22.70	7/1/2006
86666		3	ANTIBODY; EHRLICHIA	14.22	14.22	7/1/2006
86668		3	ANTIBODY; FRACISELLA TULARENSIS	14.53	14.53	7/1/2006
86671		3	ANTIBODY; FUNGUS	17.13	17.13	7/1/2006
86674		3	ANTIBODY; GIARDIA LAMBLIA	20.28	20.28	7/1/2006
86677		3	ANTIBODY; HELICOBACTER PYLOUI	20.28	20.28	7/1/2006
86682		3	ANTIBODY; HELMINTH	18.17	18.17	7/1/2006
86684		3	ANTIBODY; HEMOPHILUS INFLUENZA	20.28	20.28	7/1/2006
86687		3	ANTIBODY; HTLV I	11.72	11.72	7/1/2006
86688		3	ANTIBODY; HTLV-IT	16.43	16.43	7/1/2006
86689		3	HTLV I, ANTIBODY DETECTION; CONFIRMATORY TEST	27.05	27.05	7/1/2006
86692		3	ANTOBODY; HEPATITIS, DELTA AGENT	20.28	20.28	7/1/2006
86694		3	ANTIBODY; HERPES SIMPLEX, NON-SPECIFIC TYPE TEST	20.08	20.08	7/1/2006
86695		3	ANTIBODY; HERPES SIMPLEX. TYPE I	18.43	18.43	7/1/2006
86696		3	ANTIBODY; HERPES SIMPLEX, TYPE 2	27.05	27.05	7/1/2006
86698		3	ANTOBODY; HISTOPLASM	17.46	17.46	7/1/2006
86701		3	ANTIBODY; HIV-1	12.41	12.41	7/1/2006
86702		3	ANTIBODY; HIV-2	16.43	16.43	7/1/2006
86703		3	ANTIBODY; HIV-1 & HIV-2, SINGLE ASSAY	16.43	16.43	7/1/2006
86704		3	HEPATITIS B CORE ANTIBODY (HBCAB), TOTAL	16.26	16.26	7/1/2006
86705		3	HEPATITIS B CORE ANTIBODY (HBCAB); IGM ANTIBODY	16.44	16.44	7/1/2006
86706		3	HEPATITIS B SURFACE ANTIBODY (HBSAB)	15.01	15.01	7/1/2006
86707		3	HEPATITIS BE ANTIBODY (HBEAB)	16.16	16.16	7/1/2006
86708		3	HEPATITIS A ANTIBODY (HAAB), TOTAL	17.31	17.31	7/1/2006
86709		3	HEPATITIS A ANTIBODY (HAAB); IGM ANTIBODY	15.73	15.73	7/1/2006
86710		3	ANTIBODY, INFLUENZA VIRUS	18.94	18.94	7/1/2006
86713		3	ANTIBODY; LEGIONELLA	21.39	21.39	7/1/2006
86717		3	ANTIBODY; LEISHMANIA	11.71	11.71	7/1/2006
86720		3	ANTIBODY; LEPTOSPIRA	13.78	13.78	7/1/2006
86723		3	ANTIBODY; LISTERIA MONOCYTOGENES	18.43	18.43	7/1/2006
86727		3	ANTIBODY; LYMPHOCYTIC CHORIOMENINGITIS	17.81	17.81	7/1/2006
86729		3	ANTIBODY; LYMPHOGRANULOMA VENERUM	16.69	16.69	7/1/2006
86732		3	ANTIBODY; MUCORMYCOSIS	18.43	18.43	7/1/2006
86735		3	ANTIBODY; MUMPS	18.23	18.23	7/1/2006
86738		3	ANTIBODY; MYCOPLASMA	18.51	18.51	7/1/2006
86744		3	ANTIBODY; NOCARDIA	18.43	18.43	7/1/2006
86747		3	ANTIBODY; PARVOVIRUS	20.28	20.28	7/1/2006
86750		3	ANTIBODY; MALARIA	18.43	18.43	7/1/2006
86753		3	ANTIBODY; PROTOZOA, NOT ELSEWHERE SPECI FIED	11.71	11.71	7/1/2006
86756		3	ANTIBODY; RESPIRATORY SYNCYTIAL VIRUS	18.01	18.01	7/1/2006
86757		3	ANTIBODY; RICKETTSIA	27.05	27.05	7/1/2006
86759		3	ANTIBODY; ROTAVIRUS	17.81	17.81	7/1/2006
86762		3	ANTIBODY; RUBELLA	20.08	20.08	7/1/2006
86765		3	ANTIBODY; RUBEOLA	18.00	18.00	7/1/2006
86768		3	ANTIBODY; SALMONELLA	18.43	18.43	7/1/2006
86771		3	ANTIBODY; SHIGELLA	18.43	18.43	7/1/2006
86774		3	ANTIBODY; TETANUS	20.28	20.28	7/1/2006
86777		3	ANTIBODY; TOXOPLASMA	20.08	20.08	7/1/2006
86778		3	ANTIBODY; TOXOPLASMA, IGM	20.12	20.12	7/1/2006
86781		3	ANTIBODY; TREPONEMA PALLIDUM, CONFIRM. TEST	18.50	18.50	7/1/2006
86784		3	ANTIBODY; TRICHINELLA	17.55	17.55	7/1/2006

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86787		3	ANTIBODY; VARICELLA-ZOSTER	18.00	18.00	7/1/2006
86790		3	ANTIBODY; VIRUS, NOT ELSEWHERE SPECIFIED	18.00	18.00	7/1/2006
86793		3	ANTIBODY; YERSINIA	18.43	18.43	7/1/2006
86800		3	THYROGLOBULIN ANTIBODY	22.22	22.22	7/1/2006
86803		3	HEPATITIS C ANTIBODY;	19.94	19.94	7/1/2006
86804		3	HEPATITIS C ANTIBODY; CONFIRMATORY TEST (EG, IMMUNOBLOT)	16.54	16.54	7/1/2006
86805		3	LYMPHOCYTOTOXICITY ASSAY, VISUAL XM; W/ TITRATION	73.05	73.05	7/1/2006
86806		3	LYMPHOCYTOTOXICITY ASSAY, VISUAL XM; W/O TITRATION	66.49	66.49	7/1/2006
86807		3	SERUM SCREENING FOR CYTOTOXIC PRA; STANDARD METHOD	55.29	55.29	7/1/2006
86808		3	SERUM SCREENING FOR CYTOTOXIC PRA; QUICK METHOD	41.47	41.47	7/1/2006
86812		3	TISSUE TYPING HLA TYPING A,B, OR C SINGLE ANTIGEN	36.06	36.06	7/1/2006
86813		3	TISSUE TYPING HLA TYPING A,B, &/OR C MULT ANTIGENS	81.02	81.02	7/1/2006
86816		3	HLA TYPING; DR/DQ, SINGLE ANTIGEN	38.92	38.92	7/1/2006
86817		3	HLA TYPING; DR/DQ, MULTIPLE ANTIGENS	89.95	89.95	7/1/2006
86821		3	TISSUE TYPING LYMPNOCYTE CULTURE MIXED (MLC)	78.88	78.88	7/1/2006
86822		3	TISSUE TYPING LYMPHOCYTE CULTURE PRIMED (PLC)	51.07	51.07	7/1/2006
86850		3	ANTIBODY SCREEN, RBC, EACH SERUM TECHNIQUE	15.61	15.61	7/1/2006
86860		3	ANTIBODY ELUTION, EACH ELUTION	15.61	15.61	7/1/2006
86870		3	ANTIBODY ID, EACH PANEL FOR EACH SERUM TECHNIQUE	27.57	27.57	7/1/2006
86880		3	COOMBS TEST; DIRECT, EACH ANTISERUM	7.50	7.50	7/1/2006
86885		3	ANTIHUMAN GLOBULIN TEST INDIRECT, QUALITATIVE EACH ANTISERUM	7.99	7.99	7/1/2006
86886		3	COOMBS TEST, INDIRECT TITER, EACH ANTISERUM	7.23	7.23	7/1/2006
86900		3	BLOOD TYPING; ABO	4.17	4.17	7/1/2006
86901		3	BLOOD TYPING; RH (D)	7.96	7.96	7/1/2006
86903		3	BLOOD TYPING; ANTIGEN SCREENING, PER UNIT SCREENED	13.19	13.19	7/1/2006
86904		3	BLOOD TYPING; ANTIGEN SCREENING, PER UNIT SCREENED	13.28	13.28	7/1/2006
86905		3	BLOOD TYPING; RBC ANTIGENS, EACH	5.34	5.34	7/1/2006
86906		3	BLOOD TYPING; RH PHENOTYPING, COMPLETE	10.83	10.83	7/1/2006
86940		3	HEMOLYSINS/AGGLUTININS, AUTO, SCREEN, EACH	11.46	11.46	7/1/2006
86941		3	HEMOLYSINS/ AGGLUTININS, EACH; INCUBATED	16.92	16.92	7/1/2006
87001		3	ANIMAL INOCULATION SMALL ANIMAL W/OBSERVATION	18.47	18.47	7/1/2006
87003		3	ANIMAL INNOCULATION SMALL ANIMAL W/OBSERVATION AND	23.52	23.52	7/1/2006
87015		3	CONCENTRATION (ANY TYPE), FOR INFECTIOUS AGENTS	9.33	9.33	7/1/2006
87040		3	CULTURE, BACTERIAL; BLOOD, WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF	14.42	14.42	7/1/2006
87045		3	CULTURE, BACTERIAL; FECES, WITH ISOLATION AND PRELIMINARY EXAMINATION (EG, KIA,	13.18	13.18	7/1/2006
87046		3	CULTURE, BACTERIAL; STOOL, ADDITIONAL PATHOGENS, ISOLATION AND PRELIMINARY	13.18	13.18	7/1/2006
87070		3	CULTURE, BACTERIAL; ANY OTHER SOURCE EXCEPT URINE, BLOOD OR STOOL, WITH	12.03	12.03	7/1/2006
87071		3	CULTURE, BACTERIAL; QUANTITATIVE, AEROBIC WITH ISOLATION AND PRESUMPTIVE	13.18	13.18	7/1/2006
87073		3	CULTURE, BACTERIAL; QUANTITATIVE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE	13.18	13.18	7/1/2006
87075		3	CULTURE, BACTERIAL; ANY SOURCE, ANAEROBIC WITH ISOLATION AND PRESUMPTIVE	13.22	13.22	7/1/2006
87076		3	CULTURE, BACTERIAL; ANAEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR	11.29	11.29	7/1/2006
87077		3	CULTURE, BACTERIAL; AEROBIC ISOLATE, ADDITIONAL METHODS REQUIRED FOR DEFINITIVE	11.29	11.29	7/1/2006
87081		3	CULTURE, PRESUMPTIVE, PATHOGENIC ORGANISMS, SCREENING ONLY;	8.06	8.06	7/1/2006
87084		3	CULTURE W COLONY ESTIMATION FROM DENSITY CHART INC	12.03	12.03	7/1/2006
87086		3	CULTURE, BACTERIAL; QUANTITATIVE COLONY COUNT, URINE	11.28	11.28	7/1/2006
87088		3	CULTURE, BACTERIAL; WITH ISOLATION AND PRESUMPTIVE IDENTIFICATION OF ISOLATES,	11.31	11.31	7/1/2006
87101		3	CULTURE, FUNGI (MOLD OR YEAST) ISOLATION, WITH PRESUMPTIVE IDENTIFICATION OF	10.77	10.77	7/1/2006
87102		3	CULTURE FUNGI ISOLATION OTHER SOURCE	11.74	11.74	7/1/2006
87103		3	BLOOD CULTURE FOR FUNGI	12.60	12.60	7/1/2006
87106		3	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; YEAST	14.42	14.42	7/1/2006
87107		3	CULTURE, FUNGI, DEFINITIVE IDENTIFICATION, EACH ORGANISM; MOLD	14.42	14.42	7/1/2006
87109		3	CULTURE MYCOPLASM ANY SOURCE	21.50	21.50	7/1/2006
87110		3	CULTURE, CHLAMYDIA, ANY SOURCE	27.37	27.37	7/1/2006
87116		3	CULTURE, TUBERCLE OR OTHER ACID-FAST BACILLI (EG, TB, AFB, MYCOBACTERIA) ANY	15.10	15.10	7/1/2006
87118		3	CULTURE, MYCOBACTERIAL, DEFINITIVE IDENTIFICATION, EACH ISOLATE	15.29	15.29	7/1/2006
87140		3	CULTURE, TYPING; IMMUNOFLUORESCENT METHOD, EACH ANTISERUM	7.79	7.79	7/1/2006
87143		3	CULTURE, TYPING; GAS LIQUID CHROMATOGRAPHY (GLC) OR HIGH PRESSURE LIQUID	17.51	17.51	7/1/2006
87147		3	CULTURE, TYPING; IMMUNOLOGIC METHOD, OTHER THAN IMMUNOFLUORESENCE (EG,	7.23	7.23	7/1/2006
87149		3	CULTURE, TYPING; IDENTIFICATION BY NUCLEIC ACID PROBE	28.02	28.02	7/1/2006
87152		3	CULTURE, TYPING; IDENTIFICATION BY PULSE FIELD GEL TYPING	7.31	7.31	7/1/2006
87158		3	CULTURE TYPING OTHER METHODS	7.31	7.31	7/1/2006
87164		3	DARKFIELD EXAMINATION	8.85	8.85	7/1/2006
87164	26	5	DARKFIELD EXAMINATION	17.53	17.53	7/1/2006
87166		3	DARK FIELD EXAM ANY SOURCE W/O COLLECTION	15.78	15.78	7/1/2006
87168		3	MACROSCOPIC EXAMINATION; ARTHROPOD	5.33	5.33	7/1/2006
87169		3	MACROSCOPIC EXAMINATION; PARASITE	5.33	5.33	7/1/2006
87172		3	PINWORM EXAM (EG, CELLOPHANE TAPE PREP)	5.33	5.33	7/1/2006
87176		3	HOMOGENIZATION, TISSUE, FOR CULTURE	8.22	8.22	7/1/2006
87177		3	OVA AND PARASITES	12.43	12.43	7/1/2006
87181		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; AGAR DILUTION METHOD, PER AGENT	6.64	6.64	7/1/2006

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87184		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; DISK METHOD, PER PLATE (12 OR	9.63	9.63	7/1/2006
87185		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; ENZYME DETECTION (EG, BETA	6.64	6.64	7/1/2006
87186		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MICRODILUTION OR AGAR DILUTION	12.08	12.08	7/1/2006
87187		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MICRODILUTION OR AGAR DILUTION,	14.48	14.48	7/1/2006
87188		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MACROBROTH DILUTION METHOD, EACH	9.27	9.27	7/1/2006
87190		3	SUSCEPTIBILITY STUDIES, ANTIMICROBIAL AGENT; MYCOBACTERIA, PROPORTION METHOD,	7.90	7.90	7/1/2006
87197		3	SERUM BACTERICIDAL TITER	20.99	20.99	7/1/2006
87205		3	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; GRAM OR GIEMSA STAIN FOR BACTERIA,	5.96	5.96	7/1/2006
87206		3	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; FLUORESCENT AND/OR ACID FAST STAIN	7.50	7.50	7/1/2006
87207		3	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES	8.37	8.37	7/1/2006
87207	26	5	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; SPECIAL STAIN FOR INCLUSION BODIES	18.85	18.85	7/1/2006
87209		3	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; COMPLEX SPECIAL STAIN (EG, TRICHR	25.11	25.11	7/1/2006
87210		3	SMEAR, PRIMARY SOURCE WITH INTERPRETATION; WET MOUNT FOR INFECTIOUS AGENTS (EG,	5.33	5.33	7/1/2006
87220		3	TISSUE EXAMINATION BY KOH SLIDE OF SAMPLES FROM SKIN, HAIR, OR NAILS FOR FUNGI	5.96	5.96	7/1/2006
87230		3	TISSUE CULTURE LYMPHOCYTE	27.59	27.59	7/1/2006
87250		3	VIRUS ISOLATION; INOCULATION OF EMBRYONATED EGGS, OR SMALL ANIMAL, INCLUDES	22.76	22.76	7/1/2006
87252		3	VIRUS ISOLATION; TISSUE CULTURE INOCULATION, OBSERVATION, AND PRESUMPTIVE	22.76	22.76	7/1/2006
87253		3	VIRUS ISOLATION; TISSUE CULTURE, ADDITIONAL STUDIES OR DEFINITIVE	22.76	22.76	7/1/2006
87254		3	VIRUS ISOLATION; SHELL VIAL, INCLUDES IDENTIFICATION WITH IMMUNOFLUORESCENCE	22.76	22.76	7/1/2006
87255		3	VIRUS ISOLATION; INCLUDING IDENTIFICATION BY NON-IMMUNOLOGIC METHOD, OTHER THAN	34.14	34.14	7/1/2006
87260		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; ADENOVIRUS	16.01	16.01	7/1/2006
87265		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87267		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; ENTEROVIRUS	16.01	16.01	7/1/2006
87269		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, GIARDIA	16.01	16.01	7/1/2006
87270		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87271		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; CYTOMEGALO	16.01	16.01	7/1/2006
87272		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87273		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; HERPES	16.01	16.01	7/1/2006
87274		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; HERPES	16.01	16.01	7/1/2006
87275		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; INFLUENZA B	16.01	16.01	7/1/2006
87276		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87277		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; LEGIONELLA	16.01	16.01	7/1/2006
87278		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87279		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE;	16.01	16.01	7/1/2006
87280		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87281		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; PNEUMOCYST	16.01	16.01	7/1/2006
87283		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; RUBEOLA	16.01	16.01	7/1/2006
87285		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87290		3	INFECTIOUS AGENT ANTIGEN DETECTION BY DIRECT FLUORESCENT ANTIBODY TECHNIQUE;	16.01	16.01	7/1/2006
87299		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE; NOT	16.01	16.01	7/1/2006
87300		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOFLUORESCENT TECHNIQUE, POLYVALENT	16.01	16.01	7/1/2006
87301		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87320		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87324		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87327		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87328		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87329		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87332		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87335		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87336		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87337		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87338		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	20.10	20.10	7/1/2006
87339		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87340		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	13.00	13.00	7/1/2006
87341		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	13.00	13.00	7/1/2006
87350		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	15.46	15.46	7/1/2006
87380		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	22.94	22.94	7/1/2006
87385		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87390		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	24.65	24.65	7/1/2006
87391		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	24.65	24.65	7/1/2006
87400		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87420		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87425		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87427		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87430		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE, QUALITATIVE	16.01	16.01	7/1/2006
87449		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE QUALITATIVE	16.01	16.01	7/1/2006
87450		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE QUALITATIVE	10.68	10.68	7/1/2006
87451		3	INFECTIOUS AGENT ANTIGEN DETECTION BY ENZYME IMMUNOASSAY TECHNIQUE QUALITATIVE	10.68	10.68	7/1/2006
87470		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE	28.02	28.02	7/1/2006
87471		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE	34.26	34.26	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
87472		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BARTONELLA HENSELAE	45.50	45.50	7/1/2006
87475		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI,	28.02	28.02	7/1/2006
87476		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI,	34.26	34.26	7/1/2006
87477		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); BORRELIA BURGDORFERI,	45.50	45.50	7/1/2006
87480		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES,	28.02	28.02	7/1/2006
87481		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES,	34.26	34.26	7/1/2006
87482		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CANDIDA SPECIES,	45.50	45.50	7/1/2006
87485		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA PNEUMONIAE,	28.02	28.02	7/1/2006
87486		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA PNEUMONIAE,	34.26	34.26	7/1/2006
87487		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA PNEUMONIAE,	45.50	45.50	7/1/2006
87490		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	28.02	28.02	7/1/2006
87491		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	34.26	34.26	7/1/2006
87492		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CHLAMYDIA TRACHOMATIS,	45.50	45.50	7/1/2006
87495		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CYTOMEGALOVIRUS,	28.02	28.02	7/1/2006
87496		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CYTOMEGALOVIRUS,	34.26	34.26	7/1/2006
87497		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); CYTOMEGALOVIRUS,	45.50	45.50	7/1/2006
87510		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS,	28.02	28.02	7/1/2006
87511		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS,	34.26	34.26	7/1/2006
87512		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); GARDNERELLA VAGINALIS,	45.50	45.50	7/1/2006
87515		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS B VIRUS,	28.02	28.02	7/1/2006
87516		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS B VIRUS,	34.26	34.26	7/1/2006
87517		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS B VIRUS,	45.50	45.50	7/1/2006
87520		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C, DIRECT	28.02	28.02	7/1/2006
87521		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C, AMPLIFIED	34.26	34.26	7/1/2006
87522		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C,	45.50	45.50	7/1/2006
87525		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS G, DIRECT	28.02	28.02	7/1/2006
87526		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS G, AMPLIFIED	34.26	34.26	7/1/2006
87527		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HEPATITIS G,	45.50	45.50	7/1/2006
87528		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES SIMPLEX VIRUS,	28.02	28.02	7/1/2006
87529		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES SIMPLEX VIRUS,	34.26	34.26	7/1/2006
87530		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES SIMPLEX VIRUS,	45.50	45.50	7/1/2006
87531		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES VIRUS-6, DIRECT	28.02	28.02	7/1/2006
87532		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES VIRUS-6,	34.26	34.26	7/1/2006
87533		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HERPES VIRUS-6,	45.50	45.50	7/1/2006
87534		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-1, DIRECT PROBE	28.02	28.02	7/1/2006
87535		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-1, AMPLIFIED PROBE	34.26	34.26	7/1/2006
87536		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-1, QUANTIFICATION	74.28	74.28	7/1/2006
87537		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-2, DIRECT PROBE	28.02	28.02	7/1/2006
87538		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-2, AMPLIFIED PROBE	34.26	34.26	7/1/2006
87539		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HIV-2, QUANTIFICATION	45.50	45.50	7/1/2006
87540		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); LEGIONELLA	28.02	28.02	7/1/2006
87541		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); LEGIONELLA	34.26	34.26	7/1/2006
87542		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); LEGIONELLA	45.50	45.50	7/1/2006
87550		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA SPECIES,	28.02	28.02	7/1/2006
87551		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA SPECIES,	34.26	34.26	7/1/2006
87552		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA SPECIES,	45.50	45.50	7/1/2006
87555		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	28.02	28.02	7/1/2006
87556		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	34.26	34.26	7/1/2006
87557		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	45.50	45.50	7/1/2006
87560		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	28.02	28.02	7/1/2006
87561		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	34.26	34.26	7/1/2006
87562		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOBACTERIA	45.50	45.50	7/1/2006
87580		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOPLASMA PNEUMONIAE,	28.02	28.02	7/1/2006
87581		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOPLASMA PNEUMONIAE,	34.26	34.26	7/1/2006
87582		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); MYCOPLASMA PNEUMONIAE,	45.50	45.50	7/1/2006
87590		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); NEISSERIA GONORRHOEAE,	28.02	28.02	7/1/2006
87591		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); NEISSERIA GONORRHOEAE,	34.26	34.26	7/1/2006
87592		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); NEISSERIA GONORRHOEAE,	45.50	45.50	7/1/2006
87620		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); PAPILLOMAVIRUS, HUMAN,	28.02	28.02	7/1/2006
87621		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); PAPILLOMAVIRUS, HUMAN,	34.26	34.26	7/1/2006
87622		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); PAPILLOMAVIRUS, HUMAN,	45.50	45.50	7/1/2006
87650		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STREPTOCOCCUS, GROUP	28.02	28.02	7/1/2006
87651		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STREPTOCOCCUS, GROUP	34.26	34.26	7/1/2006
87652		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); STREPTOCOCCUS, GROUP	45.50	45.50	7/1/2006
87660		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); TRICHOMONAS VAGINALIS,	28.02	28.02	7/1/2006
87797		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), NOT OTHERWISE	28.02	28.02	7/1/2006
87798		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), NOT OTHERWISE	34.26	34.26	7/1/2006
87799		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), NOT OTHERWISE	45.50	45.50	7/1/2006
87800		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), MULTIPLE ORGANISMS;	56.03	56.03	7/1/2006
87801		3	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA), MULTIPLE ORGANISMS;	68.52	68.52	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
87802		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIC	16.01	16.01	7/1/2006
87803		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIC	16.01	16.01	7/1/2006
87804		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIC	16.01	16.01	7/1/2006
87807		3	INFECTIOUS AGENT ANTIGEN DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATIC	16.01	16.01	7/1/2006
87810		3	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION;	16.01	16.01	7/1/2006
87850		3	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION;	16.01	16.01	7/1/2006
87880		3	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION;	16.01	16.01	7/1/2006
87899		3	INFECTIOUS AGENT DETECTION BY IMMUNOASSAY WITH DIRECT OPTICAL OBSERVATION; NOT	16.01	16.01	7/1/2006
87900		3	INFECTIOUS AGENT DRUG SUSCEPTIBILITY PHENOTYPE PREDICTION USING REGULARLY UP	113.80	113.80	7/1/2006
87901		3	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA), HIV 1, REVERSE	109.05	109.05	7/1/2006
87902		3	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C	109.05	109.05	7/1/2006
87902	26	5	INFECTIOUS AGENT GENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA); HEPATITIS C	37.37	37.37	7/1/2006
87903		3	INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) WITH DRUG	380.26	380.26	7/1/2006
87904		3	INFECTIOUS AGENT PHENOTYPE ANALYSIS BY NUCLEIC ACID (DNA OR RNA) WITH DRUG	22.76	22.76	7/1/2006
88104		3	CYTOPATHOLOGY,FLD,WASH OR BRUSH, EXCPT CERV OR VAG	49.24	49.24	7/1/2006
88104	26	5	CYTOPATHOLOGY,FLD,WASH OR BRUSH, EXCPT CERV OR VAG	28.57	28.57	7/1/2006
88104	TC	T	CYTOPATHOLOGY,FLD,WASH OR BRUSH, EXCPT CERV OR VAG	20.67	20.67	7/1/2006
88106		3	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG FLTME	65.80	65.80	7/1/2006
88106	26	5	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG FLTME	28.57	28.57	7/1/2006
88106	TC	T	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG FLTME	37.23	37.23	7/1/2006
88107		3	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG SM&FL	79.52	79.52	7/1/2006
88107	26	5	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG SM&FL	38.98	38.98	7/1/2006
88107	TC	T	CYTOPTHLGY,FLD,WASH OR BRUSH,EXPT CER OR VAG SM&FL	40.54	40.54	7/1/2006
88108		3	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	61.16	61.16	7/1/2006
88108	26	5	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	28.57	28.57	7/1/2006
88108	TC	T	CYTOPATHOLOGY, CONCENTRATION TECHNIQUE, SMEARS AND INTERPRETATION (EG,	32.59	32.59	7/1/2006
88112		3	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	108.66	108.66	7/1/2006
88112	26	5	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	59.84	59.84	7/1/2006
88112	TC	T	CYTOPATHOLOGY, SELECTIVE CELLULAR ENHANCEMENT TECHNIQUE WITH INTERPRETATION	48.82	48.82	7/1/2006
88125		3	CYTOPATHOLOGY, FORENSIC	18.76	18.76	7/1/2006
88125	26	5	CYTOPATHOLOGY, FORENSIC	13.23	13.23	7/1/2006
88125	TC	T	CYTOPATHOLOGY, FORENSIC	5.53	5.53	7/1/2006
88130		3	BUCCAL SMEAR	21.02	21.02	7/1/2006
88130	26	5	BUCCAL SMEAR	21.02	21.02	7/1/2006
88140		3	SEX CHROMATIN IDENT PERIPH BLOOD SMEAR	11.17	11.17	7/1/2006
88140	26	5	SEX CHROMATIN IDENT PERIPH BLOOD SMEAR	11.17	11.17	7/1/2006
88141		3	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM); REQUIRING	20.55	20.55	7/1/2006
88142		3	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	28.31	28.31	7/1/2006
88142	26	5	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	12.22	12.22	7/1/2006
88143		3	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN	28.31	28.31	7/1/2006
88147		3	CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL; SCREENING BY AUTOMATED SYSTEM UNDEI	14.76	14.76	7/1/2006
88148		3	CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL; SCREENING BY AUTOMATED SYSTEM WITH	14.76	14.76	7/1/2006
88150		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; MANUAL SCREENING UNDER PHYSICIAN	14.76	14.76	7/1/2006
88152		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND	14.76	14.76	7/1/2006
88153		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND	14.76	14.76	7/1/2006
88154		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL; WITH MANUAL SCREENING AND	14.76	14.76	7/1/2006
88155		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL, DEFINITIVE HORMONAL EVALUATION (EG,	8.37	8.37	7/1/2006
88160		3	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	46.41	46.41	7/1/2006
88160	26	5	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	25.42	25.42	7/1/2006
88160	TC	T	CYTOPATHOLOGY, SMEARS, ANY OTHER SOURCE; SCREENING AND INTERPRETATION	21.00	21.00	7/1/2006
88161		3	CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	50.06	50.06	7/1/2006
88161	26	5	CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	25.42	25.42	7/1/2006
88161	TC	T	CYTOPATHOLOGY,ANY OTHR SOURCE; PREP,SCREEN & INTER	24.64	24.64	7/1/2006
88162		3	CYTOPATHOLOGY, EXTEND STDY INVOLV OVER5SLID &/ORMU	62.30	62.30	7/1/2006
88162	26	5	CYTOPATHOLOGY, EXTEND STDY INVOLV OVER5SLID &/ORMU	38.98	38.98	7/1/2006
88162	TC	T	CYTOPATHOLOGY, EXTEND STDY INVOLV OVER5SLID &/ORMU	23.32	23.32	7/1/2006
88164		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); MANUAL	14.76	14.76	7/1/2006
88165		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); WITH MANUAL	14.76	14.76	7/1/2006
88166		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); WITH MANUAL	14.76	14.76	7/1/2006
88167		3	CYTOPATHOLOGY, SLIDES, CERVICAL OR VAGINAL (THE BETHESDA SYSTEM); WITH MANUAL	14.76	14.76	7/1/2006
88172		3	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC	46.70	46.70	7/1/2006
88172	26	5	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC	30.67	30.67	7/1/2006
88172	TC	T	CYTOPATHOLOGY, EVALUATION OF FINE NEEDLE ASPIRATE; IMMEDIATE CYTOHISTOLOGIC	16.03	16.03	7/1/2006
88173		3	EVAL FN NDL SSPIR W/WO PREP SM; INTERPRET & REPORT	122.54	122.54	7/1/2006
88173	26	5	EVAL FN NDL SSPIR W/WO PREP SM; INTERPRET & REPORT	70.74	70.74	7/1/2006
88173	TC	T	EVAL FN NDL SSPIR W/WO PREP SM; INTERPRET & REPORT	51.80	51.80	7/1/2006
88174		3	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVA	29.85	29.85	7/1/2006
88175		3	CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVA	36.31	36.31	7/1/2006
88182		3	CELL CYCLE OR DNA ANALYSIS	94.92	94.92	7/1/2006
88182	26	5	CELL CYCLE OR DNA ANALYSIS	39.34	39.34	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
88182	TC	T	CELL CYCLE OR DNA ANALYSIS	55.57	55.57	7/1/2006
88184		3	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL	44.18	44.18	7/1/2006
88185		3	FLOW CYTOMETRY, CELL SURFACE, CYTOPLASMIC, OR NUCLEAR MARKER, TECHNICAL	21.66	21.66	7/1/2006
88187		3	FLOW CYTOMETRY, INTERPRETATION; 2 TO 8 MARKERS	64.10	64.10	7/1/2006
88188		3	FLOW CYTOMETRY, INTERPRETATION; 9 TO 15 MARKERS	79.95	79.95	7/1/2006
88189		3	FLOW CYTOMETRY, INTERPRETATION; 16 OR MORE MARKERS	105.36	105.36	7/1/2006
88230		3	TISSUE CULTURE FOR NON-NEOPLASTIC DISEASE	162.77	162.77	7/1/2006
88230	26	5	TISSUE CULTURE FOR NON-NEOPLASTIC DISEASE	122.08	122.08	7/1/2006
88230	TC	T	TISSUE CULTURE FOR NON-NEOPLASTIC DISEASE	40.69	40.69	7/1/2006
88233		3	TISSUE CULTURE, SKIN	196.63	196.63	7/1/2006
88233	26	5	TISSUE CULTURE, SKIN	147.47	147.47	7/1/2006
88233	TC	T	TISSUE CULTURE, SKIN	49.16	49.16	7/1/2006
88235		3	TISSUE CULTURE, PLACENTA	205.74	205.74	7/1/2006
88235	26	5	TISSUE CULTURE, PLACENTA	154.31	154.31	7/1/2006
88235	TC	T	TISSUE CULTURE, PLACENTA	51.44	51.44	7/1/2006
88237		3	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; BONE MARROW, BLOOD CELLS	176.47	176.47	7/1/2006
88237	26	5	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; BONE MARROW, BLOOD CELLS	132.35	132.35	7/1/2006
88237	TC	T	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; BONE MARROW, BLOOD CELLS	44.12	44.12	7/1/2006
88239		3	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; SOLID TUMOR	206.12	206.12	7/1/2006
88239	26	5	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; SOLID TUMOR	154.59	154.59	7/1/2006
88239	TC	T	TISSUE CULTURE FOR NEOPLASTIC DISORDERS; SOLID TUMOR	51.53	51.53	7/1/2006
88245		3	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE SISTER CHROMATED EXCHAN	207.98	207.98	7/1/2006
88245	26	5	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE SISTER CHROMATED EXCHAN	155.99	155.99	7/1/2006
88245	TC	T	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE SISTER CHROMATED EXCHAN	52.00	52.00	7/1/2006
88248		3	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE BREAKAGE, SCORE 50-100	241.96	241.96	7/1/2006
88248	26	5	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE BREAKAGE, SCORE 50-100	181.47	181.47	7/1/2006
88248	TC	T	CHROMOSOME ANALYSIS FOR BREAKAGE SYNDROMES; BASELINE BREAKAGE, SCORE 50-100	60.49	60.49	7/1/2006
88261		3	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING	246.93	246.93	7/1/2006
88261	26	5	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING	185.20	185.20	7/1/2006
88261	TC	T	CHROMOSOME ANALYSIS; COUNT 5 CELLS, 1 KARYOTYPE, WITH BANDING	61.73	61.73	7/1/2006
88262		3	CHROMOSOME ANALYSIS, OPTION III	174.14	174.14	7/1/2006
88262	26	5	CHROMOSOME ANALYSIS, OPTION III	130.61	130.61	7/1/2006
88262	TC	T	CHROMOSOME ANALYSIS, OPTION III	43.54	43.54	7/1/2006
88263		3	CHROMOSOME ANALYSIS	209.97	209.97	7/1/2006
88263	26	5	CHROMOSOME ANALYSIS	157.48	157.48	7/1/2006
88263	TC	T	CHROMOSOME ANALYSIS	52.49	52.49	7/1/2006
88264		3	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	174.14	174.14	7/1/2006
88264	26	5	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	130.61	130.61	7/1/2006
88264	TC	T	CHROMOSOME ANALYSIS; ANALYZE 20-25 CELLS	43.54	43.54	7/1/2006
88267		3	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIOIC VILLUS, 15 CELLS	251.17	251.17	7/1/2006
88267	26	5	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIOIC VILLUS, 15 CELLS	188.38	188.38	7/1/2006
88267	TC	T	CHROMOSOME ANALYSIS, AMNIOTIC FLUID OR CHORIOIC VILLUS, 15 CELLS	62.79	62.79	7/1/2006
88269		3	CHROMOSOME ANALYSIS, AMNIOTIC FLUID	232.38	232.38	7/1/2006
88269	26	5	CHROMOSOME ANALYSIS, AMNIOTIC FLUID	174.29	174.29	7/1/2006
88269	TC	T	CHROMOSOME ANALYSIS, AMNIOTIC FLUID	58.10	58.10	7/1/2006
88271		3	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	20.22	20.22	7/1/2006
88271	26	5	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	15.17	15.17	7/1/2006
88271	TC	T	MOLECULAR CYTOGENETICS; DNA PROBE, EACH (EG, FISH)	5.06	5.06	7/1/2006
88272		3	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 3-5 CELLS	37.41	37.41	7/1/2006
88272	26	5	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 3-5 CELLS	28.06	28.06	7/1/2006
88272	TC	T	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 3-5 CELLS	9.35	9.35	7/1/2006
88273		3	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS	44.89	44.89	7/1/2006
88273	26	5	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS	33.67	33.67	7/1/2006
88273	TC	T	MOLECULAR CYTOGENETICS; IN SITU HYBRIDIZATION, ANALYZE 10-30 CELLS	11.22	11.22	7/1/2006
88274		3	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	48.63	48.63	7/1/2006
88274	26	5	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	36.47	36.47	7/1/2006
88274	TC	T	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 25-99 CELLS	12.16	12.16	7/1/2006
88275		3	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	56.11	56.11	7/1/2006
88275	26	5	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	42.08	42.08	7/1/2006
88275	TC	T	MOLECULAR CYTOGENETICS; INTERPHASE IN SITU HYBRIDIZATION, ANALYZE 100-300 CELLS	14.03	14.03	7/1/2006
88280		3	CHROM ANALYSIS ADDITIONAL KAROTYPING	35.07	35.07	7/1/2006
88280	26	5	CHROM ANALYSIS ADDITIONAL KAROTYPING	26.30	26.30	7/1/2006
88280	TC	T	CHROM ANALYSIS ADDITIONAL KAROTYPING	8.77	8.77	7/1/2006
88283		3	BANDING FOR CHROMOSOME ANALYSIS	26.91	26.91	7/1/2006
88283	26	5	BANDING FOR CHROMOSOME ANALYSIS	20.18	20.18	7/1/2006
88283	TC	T	BANDING FOR CHROMOSOME ANALYSIS	6.73	6.73	7/1/2006
88285		3	CHROMOSOME ANALYSIS, ADDITIONAL CELLS COUNTED, EACH STUDY	26.54	26.54	7/1/2006
88285	26	5	CHROMOSOME ANALYSIS, ADDITIONAL CELLS COUNTED, EACH STUDY	19.91	19.91	7/1/2006
88285	TC	T	CHROMOSOME ANALYSIS, ADDITIONAL CELLS COUNTED, EACH STUDY	6.64	6.64	7/1/2006
88289		3	HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	47.39	47.39	7/1/2006

Physician Fee Schedule

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
88289	26	5	HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	35.54	35.54	7/1/2006
88289	TC	T	HIGH RESOLUTION FOR CHROMOSOME ANALYSIS	11.85	11.85	7/1/2006
88291		3	CYTOGENETICS AND MOLECULAR CYTOGENETICS, INTERPRETATION AND REPORT	24.81	24.81	7/1/2006
88300		3	LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	18.25	18.25	7/1/2006
88300	26	5	LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	4.10	4.10	7/1/2006
88300	TC	T	LEVEL I-SURGICAL PATHOLOGY, GROSS EXAM ONLY	14.14	14.14	7/1/2006
88302		3	LEVEL II-SURGICAL PATHOLOGY, GROSS&MICRO EXAM	39.49	39.49	7/1/2006
88302	26	5	LEVEL II-SURGICAL PATHOLOGY, GROSS&MICRO EXAM	6.90	6.90	7/1/2006
88302	TC	T	LEVEL II-SURGICAL PATHOLOGY, GROSS&MICRO EXAM	32.59	32.59	7/1/2006
88304		3	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	52.33	52.33	7/1/2006
88304	26	5	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	11.13	11.13	7/1/2006
88304	TC	T	LEVEL III - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	41.20	41.20	7/1/2006
88305		3	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	91.88	91.88	7/1/2006
88305	26	5	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	38.62	38.62	7/1/2006
88305	TC	T	LEVEL IV - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	53.26	53.26	7/1/2006
88307		3	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	164.68	164.68	7/1/2006
88307	26	5	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	81.15	81.15	7/1/2006
88307	TC	T	LEVEL V - SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION	83.53	83.53	7/1/2006
88309		3	LEVEL VI-SURGICLA PATHOLOGY, GROSS & MICRO EXAM	231.05	231.05	7/1/2006
88309	26	5	LEVEL VI-SURGICLA PATHOLOGY, GROSS & MICRO EXAM	116.06	116.06	7/1/2006
88309	TC	T	LEVEL VI-SURGICLA PATHOLOGY, GROSS & MICRO EXAM	114.99	114.99	7/1/2006
88311		3	DECALCIFICATION PROCEDURE	16.72	16.72	7/1/2006
88311	26	5	DECALCIFICATION PROCEDURE	12.18	12.18	7/1/2006
88311	TC	T	DECALCIFICATION PROCEDURE	4.54	4.54	7/1/2006
88312		3	SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	70.48	70.48	7/1/2006
88312	26	5	SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	27.52	27.52	7/1/2006
88312	TC	T	SPECIAL STAINS; GROUP I FOR MICROORGANISMS, EACH	42.96	42.96	7/1/2006
88313		3	GROUP II, ALL OTHER,EXCPT IMMUNOCYTOCHEM &IMMUNOPE	50.50	50.50	7/1/2006
88313	26	5	GROUP II, ALL OTHER,EXCPT IMMUNOCYTOCHEM &IMMUNOPE	12.18	12.18	7/1/2006
88313	TC	T	GROUP II, ALL OTHER,EXCPT IMMUNOCYTOCHEM &IMMUNOPE	38.32	38.32	7/1/2006
88314		3	GROUP II, HISTOCHEMICAL STAINING W/FROZEN SECTION	85.69	85.69	7/1/2006
88314	26	5	GROUP II, HISTOCHEMICAL STAINING W/FROZEN SECTION	22.96	22.96	7/1/2006
88314	TC	T	GROUP II, HISTOCHEMICAL STAINING W/FROZEN SECTION	62.73	62.73	7/1/2006
88318		3	DETERMINATIVE HISTOCHEMISTRY IDENTIFY CHEMICAL COMPONENTS	70.46	70.46	7/1/2006
88318	26	5	DETERMINATIVE HISTOCHEMISTRY IDENTIFY CHEMICAL COMPONENTS	21.54	21.54	7/1/2006
88318	TC	T	DETERMINATIVE HISTOCHEMISTRY IDENTIFY CHEMICAL COMPONENTS	48.92	48.92	7/1/2006
88319		3	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY/ENZYME /EACH	133.28	133.28	7/1/2006
88319	26	5	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY/ENZYME /EACH	26.83	26.83	7/1/2006
88319	TC	T	DETERMINATIVE HISTOCHEMISTRY OR CYTOCHEMISTRY/ENZYME /EACH	106.45	106.45	7/1/2006
88321		3	CONSULTATION ON TISSUE EXAM	74.12	66.50	7/1/2006
88323		3	CONSULT & REPORT ON REFERRED MAT' REQ.PREP OF SLD	109.17	109.17	7/1/2006
88323	26	5	CONSULT & REPORT ON REFERRED MAT' REQ.PREP OF SLD	68.64	68.64	7/1/2006
88323	TC	T	CONSULT & REPORT ON REFERRED MAT' REQ.PREP OF SLD	40.54	40.54	7/1/2006
88325		3	COMPREHENSIVE REVIEW RECORDS SLIDES W/REPORT	178.92	113.01	7/1/2006
88329		3	OPERATING ROOM CONSULTATION	46.11	34.19	7/1/2006
88331		3	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	81.12	81.12	7/1/2006
88331	26	5	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	60.66	60.66	7/1/2006
88331	TC	T	PATHOLOGY CONSULTATION DURING SURGERY; FIRST TISSUE BLOCK, WITH FROZEN	20.46	20.46	7/1/2006
88332		3	PATHLGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	37.40	37.40	7/1/2006
88332	26	5	PATHLGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	29.98	29.98	7/1/2006
88332	TC	T	PATHLGY CONSULT DUR. SURG; EA ADD TIS BLK W/FRZ SC	7.42	7.42	7/1/2006
88333		3	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	80.82	80.82	7/1/2006
88333	26	5	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	61.68	61.68	7/1/2006
88333	TC	T	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	19.14	19.14	7/1/2006
88334		3	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	42.04	42.04	7/1/2006
88334	26	5	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	30.31	30.31	7/1/2006
88334	TC	T	PATHOLOGY CONSULTATION DURING SURGERY; CYTOLOGIC EXAMINATION (EG, TOUCH PREP	11.72	11.72	7/1/2006
88342		3	IMMUNOCYTOCHEMISTRY EACH ANTIBODY	80.11	80.11	7/1/2006
88342	26	5	IMMUNOCYTOCHEMISTRY EACH ANTIBODY	43.22	43.22	7/1/2006
88342	TC	T	IMMUNOCYTOCHEMISTRY EACH ANTIBODY	36.90	36.90	7/1/2006
88346		3	IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	84.12	84.12	7/1/2006
88346	26	5	IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	43.58	43.58	7/1/2006
88346	TC	T	IMMUNOFLUORESCENT STDY, EA. ANTIBDY; DIRECT METHOD	40.54	40.54	7/1/2006
88347		3	IMMUNOFLUORESCENT STUDY INDIRECT METHOD	73.85	73.85	7/1/2006
88347	26	5	IMMUNOFLUORESCENT STUDY INDIRECT METHOD	43.25	43.25	7/1/2006
88347	TC	T	IMMUNOFLUORESCENT STUDY INDIRECT METHOD	30.60	30.60	7/1/2006
88348		3	ELECTRON MICROSCOPY DIAGNOSTIC	368.05	368.05	7/1/2006
88348	26	5	ELECTRON MICROSCOPY DIAGNOSTIC	76.94	76.94	7/1/2006
88348	TC	T	ELECTRON MICROSCOPY DIAGNOSTIC	291.10	291.10	7/1/2006
88349		3	ELECTRON MICROSCOPY SCANNING	147.68	147.68	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
88349	26	5	ELECTRON MICROSCOPY SCANNING	38.98	38.98	7/1/2006
88349	TC	T	ELECTRON MICROSCOPY SCANNING	108.70	108.70	7/1/2006
88355		3	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	360.75	360.75	7/1/2006
88355	26	5	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	94.38	94.38	7/1/2006
88355	TC	T	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE	266.36	266.36	7/1/2006
88356		3	MORPHOMETRIC ANALYSIS NERVE	251.89	251.89	7/1/2006
88356	26	5	MORPHOMETRIC ANALYSIS NERVE	153.23	153.23	7/1/2006
88356	TC	T	MORPHOMETRIC ANALYSIS NERVE	98.66	98.66	7/1/2006
88358		3	MORPHOMETRIC ANALYSIS OF TUMOR	65.94	65.94	7/1/2006
88358	26	5	MORPHOMETRIC ANALYSIS OF TUMOR	49.76	49.76	7/1/2006
88358	TC	T	MORPHOMETRIC ANALYSIS OF TUMOR	16.19	16.19	7/1/2006
88360		3	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	98.75	98.75	7/1/2006
88360	26	5	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	56.55	56.55	7/1/2006
88360	TC	T	MORPHOMETRIC ANALYSIS, TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	42.20	42.20	7/1/2006
88361		3	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	146.76	146.76	7/1/2006
88361	26	5	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	61.02	61.02	7/1/2006
88361	TC	T	MORPHOMETRIC ANALYSIS; TUMOR IMMUNOHISTOCHEMISTRY (EG, HER-2/NEU, ESTROGEN	85.74	85.74	7/1/2006
88362		3	NERVE TEASING PREPARATION	237.26	237.26	7/1/2006
88362	26	5	NERVE TEASING PREPARATION	110.67	110.67	7/1/2006
88362	TC	T	NERVE TEASING PREPARATION	126.59	126.59	7/1/2006
88365		3	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	114.91	114.91	7/1/2006
88365	26	5	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	60.79	60.79	7/1/2006
88365	TC	T	TISSUE IN SITU HYBRIDIZATION, INTERPRETATION AND REPORT	54.12	54.12	7/1/2006
88367		3	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	183.38	183.38	7/1/2006
88367	26	5	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	66.07	66.07	7/1/2006
88367	TC	T	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	117.31	117.31	7/1/2006
88368		3	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	132.66	132.66	7/1/2006
88368	26	5	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	71.66	71.66	7/1/2006
88368	TC	T	MORPHOMETRIC ANALYSIS, IN SITU HYBRIDIZATION, (QUANTITATIVE OR	60.99	60.99	7/1/2006
88371		3	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, INTERP AND REPORT	20.28	20.28	7/1/2006
88371	26	5	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, INTERP AND REPORT	17.86	17.86	7/1/2006
88372		3	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, IMMUNOLOGICAL PROBE	16.43	16.43	7/1/2006
88372	26	5	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, IMMUNOLOGICAL PROBE	16.43	16.43	7/1/2006
88372	TC	T	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, IMMUNOLOGICAL PROBE	16.43	16.43	7/1/2006
88400		3	BILIRUBIN, TOTAL, TRANSCUTANEOUS	7.02	7.02	7/1/2006
89049		3	CAFFEINE HALOTHANE CONTRACTURE TEST (CHCT) FOR MALIGNANT HYPERTHERMIA SUSCEP	169.70	60.73	7/1/2006
89050		3	CELL COUNT, MISCELLANEOUS BODY FLUIDS (EG, CEREBROSPINAL FLUID, JOINT FLUID),	6.61	6.61	7/1/2006
89051		3	SYNOVIAL FLUID DIFF	7.28	7.28	7/1/2006
89055		3	LEUKOCYTE ASSESSMENT, FECAL, QUALITATIVE OR SEMIQUANTITATIVE	5.96	5.96	7/1/2006
89060		3	CRYSTAL ID, SYNOVIAL FLUID	9.99	9.99	7/1/2006
89100		3	DUODENAL INTUB/ASPIRATION SING SPEC APPROP TEST	83.24	29.25	7/1/2006
89105		3	DUODENAL INTUB/ASPIR MULTI FRACT SPEC W/WO CUTOL P	92.33	24.09	7/1/2006
89125		3	FAT STAIN, FECES, URINE, OR RESPIRATORY SECRETIONS	6.03	6.03	7/1/2006
89130		3	GASTRIC INTUBATION AND ASPIRATION	74.61	20.97	7/1/2006
89132		3	GASTRIC INTUB AND ASPIRATION DIAGNOSTIC AFTER STIM	58.41	9.06	7/1/2006
89135		3	GASTRIC ANALYSIS FRACTIONAL	92.30	37.64	7/1/2006
89136		3	GASTRIC INTUB/ASPIR/FRACT COLLECTIONS 2 HOURS	65.40	10.77	7/1/2006
89140		3	GASTRIC ANALYSIS WIH HISTAMINE	103.99	43.71	7/1/2006
89141		3	GASTRIC INTUB ASP FOR AC COLLECTION 3 HR INCLUD GA	124.04	42.22	7/1/2006
89160		3	MEAT FIBERS FECES	5.15	5.15	7/1/2006
89190		3	NASAL SMEAR FOR EOSINOPHILS	6.50	6.50	7/1/2006
89225		3	STARCH GRANULES, FECES	4.67	4.67	7/1/2006
89235		3	WATER LOAD TEST	7.69	7.69	7/1/2006
89300		3	SEMEN ANALYSIS; PRESENCE AND/OR MOTILITY OF SPERM INCLUDING HUHNER TEST (POST	12.45	12.45	7/1/2006
89310		3	SEMEN ANALYSIS	11.71	11.71	7/1/2006
89320		3	SEMEN ANALYSIS COMPLETE	16.84	16.84	7/1/2006
89321		3	SEMEN ANALYSIS, PRESENCE AND/OR MOTILITY OF SPERM	16.84	16.84	7/1/2006
89325		3	SPERM AGGLUTINATION WITH ANTIBODY TITER	14.91	14.91	7/1/2006
89330		3	CERVICAL MUCUS PENETRATION TEST	13.83	13.83	7/1/2006
90291		3	CYTOMEGALOVIRUS IMMUNE GLOBULIN (HBLG), HUMAN, FOR IM USE 0.5 ML	14.57	14.57	7/1/2006
90371		3	HEPATITIS B IMMUNE GLOBULIN (HBLG), HUMAN, FOR IM USE 0.5 ML	117.74	117.74	7/1/2006
90375		3	RABIES IMMUNE GLOBULIN (RLG), HUMAN, FOR IM AND OR SUBCUTANEOUS USE, 150 IU	62.89	62.89	7/1/2006
90376		3	RABIES IMMUNE GLOBULIN, HEAT-TREATED (RLG-HT), HUMAN, FOR IM AND/OR SUBCUTANEOUS USE, 2 ML	67.13	67.13	7/1/2006
90379		3	RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN (RSV-LGIV), HUMAN, FOR IM USE 1ML	17.17	17.17	7/1/2006
90384		3	RHO (D) IMMUNE GLOBULIN (RHLG), HUMAN, FULL-DOSE, FOR IM USE 1500 IU/300 MCG	107.10	107.10	7/1/2006
90385		3	RHO (D) IMMUNE GLOBULIN (RHLG), HUMAN, MINI-DOSE, FOR IM USE 120IU/50MCG	26.29	26.29	7/1/2006
90386		3	RHO (D) IMMUNE GLOBULIN (RHLGIV), HUMAN, FOR IM USE, 100IU	127.80	127.80	7/1/2006
90389		3	TETANUS IMMUNE GLOBULIN (TLG), HUMAN, FOR IM USE, 250 U/1 ML	118.13	118.13	7/1/2006
90396		3	VARICELLA-ZOSTER IMMUNE GLOBULIN, HUMAN, FOR IM USE, 125U/1.25 ML	106.72	106.72	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
90465	EP	L	IMMUNIZATION ADMINISTRATION UNDER 8 YEARS OF AGE (INCLUDES PERCUTANEOUS)	13.71	13.71	1/1/2006
90466	EP	L	IMMUNIZATION ADMINISTRATION UNDER 8 YEARS OF AGE (INCLUDES PERCUTANEOUS)	13.71	13.71	1/1/2006
90471	EP	L	IMMUNIZATION ADMINISTRATION ((INCLUDES PERCUTANEOUS, INTRADERMAL, SUBCUTANEOUS)	13.71	13.71	1/1/2006
90471		3	IMMUNIZATION ADMINISTRATION ((INCLUDES PERCUTANEOUS, INTRADERMAL, SUBCUTANEOUS)	16.67	16.67	1/1/2006
90472		3	EACH ADDITIONAL IMMUNIZATION ADMIN;ONE VACCINE SINGLE OR COMBO TOXIOD	9.96	9.96	1/1/2006
90472	EP	L	EACH ADDITIONAL IMMUNIZATION ADMIN;ONE VACCINE SINGLE OR COMBO TOXIOD	13.71	13.71	1/1/2006
90585		3	BACILLUS CALMETTE-GUERIN VACCINE (BCG) FOR TUBERCULOSIS, LIVE FOR PERCUTANEOUS USE	114.86	114.86	7/1/2006
90632		3	HEPATITIS A VACCINE, ADULT DOSAGE, FOR IM USE	42.86	42.86	7/1/2006
90633		3	HEPATITIS A VACCINE, PEDIATRIC/ADOLESCENT DOSAGE-2 DOSE SCHEDULE, FOR IM USE	22.09	22.09	7/1/2006
90636		3	HEPATITIS A AND HEPATITIS B VACCINE (HEPA-HEPB), ADULT DOSAGE, FOR IM USE	89.01	89.01	7/1/2006
90645		3	HEMOPHILUS INFLUENZA B VACCINE (HIB), HBOC CONJUGATE (4 DOSE SCHEDULE) FOR IM USE	21.26	21.26	7/1/2006
90647		3	HEMOPHILUS INFLUENZA B VACCINE (HIB) PRP-OMP CONJUGATE (3 DOSE SCHEDULE), FOR IM USE	21.26	21.26	7/1/2006
90648		3	HEMOPHILUS INFLUENZA B VACCINE (HIB) PRP-T CONJUGATE (4 DOSE SCHEDULE), IM USE	21.63	21.63	7/1/2006
90655		3	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 6 TO 35 MONTHS DOSAGE, FOR IM OR JET INJECTION USE, PRESERVATIVE FREE.	13.50	13.50	7/1/2006
90656		3	INFLUENZA VIRUS VACCINE, SPILT VIRUS, PRESERVATIVE FREE, AGE 3 YEARS OR OLDER, IM USE	13.68	13.69	2/23/2006
90657		3	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 6 TO 35 MO, DOSAFE, FOR IM OR JET INJECTION USE.	13.50	13.50	7/1/2006
90658		3	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 3 YEARS AND ABOVE, FOR IM OR JET INJECTION USE.	10.10	10.10	7/1/2006
90675		3	RABIES VACCINE, FOR IM USE.	136.23	136.23	7/1/2006
90700		3	DIPTHERIA, TETANUS TOXOIDS, & ACELLULAR PERTUSSUS VACCINE (DTAP) FOR IM USE.	23.07	23.07	7/1/2006
90702		3	DIPTHERIA, TETANUS TOXOIDS (DT) ABSORBED FOR USE IN INDIVIDUALS YOUNGER THAN SEVEN YEARS, FOR IM USE.	19.35	19.35	7/1/2006
90703		3	TETANUS TOXOID ABSORBED, FOR IM OR JET INJECTION USE.	14.57	14.57	7/1/2006
90704		3	MUMPS VIRUS VACCINE, LIVE FOR SUBCUTANEOUS JET INJECTION USE.	17.93	17.93	7/1/2006
90705		3	MEASLES VIRUS VACCINE, LIVE, FOR SUBCUTANEOUS OR JET INJECTION USE	13.62	13.62	7/1/2006
90706		3	RUBELLA VIRUS VACCINE, LIVE, FOR SUBCUTANEOUS OR JET INJECTION USE	15.02	15.02	7/1/2006
90707		3	MEASLES, MUMPS, AND RUBELLA VIRUS VACCINE (MMR), LIVE, FOR SUBCUTANEOUS OR JET INJECTION USE	36.13	36.13	7/1/2006
90713		3	POLIOVIRUS VACCINE, INACTIVATED, (IPV), FOR SUBCUTANEOUS USE	24.73	24.73	7/1/2006
90715			TETANUS, DIPHTHERIA TOXOIDS AND ACELLULAR PERTUSSIS VACCINE(TDAP) 7 YEARS OR OLDE	19.35	19.35	7/1/2006
90716		3	VARICELLA VIRUS VACCINE, LIVE FOR SUBCUTANEOUS USE	63.26	63.26	7/1/2006
90718		3	TETANUS AND DIPHTHERIA TOXOIDS(Td) ABSORBED FOR USE IN INDIVIDUALS SEVEN YEARS OR OLDER, FOR IM OR JET INJECTION	16.04	16.04	7/1/2006
90721		3	DIPHTHERIA, TETANUS TOXOIDS, AND ACELLULAR PERTUSSIS VACCINE AND HEMOPHILUS INFLUENZA B VACCINE (DTAP-HIB) FOR IM	41.13	41.13	7/1/2006
90732		3	PNEUMOCOCCAL POLYSACCHARIDE VACCINE, 23-VALENT, ADULT OR IMMUNOSUPPRESSED PATIENT DOSAGE, FOR USE IN INDIVIDUALS 2 YRS OR OLDER, FOR SUBCUTANEOUS OR IM USE	24.57	24.57	7/1/2006
90733		3	MENINGOCOCCAL POLYSACCHARIDE VACCINE (ANY GROUP(S)), FOR SUBCUTANEOUS OR JET INJECTION USE	82.66	82.66	7/1/2006
90734		3	MENINGOCOCCAL CONJUGATE VACCINE, SEROGROUPS A, C, Y, W-135 (TETRAVALENT) FOR IM USE.	88.56	88.56	7/1/2006
90740		3	HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE (3 DOSE SCHEDULE) FOR IM USE.	113.91	113.91	7/1/2006
90744		3	HEPATITIS B VACCINE, PEDIATRIC/ADOLESCENT DOSAGE (3 DOSE SCHEDULE), FOR IM USE	21.78	21.78	7/1/2006
90746		3	HEPATITIS B VACCINE, ADULT DOSAGE, FOR IM USE	56.96	56.96	7/1/2006
90747		3	HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE (4 DOSE SCHEDULE), FOR IM USE.	186.62	186.62	7/1/2006
90760		3	INTRAVENOUS INFUSION, HYDRATION; INITIAL, UP TO 1 HOUR	55.10	55.10	7/1/2006
90761		3	INTRAVENOUS INFUSION, HYDRATION; EACH ADDITIONAL HOUR, UP TO 8 HOURS (LIST S	17.41	17.41	7/1/2006
90765		3	INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTA	67.47	67.47	7/1/2006
90766		3	INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTA	22.64	22.64	7/1/2006
90767		3	INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTA	37.24	37.24	7/1/2006
90768		3	INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTA	21.62	21.62	7/1/2006
90772		3	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG	16.62	16.62	7/1/2006
90773		3	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG	16.85	16.85	7/1/2006
90774		3	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG	50.46	50.46	7/1/2006
90775		3	THERAPEUTIC, PROPHYLACTIC OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG	23.40	23.40	7/1/2006
90801		3	PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION	140.94	132.99	7/1/2006
90802		3	INTERACTIVE PSYCHIATRIC DIAGNOSTIC INTERVIEW EXAMINATION USING PLAY EQUIPMENT,	149.73	142.44	7/1/2006
90804		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	60.48	56.84	7/1/2006
90805		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	74.17	71.50	7/1/2006
90806		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	91.07	87.76	7/1/2006
90807		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	104.69	102.36	7/1/2006
90808		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	135.95	131.64	7/1/2006

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90809		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	140.94	138.29	7/1/2006
90810		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	65.34	62.36	7/1/2006
90811		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	73.09	69.44	7/1/2006
90812		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	98.01	93.05	7/1/2006
90813		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	103.34	100.03	7/1/2006
90814		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	142.22	138.25	7/1/2006
90815		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	146.56	143.25	7/1/2006
90816		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	60.93	60.93	7/1/2006
90817		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	66.69	66.69	7/1/2006
90818		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	91.82	91.82	7/1/2006
90819		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	96.49	96.49	7/1/2006
90821		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	136.72	136.72	7/1/2006
90822		3	INDIVIDUAL PSYCHOTHERAPY, INSIGHT ORIENTED, BEHAVIOR MODIFYING AND/OR	140.96	140.96	7/1/2006
90823		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	65.55	65.55	7/1/2006
90824		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	71.88	71.88	7/1/2006
90826		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	97.37	97.37	7/1/2006
90827		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	101.44	101.44	7/1/2006
90828		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	142.34	142.34	7/1/2006
90829		3	INDIVIDUAL PSYCHOTHERAPY, INTERACTIVE, USING PLAY EQUIPMENT, PHYSICAL DEVICES,	145.68	145.68	7/1/2006
90845		3	PSYCHOANALYSIS	84.58	83.58	7/1/2006
90846		3	FAMILY PSYCHOTHERAPY (WITHOUT THE PATIENT PRESENT)	88.34	88.34	7/1/2006
90847		3	FAMILY PSYCHOTHERAPY (CONJOINT PSYCHOTHERAPY) (WITH PATIENT PRESENT)	107.88	105.89	7/1/2006
90849		3	MULTIPLE-FAMILY GROUP PSYCHOTHERAPY	30.65	29.65	7/1/2006
90853		3	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP)	29.75	29.09	7/1/2006
90857		3	INTERACTIVE GROUP PSYCHOTHERAPY	32.52	31.19	7/1/2006
90862		3	PHARMACOLOGIC MANAGEMENT, INCLUDING PRESCRIPTION, REVIEW OF MEDICATION	55.48	52.82	7/1/2006
90865		3	NARCOSYNTHESIS FOR PSYCHIATRIC DIAGNOSTIC AND THERAPEUTIC PURPOSES (EG, SODIUM	150.06	135.09	7/1/2006
90870		3	SPECIAL THERAPY	132.86	88.15	7/1/2006
90935		3	HEMODIALYSIS PROC. WITH SINGLE PHYSICIAN EVAL.	67.04	67.04	7/1/2006
90937		3	HEMODIALYSIS PROC. REQUIRING REPEATED EVALUATIONS	109.71	109.71	7/1/2006
90945		3	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS,	69.86	69.86	7/1/2006
90947		3	DIALYSIS PROCEDURE OTHER THAN HEMODIALYSIS (EG, PERITONEAL DIALYSIS,	112.17	112.17	7/1/2006
91000		3	ESOPHAGEAL INTUBATION & COLLECTION OF WASHING FOR CYTOLOGY	38.13	38.13	7/1/2006
91000	26	5	ESOPHAGEAL INTUBATION & COLLECTION OF WASHING FOR CYTOLOGY	35.25	35.25	7/1/2006
91000	TC	T	ESOPHAGEAL INTUBATION & COLLECTION OF WASHING FOR CYTOLOGY	2.88	2.88	7/1/2006
91010		3	ESOPHAGEAL MOTILITY (MANOMETRIC STUDY OF THE ESOPHAGUS AND/OR GASTROESOPHAGE	194.17	194.17	7/1/2006
91010	26	5	ESOPHAGEAL MOTILITY (MANOMETRIC STUDY OF THE ESOPHAGUS AND/OR GASTROESOPHAGE	60.96	60.96	7/1/2006
91010	TC	T	ESOPHAGEAL MOTILITY (MANOMETRIC STUDY OF THE ESOPHAGUS AND/OR GASTROESOPHAGE	133.21	133.21	7/1/2006
91011		3	ESOPHAGEAL MOTILITY STUDY	230.56	230.56	7/1/2006
91011	26	5	ESOPHAGEAL MOTILITY STUDY	73.17	73.17	7/1/2006
91011	TC	T	ESOPHAGEAL MOTILITY STUDY	157.39	157.39	7/1/2006
91012		3	ESOPHAGEAL MOTILITY STUDY WITH ACID PERFUSION STUDIES	246.68	246.68	7/1/2006
91012	26	5	ESOPHAGEAL MOTILITY STUDY WITH ACID PERFUSION STUDIES	70.84	70.84	7/1/2006
91012	TC	T	ESOPHAGEAL MOTILITY STUDY WITH ACID PERFUSION STUDIES	175.84	175.84	7/1/2006
91020		3	GASTRIC MOTILITY (MANOMETRIC) STUDIES	204.88	204.88	7/1/2006
91020	26	5	GASTRIC MOTILITY (MANOMETRIC) STUDIES	69.69	69.69	7/1/2006
91020	TC	T	GASTRIC MOTILITY (MANOMETRIC) STUDIES	135.20	135.20	7/1/2006
91022		3	DUODENAL MOTILITY (MANOMETRIC) STUDY	200.91	200.91	7/1/2006
91022	26	5	DUODENAL MOTILITY (MANOMETRIC) STUDY	70.35	70.35	7/1/2006
91022	TC	T	DUODENAL MOTILITY (MANOMETRIC) STUDY	130.56	130.56	7/1/2006
91030		3	ESOPHAGUS, ACID PERFUSION	114.96	114.96	7/1/2006
91030	26	5	ESOPHAGUS, ACID PERFUSION	44.28	44.28	7/1/2006
91030	TC	T	ESOPHAGUS, ACID PERFUSION	70.68	70.68	7/1/2006
91034		3	ESOPHAGUS, GASTROESOPHAGEAL REFLUX TEST; WITH NASAL CATHETER PH ELECTRODE(S)	211.58	211.58	7/1/2006
91034	26	5	ESOPHAGUS, GASTROESOPHAGEAL REFLUX TEST; WITH NASAL CATHETER PH ELECTRODE(S)	47.57	47.57	7/1/2006
91034	TC	T	ESOPHAGUS, GASTROESOPHAGEAL REFLUX TEST; WITH NASAL CATHETER PH ELECTRODE(S)	164.01	164.01	7/1/2006
91037		3	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	135.07	135.07	7/1/2006
91037	26	5	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	47.57	47.57	7/1/2006
91037	TC	T	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	87.50	87.50	7/1/2006
91038		3	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	116.23	116.23	7/1/2006
91038	26	5	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	53.90	53.90	7/1/2006
91038	TC	T	ESOPHAGEAL FUNCTION TEST, GASTROESOPHAGEAL REFLUX TEST WITH NASAL CATHETER	62.33	62.33	7/1/2006
91040		3	ESOPHAGEAL BALLOON DISTENSION PROVOCATION STUDY	407.33	407.33	7/1/2006
91040	26	5	ESOPHAGEAL BALLOON DISTENSION PROVOCATION STUDY	47.57	47.57	7/1/2006
91040	TC	T	ESOPHAGEAL BALLOON DISTENSION PROVOCATION STUDY	359.77	359.77	7/1/2006
91052		3	GASTRIC ANALYSIS TEST WITH INJECTION OF STIMULANT OF GASTRIC SECRETION	111.08	111.08	7/1/2006
91052	26	5	GASTRIC ANALYSIS TEST WITH INJECTION OF STIMULANT OF GASTRIC SECRETION	38.41	38.41	7/1/2006
91052	TC	T	GASTRIC ANALYSIS TEST WITH INJECTION OF STIMULANT OF GASTRIC SECRETION	72.67	72.67	7/1/2006
91055		3	GASTRIC INTUBATION, WASHING & PREPARING SLIDES FOR CYTOLOGY	133.17	133.17	7/1/2006
91055	26	5	GASTRIC INTUBATION, WASHING & PREPARING SLIDES FOR CYTOLOGY	43.94	43.94	7/1/2006

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91055	TC	T	GASTRIC INTUBATION, WASHING & PREPARING SLIDES FOR CYTOLOGY	89.23	89.23	7/1/2006
91060		3	GASTRIC SALINE LOAD TEST	82.60	82.60	7/1/2006
91060	26	5	GASTRIC SALINE LOAD TEST	21.53	21.53	7/1/2006
91060	TC	T	GASTRIC SALINE LOAD TEST	61.07	61.07	7/1/2006
91065		3	BREATH HYDROGEN TEST	56.25	56.25	7/1/2006
91065	26	5	BREATH HYDROGEN TEST	9.75	9.75	7/1/2006
91065	TC	T	BREATH HYDROGEN TEST	46.50	46.50	7/1/2006
91100		3	INTESTINAL BLEEDING TUBE PASS/POSIT/MONITORING	133.24	49.77	7/1/2006
91105		3	GASTRIC INTUBATION,AND ASPIRATION/LAVAGE FOR TX.	83.90	16.99	7/1/2006
91110		3	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS	871.38	871.38	7/1/2006
91110	26	5	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS	175.52	175.52	7/1/2006
91110	TC	T	GASTROINTESTINAL TRACT IMAGING, INTRALUMINAL (EG, CAPSULE ENDOSCOPY), ESOPHAGUS	695.86	695.86	7/1/2006
91120		3	RECTAL SENSATION, TONE, AND COMPLIANCE TEST (IE, RESPONSE TO GRADED BALLOON	402.13	402.13	7/1/2006
91120	26	5	RECTAL SENSATION, TONE, AND COMPLIANCE TEST (IE, RESPONSE TO GRADED BALLOON	47.80	47.80	7/1/2006
91120	TC	T	RECTAL SENSATION, TONE, AND COMPLIANCE TEST (IE, RESPONSE TO GRADED BALLOON	354.34	354.34	7/1/2006
91122		3	ANORECTAL MANOMETRY	237.82	237.82	7/1/2006
91122	26	5	ANORECTAL MANOMETRY	86.47	86.47	7/1/2006
91122	TC	T	ANORECTAL MANOMETRY	151.23	151.23	7/1/2006
92002		3	EYE EXAM & TREATMENT,INITIAL	64.27	43.40	7/1/2006
92004		3	EYE EXAM & TREATMENT,INITIAL	117.35	83.57	7/1/2006
92012		3	EYE EXAM & TREATMENT	58.70	34.19	7/1/2006
92014		3	EYE EXAM & TREATMENT	87.00	55.86	7/1/2006
92015		3	DETERMINATION OF REFRACTIVE STATE	63.26	18.88	7/1/2006
92018		3	EYE EXAM & TREATMENT	127.06	127.06	7/1/2006
92019		3	OPTHALMOL EXAM/EVAL UNDER GEN ANESTHESIA SUBSEQUEN	66.40	66.40	7/1/2006
92020		3	GONIOSCOPY (SEPARATE PROCEDURE)	24.81	18.85	7/1/2006
92060		3	SENSORIMOTOR EXAMINATION WITH MULTIPLE MEASUREMENTS OF OCULAR DEVIATION (EG,	49.71	49.71	7/1/2006
92070		3	THERAPEUTIC BANDAGE LENS	61.10	36.26	7/1/2006
92081		3	VISUAL FIELD EXAMINATION, UNILATERAL OR BILATERAL, WITH INTERPRETATION AND	44.56	44.56	7/1/2006
92082		3	SPECIAL EYE EXAM	57.04	57.04	7/1/2006
92083		3	SPECIAL EYE EXAM	65.83	65.83	7/1/2006
92135		3	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING (EG, SCANNING LASER) WITH	39.23	39.23	7/1/2006
92135	26	5	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING (EG, SCANNING LASER) WITH	17.80	17.80	7/1/2006
92135	TC	T	SCANNING COMPUTERIZED OPHTHALMIC DIAGNOSTIC IMAGING (EG, SCANNING LASER) WITH	21.43	21.43	7/1/2006
92136		3	OPHTHALMIC BIOMETRY BY PARTIAL COHERENCE INTERFEROMETRY WITH INTRAOCULAR LENS	75.94	75.94	7/1/2006
92136	26	5	OPHTHALMIC BIOMETRY BY PARTIAL COHERENCE INTERFEROMETRY WITH INTRAOCULAR LENS	27.62	27.62	7/1/2006
92136	TC	T	OPHTHALMIC BIOMETRY BY PARTIAL COHERENCE INTERFEROMETRY WITH INTRAOCULAR LENS	48.32	48.32	7/1/2006
92235		3	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND	117.79	117.79	7/1/2006
92235	26	5	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND	41.88	41.88	7/1/2006
92235	TC	T	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND	75.91	75.91	7/1/2006
92240		3	INDOCYANINE-GREEN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION	244.39	244.39	7/1/2006
92240	26	5	INDOCYANINE-GREEN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION	56.86	56.86	7/1/2006
92240	TC	T	INDOCYANINE-GREEN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION	187.53	187.53	7/1/2006
92265		3	NEEDLE OCULOELECTROMYOGRAPHY, ONE OR MORE EXTRAOCULAR MUSCLES, ONE OR BOTH	79.90	79.90	7/1/2006
92270		3	ELECTRO-OCULOGRAPHY WITH INTERPRETATION AND REPORT	80.99	80.99	7/1/2006
92275		3	ELECTRORETINOGRAPHY WITH INTERPRETATION AND REPORT	101.77	101.77	7/1/2006
92283		3	COLOR VISION EXAMINATION	34.40	34.40	7/1/2006
92284		3	DARK ADAPTATION EXAMINATION WITH INTERPRETATION AND REPORT	71.70	71.70	7/1/2006
92326		9	REPLACEMENT OF CONTACT LENS	39.05	39.05	7/1/2006
92340		9	FITTING OF SPECTACLES	7.72	7.72	7/1/2006
92341		9	FITTING OF SPECTACLES	11.59	11.59	7/1/2006
92342		9	FITTING OF SPECTACLES	15.46	15.46	7/1/2006
92353		9	FITTING OF SPECTACLES	21.28	21.28	7/1/2006
92370		9	REPAIR & ADJUST SPECTACLES	7.72	7.72	7/1/2006
92502		3	EAR AND THROAT EXAMINATION	92.28	92.28	7/1/2006
92504		3	SPECIAL EAR EXAMINATION	23.27	9.69	7/1/2006
92506		3	EVALUATION OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AUDITORY PROCESSING,	117.77	44.90	7/1/2006
92507		3	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/ OR AUDITORY	75.00	26.84	7/1/2006
92508		3	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/ OR AUDITORY	26.48	13.57	7/1/2006
92511		3	VISUALIZATION NOSE & THROAT	140.90	56.77	7/1/2006
92512		3	NASAL FUNCTION STUDIES	58.02	26.22	7/1/2006
92516		3	FACIAL NERVE FUNCTION STUDIES (EG, ELECTRONEURONOGRAPHY)	55.46	23.00	7/1/2006
92520		3	LARYNGEAL FUNCTION STUDIES	44.59	40.61	7/1/2006
92526		3	TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING	74.58	26.89	7/1/2006
92531		3	SPONTANEOUS NYSTAGMUS TEST	19.10	19.10	7/1/2006
92532		3	POSITIONAL NYSTAGMUS TEST	19.48	19.48	7/1/2006
92533		3	INNER EAR TEST	12.41	12.41	7/1/2006
92534		3	OPTOKINETIC NYSTAGMUS TEST	36.70	36.70	7/1/2006
92541		3	SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION W RECORDING	49.44	49.44	7/1/2006
92541	26	5	SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION W RECORDING	21.16	21.16	7/1/2006

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92541	TC	T	SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION W RECORDING	28.28	28.28	7/1/2006
92542		3	POSITIONAL NYSTAGMUS TEST MIN OF 4 POSITIONS W RECORDING	50.33	50.33	7/1/2006
92542	26	5	POSITIONAL NYSTAGMUS TEST MIN OF 4 POSITIONS W RECORDING	17.41	17.41	7/1/2006
92542	TC	T	POSITIONAL NYSTAGMUS TEST MIN OF 4 POSITIONS W RECORDING	32.92	32.92	7/1/2006
92543		3	CLAORIC VESTIBULAR TEST, EA. IRRIGATION WITH RECORDING	22.94	22.94	7/1/2006
92543	26	5	CLAORIC VESTIBULAR TEST, EA. IRRIGATION WITH RECORDING	5.49	5.49	7/1/2006
92543	TC	T	CLAORIC VESTIBULAR TEST, EA. IRRIGATION WITH RECORDING	17.45	17.45	7/1/2006
92544		3	OPTOKINETIC NYSTAGMUS TEST	39.86	39.86	7/1/2006
92544	26	5	OPTOKINETIC NYSTAGMUS TEST	13.57	13.57	7/1/2006
92544	TC	T	OPTOKINETIC NYSTAGMUS TEST	26.30	26.30	7/1/2006
92545		3	OSCILLATING TRACKING TEST WITH RECORDING	35.47	35.47	7/1/2006
92545	26	5	OSCILLATING TRACKING TEST WITH RECORDING	12.15	12.15	7/1/2006
92545	TC	T	OSCILLATING TRACKING TEST WITH RECORDING	23.32	23.32	7/1/2006
92546		3	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING	77.05	77.05	7/1/2006
92546	26	5	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING	14.98	14.98	7/1/2006
92546	TC	T	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING	62.07	62.07	7/1/2006
92547		3	USE OF VERTICAL ELECTRODES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY	4.03	4.03	7/1/2006
92548		3	COMPUTERIZED DYNAMIC POSTUROGRAPHY	96.31	96.31	7/1/2006
92548	26	5	COMPUTERIZED DYNAMIC POSTUROGRAPHY	27.07	27.07	7/1/2006
92548	TC	T	COMPUTERIZED DYNAMIC POSTUROGRAPHY	69.24	69.24	7/1/2006
92551		3	HEARING TEST	9.77	9.77	7/1/2006
92552		3	HEARING TEST	15.50	15.50	7/1/2006
92553		3	HEARING TEST	23.24	23.24	7/1/2006
92555		3	SPEECH AUDIOMETRY THRESHOLD;	13.51	13.51	7/1/2006
92556		3	SPEECH AUDIOMETRY THRESHOLD; WITH SPEECH RECOGNITION	20.26	20.26	7/1/2006
92557		3	COMPREHENSIVE AUDIOMETRY THRESHOLD EVALUATION AND SPEECH RECOGNITION (92553 AN	42.18	42.18	7/1/2006
92560		3	HEARING TEST, SCREENING	18.52	18.52	7/1/2006
92561		3	SPECIAL HEARING TEST	25.23	25.23	7/1/2006
92562		3	SPECIAL HEARING TEST	14.50	14.50	7/1/2006
92563		3	SPECIAL HEARING TEST	13.51	13.51	7/1/2006
92564		3	SPECIAL HEARING TEST	16.72	16.72	7/1/2006
92565		3	SPECIAL HEARING TEST	14.17	14.17	7/1/2006
92567		3	TYMPANOMETRY	18.61	18.61	7/1/2006
92568		3	ACOUSTIC REFLEX TESTING	13.51	13.51	7/1/2006
92569		3	ACOUSTIC REFLEX DECAY TEST	14.50	14.50	7/1/2006
92571		3	SPECIAL HEARING TEST	13.84	13.84	7/1/2006
92572		3	SPECIAL HEARING TEST	3.21	3.21	7/1/2006
92573		3	SPECIAL HEARING TEST	12.51	12.51	7/1/2006
92575		3	SPECIAL HEARING TEST	10.40	10.40	7/1/2006
92576		3	SPECIAL HEARING TEST	15.73	15.73	7/1/2006
92577		3	SPECIAL HEARING TEST	25.46	25.46	7/1/2006
92579		3	VISUAL REINFORCEMENT AUDIOMETRY (VRA)	25.56	25.56	7/1/2006
92582		3	SPECIAL HEARING TEST	25.56	25.56	7/1/2006
92583		3	SPECIAL HEARING TEST	31.32	31.32	7/1/2006
92584		3	ELECTROCOCHLEOGRAPHY	86.98	86.98	7/1/2006
92585		3	AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF TH	90.48	90.48	7/1/2006
92585	26	5	AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF TH	25.65	25.65	7/1/2006
92585	TC	T	AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF TH	64.83	64.83	7/1/2006
92586		3	AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF TH	64.83	64.83	7/1/2006
92587		3	EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT	52.82	52.82	7/1/2006
92587	26	5	EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT	6.90	6.90	7/1/2006
92587	TC	T	EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT	45.92	45.92	7/1/2006
92588		3	EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE OR DIAGNOSTIC EVALUATION	70.18	70.18	7/1/2006
92588	26	5	EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE OR DIAGNOSTIC EVALUATION	18.49	18.49	7/1/2006
92588	TC	T	EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE OR DIAGNOSTIC EVALUATION	51.69	51.69	7/1/2006
92590		3	HEARING AID EXAMINATION AND SELECTION MONAURAL	37.60	37.60	7/1/2006
92591		3	HEARING AID EXAM AND SELECTION BINAURAL	56.47	56.47	7/1/2006
92592		3	HEARING AID CHECK MONAURAL	16.46	16.46	7/1/2006
92593		3	HEARING AID CHECK BINAURAL	24.88	24.88	7/1/2006
92594		3	ELECTROACOUSTIC EVALUATION FOR HEARING AID MONAURA	18.18	18.18	7/1/2006
92595		3	ELECTROACOUSTIC EVALUATION FOR HEARING AID BINAURA	27.16	27.16	7/1/2006
92596		3	EAR PROTECTOR ATTENUATION MEASUREMENTS	20.92	20.92	7/1/2006
92601		3	DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT UNDER 7 YEARS OF AGE; WITH	117.87	117.87	7/1/2006
92602		3	DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT UNDER 7 YEARS OF AGE;	80.78	80.78	7/1/2006
92603		3	DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; WITH PROGRAMMING	72.83	72.83	7/1/2006
92604		3	DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; SUBSEQUENT	46.33	46.33	7/1/2006
92607		3	EVAL FOR PRESCRIPTION FOR SPEECH GENERATING & ALT. COMM. DEVICE - FACE TO FACE	103.50	103.50	7/1/2006
92608		3	EACH ADDITIONAL 30 MINUTES (USE IN CONJUNCTION WITH 92607)	19.37	19.37	7/1/2006
92609		3	THERAPEUTIC SVCS FOR USE OF SPEECH GENERATING DEVICE INCLUDING PROG. & MODIF.	53.59	53.59	7/1/2006
92610		3	EVAL OF SWALLOWING AND ORAL FUNCTION FOR FEEDING	115.78	115.78	7/1/2006

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92611		3	MOTION FLUOROSCOPIC EVALUATION OF SWALLOWING FUNCTION BY CINE OR VIDEO RECORDI	115.78	115.78	7/1/2006
92612		3	ENDOSCOPIC STUDY OF SWALLOWING	137.73	68.51	7/1/2006
92614		3	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION, LARYNGEAL SENSORY TESTING BY CINE OR	129.78	68.51	7/1/2006
92616		3	FLEXIBLE FIBEROPTIC ENDOSCOPIC EVALUATION OF SWALLOWING AND LARYNGEAL SENSORY	181.68	101.86	7/1/2006
92620		3	EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; INITIAL 60 MINUTES	39.14	39.14	7/1/2006
92621		3	EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; EACH ADDITIONAL 15 MINUTES	9.66	9.66	7/1/2006
92625		3	ASSESSMENT OF TINNITUS (INCLUDES PITCH, LOUDNESS MATCHING, AND MASKING)	38.48	38.48	7/1/2006
92626		3	EVALUATION OF AUDITORY REHABILITATION STATUS; FIRST HOUR	74.25	74.25	7/1/2006
92627		3	EVALUATION OF AUDITORY REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES (LI	18.68	18.68	7/1/2006
92950		3	HEART-LUNG RESUSCITATION	282.31	174.74	7/1/2006
92953		3	TEMPORARY TRANSCUTANEOUS PACING	11.06	11.06	7/1/2006
92960		3	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA, EXTERNAL	292.28	121.37	7/1/2006
92961		3	CARDIOVERSION, ELECTIVE, ELECTRICAL CONVERSION OF ARRHYTHMIA; INTERNAL	241.16	241.16	7/1/2006
92970		3	CARDIOASSIST-METHOD OF CIRCULATORY ASSIST; INTERNAL	165.17	165.17	7/1/2006
92971		3	CARDIOASSIST-METHOD OF CIRCULATORY ASSIST; EXTERNAL	93.26	93.26	7/1/2006
92973		3	PERCUTANEOUS TRANSLUMINAL CORONARY THROMBECTOMY (LIST SEPARATELY IN ADDITION T	166.12	166.12	7/1/2006
92974		3	TRANSCATHETER PLACEMENT OF RADIATION DELIVERY DEVICE FOR SUBSEQUENT CORONARY	151.93	151.93	7/1/2006
92975		3	THROMBOLYSIS, CORONARY; BY INTRACORONARY INFUSION, INCLUDING SELECTIVE CORONARY	359.54	359.54	7/1/2006
92977		3	THROMBOLYSIS, CORONARY; BY INTRAVENOUS INFUSION	277.90	277.90	7/1/2006
92978		3	INTRAVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING DIAGNOSTIC	246.60	246.60	7/1/2006
92978	26	5	INTRAVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING DIAGNOSTIC	89.70	89.70	7/1/2006
92978	TC	T	INTRAVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING DIAGNOSTIC	156.90	156.90	7/1/2006
92979		3	INTRASVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING THERAPEUTIC	150.95	150.95	7/1/2006
92979	26	5	INTRASVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING THERAPEUTIC	71.77	71.77	7/1/2006
92979	TC	T	INTRASVASCULAR ULTRASOUND (CORONARY VESSEL OR GRAFT) DURING THERAPEUTIC	79.18	79.18	7/1/2006
92980		3	TRANSCATHETER PLACEMENT OF AN INTRACORONARY STENT(S), PERCUTANEOUS,	746.10	746.10	7/1/2006
92981		3	TRANSCATHETER PLACEMENT OF AN INTRACORONARY STENT(S), PERCUTANEOUS, WITH OR	207.05	207.05	7/1/2006
92982		3	PERCUTANEOUS TRANSLUMINAL CORONARY ANGIOPLASTY	553.51	553.51	7/1/2006
92984		3	PERCUTANEOUS TRANSLUMINAL CORONARY BALLOON ANGIOPLASTY; EACH ADDITIONAL VESSE	147.63	147.63	7/1/2006
92986		3	PERCUTANEOUS BALLOON VALVULOPLASTY; AORTIC VALVE	1,193.87	1,193.87	7/1/2006
92987		3	PERCUTANEOUS BALLOON VALVULOPLASTY; MITRAL VALVE	1,239.39	1,239.39	7/1/2006
92990		3	PERCUTANEOUS BALLOON VALVULOPLASTY; PULMONARY VALVE	967.44	967.44	7/1/2006
92992		3	ATRIAL SEPTECTOMY OR SEPTOSTOMY; TRANSVENOUS METHOD, BALLOON (EG, RASHKIND	969.18	969.18	7/1/2006
92993		3	ATRIAL SEPTECTOMY OR SEPTOSTOMY; BLADE METHOD (PARK SEPTOSTOMY) (INCLUDES	730.18	730.18	7/1/2006
92995		3	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, BY MECHANICAL OR OTHER METH	608.72	608.72	7/1/2006
92996		3	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, BY MECHANICAL OR OTHER METH	161.74	161.74	7/1/2006
92997		3	PERCUTANEOUS TRANSLUMINAL PULMONARY ARTERY BALLOON ANGIOPLASTY; SINGLE VESSEL	600.51	600.51	7/1/2006
92998		3	PERCUTANEOUS TRANSLUMINAL PULMONARY ARTERY BALLOON ANGIOPLASTY; EACH ADDITION	295.31	295.31	7/1/2006
93000		3	ELECTROCARDIOGRAM, COMPLETE	23.70	23.70	7/1/2006
93005		3	ELECTROCARDIOGRAM, TRACING	15.37	15.37	7/1/2006
93010		3	ELECTROCARDIOGRAM REPORT	8.34	8.34	7/1/2006
93015		3	CARDIOVASCULAR STRESS TEST	95.15	95.15	7/1/2006
93016		3	CARDIOVASCULAR STRESS TEST USING MAXIMAL OR SUBMAXIMAL TREADMILL OR BICYCLE	22.29	22.29	7/1/2006
93017		3	ELECTROCARDIOGRAM TRACING	58.18	58.18	7/1/2006
93018		3	TREADMILL EKG-INTERP ONLY	14.67	14.67	7/1/2006
93024		3	ERGONOVINE PROVOCATION TEST	96.89	96.89	7/1/2006
93024	26	5	ERGONOVINE PROVOCATION TEST	57.95	57.95	7/1/2006
93024	TC	T	ERGONOVINE PROVOCATION TEST	38.94	38.94	7/1/2006
93025		3	MICROVOLT T-WAVE ALTERNANS FOR ASSESSMENT OF VENTRICULAR ARRHYTHMIAS	282.29	282.29	7/1/2006
93040		3	ELECTROCARDIOGRAM REPORT	12.85	12.85	7/1/2006
93041		3	RHYTHM ECG TRACING	5.20	5.20	7/1/2006
93042		3	RHYTHM STRIP-INTERP ONLY	7.65	7.65	7/1/2006
93224		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	144.15	144.15	7/1/2006
93225		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	42.92	42.92	7/1/2006
93226		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	75.76	75.76	7/1/2006
93227		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	25.48	25.48	7/1/2006
93230		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	153.89	153.89	7/1/2006
93231		3	24 HR ECG, RECORDING ONLY	52.88	52.88	7/1/2006
93232		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	75.53	75.53	7/1/2006
93233		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG	25.48	25.48	7/1/2006
93235		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED	112.30	112.30	7/1/2006
93236		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED	90.34	90.34	7/1/2006
93237		3	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED	21.96	21.96	7/1/2006
93268		3	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH PRESYMPTOM MEMORY LOOP	272.27	272.27	7/1/2006
93270		3	PATIENT DEMAND SINGLE OR MULTI EVENT RECORDING W/ PRESYMPTOM MEMO	42.92	42.92	7/1/2006
93271		3	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH	203.88	203.88	7/1/2006
93272		3	PATIENT DEMAND SINGLE OR MULTIPLE EVENT RECORDING WITH	25.48	25.48	7/1/2006
93278		3	SIGNAL-AVERAGED ELECTROCARDIOGRAPHY W/WO ECG	53.17	53.17	7/1/2006
93278	26	5	SIGNAL-AVERAGED ELECTROCARDIOGRAPHY W/WO ECG	12.54	12.54	7/1/2006
93278	TC	T	SIGNAL-AVERAGED ELECTROCARDIOGRAPHY W/WO ECG	40.63	40.63	7/1/2006

Physician Fee Schedule

Provider Specialty 001

Revised Date July 1, 2006

				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
93303		3	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE	197.11	197.11	7/1/2006
93303	26	5	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE	63.62	63.62	7/1/2006
93303	TC	T	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE	133.48	133.48	7/1/2006
93304		3	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OF	104.32	104.32	7/1/2006
93304	26	5	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OF	36.74	36.74	7/1/2006
93304	TC	T	TRANSTHORACIC ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OF	67.58	67.58	7/1/2006
93307		3	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH	178.89	178.89	7/1/2006
93307	26	5	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH	45.41	45.41	7/1/2006
93307	TC	T	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D) WITH	133.48	133.48	7/1/2006
93308		3	ECHOCARDIOGRAPHY, RL-TIME IMAG.DOC.W/WOM-MOD,LMT S	93.75	93.75	7/1/2006
93308	26	5	ECHOCARDIOGRAPHY, RL-TIME IMAG.DOC.W/WOM-MOD,LMT S	26.17	26.17	7/1/2006
93308	TC	T	ECHOCARDIOGRAPHY, RL-TIME IMAG.DOC.W/WOM-MOD,LMT S	67.58	67.58	7/1/2006
93312		3	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL, REAL TIME WITH IMAGE DOCUMENTATION (2D)	239.43	239.43	7/1/2006
93312	26	5	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL, REAL TIME WITH IMAGE DOCUMENTATION (2D)	107.22	107.22	7/1/2006
93312	TC	T	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL, REAL TIME WITH IMAGE DOCUMENTATION (2D)	132.22	132.22	7/1/2006
93313		3	ECHOCARDIO, RL TIME W/DOC TRANSESOPHAGEAL; PLC PRO	42.54	42.54	7/1/2006
93314		3	ECHOCARDIO, RL TIME W/DOC TRANSESOPHAGEAL INTERP.ON	193.71	193.71	7/1/2006
93314	26	5	ECHOCARDIO, RL TIME W/DOC TRANSESOPHAGEAL INTERP.ON	61.49	61.49	7/1/2006
93314	TC	T	ECHOCARDIO, RL TIME W/DOC TRANSESOPHAGEAL INTERP.ON	132.22	132.22	7/1/2006
93315		3	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; INCLUDING	261.90	261.90	7/1/2006
93315	26	5	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; INCLUDING	135.61	135.61	7/1/2006
93315	TC	T	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; INCLUDING	125.47	125.47	7/1/2006
93316		3	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; PLACEMENT	43.30	43.30	7/1/2006
93317		3	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; IMAGE	214.80	214.80	7/1/2006
93317	26	5	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; IMAGE	89.92	89.92	7/1/2006
93317	TC	T	TRANSESOPHAGEAL ECHOCARDIOGRAPHY FOR CONGENITAL CARDIAC ANOMALIES; IMAGE	125.47	125.47	7/1/2006
93318		3	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL (TEE) FOR MONITORING PURPOSES, INCLUDING	211.24	211.24	7/1/2006
93318	26	5	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL (TEE) FOR MONITORING PURPOSES, INCLUDING	98.33	98.33	7/1/2006
93318	TC	T	ECHOCARDIOGRAPHY, TRANSESOPHAGEAL (TEE) FOR MONITORING PURPOSES, INCLUDING	112.91	112.91	7/1/2006
93320		3	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	78.28	78.28	7/1/2006
93320	26	5	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	18.88	18.88	7/1/2006
93320	TC	T	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	59.40	59.40	7/1/2006
93321		3	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	46.23	46.23	7/1/2006
93321	26	5	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	7.62	7.62	7/1/2006
93321	TC	T	DOPPLER ECHOCARDIOGRAPHY, PULSED WAVE AND/OR CONTINUOUS WAVE WITH SPECTRAL	38.61	38.61	7/1/2006
93325		3	DOPPLER ECHOCARDIOGRAPHY COLOR FLOW VELOCITY MAPPING (LIST SEPARATELY IN	104.97	104.97	7/1/2006
93325	26	5	DOPPLER ECHOCARDIOGRAPHY COLOR FLOW VELOCITY MAPPING (LIST SEPARATELY IN	3.74	3.74	7/1/2006
93325	TC	T	DOPPLER ECHOCARDIOGRAPHY COLOR FLOW VELOCITY MAPPING (LIST SEPARATELY IN	101.22	101.22	7/1/2006
93350		3	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D, WITH	134.94	134.94	7/1/2006
93350	26	5	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D, WITH	73.32	73.32	7/1/2006
93350	TC	T	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D, WITH	61.61	61.61	7/1/2006
93501		3	RIGHT HEART CATHETERIZATION	737.28	737.28	7/1/2006
93501	26	5	RIGHT HEART CATHETERIZATION	151.66	151.66	7/1/2006
93501	TC	T	RIGHT HEART CATHETERIZATION	585.62	585.62	7/1/2006
93503		3	PLACEMENT OF FLOW DIRECTED CATHETER	131.90	131.90	7/1/2006
93505		3	ENDOCARDIAL BIOPSY	289.49	289.49	7/1/2006
93505	26	5	ENDOCARDIAL BIOPSY	219.89	219.89	7/1/2006
93505	TC	T	ENDOCARDIAL BIOPSY	69.60	69.60	7/1/2006
93508		3	CATHETER PLACEMENT IN CORONARY ARTERY(S), ARTERIAL CORONARY CONDUIT(S), AND/OR	656.57	656.57	7/1/2006
93508	26	5	CATHETER PLACEMENT IN CORONARY ARTERY(S), ARTERIAL CORONARY CONDUIT(S), AND/OR	222.93	222.93	7/1/2006
93508	TC	T	CATHETER PLACEMENT IN CORONARY ARTERY(S), ARTERIAL CORONARY CONDUIT(S), AND/OR	433.64	433.64	7/1/2006
93510		3	LEFT HEART CATHETERIZATION (RETROGRADE)	1,515.39	1,515.39	7/1/2006
93510	26	5	LEFT HEART CATHETERIZATION (RETROGRADE)	234.65	234.65	7/1/2006
93510	TC	T	LEFT HEART CATHETERIZATION (RETROGRADE)	1,280.74	1,280.74	7/1/2006
93511		3	LFT HEART CATH RETROG FROM BRAD/AXIL OR FEM ARTERY; PERCUT BY CUTDOWN	1,516.29	1,516.29	7/1/2006
93511	26	5	LFT HEART CATH RETROG FROM BRAD/AXIL OR FEM ARTERY; PERCUT BY CUTDOWN	269.95	269.95	7/1/2006
93511	TC	T	LFT HEART CATH RETROG FROM BRAD/AXIL OR FEM ARTERY; PERCUT BY CUTDOWN	1,246.34	1,246.34	7/1/2006
93514		3	LEFT HEART CATH BY LEFT VENTRICULAR PUNCTURE	1,616.92	1,616.92	7/1/2006
93514	26	5	LEFT HEART CATH BY LEFT VENTRICULAR PUNCTURE	368.42	368.42	7/1/2006
93514	TC	T	LEFT HEART CATH BY LEFT VENTRICULAR PUNCTURE	1,248.50	1,248.50	7/1/2006
93524		3	COMBINED TRANSSEPTAL AND RETROGRADE LEFT HEART CATHETERIZATION	1,995.61	1,995.61	7/1/2006
93524	26	5	COMBINED TRANSSEPTAL AND RETROGRADE LEFT HEART CATHETERIZATION	366.25	366.25	7/1/2006
93524	TC	T	COMBINED TRANSSEPTAL AND RETROGRADE LEFT HEART CATHETERIZATION	1,629.36	1,629.36	7/1/2006
93526		3	COMBINED RT HEART CATH AND RETROGRADE LEFT HEART CATH	1,992.54	1,992.54	7/1/2006
93526	26	5	COMBINED RT HEART CATH AND RETROGRADE LEFT HEART CATH	318.32	318.32	7/1/2006
93526	TC	T	COMBINED RT HEART CATH AND RETROGRADE LEFT HEART CATH	1,674.17	1,674.17	7/1/2006
93527		3	COMBINED RT. HEART CATHETERIZATION/TRANSSEPTAL LEFT	2,012.82	2,012.82	7/1/2006
93527	26	5	COMBINED RT. HEART CATHETERIZATION/TRANSSEPTAL LEFT	383.46	383.46	7/1/2006
93527	TC	T	COMBINED RT. HEART CATHETERIZATION/TRANSSEPTAL LEFT	1,629.36	1,629.36	7/1/2006
93528		3	COMBINED RT HEART CATH WITH LEFT VENTRICULAR PUNCTURE	2,101.13	2,101.13	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
93528	26	5	COMBINED RT HEART CATH WITH LEFT VENTRICULAR PUNCTURE	471.76	471.76	7/1/2006
93528	TC	T	COMBINED RT HEART CATH WITH LEFT VENTRICULAR PUNCTURE	1,629.36	1,629.36	7/1/2006
93529		3	COMBINED RT. AND LEFT HEART CATH THRU EXISTING SEPTAL OPENING	1,884.94	1,884.94	7/1/2006
93529	26	5	COMBINED RT. AND LEFT HEART CATH THRU EXISTING SEPTAL OPENING	255.58	255.58	7/1/2006
93529	TC	T	COMBINED RT. AND LEFT HEART CATH THRU EXISTING SEPTAL OPENING	1,629.36	1,629.36	7/1/2006
93530		3	RIGHT HEART CATHETERIZATION FOR CONGENITAL CARDIAC ANOMALIES	808.49	808.49	7/1/2006
93530	26	5	RIGHT HEART CATHETERIZATION FOR CONGENITAL CARDIAC ANOMALIES	222.87	222.87	7/1/2006
93530	TC	T	RIGHT HEART CATHETERIZATION FOR CONGENITAL CARDIAC ANOMALIES	585.62	585.62	7/1/2006
93531		3	COMBINED RIGHT HEART CATH. AND RETROGRADE LEFT HEART CATH FOR CON	2,106.70	2,106.70	7/1/2006
93531	26	5	COMBINED RIGHT HEART CATH. AND RETROGRADE LEFT HEART CATH FOR CON	432.54	432.54	7/1/2006
93531	TC	T	COMBINED RIGHT HEART CATH. AND RETROGRADE LEFT HEART CATH FOR CON	1,674.17	1,674.17	7/1/2006
93532		3	COMBINED RIGHT AND LEFT CATHETERIZATION FOR CONGENITAL CARDIAC	2,148.03	2,148.03	7/1/2006
93532	26	5	COMBINED RIGHT AND LEFT CATHETERIZATION FOR CONGENITAL CARDIAC	516.67	516.67	7/1/2006
93532	TC	T	COMBINED RIGHT AND LEFT CATHETERIZATION FOR CONGENITAL CARDIAC	1,631.36	1,631.36	7/1/2006
93533		3	COMBINED RT. AND LEFT CATH. THROUGH SEPTAL OPENING FOR CONGENITAL	1,977.10	1,977.10	7/1/2006
93533	26	5	COMBINED RT. AND LEFT CATH. THROUGH SEPTAL OPENING FOR CONGENITAL	344.37	344.37	7/1/2006
93533	TC	T	COMBINED RT. AND LEFT CATH. THROUGH SEPTAL OPENING FOR CONGENITAL	1,632.73	1,632.73	7/1/2006
93539		3	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION; FOR SELECTIVE OPACIFICATION	19.93	19.93	7/1/2006
93540		3	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION; FOR SELECTIVE OPACIFICATION	21.34	21.34	7/1/2006
93541		3	INJECTION PROCEDURE DURING CARDIAC CATHETERIZATION; FOR PULMONARY ANGIOGRAPHY	14.31	14.31	7/1/2006
93542		3	INJECTION PX; CARDIAC CATH. SELECTIVE RIGHT VENTRICULAR/ATRIAL	14.31	14.31	7/1/2006
93543		3	INJECTION PX; CARDIAC CATH. SELECT. LEFT VENTRICULAR/ATRIAL ANGIO	14.31	14.31	7/1/2006
93544		3	INJECTION PX; CARDIAC CATH. FOR AORTOGRAPHY	12.54	12.54	7/1/2006
93545		3	INJECTION PX; CARDIAC CATH. SELECTIVE CORONARY ANGIOGRAPHY	19.93	19.93	7/1/2006
93555		3	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	256.63	256.63	7/1/2006
93555	26	5	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	40.45	40.45	7/1/2006
93555	TC	T	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	216.17	216.17	7/1/2006
93556		3	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	381.50	381.50	7/1/2006
93556	26	5	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	41.17	41.17	7/1/2006
93556	TC	T	IMAGING SUPERVISION, INTERPRETATION AND REPORT FOR INJECTION	340.33	340.33	7/1/2006
93561		3	INDICATOR DILUTION STUDIES	42.37	42.37	7/1/2006
93561	26	5	INDICATOR DILUTION STUDIES	23.76	23.76	7/1/2006
93561	TC	T	INDICATOR DILUTION STUDIES	18.61	18.61	7/1/2006
93562		3	INDICATOR DILUTION STUDIES/CARDIAC OUTPUT MEASUREMENT	19.17	19.17	7/1/2006
93562	26	5	INDICATOR DILUTION STUDIES/CARDIAC OUTPUT MEASUREMENT	7.65	7.65	7/1/2006
93562	TC	T	INDICATOR DILUTION STUDIES/CARDIAC OUTPUT MEASUREMENT	11.52	11.52	7/1/2006
93571		3	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	245.61	245.61	7/1/2006
93571	26	5	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	88.71	88.71	7/1/2006
93571	TC	T	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	156.90	156.90	7/1/2006
93572		3	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	148.22	148.22	7/1/2006
93572	26	5	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	69.33	69.33	7/1/2006
93572	TC	T	INTRAVASCULAR DOPPLER VELOCITY AND/OR PRESSURE DERIVED CORONARY FLOW RESERVE	78.89	78.89	7/1/2006
93580		3	PERCUTANEOUS TRANSCATHETER CLOSURE OF CONGENITAL INTERATRIAL COMMUNICATION (IE	920.88	920.88	7/1/2006
93581		3	PERCUTANEOUS TRANSCATHETER CLOSURE OF A CONGENITAL VENTRICULAR SEPTAL DEFECT	1,229.52	1,229.52	7/1/2006
93600		3	BUNDLE OF HIS RECORDING	175.42	175.42	7/1/2006
93600	26	5	BUNDLE OF HIS RECORDING	107.50	107.50	7/1/2006
93600	TC	T	BUNDLE OF HIS RECORDING	67.92	67.92	7/1/2006
93602		3	INTRA-ATRIAL RECORDING	145.78	145.78	7/1/2006
93602	26	5	INTRA-ATRIAL RECORDING	107.40	107.40	7/1/2006
93602	TC	T	INTRA-ATRIAL RECORDING	38.38	38.38	7/1/2006
93603		3	RIGHT VENTRICULAR RECORDING	165.48	165.48	7/1/2006
93603	26	5	RIGHT VENTRICULAR RECORDING	107.30	107.30	7/1/2006
93603	TC	T	RIGHT VENTRICULAR RECORDING	58.18	58.18	7/1/2006
93609		3	INTRAVENTRICULAR AND/OR INTRA-ATRIAL MAPPING OF TACHYCARDIA SITE(S) WITH	346.98	346.98	7/1/2006
93609	26	5	INTRAVENTRICULAR AND/OR INTRA-ATRIAL MAPPING OF TACHYCARDIA SITE(S) WITH	252.64	252.64	7/1/2006
93609	TC	T	INTRAVENTRICULAR AND/OR INTRA-ATRIAL MAPPING OF TACHYCARDIA SITE(S) WITH	94.34	94.34	7/1/2006
93610		3	INTRA-ATRIAL PACING	199.70	199.70	7/1/2006
93610	26	5	INTRA-ATRIAL PACING	152.68	152.68	7/1/2006
93610	TC	T	INTRA-ATRIAL PACING	47.02	47.02	7/1/2006
93612		3	INTRAVENTRICULAR PACING	208.77	208.77	7/1/2006
93612	26	5	INTRAVENTRICULAR PACING	152.91	152.91	7/1/2006
93612	TC	T	INTRAVENTRICULAR PACING	55.86	55.86	7/1/2006
93613		3	INTRACARDIAC ELECTROPHYSIOLOGIC 3-DIMENSIONAL MAPPING (LIST SEPARATELY IN	354.63	354.63	7/1/2006
93613	26	5	INTRACARDIAC ELECTROPHYSIOLOGIC 3-DIMENSIONAL MAPPING (LIST SEPARATELY IN	195.03	195.03	7/1/2006
93613	TC	T	INTRACARDIAC ELECTROPHYSIOLOGIC 3-DIMENSIONAL MAPPING (LIST SEPARATELY IN	159.60	159.60	7/1/2006
93618		3	INDUCTION ARTHYTHMIA BY ELECTRICAL PACING	349.26	349.26	7/1/2006
93618	26	5	INDUCTION ARTHYTHMIA BY ELECTRICAL PACING	211.85	211.85	7/1/2006
93618	TC	T	INDUCTION ARTHYTHMIA BY ELECTRICAL PACING	137.03	137.03	7/1/2006
93619		3	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	641.87	641.87	7/1/2006
93619	26	5	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	374.61	374.61	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
93619	TC	T	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	266.53	266.53	7/1/2006
93620		3	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	873.82	873.82	7/1/2006
93620	26	5	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	586.49	586.49	7/1/2006
93620	TC	T	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	294.67	294.67	7/1/2006
93621		3	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	184.89	184.89	7/1/2006
93621	26	5	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	104.53	104.53	7/1/2006
93621	TC	T	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	80.36	80.36	7/1/2006
93622		3	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	272.58	272.58	7/1/2006
93622	26	5	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	154.21	154.21	7/1/2006
93622	TC	T	COMPREHENSIVE ELECTROPHYSIOLOGIC EVALUATION WITH RIGHT ATRIAL PACING AND	118.37	118.37	7/1/2006
93623	26	5	PROGRAMMED STIMULATION AND PACING AFTER INTRAVENOUS DRUG INFUSION (LIST	141.65	141.65	7/1/2006
93640		3	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR LEADS (INCLUDES	422.88	422.88	7/1/2006
93640	26	5	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR LEADS (INCLUDES	174.43	174.43	7/1/2006
93640	TC	T	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR LEADS (INCLUDES	247.83	247.83	7/1/2006
93641		3	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR	543.13	543.13	7/1/2006
93641	26	5	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR	294.67	294.67	7/1/2006
93641	TC	T	ELECTROPHYSIOLOGIC EVALUATION OF CARDIOVERTER-DEFIBRILLATOR	247.83	247.83	7/1/2006
93642		3	ELECTROPHYSIOLOGIC EVALUATION OF SINGLE OR DUAL CHAMBER PACING	500.51	500.51	7/1/2006
93642	26	5	ELECTROPHYSIOLOGIC EVALUATION OF SINGLE OR DUAL CHAMBER PACING	252.68	252.68	7/1/2006
93642	TC	T	ELECTROPHYSIOLOGIC EVALUATION OF SINGLE OR DUAL CHAMBER PACING	247.83	247.83	7/1/2006
93650		3	INTRACARDIAC CATHETER ABLATION OF ATRIOVENTRICULAR NODE FUNCTION,	541.55	541.55	7/1/2006
93651		3	INTRACARDIAC CATHETER ABLATION OF ARRHYTHMOGENIC FOCUS; FOR TREATMENT OF	820.36	820.36	7/1/2006
93652		3	INTRACARDIAC CATHETER ABLATION OF ARRHYTHMOGENIC FOCUS; FOR TREATMENT OF	892.33	892.33	7/1/2006
93660		3	EVALUATION OF CARDIOVASCULAR FUNCTION WITH TILT TABLE EVALUATION, WITH	150.04	150.04	7/1/2006
93660	26	5	EVALUATION OF CARDIOVASCULAR FUNCTION WITH TILT TABLE EVALUATION, WITH	93.94	93.94	7/1/2006
93662		3	INTRACARDIAC ECHOCARDIOGRAPHY DURING THERAPEUTIC/DIAGNOSTIC INTERVENTION,	247.10	247.10	7/1/2006
93662	26	5	INTRACARDIAC ECHOCARDIOGRAPHY DURING THERAPEUTIC/DIAGNOSTIC INTERVENTION,	139.65	139.65	7/1/2006
93662	TC	T	INTRACARDIAC ECHOCARDIOGRAPHY DURING THERAPEUTIC/DIAGNOSTIC INTERVENTION,	107.26	107.26	7/1/2006
93701		3	BIOIMPEDANCE, THORACIC, ELECTRICAL	39.04	39.04	7/1/2006
93701	26	5	BIOIMPEDANCE, THORACIC, ELECTRICAL	8.67	8.67	7/1/2006
93701	TC	T	BIOIMPEDANCE, THORACIC, ELECTRICAL	30.37	30.37	7/1/2006
93720		3	PLETH., TOTAL BODY; WITH INTERP	32.91	32.91	7/1/2006
93721		3	PLETH., TRACING ONLY	24.90	24.90	7/1/2006
93722		3	PLETH., INTERP. ONLY	8.01	8.01	7/1/2006
93724		3	ELECTRONIC ANALYSIS OF ANTITACHYCARDIA PACEMAKER SYSTEM (INCLUDES EKG	379.77	379.77	7/1/2006
93724	26	5	ELECTRONIC ANALYSIS OF ANTITACHYCARDIA PACEMAKER SYSTEM (INCLUDES EKG	242.74	242.74	7/1/2006
93724	TC	T	ELECTRONIC ANALYSIS OF ANTITACHYCARDIA PACEMAKER SYSTEM (INCLUDES EKG	137.03	137.03	7/1/2006
93727		3	ELECTRONIC ANALYSIS OF IMPLANTABLE LOOP RECORDER (ILR) SYSTEM (INCLUDES	25.81	25.81	7/1/2006
93731		3	ELECTRONIC ANALYSIS OF DUAL-CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	39.21	39.21	7/1/2006
93731	26	5	ELECTRONIC ANALYSIS OF DUAL-CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	22.06	22.06	7/1/2006
93731	TC	T	ELECTRONIC ANALYSIS OF DUAL-CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	17.15	17.15	7/1/2006
93732		3	ANALYSIS PACEMAKER WITH REPROGRAMING DUAL-CHAMBER	63.22	63.22	7/1/2006
93732	26	5	ANALYSIS PACEMAKER WITH REPROGRAMING DUAL-CHAMBER	45.41	45.41	7/1/2006
93732	TC	T	ANALYSIS PACEMAKER WITH REPROGRAMING DUAL-CHAMBER	17.81	17.81	7/1/2006
93734		3	ELECTRONIC ANALYSIS OF SINGLE CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	30.93	30.93	7/1/2006
93734	26	5	ELECTRONIC ANALYSIS OF SINGLE CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	18.88	18.88	7/1/2006
93734	TC	T	ELECTRONIC ANALYSIS OF SINGLE CHAMBER PACEMAKER SYSTEM (INCLUDES EVALUATION OF	12.05	12.05	7/1/2006
93735		3	ANALYSIS PACEMAKER SINGLE-CHAMBER WITH REPROGRAMMING	51.87	51.87	7/1/2006
93735	26	5	ANALYSIS PACEMAKER SINGLE-CHAMBER WITH REPROGRAMMING	36.38	36.38	7/1/2006
93735	TC	T	ANALYSIS PACEMAKER SINGLE-CHAMBER WITH REPROGRAMMING	15.50	15.50	7/1/2006
93740		3	TEMPERATURE GRADIENT STUDIES	12.51	12.51	7/1/2006
93740	26	5	TEMPERATURE GRADIENT STUDIES	7.32	7.32	7/1/2006
93740	TC	T	TEMPERATURE GRADIENT STUDIES	5.20	5.20	7/1/2006
93741		3	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	62.87	62.87	7/1/2006
93741	26	5	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	39.76	39.76	7/1/2006
93741	TC	T	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	23.11	23.11	7/1/2006
93742		3	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	68.49	68.49	7/1/2006
93742	26	5	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	45.38	45.38	7/1/2006
93742	TC	T	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	23.11	23.11	7/1/2006
93743		3	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	76.12	76.12	7/1/2006
93743	26	5	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	51.02	51.02	7/1/2006
93743	TC	T	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	25.10	25.10	7/1/2006
93744		3	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	81.75	81.75	7/1/2006
93744	26	5	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	58.64	58.64	7/1/2006
93744	TC	T	ELECTRONIC ANALYSIS OF PACING CARDIOVERTER-DEFIBRILLATOR (INCLUDES	23.11	23.11	7/1/2006
93745		3	INITIAL SET-UP AND PROGRAMMING BY A PHYSICIAN OF WEARABLE	63.05	63.05	7/1/2006
93745	26	5	INITIAL SET-UP AND PROGRAMMING BY A PHYSICIAN OF WEARABLE	39.82	39.82	7/1/2006
93745	TC	T	INITIAL SET-UP AND PROGRAMMING BY A PHYSICIAN OF WEARABLE	23.23	23.23	7/1/2006
93770		3	DETERMINATION OF VENOUS PRESSURE	8.87	8.87	7/1/2006
93770	26	5	DETERMINATION OF VENOUS PRESSURE	7.65	7.65	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
93770	TC	T	DETERMINATION OF VENOUS PRESSURE	1.22	1.22	7/1/2006
93875		3	BILAT. EXTRACRANIAL ARTERY STUDIES, NON-INVASIVE	88.19	88.19	7/1/2006
93875	26	5	BILAT. EXTRACRANIAL ARTERY STUDIES, NON-INVASIVE	10.80	10.80	7/1/2006
93875	TC	T	BILAT. EXTRACRANIAL ARTERY STUDIES, NON-INVASIVE	77.39	77.39	7/1/2006
93880		3	DUPLEX SCAN OF EXTRACRANIAL ARTERIES; COMP BIL STY	215.08	215.08	7/1/2006
93880	26	5	DUPLEX SCAN OF EXTRACRANIAL ARTERIES; COMP BIL STY	29.15	29.15	7/1/2006
93880	TC	T	DUPLEX SCAN OF EXTRACRANIAL ARTERIES; COMP BIL STY	185.93	185.93	7/1/2006
93882		3	DUPLEX SCAN OF EXTRACRANIAL ARTERIES;	136.65	136.65	7/1/2006
93882	26	5	DUPLEX SCAN OF EXTRACRANIAL ARTERIES;	19.96	19.96	7/1/2006
93882	TC	T	DUPLEX SCAN OF EXTRACRANIAL ARTERIES;	116.69	116.69	7/1/2006
93886		3	TRANSCRANIAL DOPPLER STDY OF INTRACRANIAL ART;COMP	268.12	268.12	7/1/2006
93886	26	5	TRANSCRANIAL DOPPLER STDY OF INTRACRANIAL ART;COMP	47.48	47.48	7/1/2006
93886	TC	T	TRANSCRANIAL DOPPLER STDY OF INTRACRANIAL ART;COMP	220.64	220.64	7/1/2006
93888		3	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; LIMITED STUDY	170.47	170.47	7/1/2006
93888	26	5	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; LIMITED STUDY	31.09	31.09	7/1/2006
93888	TC	T	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; LIMITED STUDY	139.37	139.37	7/1/2006
93890		3	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; VASOREACTIVITY STUDY	209.00	209.00	7/1/2006
93890	26	5	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; VASOREACTIVITY STUDY	50.63	50.63	7/1/2006
93890	TC	T	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; VASOREACTIVITY STUDY	158.37	158.37	7/1/2006
93892		3	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION	223.01	223.01	7/1/2006
93892	26	5	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION	58.02	58.02	7/1/2006
93892	TC	T	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION	164.99	164.99	7/1/2006
93893		3	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION WITH	218.71	218.71	7/1/2006
93893	26	5	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION WITH	58.02	58.02	7/1/2006
93893	TC	T	TRANSCRANIAL DOPPLER STUDY OF THE INTRACRANIAL ARTERIES; EMBOLI DETECTION WITH	160.69	160.69	7/1/2006
93922		3	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	101.56	101.56	7/1/2006
93922	26	5	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	12.11	12.11	7/1/2006
93922	TC	T	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	89.44	89.44	7/1/2006
93923		3	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	156.01	156.01	7/1/2006
93923	26	5	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	22.09	22.09	7/1/2006
93923	TC	T	NONINVASIVE PHYSIOLOGIC STUDIES OF UPPER OR LOWER EXTREMITY	133.92	133.92	7/1/2006
93924		3	NONINVASIVE PHYSIOLOGIC STUDIES OF LOWER EXTREMITY ARTERIES	183.90	183.90	7/1/2006
93924	26	5	NONINVASIVE PHYSIOLOGIC STUDIES OF LOWER EXTREMITY ARTERIES	24.78	24.78	7/1/2006
93924	TC	T	NONINVASIVE PHYSIOLOGIC STUDIES OF LOWER EXTREMITY ARTERIES	159.12	159.12	7/1/2006
93925		3	DUPLEX SCAN LOWER EXTREM. ARTERIES; BILAT, COMPLET	255.10	255.10	7/1/2006
93925	26	5	DUPLEX SCAN LOWER EXTREM. ARTERIES; BILAT, COMPLET	28.43	28.43	7/1/2006
93925	TC	T	DUPLEX SCAN LOWER EXTREM. ARTERIES; BILAT, COMPLET	226.67	226.67	7/1/2006
93926		3	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	154.74	154.74	7/1/2006
93926	26	5	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	19.27	19.27	7/1/2006
93926	TC	T	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	135.47	135.47	7/1/2006
93930		3	DUPLEX SCAN UPPER EXTREM. ARTERIES; COMP.BILAT STY	203.88	203.88	7/1/2006
93930	26	5	DUPLEX SCAN UPPER EXTREM. ARTERIES; COMP.BILAT STY	22.78	22.78	7/1/2006
93930	TC	T	DUPLEX SCAN UPPER EXTREM. ARTERIES; COMP.BILAT STY	181.09	181.09	7/1/2006
93931		3	DUPLEX SCAN OF UPPER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	132.98	132.98	7/1/2006
93931	26	5	DUPLEX SCAN OF UPPER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	15.16	15.16	7/1/2006
93931	TC	T	DUPLEX SCAN OF UPPER EXTREMITY ARTERIES OR ARTERIAL BYPASS GRAFTS; UNILATERAL	117.81	117.81	7/1/2006
93965		3	NON-INVASIVE PHYSIOLOGIC STUDIES OF EXTREMITY VEINS, COMPLETE BILATERAL STUDY	108.57	108.57	7/1/2006
93965	26	5	NON-INVASIVE PHYSIOLOGIC STUDIES OF EXTREMITY VEINS, COMPLETE BILATERAL STUDY	17.04	17.04	7/1/2006
93965	TC	T	NON-INVASIVE PHYSIOLOGIC STUDIES OF EXTREMITY VEINS, COMPLETE BILATERAL STUDY	91.53	91.53	7/1/2006
93970		3	DUPLEX SCAN OF EXTREMITY VEINS, COMP. BILAT. STUDY	209.30	209.30	7/1/2006
93970	26	5	DUPLEX SCAN OF EXTREMITY VEINS, COMP. BILAT. STUDY	33.29	33.29	7/1/2006
93970	TC	T	DUPLEX SCAN OF EXTREMITY VEINS, COMP. BILAT. STUDY	175.82	175.82	7/1/2006
93971		3	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESPONSES TO COMPRESSION AND OTHER	142.35	142.35	7/1/2006
93971	26	5	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESPONSES TO COMPRESSION AND OTHER	21.86	21.86	7/1/2006
93971	TC	T	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESPONSES TO COMPRESSION AND OTHER	120.49	120.49	7/1/2006
93975		3	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	331.09	331.09	7/1/2006
93975	26	5	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	87.67	87.67	7/1/2006
93975	TC	T	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	243.42	243.42	7/1/2006
93976		3	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	195.38	195.38	7/1/2006
93976	26	5	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	57.96	57.96	7/1/2006
93976	TC	T	DUPLEX SCAN OF ARTERIAL INFLOW AND VENOUS OUTFLOW OF ABDOMINAL, PELVIC, SCROTAL	137.41	137.41	7/1/2006
93978		3	DUPLEX SCAN COMPLETE; AORTA,VENA CAVA,ILIAC VASC.	183.02	183.02	7/1/2006
93978	26	5	DUPLEX SCAN COMPLETE; AORTA,VENA CAVA,ILIAC VASC.	32.07	32.07	7/1/2006
93978	TC	T	DUPLEX SCAN COMPLETE; AORTA,VENA CAVA,ILIAC VASC.	150.95	150.95	7/1/2006
93979		3	DUPLEX SCAN OF AORTA, INFERIOR VENA CAVA, ILIAC VASCULATURE, OR BYPASS GRAFTS;	128.72	128.72	7/1/2006
93979	26	5	DUPLEX SCAN OF AORTA, INFERIOR VENA CAVA, ILIAC VASCULATURE, OR BYPASS GRAFTS;	21.50	21.50	7/1/2006
93979	TC	T	DUPLEX SCAN OF AORTA, INFERIOR VENA CAVA, ILIAC VASCULATURE, OR BYPASS GRAFTS;	107.22	107.22	7/1/2006
93990		3	DUPLEX SCAN OF HEMODIALYSIS	147.48	147.48	7/1/2006
93990	26	5	DUPLEX SCAN OF HEMODIALYSIS	12.67	12.67	7/1/2006
93990	TC	T	DUPLEX SCAN OF HEMODIALYSIS	134.81	134.81	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
94010		3	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY,	29.00	29.00	7/1/2006
94010	26	5	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY,	8.01	8.01	7/1/2006
94010	TC	T	SPIROMETRY, INCLUDING GRAPHIC RECORD, TOTAL AND TIMED VITAL CAPACITY,	21.00	21.00	7/1/2006
94060		3	BRONCHOSPASM EVALUATION: SPIROMETRY AS IN 94010, BEFORE AND AFTER	48.21	48.21	7/1/2006
94060	26	5	BRONCHOSPASM EVALUATION: SPIROMETRY AS IN 94010, BEFORE AND AFTER	14.37	14.37	7/1/2006
94060	TC	T	BRONCHOSPASM EVALUATION: SPIROMETRY AS IN 94010, BEFORE AND AFTER	33.84	33.84	7/1/2006
94070		3	PROLONGED POSTEXPOSURE EVALUATION OF BRONCHOSPASM WITH MULTIPLE SPIROMETRIC	51.76	51.76	7/1/2006
94070	26	5	PROLONGED POSTEXPOSURE EVALUATION OF BRONCHOSPASM WITH MULTIPLE SPIROMETRIC	28.25	28.25	7/1/2006
94070	TC	T	PROLONGED POSTEXPOSURE EVALUATION OF BRONCHOSPASM WITH MULTIPLE SPIROMETRIC	23.50	23.50	7/1/2006
94150		3	VITAL CAPACITY, TOTAL	18.55	18.55	7/1/2006
94150	26	5	VITAL CAPACITY, TOTAL	3.74	3.74	7/1/2006
94150	TC	T	VITAL CAPACITY, TOTAL	14.80	14.80	7/1/2006
94200		3	MAXIMUM BREATHING CAPACITY, MAXIMAL VOLUNTARY VENTILATION	19.23	19.23	7/1/2006
94200	26	5	MAXIMUM BREATHING CAPACITY, MAXIMAL VOLUNTARY VENTILATION	5.18	5.18	7/1/2006
94200	TC	T	MAXIMUM BREATHING CAPACITY, MAXIMAL VOLUNTARY VENTILATION	14.04	14.04	7/1/2006
94240		3	FUNCTIONAL RESIDUAL CAPACITY OR RESIDUAL VOLUME	32.60	32.60	7/1/2006
94240	26	5	FUNCTIONAL RESIDUAL CAPACITY OR RESIDUAL VOLUME	12.24	12.24	7/1/2006
94240	TC	T	FUNCTIONAL RESIDUAL CAPACITY OR RESIDUAL VOLUME	20.36	20.36	7/1/2006
94250		3	EXPIRED GAS COLLECTION	25.62	25.62	7/1/2006
94250	26	5	EXPIRED GAS COLLECTION	5.18	5.18	7/1/2006
94250	TC	T	EXPIRED GAS COLLECTION	20.44	20.44	7/1/2006
94260		3	THORACIC GAS VOLUME	25.04	25.04	7/1/2006
94260	26	5	THORACIC GAS VOLUME	6.24	6.24	7/1/2006
94260	TC	T	THORACIC GAS VOLUME	18.81	18.81	7/1/2006
94350		3	DETERMINATION MALDISTRIBUTION OF INSPIRED GAS	35.69	35.69	7/1/2006
94350	26	5	DETERMINATION MALDISTRIBUTION OF INSPIRED GAS	12.24	12.24	7/1/2006
94350	TC	T	DETERMINATION MALDISTRIBUTION OF INSPIRED GAS	23.44	23.44	7/1/2006
94360		3	DETERMINATION OF RESISTANCE TO AIRFLOW	34.16	34.16	7/1/2006
94360	26	5	DETERMINATION OF RESISTANCE TO AIRFLOW	12.24	12.24	7/1/2006
94360	TC	T	DETERMINATION OF RESISTANCE TO AIRFLOW	21.92	21.92	7/1/2006
94370		3	LUNG FUNCTION TEST	33.90	33.90	7/1/2006
94375		3	RESPIRATORY FLOW VOLUME LOOP	31.73	31.73	7/1/2006
94375	26	5	RESPIRATORY FLOW VOLUME LOOP	14.37	14.37	7/1/2006
94375	TC	T	RESPIRATORY FLOW VOLUME LOOP	17.35	17.35	7/1/2006
94400		3	BREATHING RESPONSE TO CO2	44.30	44.30	7/1/2006
94400	26	5	BREATHING RESPONSE TO CO2	19.07	19.07	7/1/2006
94400	TC	T	BREATHING RESPONSE TO CO2	25.23	25.23	7/1/2006
94450		3	BREATHING RESPONSE TO HYPOXIA	43.48	43.48	7/1/2006
94450	26	5	BREATHING RESPONSE TO HYPOXIA	18.84	18.84	7/1/2006
94450	TC	T	BREATHING RESPONSE TO HYPOXIA	24.64	24.64	7/1/2006
94620		3	PULMONARY STRESS TESTING; SIMPLE (EG, PROLONGED EXERCISE TEST FOR BRONCHOSPASM	108.84	108.84	7/1/2006
94620	26	5	PULMONARY STRESS TESTING; SIMPLE (EG, PROLONGED EXERCISE TEST FOR BRONCHOSPASM	30.36	30.36	7/1/2006
94620	TC	T	PULMONARY STRESS TESTING; SIMPLE (EG, PROLONGED EXERCISE TEST FOR BRONCHOSPASM	78.49	78.49	7/1/2006
94621		3	PULMONARY STRESS TESTING; COMPLEX (INCLUDING MEASUREMENTS OF CO2 PRODUCTION, O	128.01	128.01	7/1/2006
94621	26	5	PULMONARY STRESS TESTING; COMPLEX (INCLUDING MEASUREMENTS OF CO2 PRODUCTION, O	67.08	67.08	7/1/2006
94621	TC	T	PULMONARY STRESS TESTING; COMPLEX (INCLUDING MEASUREMENTS OF CO2 PRODUCTION, O	60.92	60.92	7/1/2006
94640		3	NONPRESSURIZED INHALATION TREATMENT FOR ACUTE AIRWAY OBSTRUCTION	10.40	10.40	7/1/2006
94642		3	AEROSOL INHALATION PENTAMIDINE PROPHYLAXIS	9.74	9.74	7/1/2006
94656		3	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET	83.73	55.90	7/1/2006
94657		3	VENTILATION ASSIST AND MANAGEMENT, INITIATION OF PRESSURE OR VOLUME PRESET	63.26	39.08	7/1/2006
94660		3	CONTINUOUS POSITIVE AIRWAY PRESSURE VENTILATION (CPAP), INITIATION AND	49.81	35.90	7/1/2006
94662		3	CONT NEGATIVE PRESSURE VENT INIATION/MANAGEMENT	35.67	35.67	7/1/2006
94664		3	INHALATION THERAPY	11.19	11.19	7/1/2006
94667		3	MANIPULATION CHEST WALL	18.38	18.38	7/1/2006
94668		3	MANIPULATION CHEST WALL SUBSEQUENT	15.37	15.37	7/1/2006
94680		3	EXPIRED GAS ANALYSIS	72.91	72.91	7/1/2006
94680	26	5	EXPIRED GAS ANALYSIS	12.24	12.24	7/1/2006
94680	TC	T	EXPIRED GAS ANALYSIS	60.66	60.66	7/1/2006
94681		3	EXPIRED GAS ANALYSIS WITH CO2	94.00	94.00	7/1/2006
94681	26	5	EXPIRED GAS ANALYSIS WITH CO2	9.42	9.42	7/1/2006
94681	TC	T	EXPIRED GAS ANALYSIS WITH CO2	84.58	84.58	7/1/2006
94690		3	EXPIRED GAS ANALYSIS REST, INDIRECT	69.92	69.92	7/1/2006
94690	26	5	EXPIRED GAS ANALYSIS REST, INDIRECT	3.41	3.41	7/1/2006
94690	TC	T	EXPIRED GAS ANALYSIS REST, INDIRECT	66.50	66.50	7/1/2006
94720		3	CARBON MONOXIDE DIFFUSING CAPACITY (EG, SINGLE BREATH, STEADY STATE)	44.10	44.10	7/1/2006
94720	26	5	CARBON MONOXIDE DIFFUSING CAPACITY (EG, SINGLE BREATH, STEADY STATE)	12.24	12.24	7/1/2006
94725		3	MEMBRANE DIFFUSION CAPACITY	109.07	109.07	7/1/2006
94725	26	5	MEMBRANE DIFFUSION CAPACITY	12.24	12.24	7/1/2006
94725	TC	T	MEMBRANE DIFFUSION CAPACITY	96.83	96.83	7/1/2006
94750		3	PULMONARY COMPLIANCE STUDY (EG, PLETHYSMOGRAPHY, VOLUME AND PRESSURE	53.82	53.82	7/1/2006

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
94750	26	5	PULMONARY COMPLIANCE STUDY (EG, PLETHYSMOGRAPHY, VOLUME AND PRESSURE	10.83	10.83	7/1/2006
94750	TC	T	PULMONARY COMPLIANCE STUDY (EG, PLETHYSMOGRAPHY, VOLUME AND PRESSURE	42.99	42.99	7/1/2006
94760		3	NONINVASIVE EAR OR PULSE OXIMETRY FOR OXYGEN SAT.	1.79	1.79	7/1/2006
94761		3	NONINVASIVE EAR OR PULSE OXIMETRY MULTIPLE DETERM.	3.70	3.70	7/1/2006
94762		3	NONINVASIVE PULSE OXIMETRY FOR O2 SATURATION; BY CONTINUOUS OVERNIGHT MONITORIN	17.87	17.87	7/1/2006
94770		3	CARBON DIOXIDE/INFRARED ANALYSIS	32.09	32.09	7/1/2006
94770	26	5	CARBON DIOXIDE/INFRARED ANALYSIS	6.96	6.96	7/1/2006
94770	TC	T	CARBON DIOXIDE/INFRARED ANALYSIS	25.13	25.13	7/1/2006
94772		3	RESPIRATORY PATTERN RECORDING	101.03	101.03	7/1/2006
94772	26	5	RESPIRATORY PATTERN RECORDING	53.20	53.20	7/1/2006
94772	TC	T	RESPIRATORY PATTERN RECORDING	47.83	47.83	7/1/2006
95004		3	PERCUTANEOUS TESTS (SCRATCH, PUNCTURE, PRICK) WITH ALLERGENIC EXTRACTS,	3.54	3.54	7/1/2006
95010		3	PERCUTANEOUS TESTS (SCRATCH, PUNCTURE, PRICK) SEQUENTIAL AND INCREMENTAL, WITH	16.23	7.62	7/1/2006
95015		3	INTRACUTANEOUS (INTRADERMAL) TESTS, SEQUENTIAL AND INCREMENTAL, WITH DRUGS,	10.27	7.62	7/1/2006
95024		3	INTRACUTANEOUS (INTRADERMAL) TESTS WITH ALLERGENIC EXTRACTS, IMMEDIATE TYPE	5.20	5.20	7/1/2006
95027		3	SKIN END POINT TITRATION	5.20	5.20	7/1/2006
95028		3	INTRACUTANEOUS (INTRADERMAL) TESTS WITH ALLERGENIC EXTRACTS, DELAYED TYPE	7.85	7.85	7/1/2006
95044		3	PATCH OR APPLICATION TEST(S) (SPECIFY NUMBER OF TESTS)	6.85	6.85	7/1/2006
95052		3	PHOTO PATCH TEST(S) (SPECIFY NUMBER OF TESTS)	8.51	8.51	7/1/2006
95056		3	PHOTOSENSITIVITY TESTS	5.86	5.86	7/1/2006
95060		3	ALLERGY EYE TESTS	12.05	12.05	7/1/2006
95065		3	ALLERGY NOSE TEST	6.85	6.85	7/1/2006
95070		3	ALLERGY BRONCHIAL TESTS	76.31	76.31	7/1/2006
95071		3	INHALA BRONCH CHALLENGE TESTING W/ANTIGENS SPECIFY	97.51	97.51	7/1/2006
95075		3	INGESTION CHALLENGE TEST	62.05	47.48	7/1/2006
95078		3	PROVOCATIVE TESTING	8.74	8.74	7/1/2006
95115		3	IMMUNOTHERAPY, ONE INJECTION	13.38	13.38	7/1/2006
95117		3	PROFESSIONAL SERVICES FOR ALLERGEN IMMUNOTHERAPY NOT INCLUDING PROVISION OF	17.02	17.02	7/1/2006
95120		3	PROFESSIONAL SERVICES FOR ALLERGEN IMMUNOTHERAPY IN PRESCRIBING	4.64	4.64	7/1/2006
95125		3	PROFESSIONAL SERVICES FOR ALLERGEN IMMUNOTHERAPY IN PRESCRIBING	6.98	6.98	7/1/2006
95130		3	IMMUNOTHERAPY	29.54	29.54	7/1/2006
95131		3	IMMUNOTHERAPY 2 STINGING INSECT VENOMS	37.60	37.60	7/1/2006
95132		3	IMMUNOTHERAPY 3 STINGING INSECT VENOMS	29.61	29.61	7/1/2006
95133		3	IMMUNOTHERAPY 4 STINGING INSECT VENOMS	54.75	54.75	7/1/2006
95134		3	IMMUNOTHERAPY 5 STINGING INSECT VENOMS	65.55	65.55	7/1/2006
95144		3	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	8.68	3.05	7/1/2006
95145		3	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	12.99	3.05	7/1/2006
95146		3	PROFESSIONAL SERVICES FOR THE SUPERVISION AND PROVISION OF ANTIGENS FOR	16.96	3.38	7/1/2006
95147		3	PROFESSIONAL SERVICES FOR THE SUPERVISION AND PROVISION OF ANTIGENS FOR	16.30	3.05	7/1/2006
95148		3	PROFESSIONAL SERVICES FOR THE SUPERVISION AND PROVISION OF ANTIGENS FOR	21.60	3.38	7/1/2006
95149		3	PROFESSIONAL SERVICES FOR THE SUPERVISION AND PROVISION OF ANTIGENS FOR	28.89	3.38	7/1/2006
95165		3	PROFESSIONAL SERVICES FOR THE SUPERVISION OF PREPARATION AND PROVISION OF	8.68	3.05	7/1/2006
95170		3	PROFESSIONAL SERVICES FOR THE SUPERVISION AND PROVISION OF ANTIGENS FOR	6.70	3.38	7/1/2006
95180		3	RAPID DESENSITIZATION PROCEDURE, EACH HOUR (EG, INSULIN, PENICILLIN, EQUINE	140.86	104.09	7/1/2006
95805		3	MULTIPLE SLEEP LATENCY OR MAINTENANCE OF WAKEFULNESS TESTING, RECORDING,	650.94	650.94	7/1/2006
95805	26	5	MULTIPLE SLEEP LATENCY OR MAINTENANCE OF WAKEFULNESS TESTING, RECORDING,	91.62	91.62	7/1/2006
95805	TC	T	MULTIPLE SLEEP LATENCY OR MAINTENANCE OF WAKEFULNESS TESTING, RECORDING,	559.32	559.32	7/1/2006
95806		3	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	179.38	179.38	7/1/2006
95806	26	5	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	79.36	79.36	7/1/2006
95806	TC	T	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	99.89	99.89	7/1/2006
95807		3	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	464.78	464.78	7/1/2006
95807	26	5	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	79.16	79.16	7/1/2006
95807	TC	T	SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR	385.62	385.62	7/1/2006
95808		3	POLYSOMNOGRAPHY; SLEEP STAGING WITH 1-3 ADD'L PARAMETERS OF SLEEP, ATTENDED	546.29	546.29	7/1/2006
95808	26	5	POLYSOMNOGRAPHY; SLEEP STAGING WITH 1-3 ADD'L PARAMETERS OF SLEEP, ATTENDED	128.87	128.87	7/1/2006
95808	TC	T	POLYSOMNOGRAPHY; SLEEP STAGING WITH 1-3 ADD'L PARAMETERS OF SLEEP, ATTENDED	417.41	417.41	7/1/2006
95810		3	POLYSOMNOGRAPHY; SLEEP STAGING WITH 4 OR MORE ADD'L PARAMETERS OF SLEEP, ATTEND	721.29	721.29	7/1/2006
95810	26	5	POLYSOMNOGRAPHY; SLEEP STAGING WITH 4 OR MORE ADD'L PARAMETERS OF SLEEP, ATTEND	169.73	169.73	7/1/2006
95810	TC	T	POLYSOMNOGRAPHY; SLEEP STAGING WITH 4 OR MORE ADD'L PARAMETERS OF SLEEP, ATTEND	551.56	551.56	7/1/2006
95811		3	POLYSOMNOGRAPHY; OF SLEEP, ATTENDED BY A TECHNOLOGIST SLEEP STAGI	787.78	787.78	7/1/2006
95811	26	5	POLYSOMNOGRAPHY; OF SLEEP, ATTENDED BY A TECHNOLOGIST SLEEP STAGI	182.66	182.66	7/1/2006
95811	TC	T	POLYSOMNOGRAPHY; OF SLEEP, ATTENDED BY A TECHNOLOGIST SLEEP STAGI	605.12	605.12	7/1/2006
95812		3	EEG EXTENDED MONITORING; UP TO 1 HOUR	176.61	176.61	7/1/2006
95812	26	5	EEG EXTENDED MONITORING; UP TO 1 HOUR	55.17	55.17	7/1/2006
95812	TC	T	EEG EXTENDED MONITORING; UP TO 1 HOUR	121.44	121.44	7/1/2006
95813		3	EEG EXTENDED MONITORING; GREATER THAN 1 HOUR	233.50	233.50	7/1/2006
95813	26	5	EEG EXTENDED MONITORING; GREATER THAN 1 HOUR	87.54	87.54	7/1/2006
95813	TC	T	EEG EXTENDED MONITORING; GREATER THAN 1 HOUR	145.95	145.95	7/1/2006
95816		3	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND DROWSY (INCLUDING	165.78	165.78	7/1/2006
95816	26	5	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND DROWSY (INCLUDING	55.50	55.50	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
95816	TC	T	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND DROWSY (INCLUDING	110.28	110.28	7/1/2006
95819		3	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND ASLEEP (INCLUDING	141.61	141.61	7/1/2006
95819	26	5	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND ASLEEP (INCLUDING	55.50	55.50	7/1/2006
95819	TC	T	ELECTROENCEPHALOGRAM (EEG) INCLUDING RECORDING AWAKE AND ASLEEP (INCLUDING	86.10	86.10	7/1/2006
95822		3	ELECTROENCEPHALOGRAM; SLEEP ONLY	195.96	195.96	7/1/2006
95822	26	5	ELECTROENCEPHALOGRAM; SLEEP ONLY	55.50	55.50	7/1/2006
95822	TC	T	ELECTROENCEPHALOGRAM; SLEEP ONLY	140.45	140.45	7/1/2006
95824		3	ELECTROENCEPHALOGRAM; CEREBRAL DEATH EVAL. ONLY	53.98	53.98	7/1/2006
95824	26	5	ELECTROENCEPHALOGRAM; CEREBRAL DEATH EVAL. ONLY	37.83	37.83	7/1/2006
95824	TC	T	ELECTROENCEPHALOGRAM; CEREBRAL DEATH EVAL. ONLY	8.83	8.83	7/1/2006
95827		3	ELECTROENCEPHALOGRAM; ALL NIGHT SLEEP ONLY	133.02	133.02	7/1/2006
95827	26	5	ELECTROENCEPHALOGRAM; ALL NIGHT SLEEP ONLY	53.62	53.62	7/1/2006
95827	TC	T	ELECTROENCEPHALOGRAM; ALL NIGHT SLEEP ONLY	79.41	79.41	7/1/2006
95829		3	ELECTROCORTICOGRAM AT SURGER	1,264.51	1,264.51	7/1/2006
95829	26	5	ELECTROCORTICOGRAM AT SURGER	311.12	311.12	7/1/2006
95829	TC	T	ELECTROCORTICOGRAM AT SURGER	953.39	953.39	7/1/2006
95830		3	INSERTION OF ELECTRODES FOR ELECTROENCEPHALOGRAPHI	173.04	87.92	7/1/2006
95830	26	5	INSERTION OF ELECTRODES FOR ELECTROENCEPHALOGRAPHI	29.95	29.95	7/1/2006
95831		3	MUSCLE TESTING, MANUAL (SEPARATE PROCEDURE) WITH REPORT; EXTREMITY (EXCLUDING	25.55	14.62	7/1/2006
95832		3	MUSCLE TESTING HAND	21.83	14.88	7/1/2006
95833		3	MUSCLE TESTING TOTAL EVALUATION OF BODY EXCLUDING	36.59	25.00	7/1/2006
95834		3	BODY MUSCLE EVALUATION	43.16	31.57	7/1/2006
95851		3	RANGE OF MOTION EVALUATION	17.91	8.64	7/1/2006
95851	26	5	RANGE OF MOTION EVALUATION	13.56	6.52	7/1/2006
95852		3	RANGE OF MOTION MEASUREMENTS AND REPORT OF HANDS	12.80	5.85	7/1/2006
95852	26	5	RANGE OF MOTION MEASUREMENTS AND REPORT OF HANDS	7.26	7.26	7/1/2006
95857		3	TENSILON TEST FOR MYASTHENIA GRAVIS	39.42	27.16	7/1/2006
95857	26	5	TENSILON TEST FOR MYASTHENIA GRAVIS	18.92	18.94	7/1/2006
95860		3	NEEDLE ELECTROMYOGRAPHY, ONE EXTREMITY WITH OR WITHOUT RELATED PARASPINAL AREA	83.21	83.21	7/1/2006
95860	26	5	NEEDLE ELECTROMYOGRAPHY, ONE EXTREMITY WITH OR WITHOUT RELATED PARASPINAL AREA	49.63	49.63	7/1/2006
95860	TC	T	NEEDLE ELECTROMYOGRAPHY, ONE EXTREMITY WITH OR WITHOUT RELATED PARASPINAL AREA	33.58	33.58	7/1/2006
95861		3	NEEDLE ELECTROMYOGRAPHY, TWO EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	105.14	105.14	7/1/2006
95861	26	5	NEEDLE ELECTROMYOGRAPHY, TWO EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	79.58	79.58	7/1/2006
95861	TC	T	NEEDLE ELECTROMYOGRAPHY, TWO EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	25.56	25.56	7/1/2006
95863		3	NEEDLE ELECTROMYOGRAPHY, THREE EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	128.41	128.41	7/1/2006
95863	26	5	NEEDLE ELECTROMYOGRAPHY, THREE EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	95.90	95.90	7/1/2006
95863	TC	T	NEEDLE ELECTROMYOGRAPHY, THREE EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	32.52	32.52	7/1/2006
95864		3	NEEDLE ELECTROMYOGRAPHY, FOUR EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	164.59	164.59	7/1/2006
95864	26	5	NEEDLE ELECTROMYOGRAPHY, FOUR EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	102.54	102.54	7/1/2006
95864	TC	T	NEEDLE ELECTROMYOGRAPHY, FOUR EXTREMITIES WITH OR WITHOUT RELATED PARASPINAL	62.04	62.04	7/1/2006
95865		3	NEEDLE ELECTROMYOGRAPHY; LARYNX	107.09	107.09	7/1/2006
95865	26	5	NEEDLE ELECTROMYOGRAPHY; LARYNX	83.87	83.87	7/1/2006
95865	TC	T	NEEDLE ELECTROMYOGRAPHY; LARYNX	23.21	23.21	7/1/2006
95866		3	NEEDLE ELECTROMYOGRAPHY; HEMIDIAPHRAGM	72.48	72.48	7/1/2006
95866	26	5	NEEDLE ELECTROMYOGRAPHY; HEMIDIAPHRAGM	65.16	65.16	7/1/2006
95866	TC	T	NEEDLE ELECTROMYOGRAPHY; HEMIDIAPHRAGM	7.32	7.32	7/1/2006
95867		3	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, UNILATERAL	60.86	60.86	7/1/2006
95867	26	5	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, UNILATERAL	40.73	40.73	7/1/2006
95867	TC	T	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, UNILATERAL	20.13	20.13	7/1/2006
95868		3	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, BILATERAL	84.87	84.87	7/1/2006
95868	26	5	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, BILATERAL	60.53	60.53	7/1/2006
95868	TC	T	NEEDLE ELECTROMYOGRAPHY, CRANIAL NERVE SUPPLIED MUSCLES, BILATERAL	24.34	24.34	7/1/2006
95869		3	NEEDLE ELECTROMYOGRAPHY; THORACIC PARASPINAL MUSCLES	26.50	26.50	7/1/2006
95869	26	5	NEEDLE ELECTROMYOGRAPHY; THORACIC PARASPINAL MUSCLES	19.08	19.08	7/1/2006
95869	TC	T	NEEDLE ELECTROMYOGRAPHY; THORACIC PARASPINAL MUSCLES	7.42	7.42	7/1/2006
95870		3	NEEDLE ELECTROMYOGRAPHY; OTHER THAN PARASPINAL (EG, ABDOMEN, THORAX)	26.50	26.50	7/1/2006
95870	26	5	NEEDLE ELECTROMYOGRAPHY; OTHER THAN PARASPINAL (EG, ABDOMEN, THORAX)	19.08	19.08	7/1/2006
95870	TC	T	NEEDLE ELECTROMYOGRAPHY; OTHER THAN PARASPINAL (EG, ABDOMEN, THORAX)	7.42	7.42	7/1/2006
95872		3	NEEDLE ELECTROMYOGRAPHY USING SINGLE FIBER ELECTRODE, WITH QUANTITATIVE	97.74	97.74	7/1/2006
95872	26	5	NEEDLE ELECTROMYOGRAPHY USING SINGLE FIBER ELECTRODE, WITH QUANTITATIVE	76.71	76.71	7/1/2006
95872	TC	T	NEEDLE ELECTROMYOGRAPHY USING SINGLE FIBER ELECTRODE, WITH QUANTITATIVE	21.03	21.03	7/1/2006
95873		3	ELECTRICAL STIMULATION FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (LI	26.17	26.17	7/1/2006
95873	26	5	ELECTRICAL STIMULATION FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (LI	19.08	19.08	7/1/2006
95873	TC	T	ELECTRICAL STIMULATION FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (LI	7.09	7.09	7/1/2006
95874		3	NEEDLE ELECTROMYOGRAPHY FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (L	26.50	26.50	7/1/2006
95874	26	5	NEEDLE ELECTROMYOGRAPHY FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (L	19.41	19.41	7/1/2006
95874	TC	T	NEEDLE ELECTROMYOGRAPHY FOR GUIDANCE IN CONJUNCTION WITH CHEMODENERVATION (L	7.09	7.09	7/1/2006
95875		3	ISCHEMIC LIMB EXERCISE TEST WITH SERIAL SPECIMEN(S) ACQUISITION FOR MUSCLE	90.16	90.16	7/1/2006
95875	26	5	ISCHEMIC LIMB EXERCISE TEST WITH SERIAL SPECIMEN(S) ACQUISITION FOR MUSCLE	56.32	56.32	7/1/2006
95875	TC	T	ISCHEMIC LIMB EXERCISE TEST WITH SERIAL SPECIMEN(S) ACQUISITION FOR MUSCLE	33.84	33.84	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
95900		3	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; MOTOR,	57.78	57.78	7/1/2006
95900	26	5	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; MOTOR,	21.54	21.54	7/1/2006
95900	TC	T	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; MOTOR,	36.23	36.23	7/1/2006
95903		3	NERVE CONDUCTION STUDY, ANY SITE; MOTOR WITH F-WAVE STUDY	62.17	62.17	7/1/2006
95903	26	5	NERVE CONDUCTION STUDY, ANY SITE; MOTOR WITH F-WAVE STUDY	30.90	30.90	7/1/2006
95903	TC	T	NERVE CONDUCTION STUDY, ANY SITE; MOTOR WITH F-WAVE STUDY	31.26	31.26	7/1/2006
95904		3	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; SENSORY	49.27	49.27	7/1/2006
95904	26	5	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; SENSORY	17.67	17.67	7/1/2006
95904	TC	T	NERVE CONDUCTION, AMPLITUDE AND LATENCY/VELOCITY STUDY, EACH NERVE; SENSORY	31.60	31.60	7/1/2006
95920		3	INTRAOPERATIVE NEUROPHYSIOLOGY TESTING, PER HOUR (LIST SEPARATELY IN ADDITION	155.46	155.46	7/1/2006
95920	26	5	INTRAOPERATIVE NEUROPHYSIOLOGY TESTING, PER HOUR (LIST SEPARATELY IN ADDITION	110.46	110.46	7/1/2006
95920	TC	T	INTRAOPERATIVE NEUROPHYSIOLOGY TESTING, PER HOUR (LIST SEPARATELY IN ADDITION	45.00	45.00	7/1/2006
95921		3	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; CARDIOVAGAL INNERVATION	57.30	57.30	7/1/2006
95921	26	5	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; CARDIOVAGAL INNERVATION	44.25	44.25	7/1/2006
95921	TC	T	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; CARDIOVAGAL INNERVATION	13.05	13.05	7/1/2006
95922		3	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; VASOMOTOR ADRENERGIC INNERVATIO	62.01	62.01	7/1/2006
95922	26	5	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; VASOMOTOR ADRENERGIC INNERVATIO	48.96	48.96	7/1/2006
95922	TC	T	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; VASOMOTOR ADRENERGIC INNERVATIO	13.05	13.05	7/1/2006
95923		3	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; SUDOMOTOR, INCLUDING ONE OR MORE	98.27	98.27	7/1/2006
95923	26	5	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; SUDOMOTOR, INCLUDING ONE OR MORE	46.14	46.14	7/1/2006
95923	TC	T	TESTING OF AUTONOMIC NERVOUS SYSTEM FUNCTION; SUDOMOTOR, INCLUDING ONE OR MORE	52.13	52.13	7/1/2006
95925		3	SHORT-LATENCY SOMATOSENSORY EVOKED POTENTIAL STUDY, STIMULATION OF ANY/ALL	59.17	59.17	7/1/2006
95925	26	5	SHORT-LATENCY SOMATOSENSORY EVOKED POTENTIAL STUDY, STIMULATION OF ANY/ALL	27.65	27.65	7/1/2006
95925	TC	T	SHORT-LATENCY SOMATOSENSORY EVOKED POTENTIAL STUDY, STIMULATION OF ANY/ALL	31.52	31.52	7/1/2006
95926		3	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN LOWER LIMBS	59.27	59.27	7/1/2006
95926	26	5	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN LOWER LIMBS	27.75	27.75	7/1/2006
95926	TC	T	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN LOWER LIMBS	31.52	31.52	7/1/2006
95927		3	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN THE TRUNK OR HEAD	60.15	60.15	7/1/2006
95927	26	5	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN THE TRUNK OR HEAD	28.46	28.46	7/1/2006
95927	TC	T	SHORT LATENCY SOMATOSENSORY STUDY, ANY SITE; IN THE TRUNK OR HEAD	31.52	31.52	7/1/2006
95930		3	VISUAL EVOKED POTENTIAL (VEP) TESTING CENTRAL NERVOUS SYSTEM	87.82	87.82	7/1/2006
95930	26	5	VISUAL EVOKED POTENTIAL (VEP) TESTING CENTRAL NERVOUS SYSTEM	18.03	18.03	7/1/2006
95930	TC	T	VISUAL EVOKED POTENTIAL (VEP) TESTING CENTRAL NERVOUS SYSTEM	69.79	69.79	7/1/2006
95933		3	ORBICULARIS OCULI REFLEX BY ELECTRODIAGNOSTIC TEST	57.33	57.33	7/1/2006
95933	26	5	ORBICULARIS OCULI REFLEX BY ELECTRODIAGNOSTIC TEST	30.11	30.11	7/1/2006
95933	TC	T	ORBICULARIS OCULI REFLEX BY ELECTRODIAGNOSTIC TEST	27.22	27.22	7/1/2006
95934		3	H-REFLEX, AMPLITUDE AND LATENCY STUDY; RECORD GASTROCNEMIUS/SOLEU	33.53	33.53	7/1/2006
95934	26	5	H-REFLEX, AMPLITUDE AND LATENCY STUDY; RECORD GASTROCNEMIUS/SOLEU	26.11	26.11	7/1/2006
95934	TC	T	H-REFLEX, AMPLITUDE AND LATENCY STUDY; RECORD GASTROCNEMIUS/SOLEU	7.42	7.42	7/1/2006
95936		3	H-REFLEX, AMPLITUDE AND LATENCY STUDY; OTHER THAN GASTROCNEMIUS	35.86	35.86	7/1/2006
95936	26	5	H-REFLEX, AMPLITUDE AND LATENCY STUDY; OTHER THAN GASTROCNEMIUS	28.44	28.44	7/1/2006
95936	TC	T	H-REFLEX, AMPLITUDE AND LATENCY STUDY; OTHER THAN GASTROCNEMIUS	7.42	7.42	7/1/2006
95937		3	NEUROMUSCULAR JUNCTN TESTING, EA NERVE,ANY 1 METH.	45.79	45.79	7/1/2006
95937	26	5	NEUROMUSCULAR JUNCTN TESTING, EA NERVE,ANY 1 METH.	34.01	34.01	7/1/2006
95937	TC	T	NEUROMUSCULAR JUNCTN TESTING, EA NERVE,ANY 1 METH.	11.72	11.72	7/1/2006
95950		3	MONITORING FOR IDENTIFICATION AND LATERALIZATION OF CEREBRAL SEIZURE FOCUS,	196.62	196.62	7/1/2006
95950	26	5	MONITORING FOR IDENTIFICATION AND LATERALIZATION OF CEREBRAL SEIZURE FOCUS,	77.41	77.41	7/1/2006
95950	TC	T	MONITORING FOR IDENTIFICATION AND LATERALIZATION OF CEREBRAL SEIZURE FOCUS,	119.21	119.21	7/1/2006
95951		3	MONITORING FOR LOCALIZATION OF CEREBRAL SEIZURE FOCUS BY CABLE OR RADIO, 16 OR	1,553.31	1,553.31	7/1/2006
95951	26	5	MONITORING FOR LOCALIZATION OF CEREBRAL SEIZURE FOCUS BY CABLE OR RADIO, 16 OR	307.82	307.82	7/1/2006
95951	TC	T	MONITORING FOR LOCALIZATION OF CEREBRAL SEIZURE FOCUS BY CABLE OR RADIO, 16 OR	1,248.32	1,248.32	7/1/2006
95953		3	MONITOR FOR LOCLZN OF CEREBRAL SEIZ. BY COMP EEG;RE	377.77	377.77	7/1/2006
95953	26	5	MONITOR FOR LOCLZN OF CEREBRAL SEIZ. BY COMP EEG;RE	157.53	157.53	7/1/2006
95953	TC	T	MONITOR FOR LOCLZN OF CEREBRAL SEIZ. BY COMP EEG;RE	220.24	220.24	7/1/2006
95954		3	PHARMACOLOGICAL OR PHYSICAL ACTIVATION REQUIRING PHYSICIAN ATTENDANCE DURING	232.69	232.69	7/1/2006
95954	26	5	PHARMACOLOGICAL OR PHYSICAL ACTIVATION REQUIRING PHYSICIAN ATTENDANCE DURING	125.65	125.65	7/1/2006
95954	TC	T	PHARMACOLOGICAL OR PHYSICAL ACTIVATION REQUIRING PHYSICIAN ATTENDANCE DURING	107.04	107.04	7/1/2006
95955		3	ELECTROENCEPHALOGRAM DURING SURGERY INTERPRETATION	118.61	118.61	7/1/2006
95955	26	5	ELECTROENCEPHALOGRAM DURING SURGERY INTERPRETATION	49.44	49.44	7/1/2006
95955	TC	T	ELECTROENCEPHALOGRAM DURING SURGERY INTERPRETATION	69.17	69.17	7/1/2006
95956		3	MONITOR FOR LOCLZN OF CEREBRAL SEIZ.BY TELEMET.EEG	636.22	636.22	7/1/2006
95956	26	5	MONITOR FOR LOCLZN OF CEREBRAL SEIZ.BY TELEMET.EEG	157.63	157.63	7/1/2006
95956	TC	T	MONITOR FOR LOCLZN OF CEREBRAL SEIZ.BY TELEMET.EEG	478.59	478.59	7/1/2006
95957		3	DIGITAL ANALYSIS OF ELECTROENCEPHALOGRAM (EEG) (EG, FOR EPILEPTIC SPIKE	161.05	161.05	7/1/2006
95957	26	5	DIGITAL ANALYSIS OF ELECTROENCEPHALOGRAM (EEG) (EG, FOR EPILEPTIC SPIKE	101.97	101.97	7/1/2006
95957	TC	T	DIGITAL ANALYSIS OF ELECTROENCEPHALOGRAM (EEG) (EG, FOR EPILEPTIC SPIKE	59.07	59.07	7/1/2006
95958		3	WADA ACTIVATION TEST FOR HEMISPHERIC FUNCT.INC.EEG	276.41	276.41	7/1/2006
95958	26	5	WADA ACTIVATION TEST FOR HEMISPHERIC FUNCT.INC.EEG	215.45	215.45	7/1/2006
95958	TC	T	WADA ACTIVATION TEST FOR HEMISPHERIC FUNCT.INC.EEG	60.94	60.94	7/1/2006
95961		3	FUNCTIONAL CORTICAL AND SUBCORTICAL MAPPING BY STIMULATION AND/OR RECORDING OF	206.71	206.71	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
95961	26	5	FUNCTIONAL CORTICAL AND SUBCORTICAL MAPPING BY STIMULATION AND/OR RECORDING OF	161.71	161.71	7/1/2006
95961	TC	T	FUNCTIONAL CORTICAL AND SUBCORTICAL MAPPING BY STIMULATION AND/OR RECORDING OF	45.00	45.00	7/1/2006
95962		3	FUNCTIONAL CORTICAL MAPPING BY STIMULATION OF ELECTRODES ON BRAIN SURFACE, OR	213.99	213.99	7/1/2006
95962	26	5	FUNCTIONAL CORTICAL MAPPING BY STIMULATION OF ELECTRODES ON BRAIN SURFACE, OR	168.98	168.98	7/1/2006
95962	TC	T	FUNCTIONAL CORTICAL MAPPING BY STIMULATION OF ELECTRODES ON BRAIN SURFACE, OR	45.00	45.00	7/1/2006
95965	26	5	MAGNETOENCEPHALOGRAPHY (MEG), RECORDING AND ANALYSIS; FOR SPONTANEOUS BRAIN	411.87	411.87	7/1/2006
95966	26	5	MAGNETOENCEPHALOGRAPHY (MEG), RECORDING AND ANALYSIS; FOR EVOKED MAGNETIC	204.67	204.67	7/1/2006
95967	26	5	MAGNETOENCEPHALOGRAPHY (MEG), RECORDING AND ANALYSIS; FOR EVOKED MAGNETIC	168.40	168.40	7/1/2006
95970		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	45.05	21.53	7/1/2006
95971		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	52.22	36.98	7/1/2006
95972		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	97.31	73.46	7/1/2006
95973		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	55.27	46.00	7/1/2006
95974		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	168.00	154.75	7/1/2006
95975		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	93.45	88.15	7/1/2006
95978		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	194.41	173.22	7/1/2006
95979		3	ELECTRONIC ANALYSIS OF IMPLANTED NEUROSTIMULATOR PULSE GENERATOR SYSTEM (EG,	89.70	83.74	7/1/2006
95990		3	REFILLING AND MAINTENANCE OF IMPLANTABLE PUMP OR RESERVOIR FOR DRUG DELIVERY,	51.07	51.07	7/1/2006
95991		3	REFILLING AND MAINTENANCE OF IMPLANTABLE PUMP OR RESERVOIR FOR DRUG DELIVERY,	77.46	34.74	7/1/2006
96000		3	COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS BY VIDEO-TAPING AND 3-D KINEMATICS	84.89	84.89	7/1/2006
96001		3	COMPREHENSIVE COMPUTER-BASED MOTION ANALYSIS BY VIDEO-TAPING AND 3-D KINEMATICS	101.57	101.57	7/1/2006
96002		3	DYNAMIC SURFACE ELECTROMYOGRAPHY, DURING WALKING OR OTHER FUNCTIONAL	20.19	20.19	7/1/2006
96003		3	DYNAMIC FINE WIRE ELECTROMYOGRAPHY, DURING WALKING OR OTHER FUNCTIONAL	17.76	17.76	7/1/2006
96004		3	PHYSICIAN REVIEW AND INTERPRETATION OF COMPREHENSIVE COMPUTER BASED MOTION	110.72	110.72	7/1/2006
96101		3	PSYCHOLOGICAL TESTING (INCLUDES PSYCHODIAGNOSTIC ASSESSMENT OF EMOTIONALITY,	89.65	88.98	7/1/2006
96105		3	ASSESSMENT OF APHASIA (INCLUDES ASSESSMENT OF EXPRESSIVE AND RECEPTIVE SPEECH	62.76	62.76	7/1/2006
96110		3	DEVELOPMENTAL TESTING; LIMITED (EG, DEVELOPMENTAL SCREENING TEST II, EARLY	10.11	10.11	7/1/2006
96111		3	DEVELOPMENTAL TESTING; EXTENDED (INCLUDES ASSESSMENT OF MOTOR, LANGUAGE,	132.53	132.53	7/1/2006
96116		3	NEUROBEHAVIORAL STATUS EXAM (CLINICAL ASSESSMENT OF THINKING, REASONING AND	98.60	92.31	7/1/2006
96118		3	NEUROPSYCHOLOGICAL TESTING (EG, HALSTEAD-REITAN NEUROPSYCHOLOGICAL BATTERY,	117.15	91.98	7/1/2006
96401		3	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; NON-HORMONAL ANT	46.54	46.54	7/1/2006
96402		3	CHEMOTHERAPY ADMINISTRATION, SUBCUTANEOUS OR INTRAMUSCULAR; HORMONAL ANTI-NE	40.52	40.52	7/1/2006
96405		3	CHEMOTHERAPY ADMINISTRATION, INTRALESIONAL;	96.01	27.36	7/1/2006
96406		3	CHEMOTHERAPY ADMINISTRATION, INTRALESIONAL;	129.52	39.10	7/1/2006
96409		3	CHEMOTHERAPY ADMINISTRATION; INTRAVENOUS, PUSH TECHNIQUE, SINGLE OR INITIAL	107.07	107.07	7/1/2006
96411		3	CHEMOTHERAPY ADMINISTRATION; INTRAVENOUS, PUSH TECHNIQUE, EACH ADDITIONAL SU	61.91	61.91	7/1/2006
96413		3	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; UP TO 1 HOUR, S	151.04	151.04	7/1/2006
96415		3	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; EACH ADDITIONAL	33.96	33.96	7/1/2006
96416		3	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; INITIATION OF P	162.10	162.10	7/1/2006
96417		3	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; EACH ADDITIONAL	73.76	73.76	7/1/2006
96420		3	CHEMOTHERAPY ADMIN, INTRA-ARTERIAL PUSH	96.40	96.40	7/1/2006
96422		3	CHEMOTHERAPY ADMIN, INTRA-ARTERIAL INFUSION UP TO 1 HOUR	168.28	168.28	7/1/2006
96423		3	CHEMOTHERAPY ADMINISTRATION, INTRA-ARTERIAL; INFUSION TECHNIQUE, ONE TO 8	69.18	69.18	7/1/2006
96425		3	CHEMOTHERAPY ADMIN, INTRA-ARTERIAL INFUSION, OVER 8 HOURS (PUMP)	156.35	156.35	7/1/2006
96440		3	CHEMOTHERAPY ADMIN, INTO PLEURAL CAVITY INCLUDING THORACENTESIS	353.10	129.97	7/1/2006
96445		3	CHEMOTHERAPY ADMIN, INTO PERITONEAL CAVITY INCLUDING PERITONEOCENTESIS	349.07	121.52	7/1/2006
96450		3	CHEMOTHERAPY ADMINISTRATION, INTO CNS (EG, INTRATHECAL), REQUIRING AND	288.02	99.89	7/1/2006
96521		3	REFILLING AND MAINTENANCE OF PORTABLE PUMP	133.81	133.81	7/1/2006
96522		3	REFILLING AND MAINTENANCE OF IMPLANTABLE PUMP OR RESERVOIR FOR DRUG DELIVERY	96.72	96.72	7/1/2006
96523		3	IRRIGATION OF IMPLANTED VENOUS ACCESS DEVICE FOR DRUG DELIVERY SYSTEMS	24.52	24.52	7/1/2006
96542		3	CHEMOTHERAPY INJECTION, SUBARACHNOID OR INTRAVENTRICULAR VIA SUBQ. RESERVOIR	169.72	50.48	7/1/2006
96567		3	PHOTODYNAMIC THERAPY BY EXTERNAL APPLICATION OF LIGHT TO DESTROY PREMALIGNANT	65.84	65.84	7/1/2006
96567	TC	T	PHOTODYNAMIC THERAPY BY EXTERNAL APPLICATION OF LIGHT TO DESTROY PREMALIGNANT	52.79	52.79	7/1/2006
96570		3	PHOTODYNAMIC THERAPY BY ENDOSCOPIC APPLICATION OF LIGHT TO ABLATE ABNORMAL	54.39	54.39	7/1/2006
96571		3	PHOTODYNAMIC THERAPY BY ENDOSCOPIC APPLICATION OF LIGHT TO ABLATE ABNORMAL	26.79	26.79	7/1/2006
96900		3	ULTRAVIOLET LIGHT THERAPY	15.03	15.03	7/1/2006
96910		3	PHOTOCHEMOTHERAPH TAR/ULTRAUIOLET B GOECKERMAN TRE	33.71	33.71	7/1/2006
96912		3	PHOTOCHEMOTHERAPY PSORALENS/ULTRAUIOLET A PUVA	42.89	42.89	7/1/2006
96920		3	LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); TOTAL AREA LESS THAN	125.99	60.41	7/1/2006
96921		3	LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); 250 SQ CM TO 500 SQ	129.26	61.69	7/1/2006
96922		3	LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); OVER 500 SQ CM	192.12	97.06	7/1/2006
97001		3	PHYSICAL THERAPY EVALUATION	69.20	59.26	7/1/2006
97002		3	PHYSICAL THERAPY RE-EVALUATION	36.64	29.68	7/1/2006
97003		3	OCCUPATIONAL THERAPY EVALUATION	73.73	57.83	7/1/2006
97004		3	OCCUPATIONAL THERAPY RE-EVALUATION	44.25	28.36	7/1/2006
97010		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HOT OR COLD PACKS	4.05	4.05	7/1/2006
97012		3	PHYSICAL MED TREATMENT ONE AREA TRACTION	13.54	13.54	7/1/2006
97014		3	PHYSICAL MED TREATMENT ELECTRICAL STIMULATION	13.00	13.00	7/1/2006
97016		3	PHYSICAL MED TREATMENT VASOPNEUMATIC DEVICES	12.67	12.67	7/1/2006
97018		3	PHYSICAL MED TREATMENT PARAFFIN BATH	5.70	5.70	7/1/2006
97022		3	PHYSICAL MEDICINE TREATMENT WHIRLPOOL	13.31	13.31	7/1/2006

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
97024		3	PHYSICAL MEDICINE TREATMENT DIATHERMY	4.71	4.71	7/1/2006
97026		3	PHYSICAL MEDICINE TREATMENT INFRARED	4.38	4.38	7/1/2006
97028		3	PHYSICAL MEDICINE TREATMENT ONE AREA ULTRAVIOLET	5.43	5.43	7/1/2006
97032		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS;	14.53	14.53	7/1/2006
97033		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS;	18.53	18.53	7/1/2006
97034		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS;	12.76	12.76	7/1/2006
97035		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS;	11.10	11.10	7/1/2006
97036		3	APPLICATION OF A MODALITY TO ONE OR MORE AREAS;	20.91	20.91	7/1/2006
97039		3	UNLISTED MODALITY (SPECIFY TYPE AND TIME IF CONSTANT ATTENDANCE)	10.76	10.76	7/1/2006
97110		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC	25.61	25.61	7/1/2006
97112		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR	26.70	26.70	7/1/2006
97113		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES;	28.99	28.99	7/1/2006
97116		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING	22.58	22.58	7/1/2006
97124		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING	20.45	20.45	7/1/2006
97139		3	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; UNLISTED THERAPEUTIC	14.45	14.45	7/1/2006
97140		3	MANUAL THERAPY TECHNIQUES	23.99	23.99	7/1/2006
97530		3	THERAPEUTIC ACTIVITIES, DIRECT (ONE ON ONE) PATIENT CONTACT BY THE PROVIDER	26.67	26.67	7/1/2006
97597		3	REMOVAL OF DEVITALIZED TISSUE FROM WOUND(S), SELECTIVE DEBRIDEMENT, WITHOUT	43.89	43.89	7/1/2006
97598		3	REMOVAL OF DEVITALIZED TISSUE FROM WOUND(S), SELECTIVE DEBRIDEMENT, WITHOUT	56.12	56.12	7/1/2006
97750		3	PHYSICAL PERFORMANCE TEST OR MEASUREMENT (EG, MUSCULOSKELETAL,	27.26	27.26	7/1/2006
97760		3	ORTHOTIC(S) MANAGEMENT AND TRAINING (INCLUDING ASSESSMENT AND FITTING WHEN N	28.15	23.52	7/1/2006
97761		3	PROSTHETIC TRAINING, UPPER AND/OR LOWER EXTREMITY(S), EACH 15 MINUTES	25.94	22.96	7/1/2006
97762		3	CHECKOUT FOR ORTHOTIC/PROSTHETIC USE, ESTABLISHED PATIENT, EACH 15 MINUTES	23.37	15.75	7/1/2006
98940		3	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL, ONE TO TWO REGIONS	24.05	20.41	7/1/2006
98941		3	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL, THREE TO FOUR REGIONS	33.57	29.26	7/1/2006
98942		3	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT); SPINAL, FIVE REGIONS	43.71	39.40	7/1/2006
99050		3	MEDICAL SERVICES AFTER HOURS	16.91	16.91	7/1/2006
99058		3	OFFICE VISIT/EMERGENCY	10.32	10.32	7/1/2006
99070		3	SPECIAL SUPPLIES	10.05	10.05	7/1/2006
99082		3	UNUSUAL TRAVEL	0.89	0.89	7/1/2006
99100		3	ANESTHESIA FOR PATIENT OF EXTREME AGE, UNDER ONE YEAR AND OVER SEVENTY (LIST	18.53	18.53	7/1/2006
99116		3	ANESTHESIA COMPLICATED BY UTILIZATION OF TOTAL BODY HYPOTHERMIA (LIST	18.53	18.53	7/1/2006
99135		3	ANESTHESIA COMPLICATED BY UTILIZATION OF CONTROLLED HYPOTENSION (LIST	18.53	18.53	7/1/2006
99140		3	ANESTHESIA COMPLICATED BY EMERGENCY CONDITIONS (SPECIFY) (LIST SEPARATELY IN	18.53	18.53	7/1/2006
99170		3	ANOGENITAL EXAMINATION WITH COLPOSCOPIC MAGNIFICATION IN CHILDHOOD FOR	123.46	83.07	7/1/2006
99175		3	INDUCED VOMITING	48.34	48.34	7/1/2006
99183		3	PHYSICIAN ATTENDANCE AND SUPERVISION OF HYPERBARIC OXYGEN THERAPY,	195.58	111.78	7/1/2006
99185		3	HYPOTHERMIA, REGIONAL	22.12	22.12	7/1/2006
99186		3	HYPOTHERMIA, TOTAL BODY	69.65	69.65	7/1/2006
99190		3	MONITORING SERVICES	97.91	97.91	7/1/2006
99191		3	MONITORING SERVICES	61.53	61.53	7/1/2006
99192		3	MONITORING SERVICES	45.52	45.52	7/1/2006
99195		3	THERAPEUTIC PHLEBOTOMY	15.03	15.03	7/1/2006
99201		3	OV NEW PT MINOR-PHYS TIME APPROX. 10 MINUTES	33.12	21.86	7/1/2006
99202		3	OV NEW PT,MODERATE-PHYS TIME APPROX 20 MINUTES	59.00	43.10	7/1/2006
99203		3	OV NEW PT, MODERATE-PHYS TIME APPROX 30 MINUTES	87.75	66.22	7/1/2006
99204		3	OV NEW PT, COMPLEX-PHYS TIME APPROX 45 MINUTES	124.45	98.29	7/1/2006
99205		3	OV NEW PT, SEVERE-PHYS TIME APPROX 60 MINUTES	158.30	130.99	7/1/2006
99211		3	OV ESTAB PT, MINIMAL W/WO PHYS, TIME APPROX 5 MIN	19.27	8.34	7/1/2006
99212		3	OV ESTABLISHED PT, MINOR-PHYS TIME APPROX 10 MIN.	34.78	22.19	7/1/2006
99213		3	OV ESTAB. PT, MODERATE. PHYS TIME APPROX 15 MIN.	47.67	32.76	7/1/2006
99214		3	OV ESTAB. PT, SEVERE. PHYS TIME APPROX 25 MIN.	74.87	54.34	7/1/2006
99215		3	OV ESTAB. PT, SEVERE. PHYS TIME APPROX 40 MIN.	109.29	87.10	7/1/2006
99217		3	OBSERVATION CARE DISCHARGE DAY MANAGEMENT	65.02	65.02	7/1/2006
99218		3	INITIAL OBSERVATION, PER DAY, LOW COMPLEXITY	62.04	62.04	7/1/2006
99219		3	INITIAL OBSERVATION CARE, PER DAY, MODERATE COMPLEXITY	103.20	103.20	7/1/2006
99220		3	INITIAL OBSERVATION CARE, PER DAY, HIGH COMPLEXITY	144.99	144.99	7/1/2006
99221		3	INITIAL HOSP. CARE, MINOR. PHYS TIME APPROX 30 MIN	62.60	62.60	7/1/2006
99222		3	INITIAL HOSP CARE,MODERATE-PHYS TIME APPROX 50 MIN	103.86	103.86	7/1/2006
99223		3	INITIAL HOSP CARE, SEVERE-PHYS TIME APPROX 70 MIN	144.76	144.76	7/1/2006
99231		3	HOSP VISIT, STABLE. PHYS TIME APPROX 15 MINUTES	31.35	31.35	7/1/2006
99232		3	HOSP VISIT, MODERATE. PHYS TIME APPROX 25 MINUTES	51.34	51.34	7/1/2006
99233		3	HOSP VISIT, COMPLEX. PHYS TIME APPROX 35 MINUTES	72.97	72.97	7/1/2006
99234		3	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A	124.64	124.64	7/1/2006
99235		3	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A	164.55	164.55	7/1/2006
99236		3	OBSERVATION OR INPATIENT HOSPITAL CARE, FOR THE EVALUATION AND MANAGEMENT OF A	205.45	205.45	7/1/2006
99238		3	HOSPITAL DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS	65.12	65.12	7/1/2006
99239		3	HOSPITAL DISCHARGE DAY MANAGEMENT; MORE THAN 30 MINUTES	88.80	88.80	7/1/2006
99241		3	OUTPT. CONSULT, MINOR- PHYS TIME APPROX 15 MIN.	45.39	31.48	7/1/2006
99242		3	OUTPT. CONSULT, MODERATE- PHYS TIME APPROX 30 MIN.	83.19	63.98	7/1/2006

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
99243		3	OUTPT. CONSULT, SEVERE- PHYS TIME APPROX 40 MIN.	110.96	85.79	7/1/2006
99244		3	OUTPT. CONSULT, SEVERE- PHYS TIME APPROX 60 MIN.	157.18	127.05	7/1/2006
99245		3	OUTPT. CONSULT, SEVERE- PHYS TIME APPROX 80 MIN.	203.49	169.04	7/1/2006
99251		3	INITIAL INPT CONSULT- PHYS TIME APPROX 20 MIN.	32.86	32.86	7/1/2006
99252		3	INITIAL INPT CONSULT- PHYS TIME APPROX 40 MIN.	66.16	66.16	7/1/2006
99253		3	INITIAL INPT CONSULT- PHYS TIME APPROX 55 MIN.	90.58	90.58	7/1/2006
99254		3	INITIAL INPT CONSULT- PHYS TIME APPROX 80 MIN.	130.50	130.50	7/1/2006
99255		3	INITIAL INPT CONSULT- PHYS TIME APPROX 110 MIN.	179.91	179.91	7/1/2006
99281		3	ER VISIT, MINOR	15.32	15.32	7/1/2006
99282		3	ER VISIT, LOW SEVERITY	25.36	25.36	7/1/2006
99283		3	ER VISIT, MODERATE SEVERITY	56.98	56.98	7/1/2006
99284		3	ER VISIT, HIGH SEVERITY	89.00	89.00	7/1/2006
99285		3	EMERGENCY DEPARTMENT VISIT FOR THE EVALUATION AND MANAGEMENT OF A PATIENT,	139.32	139.32	7/1/2006
99288		3	PHYSICIAN DIRECTION OF EMS ADVANCED LIFE SUPPORT	47.23	47.23	7/1/2006
99291		3	CRITICAL CARE, EVALUATION AND MANAGEMENT OF THE CRITICALLY ILL OR CRITICALLY	233.95	190.89	7/1/2006
99292		3	CRITICAL CARE, EVALUATION AND MANAGEMENT OF THE UNSTABLE CRITICALLY ILL OR	104.28	95.62	7/1/2006
99293		3	INITIAL INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	758.62	758.62	7/1/2006
99294		3	SUBSEQUENT INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	377.85	377.85	7/1/2006
99295		3	INITIAL NEONATAL INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF	869.87	869.87	7/1/2006
99296		3	SUBSEQUENT NEONATAL INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	379.50	379.50	7/1/2006
99298		3	SUBSEQUENT NEONATAL INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	133.67	133.67	7/1/2006
99299		3	SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE	122.18	122.18	7/1/2006
99300		3	SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE	117.69	117.69	7/1/2006
99304		3	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF	60.59	60.59	7/1/2006
99305		3	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF	80.44	80.44	7/1/2006
99306		3	INITIAL NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF	99.28	99.28	7/1/2006
99307		3	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	31.24	31.24	7/1/2006
99308		3	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	51.83	51.83	7/1/2006
99309		3	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	73.04	73.04	7/1/2006
99310		3	SUBSEQUENT NURSING FACILITY CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT	91.40	91.40	7/1/2006
99315		3	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS	56.74	56.74	7/1/2006
99316		3	NURSING FACILITY DISCHARGE DAY MANAGEMENT; 30 MINUTES OR LESS MORE THAN 30	74.93	74.93	7/1/2006
99318		3	EVALUATION AND MANAGEMENT OF A PATIENT INVOLVING AN ANNUAL NURSING FACILITY	60.59	60.59	7/1/2006
99324		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PA	53.74	53.74	7/1/2006
99325		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PA	78.86	78.86	7/1/2006
99326		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PA	114.50	114.50	7/1/2006
99327		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PA	150.84	150.84	7/1/2006
99328		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PA	186.81	186.81	7/1/2006
99334		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTAB	41.53	41.53	7/1/2006
99335		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTAB	65.96	65.96	7/1/2006
99336		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTAB	101.96	101.96	7/1/2006
99337		3	DOMICILIARY OR REST HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTAB	150.17	150.17	7/1/2006
99341		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES	53.41	53.41	7/1/2006
99342		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES	78.86	78.86	7/1/2006
99343		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES	115.17	115.17	7/1/2006
99344		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES	151.17	151.17	7/1/2006
99345		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT, WHICH REQUIRES	187.14	187.14	7/1/2006
99347		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH	41.53	41.53	7/1/2006
99348		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH	65.96	65.96	7/1/2006
99349		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH	102.29	102.29	7/1/2006
99350		3	HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT, WHICH	151.17	151.17	7/1/2006
99354		3	PROLONGED PHYSICIAN SERVICE IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING	91.07	87.43	7/1/2006
99355		3	PROLONGED PHYSICIAN SERVICE IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING	90.18	85.87	7/1/2006
99356		3	PROLONGED PHYSICIAN SERVICE IN THE INPATIENT SETTING, REQUIRING DIRECT	83.71	83.71	7/1/2006
99357		3	PROLONGED PHYSICIAN SERVICE IN THE INPATIENT SETTING, REQUIRING DIRECT	84.27	84.27	7/1/2006
99360		3	PHYSICIAN STANDBY SERVICE, REQUIRING PROLONGED PHYSICIAN ATTENDANCE, EACH 30	72.13	72.13	7/1/2006
99361		3	TEAM CONFERENCE. APPROX. 30 MIN.	31.03	31.03	7/1/2006
99362		3	TEAM CONFERENCE. APPROX. 60 MIN.	62.04	62.04	7/1/2006
99375		3	PHYSICIAN SUPERVISION OF PATIENTS UNDER CARE OF HOME HEALTH	115.24	115.24	7/1/2006
99378		3	PHYSICIAN SUPERVISION OF A HOSPICE PATIENT (PATIENT NOT PRESENT) REQUIRING	128.49	128.49	7/1/2006
99381	EP	L	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE EVALUATION AND MANAGEMENT AGE 000-001	80.33	80.33	7/1/2006
99382	EP	L	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE AGE 001-004	80.33	80.33	7/1/2006
99383	EP	L	NEW PT PHYSICIAL EXAM: 5 THROUGH 11 YEARS	80.33	80.33	7/1/2006
99384	EP	L	NEW PT PHYSICIAL EXAM: 12 THROUGH 17 YEARS	80.33	80.33	7/1/2006
99385		3	NEW PT PHYSICAL EXAM: 18 TO 39 YEARS	107.81	76.01	7/1/2006
99385	EP	L	INITIAL COMPREHENSIVE PREVENTIVE MEDICINE AGE 018-039	80.33	80.33	7/1/2006
99386		3	NEW PT PHYSICAL EXAM: 40 TO 64 YEARS	127.24	93.15	7/1/2006
99387		3	NEW PT PHYSICAL EXAM: 65 YEARS AND OVER	138.05	101.95	7/1/2006
99391	EP	L	PERIODIC COMPREHENSIVE PREVENTIVE MEDICINE REEVALUATION AND MANAGEMENT AGE 000	80.33	80.33	7/1/2006
99392	EP	L	ESTAB. PT PHYSICAL EXAM: 1 TO 4 YEARS	80.33	80.33	7/1/2006

Physician Fee Schedule

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Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
99393	EP	L	ESTAB. PT PHYSICAL EXAM: 5 THROUGH 11 YEARS	80.33	80.33	7/1/2006
99394	EP	L	ESTAB. PT PHYSICAL EXAM: 12 TO 17 YEARS	80.33	80.33	7/1/2006
99395		3	ESTAB. PT PHYSICAL EXAM: 18 TO 39 YEARS	88.54	67.34	7/1/2006
99395	EP	L	ESTAB. PT PHYSICAL EXAM: 18 TO 39 YEARS	80.33	80.33	7/1/2006
99396		3	ESTAB. PT PHYSICAL EXAM: 40 TO 64 YEARS	97.87	76.01	7/1/2006
99397		3	ESTAB. PT PHYSICAL EXAM: 65 YEARS AND OLDER	107.99	84.81	7/1/2006
99404		3	PREVENTIVE MEDICINE, INDIVIDUAL COUNSELING, APPX 60 MINUTES	115.08	96.20	7/1/2006
99412		3	PREVENTIVE MEDICINE, GROUP COUNSELING, APPX 60 MINUTES	17.51	12.54	7/1/2006
99431		3	NORMAL NEWBORN H/P, HOSP OR BIRTHING CENTER	55.86	55.86	7/1/2006
99432		3	NORMAL NEWBORN CARE; NOT IN HOSP/BIRTHING CENTER	77.78	60.23	7/1/2006
99433		3	F/U HOSP. CARE NORMAL NEWBORN, PER DAY	29.41	29.41	7/1/2006
99435		3	HISTORY AND EXAMINATION OF THE NORMAL NEWBORN INFANT, INCLUDING THE PREPARATION	74.93	74.93	7/1/2006
99436		3	ATTENDANCE AT DELIVERY (WHEN REQUESTED BY DELIVERING PHYSICIAN) AND INITIAL	70.95	70.95	7/1/2006
99440		3	NEWBORN RESUSCITATION: PROVISION OF POSITIVE PRESSURE VENTILATION AND/OR CHEST	139.06	139.06	7/1/2006
99502	EP	L	HOME VISIT FOR NEWBORN CARE AND ASSESSMENT	80.33	80.33	7/1/2006
D0120		3	PERIODIC ORAL EVALUATION	23.07	23.07	10/1/2002
D0150		3	COMPREHENSIVE ORAL EVALUATION - NEW OR ESTABLISHED PATIENT	31.46	31.46	10/1/2002
D1203		3	TOPICAL APPLICATION OF FLUORIDE(PROPHYLAXIS NOT INCLUDED)CHILD	15.44	15.44	10/1/2002
D1330		3	ORAL HYGIENE INSTRUCTIONS CHILD	15.00	15.00	10/1/2002
G0127		3	TRIMMING OF DYSTROPHIC NAILS, ANY NUMBER	14.63	8.67	7/1/2006
G0308		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES UNDER 2	751.88	751.88	7/1/2006
G0309		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES UNDER 2	626.11	626.11	7/1/2006
G0310		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES UNDER 2	500.91	500.91	7/1/2006
G0311		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 2 - 11	514.81	514.81	7/1/2006
G0312		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 2 - 11	428.83	428.83	7/1/2006
G0313		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 2 - 11	343.06	343.06	7/1/2006
G0314		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 12 - 19	451.06	451.06	7/1/2006
G0315		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 12 - 19	375.61	375.61	7/1/2006
G0316		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 12 - 19	300.36	300.36	7/1/2006
G0317		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 20 AND OVER	282.23	282.23	7/1/2006
G0318		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 20 AND OVER	235.04	235.04	7/1/2006
G0319		3	ESRD RELATED SERVICES DURING THE COURSE OF TREATMENT, AGES 20 AND OVER	187.85	187.85	7/1/2006
G0320		3	ESRD RELATED SERVICES HOME DIALYSIS PER FULL MONTH, UNDER 2 YEARS OLD	626.11	626.11	7/1/2006
G0321		3	ESRD RELATED SERVICES HOME DIALYSIS PER FULL MONTH, AGES 2 - 11	428.83	428.83	7/1/2006
G0322		3	ESRD RELATED SERVICES HOME DIALYSIS PER FULL MONTH, AGES 12-19	375.61	375.61	7/1/2006
G0323		3	ESRD RELATED SERVICES HOME DIALYSIS PER FULL MONTH, AGES 20 AND OVER	235.04	235.04	7/1/2006
G0324		3	ESRD RELATED SERVICES HOME DIALYSIS LESS THAN FULL MONTH, AGES UNDER 2	20.78	20.78	7/1/2006
G0325		3	ESRD RELATED SERVICES HOME DIALYSIS LESS THAN FULL MONTH, AGES 2 - 11	12.49	12.49	7/1/2006
G0326		3	ESRD RELATED SERVICES HOME DIALYSIS LESS THAN FULL MONTH, AGES 12 -19	14.26	14.26	7/1/2006
G0327		3	ESRD RELATED SERVICES HOME DIALYSIS LESS THAN FULL MONTH, AGES 20 AND OVER	7.92	7.92	7/1/2006
S9445		3	PATIENT EDUCATION,NOT OTHERWISE CLASSIFIED,NON-PHYSICIAN PROVIDER(1UNIT=15MIN.)	16.50	16.50	7/1/2006
V2797		3	SUPPLY OF LOW VISION AIDS	61.82	61.82	7/1/2006
			PHYSICIANS DRUG PROGRAM			
90291			CYTOMEGALOVIRUS IMMUNE GLOBULIN (CMV-LGIV), HUMAN, FOR INTRAVENOUS USE. 1ML	14.57	14.57	11/01/05
90371			HEPATITIS B IMMUNE GLOBULIN (HBLG), HUMAN, FOR INTRAMUSCULAR USE 0.5 ML	117.74	117.74	11/01/05
90375			RABIES IMMUNE GLOBULIN (RLG), HUMAN, FOR INTRAMUSCULAR AND/OR SUBCUTANEOUS USE,	62.89	62.89	11/01/05
90376			RABIES IMMUNE GLOBULIN , HEAT-TREATED (RLG-HT), HUMAN, FOR INTRAMUSCULAR AND/OR SU	67.13	67.13	11/01/05
90379			RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN (RSV-LGIV), HUMAN, FOR INTRAVENOUS US	17.17	17.17	11/01/05
90384			RHO(D) IMMUNE GLOBULIN (RHLG), HUMAN, FULL-DOSE, FOR INTRAMUSCULAR USE 1500 IU/300 M	99.00	99.00	04/01/05
90385			RHO(D) IMMUNE GLOBULIN (RHLG), HUMAN, MINI-DOSE, FOR INTRAMUSCULAR USE 120IU/50 MCG	11.84	11.84	07/01/06
90386			RHO(D) IMMUNE GLOBULIN (RHLGIV), HUMAN, FOR INTRAVENOUS USE, 100 IU	127.80	127.80	11/01/05
90389			TETANUS IMMUNE GLOBULIN (TLG), HUMAN, FOR INTRAMUSCULAR USE, 250 U/ 1 ML	118.13	118.13	11/01/05
90396			VARICELLA-ZOSTER IMMUNE GLOBULIN, HUMAN, FOR INTRAMUSCULAR USE, 125 U/1.25 ML	106.72	106.72	11/01/05
90585			BACILLUS CALMETTE-GUERIN VACCINE (BCG) FOR TUBERCULOSIS, LIVE, FOR PERCUTANEOUS U	114.86	114.86	11/01/05
90632			HEPATITIS A VACCINE, ADULT DOSAGE, FOR INTRAMUSCULAR USE	42.86	42.86	11/01/05
90636			HEPATITIS A AND HEPATITIS B VACCINE (HEPA-HEPB), ADULT DOSAGE, FOR INTRAMUSCULAR US	87.60	87.60	12/01/04
90656			INFLUENZA VIRUS VACCINE, SPLIT VIRUS, PRESERVATIVE FREE, FOR USE IN INDIVIDUALS	13.68	13.68	02/23/06
90658			INFLUENZA VIRUS VACCINE, SPLIT VIRUS, 3 YEARS AND ABOVE, FOR INTRAMUSCULAR OR JET IN	10.10	10.10	11/01/05
90675			RABIES VACCINE, FOR INTRAMUSCULAR USE	136.23	136.23	11/01/05
90703			TETANUS TOXOID ADSORBED, FOR INTRAMUSCULAR OR JET INJECTION USE	14.57	14.57	11/01/05
90704			MUMPS VIRUS VACCINE, LIVE, FOR SUBCUTANEOUS OR JET INJECTION USE	17.93	17.93	11/01/05
90705			MEASLES VIRUS VACCINE, LIVE, FOR SUBCUTANEOUS OR JET INJECTION USE	13.62	13.62	11/01/05
90706			RUBELLA VIRUS VACCINE, LIVE, FOR SUBCUTANEUS OR JET INJECTION USE	15.02	15.02	11/01/05
90707			MEASLES, MUMPS, AND RUBELLA VIRUS VACCINE (MMR), LIVE, FOR SUBCUTANEOUS OR JET INJE	36.13	36.13	11/01/05
90715			TETANUS, DIPHTHERIA TOXOIDS AND ACELLULAR PERTUSSIS VACCINE (TDAP), FOR USE IN INDIV	38.21	38.21	03/01/06
90716			VARICELLA VIRUS VACCINE, LIVE FOR SUBCUTANEOUS USE	63.26	63.26	11/01/05
90732			PNEUMOCOCCAL POLYSACCHARIDE VACCINE, 23-VALENT, ADULT OR IMMUNOSUPPRESSED PAT	24.57	24.57	11/01/05
90733			MENINGOCOCCAL POLYSACCHARIDE VACCINE (ANY GROUP(S)), FOR SUBCUTANEOUS OR JET IN	82.66	82.66	11/01/05
90734			MENINGOCOCCAL CONJUGATE VACCINE, SEROGROUPS A, C, Y, W-135 (TETRAVALENT) FOR IM U	88.56	88.56	11/01/05

Physician Fee Schedule

Provider Specialty 001

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
90740			HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE (3 DOSE SCHEDULE	113.91	113.91	11/01/05
90746			HEPATITIS B VACCINE, ADULT DOSAGE, FOR INTRAMUSCULAR USE	56.96	56.96	11/01/05
90747			HEPATITIS B VACCINE, DIALYSIS OR IMMUNOSUPPRESSED PATIENT DOSAGE (4 DOSE SCHEDULE	120.75	120.75	07/01/06
J0128			ABARELIX, 10 MG, INJ. (PLENAXIS)	67.89	67.89	11/01/05
J0130			ABCIXIMAB, 10MG, INJECTION (REOPRO)	465.35	465.35	11/01/05
J0133			ACYCLOVIR	0.03	0.03	01/01/06
J0150			ADENOSINE, 06MG, INJECTION (NOT TO BE USED TO REPORT ANY ADENOSINE PHOSPHATE COM	32.61	32.61	07/01/06
J0152			ADENOSINE, 30 MG, INJ (NOT TO BE USED TO REPORT ANY ADENOSINE PHOSPHATE COMPOUND	70.32	70.32	11/01/05
J0170			EPINEPHRINE, UP TO 1ML AMPULE, INJECTION	0.61	0.61	11/01/05
J0180			AGALSIDASE BETA, 1 MG, INJ. (FABRAZYME)	121.11	121.11	11/01/05
J0205			ALGLUCERASE, PER 10 UNITS, INJECTION (CEREDASE)	39.22	39.22	11/01/05
J0207			AMIFOSTINE, 500MG, INJECTION (ETHYOL)	429.53	429.53	11/01/05
J0210			METHYLDOPATE HCL, UP TO 250MG, INJECTION IV (ALDOMET)	9.41	9.41	11/01/05
J0215			ALEFACEPT, 0.5 MG, INJ. (AMEVIVE)	26.40	26.40	11/01/05
J0256			ALPHA 1-PROTEINASE INHIBITOR-HUMAN, 10MG, INJECTION (PROLASTIN)	3.26	3.26	11/01/05
J0278			AMICACIN SULFATE, 100 MG	1.21	1.21	07/01/06
J0280			AMINOPHYLLINE, UP TO 250MG, INJECTION	0.37	0.37	11/01/05
J0285			AMPHOTERICIN B, 50 MG, INJECTION	8.83	8.83	07/01/06
J0287			AMPHOTERICIN B LIPID COMPLEX, 10 MG, INJECTION	11.07	11.07	11/01/05
J0288			AMPHOTERICIN B CHOLESTERYL SULFATE COMPLEX, 10 MG, INJECTION (AMPHOTEE)	12.00	12.00	11/01/05
J0289			AMPHOTERICIN B LIPOSOME, 10 MG, INJECTION (AMBISOME)	12.92	12.92	11/01/05
J0290			AMPICILLIN SODIUM, 500MG, INJECTION (OMNIPEN-N, TOTACILLIN-N)	2.21	2.21	11/01/05
J0295			AMPICILLIN SODIUM/SULBACTAM SODIUM, PER 1.5G, INJECTION (UNASYN)	4.89	4.89	07/01/06
J0300			AMOBARBITAL, UP TO 125MG, INJECTION (AMYTAL)	2.54	2.54	11/01/05
J0330			SUCCINYLCHOLINE CHLORIDE, UP TO 20 MG, INJECTION (ANECTINE)	0.14	0.14	11/01/05
J0350			ANISTREPLASE, PER 30 UNITS, INJECTION (EMINASE)	2,404.57	2,404.57	07/01/06
J0360			HYDRALAZINE HCL, UP TO 20MG, INJECTION (APRESOLINE)	5.91	5.91	11/01/05
J0380			METARAMINOL BITARTRATE, PER 10MG, INJECTION (ARAMINE)	1.15	1.15	11/01/05
J0456			AZITHROMYCIN, 500MG, INJECTION (ZITHROMAX)	21.45	21.45	07/01/06
J0460			ATROPINE SULFATE, UP TO 0.3MG, INJECTION	0.30	0.30	07/01/06
J0470			DIMERCAPROL, PER 100MG, INJECTION (BAL IN OIL)	18.83	18.83	11/01/05
J0475			BACLOFEN, 10MG, INJECTION (LIORESAL)	191.90	191.90	11/01/05
J0476			BACLOFEN, 50 MCG FOR INTRATHECAL TRIAL, INJECTION	70.78	70.78	11/01/05
J0500			DICYCLOMINE HCL, UP TO 20MG, INJECTION (BENTYL, DILOMINE, ANTISPAS)	14.50	14.50	11/01/05
J0530			PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 600,000 UNITS, INJECTION (BICILL	12.31	12.31	11/01/05
J0540			PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 1,200,000 UNITS, INJECTION (BICI	24.12	24.12	11/01/05
J0550			PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, UP TO 2,400,000 UNITS, INJECTION (BICI	26.81	26.81	11/01/05
J0560			PENICILLIN G BENZATHINE, UP TO 600,000 UNITS, INJECTION (BICILLIN L-A)	18.46	18.46	11/01/05
J0570			PENICILLIN G BENZATHINE, UP TO 1,200,000 UNITS, INJECTION (BICILLIN L-A)	31.52	31.52	11/01/05
J0580			PENICILLIN G BENZATHINE, UP TO 2,400,000 UNITS, INJECTION (BICILLIN L-A)	73.14	73.14	11/01/05
J0585			BOTULINUM TOXIN TYPE A, PER UNIT (BOTOX)	4.89	4.89	11/01/05
J0595			BUTORPHINOL TARTRATE, 1 MG, INJ. (STADOL)	0.80	0.80	07/01/06
J0600			EDETATE CALCIUM DISODIUM, UP TO 1000MG, INJECTION (CALCIUM EDTA)	39.78	39.78	11/01/05
J0610			CALCIUM GLUCONATE, PER 10ML, INJECTION (KALEINATE)	0.40	0.40	11/01/05
J0620			CALCIUM GLYCEROPHOSPHATE AND CALCIUM LACTATE, PER 10ML, INJECTION (CALPHOSAN)	8.96	8.96	11/01/05
J0636			CALCITRIOL, 0.1 MCG, INJECTION (CALCIJEX)	0.54	0.54	07/01/06
J0640			LEUCOVORIN CALCIUM, PER 50 MG, INJECTION (WELLCOVORIN)	1.08	1.08	07/01/06
J0670			MEPIVACAINE HCL, PER 10ML, INJECTION (CARBOCAINE)	1.52	1.52	11/01/05
J0690			CEFAZOLIN SODIUM, 500 MG, INJECTION (ANCEF, KEFZOL, ZOLIICEF)	1.39	1.39	11/01/05
J0692			CEFEPIME HCL, 500 MG, INJECTION (MAXIPIME)	6.40	6.40	11/01/05
J0694			CEFOXITIN SODIUM, 1G, INJECTION (MEFOXIN)	7.33	7.33	07/01/06
J0696			CEFTRIAXONE SODIUM, PER 250MG, INJECTION (ROCEPHIN)	2.15	2.15	07/01/06
J0697			STERILE CEFUROXIME SODIUM, PER 750MG, INJECTION	1.55	1.55	07/01/06
J0698			CEFOTAXIME SODIUM, PER G (CLAFORAN)	4.35	4.35	11/01/05
J0702			BETAMETHASONE ACET&SOD PHOSP, 3 MG	4.88	4.88	11/01/05
J0713			CEFTAZIDIME, PER 500 MG, INJECTION (FORTAZ, TAZIDIME)	4.02	4.02	11/01/05
J0715			CEFTIZOXIME SODIUM, PER 500MG, INJECTION (CEFIZOX)	3.49	3.49	11/01/05
J0720			CHLORAMPHENICOL SODIUM SUCCINATE, UP TO 1G, INJECTION (CHLOROMYCETIN)	8.97	8.97	11/01/05
J0725			CHORIONIC GONADOTROPIN, PER 1,000 USP UNITS, INJECTION,	3.59	3.59	11/01/05
J0735			CLONIDINE HYDROCHLORIDE, 1MG, INJECTION (CATAPRES)	59.74	59.74	11/01/05
J0740			CIDOFOVIR, 375 MG, INJECTION (VISTIDE)	768.71	768.71	11/01/05
J0743			CILASTATIN SODIUM IMIPENEM, PER 250MG, INJECTION (PRIMAXIN IM OR IV)	11.40	11.40	11/01/05
J0744			CIPROFLOXACIN FOR IV INFUSION, 200 MG, INJECTION (CIPRO)	8.09	8.09	11/01/05
J0745			CODEINE PHOSPHATE, PER 30MG, INJECTION	0.58	0.58	11/01/05
J0760			COLCHICINE, PER 1MG, INJECTION	4.40	4.40	11/01/05
J0770			COLISTIMETHATE SODIUM, UP TO 150 MG, INJECTION (COLY-MYCIN M)	32.07	32.07	11/01/05
J0780			PROCHLORPERAZINE, UP TO 10 MG, INJECTION, (COMPAZINE)	2.49	2.49	07/01/06
J0800			CORTICOTROPIN, UP TO 40 UNITS, INJECTION (ACTHAR, ACTH)	102.00	102.00	11/01/05
J0835			COSYNTROPIN, PER 0.25 MG, INJECTION (CORTROSYN)	66.07	66.07	07/01/06
J0878			DAPTOMYCIN, 1 MG (CUBICIN)	0.29	0.29	01/01/06

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
J0881			DARBEPOETIN ALFA (ARANESP) 1 MCG	3.01	3.01	01/01/06
J0882			DARBEPOETIN ALFA FOR ESRD ON DIALYSIS (ARANESP) 1 MCG	3.01	3.01	01/01/06
J0885			EPOETIN ALPHA, (FOR NON ESRD USE), PER 1,000 UNITS (EPOGEN, PROCRIT)	9.49	9.49	11/01/05
J0886			EPOETIN ALFA 1000 UNITS (FOR ESRD ON DIALYSIS)	10.00	10.00	11/01/05
J0895			DEFEROXAMINE MESYLATE, 500MG, INJECTION (DESFERAL)	14.93	14.93	11/01/05
J0900			TESTASTERONE ENANTHATE & ESTRADIOL VALERATE UP TO 1 CC (DELADUMONE)	1.38	1.38	11/01/05
J0970			ESTRADIOL VALERATE, UP TO 40MG, INJECTION (DELESTROGEN)	29.79	29.79	11/01/05
J1000			DEPO-ESTRADIOL CYPIONATE, UP TO 5MG, INJECTION	5.23	5.23	11/01/05
J1020			METHYLPREDNISOLONE ACETATE, 20MG, INJECTION (DEPO-MEDROL)	2.73	2.73	11/01/05
J1030			METHYLPREDNISOLONE ACETATE, 40MG, INJECTION (DEPO-MEDROL)	5.50	5.50	11/01/05
J1040			METHYLPREDNISOLONE ACETATE, 80MG, INJECTION (DEPO-MEDROL)	9.97	9.97	11/01/05
J1051			MEDROXYPROGESTERONE ACETATE, 50 MG, INJECTION (DEPO-PROVERA)	5.12	5.12	11/01/05
J1070			TESTOSTERONE CYPIONATE, UP TO 100MG INJECTION	5.07	5.07	11/01/05
J1080			TESTOSTERONE CYPIONATE, 1CC, 200MG, INJECTION (DEPO-TESTOSTERONE)	13.51	13.51	11/01/05
J1100			DEXAMETHASONE SODIUM PHOSPHATE, 1MG, INJECTION (CORTASTAT, DALALONE)	0.12	0.12	11/01/05
J1110			DIHYDROERGOTAMINE MESYLATE, PER 1MG, INJECTION (DHE 45)	26.02	26.02	11/01/05
J1120			ACETAZOLAMIDE SODIUM, UP TO 500 MG, INJECTION (DIAMOX)	14.29	14.29	11/01/05
J1160			DIGOXIN, UP TO 0.5 MG INJECTION (LANOXIN)	1.08	1.08	07/01/06
J1165			PHENYTOIN SODIUM, PER 50 MG, INJECTION (DILANTIN)	0.68	0.68	11/01/05
J1170			HYDROMORPHONE, UP TO 4 MG, INJECTION (DILAUDID)	1.77	1.77	11/01/05
J1180			DYPHYLLINE, UP TO 500 MG, INJECTION (LUFYLLIN, DILOR)	8.05	8.05	11/01/05
J1190			DEXRAZOXANE HYDROCHLORIDE, PER 250 MG, INJECTION (ZINECARD)	194.29	194.29	07/01/06
J1200			DIPHENHYDRAMINE HCL, UP TO 50 MG, INJECTION (BENADRYL)	0.78	0.78	07/01/06
J1205			CHLOROTHIAZIDE SODIUM, PER 500 MG, INJECTION (DIURIL SODIUM)	9.10	9.10	11/01/05
J1212			DMSO, DIMETHYL SULFOXIDE, 50%, 50 ML, INJECTION	41.66	41.66	11/01/05
J1230			METHADONE HCL, UP TO 10 MG, INJECTION (DOLOPHINE)	3.34	3.34	11/01/05
J1240			DIMENHYDRINATE, UP TO 50 MG, INJECTION (DRAMAMINE)	2.65	2.65	11/01/05
J1245			DIPYRIDAMOLE, PER 10 MG, INJECTION (PERSANTINE IV)	1.71	1.71	11/01/05
J1250			DOBUTAMINE HCL, PER 250 MG, INJECTION (DOBUTREX)	4.50	4.50	11/01/05
J1260			DOLASETRON MESYLATE, 10 MG, INJECTION (ANZEMET)	6.32	6.32	11/01/05
J1265			DOPAMINE HCL	0.39	0.39	01/01/06
J1270			DOXERCALCIFEROL, 1 MCG, INJECTION (HECTORAL)	1.50	1.50	11/01/05
J1325			EPOPROSTENOL, 0.5 MG, INJECTION (FLOLAN)	12.71	12.71	11/01/05
J1364			ERYTHROMYCIN LACTOBIONATE, PER 500 MG, INJECTION (ERTHROCIN)	2.91	2.91	11/01/05
J1380			ESTRADIOL VALERATE, UP TO 10 MG, INJECTION (DELESTROGEN)	11.71	11.71	11/01/05
J1390			ESTRADIOL VALERATE, UP TO 20 MG, INJECTION (DELESTROGEN)	14.90	14.90	11/01/05
J1410			ESTROGEN CONJUGATED, PER 25 MG, INJECTION (PREMARIN IV)	56.71	56.71	11/01/05
J1436			ETIDRONATE DISODIUM, PER 300 MG, INJECTION (DIDRONEL)	71.41	71.41	11/01/05
J1440			FILGRASTIM (G-CSF), 300 MCG, INJECTION (NEUPOGEN)	175.26	175.26	11/01/05
J1441			FILGASTRIM (G-CSF), 480 MCG, INJECTION (NEUPOGEN)	277.02	277.02	11/01/05
J1455			FOSCARNET SODIUM, PER 1,000 MG, INJECTION (FOSCAVIR)	10.57	10.57	11/01/05
J1460			GAMMA GLOBULIN, INTRAMUSCULAR,01 CC, INJECTION	9.99	9.99	11/01/05
J1470			GAMMA GLOBULIN, INTRAMUSCULAR,02 CC, INJECTION	19.67	19.67	11/01/05
J1480			GAMMA GLOBULIN, INTRAMUSCULAR,03 CC, INJECTION	29.95	29.95	11/01/05
J1490			GAMMA GLOBULIN, INTRAMUSCULAR,04 CC, INJECTION	39.95	39.95	11/01/05
J1500			GAMMA GLOBULIN, INTRAMUSCULAR,05 CC, INJECTION	49.93	49.93	11/01/05
J1510			GAMMA GLOBULIN, INTRAMUSCULAR,06 CC, INJECTION	59.95	59.95	11/01/05
J1520			GAMMA GLOBULIN, INTRAMUSCULAR,07 CC, INJECTION	69.85	69.85	11/01/05
J1530			GAMMA GLOBULIN, INTRAMUSCULAR,08 CC, INJECTION	79.89	79.89	11/01/05
J1540			GAMMA GLOBULIN, INTRAMUSCULAR, 9 CC, INJECTION	89.93	89.93	11/01/05
J1550			GAMMA GLOBULIN, INTRAMUSCULAR, 10 CC, INJECTION	99.86	99.86	11/01/05
J1560			GAMMA GLOBULIN, INTRAMUSCULAR, OVER 10 CC, INJECTION	99.76	99.76	11/01/05
J1565			INJECTION, RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN, INTRAVENOUS, 50MG	16.18	16.18	01/01/06
J1566			IMMUNE GLOBULIN, IV, LYOPHILIZED (POWDER) 500 MG	26.39	26.39	07/01/06
J1567			IMMUNE GLOBULIN, IV NON-LYOPHILIZED (LIQUID) 500 MG	31.92	31.92	07/01/06
J1570			GANCICLOVIR SODIUM, 500 MG, INJECTION (CYTOVENE)	35.70	35.70	11/01/05
J1580			GARAMYCIN, GENTAMICIN, UP TO 80 MG, INJECTION	0.95	0.95	11/01/05
J1600			GOLD SODIUM THIOMALATE, UP TO 50 MG, INJECTION (MYOCHRYSINE)	6.36	6.36	11/01/05
J1610			GLUCAGON HYDROCHLORIDE, PER 1 MG, INJECTION) (GLUCAGEN)	59.84	59.84	11/01/05
J1620			GONADORELIN HYDROCHLORIDE, PER 100 MCG, INJECTION (FACTREL)	170.09	170.09	11/01/05
J1626			GRANISETRON HYDROCHLORIDE, 100 MCG, INJECTION (KYTRIL)	7.15	7.15	11/01/05
J1630			HALOPERIDOL, UP TO 5 MG, INJECTION (HALDOL)	2.84	2.84	07/01/06
J1631			HALOPERIDOL DECANOATE, PER 50 MG, INJECTION (HALDOL DECANOATE-50)	5.52	5.52	11/01/05
J1642			HEPARIN SODIUM, (HEPARIN LOCK FLUSH), PER 10 UNITS, INJECTION	0.05	0.05	11/01/05
J1644			HEPARIN SODIUM, PER 1,000 UNITS, INJECTION (HEPARIN)	0.12	0.12	07/01/06
J1645			DALTEPARIN SODIUM, PER 2500 IU, INJECTION (FRAGMIN)	11.00	11.00	11/01/05
J1650			ENOXAPARIN SODIUM, 10 MG, INJECTION (LOVENOX)	5.34	5.34	11/01/05
J1670			TETANUS IMMUNE GLOBULIN INJ	42.48	42.48	11/01/05
J1720			HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG, INJECTION	1.89	1.89	11/01/05
J1730			DIAZOXIDE, UP TO 300 MG, INJECTION (HYPERSTAT IV)	111.79	111.79	11/01/05

Physician Fee Schedule

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				Medicaid Maximum Allowable		
Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
J1742			IBUTILIDE FUMARATE, 1 MG, INJECTION (CORVERT)	247.32	247.32	11/01/05
J1745			INFLIXIMAB, 10 MG, INJECTION (REMICADE)	53.32	53.32	11/01/05
J1751			IRON DEXTRAN 165, 50 MG	11.22	11.22	01/01/06
J1752			IRON DEXTRAN 267, 50 MG	10.96	10.96	07/01/06
J1756			IRON SUCROSE, 1 MG, INJECTION (VENOFER)	0.37	0.37	11/01/05
J1785			IMIGLUCERASE, PER UNIT, INJECTION (CEREZYME)	3.91	3.91	11/01/05
J1790			DROPERIDOL, UP TO 5 MG, INJECTION (INAPSINE)	1.08	1.08	11/01/05
J1800			PROPRANOLOL HCL, UP TO 1 MG, INJECTION (INDERAL)	4.50	4.50	07/01/06
J1815			INSULIN, PER 5 UNITS, INJECTION	0.22	0.22	11/01/05
J1840			KANAMYCIN SULFATE, UP TO 500 MG, INJECTION (KANTREX)	3.67	3.67	11/01/05
J1850			KANAMYCIN SULFATE, UP TO 75 MG, INJECTION (KANTREX)	0.57	0.57	11/01/05
J1885			KETOROLAC TROMETHAMINE, PER 15 MG, INJECTION (TORADOL)	0.55	0.55	11/01/05
J1931			LARONIDASE, 0.1 MG, INJ. (ALDURAZYME)	22.74	22.74	11/01/05
J1940			FUROSEMIDE, UP 20 MG, INJECTION (LASIX)	0.35	0.35	07/01/06
J1950			LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), PER 3.75 MG, INJECTION (LUPRON DEPOT)	430.99	430.99	11/01/05
J1955			LEVOCARNITINE, PER 1 G, INJECTION (CARNITOR)	10.51	10.51	07/01/06
J1956			LEVOFLOXACIN, 250 MG, INJECTION (LEVAQUIN)	7.80	7.80	11/01/05
J1960			LEVORPHANOL TARTRATE, UP TO 2 MG, INJECTION (LEVO-DROMORAN)	3.17	3.17	11/01/05
J1980			HYOSCYAMINE SULFATE, UP TO 0.25 MG, INJECTION (LEVSIN)	4.86	4.86	11/01/05
J1990			CHLORDIAZEPOXIDE HCL, UP TO 100 MG, INJECTION (LIBRIUM)	22.31	22.31	11/01/05
J2001			LIDOCAINE HCL, FOR IV INFUSION, 10 MG, INJ (XYLOCAINE)	0.02	0.02	11/01/05
J2010			LINCOMYCIN HCL, UP TO 300 MG, INJECTION (LINCOCIN)	3.53	3.53	11/01/05
J2060			LORAZEPAM, 2 MG, INJECTION (ATIVAN)	1.07	1.07	07/01/06
J2150			MANNITOL, 25% IN 50 ML, INJECTION	0.83	0.83	11/01/05
J2175			MEPERIDINE HCL, PER 100 MG, INJECTION (DEMEROL)	1.61	1.61	11/01/05
J2210			METHYLERGONOVINE MALEATE, UP TO 0.2 MG, INJECTION (METHERGINE)	4.31	4.31	11/01/05
J2250			MIDAZOLAM HCL, PER 1 MG, INJECTION (VERSED)	0.23	0.23	07/01/06
J2260			MILRINONE LACTATE, PER 5 MG, INJECTION (PRIMACOR)	4.15	4.15	11/01/05
J2270			MORPHINE SULFATE, UP TO 10 MG, INJECTION	1.45	1.45	07/01/06
J2271			MORPHINE SULFATE 100 MG, INJECTION	5.02	5.02	11/01/05
J2275			MORPHINE SULFATE (PRESERVATIVE-FREE STERILE SOLUTION), INJECTION, PER 10 MG (ASTRAM	6.91	6.91	11/01/05
J2278			ZICONOTIDE (PRIALT)1 MCG	6.59	6.59	01/01/06
J2300			NALBUPHINE HCL, PER 10 MG, INJECTION (NUBAIN)	0.74	0.74	07/01/06
J2310			NALOXONE HCL, PER 1 MG, INJECTION (NARCAN)	2.22	2.22	07/01/06
J2320			NANDROLONE DECANOATE, UP TO 050 MG, INJECTION (DECA-DURABOLIN)	3.36	3.36	07/01/06
J2321			NANDROLONE DECANOATE, UP TO 100 MG, INJECTION (DECA-DURABOLIN)	6.56	6.56	07/01/06
J2322			NANDROLONE DECANOATE, UP TO 200 MG, INJECTION (DECA-DURABOLIN)	13.59	13.59	07/01/06
J2354			OCTREOTIDE NON-DEPOT FORM FOR SC OR IV INJ, 25 MCG.	3.94	3.94	07/01/06
J2355			OPRELVEKIN, 5 MG, INJECTION (NEWMEGA)	245.11	245.11	11/01/05
J2357			OMALIZUMAB, 5 MG, INJ.M (XOLAIR)	15.86	15.86	11/01/05
J2360			ORPHENADRINE CITRATE, UP TO 60 MG, INJECTION (NORFLEX)	13.32	13.32	11/01/05
J2370			PHENYLEPHRINE HCL, UP TO 1 ML, INJECTION (NEOSYNEPHRINE)	0.53	0.53	07/01/06
J2400			CHLOROPROCAINE HCL, PER 30 ML, INJECTION (NESACAINE)	13.97	13.97	11/01/05
J2405			ONDANSETRON HCL, PER 1 MG, INJECTION (ZOFRAN)	3.69	3.69	11/01/05
J2410			OXYMORPHONE HCL, UP TO 1 MG, INJECTION (NUMORPHAN)	2.04	2.04	11/01/05
J2430			PAMIDRONATE DISODIUM, PER 30 MG, INJECTION (AREDIA)	37.70	37.70	07/01/06
J2440			PAPAVERINE HCL, UP TO 60 MG, INJECTION	0.64	0.64	07/01/06
J2469			PALONOSETRON HCL, 25 MCG, INJ. (ALOXI)	17.76	17.76	11/01/05
J2501			PARICALCITOL, 1 MCG, INJECTION (ZEMPLAR)	3.87	3.87	11/01/05
J2503			PEGAPTANIB SODIUM (MACUGEN) 0.3 MG	1,001.97	1,001.97	01/01/06
J2505			PEGFILGASTRIM, 6 MG, INJ. (NEULASTA)	2,087.70	2,087.70	11/01/05
J2510			PENICILLIN G PROCAINE, AQUEOUS, UP TO 600,000 UNITS, INJECTION (WYCILLIN)	8.43	8.43	11/01/05
J2515			PENTOBARBITAL SODIUM, PER 50 MG, INJECTION (NEMBUTAL SODIUM)	3.35	3.35	11/01/05
J2540			PENICILLIN G POTASSIUM, UP TO 600,000 UNITS, INJECTION (PFIZERPEN)	0.72	0.72	07/01/06
J2543			PIPERACILLIN SODIUM/TAZOBACTAM SODIUM, INJECTION, 1G/0.125G (1.125 G) (ZOSYN)	4.60	4.60	11/01/05
J2545			PENTAMIDINE ISETHIONATE, INHALATION SOLUTION, PER 300 MG, ADMINISTERED THROUGH A DI	28.81	28.81	11/01/05
J2550			PROMETHAZINE HCL, UP TO 50 MG, INJECTION (PHENERGAN)	2.15	2.15	11/01/05
J2560			PHENOBARBITAL SODIUM, UP TO 120 MG, INJECTION	2.31	2.31	07/01/06
J2590			OXYTOCIN, UP TO 10 UNITS, INJECTION (PITOCIN)	1.13	1.13	11/01/05
J2597			DESMOPRESSIN ACETATE, PER 1 MCG, INJECTION (DDAVP)	2.54	2.54	07/01/06
J2675			PROGESTERONE, PER 50 MG, INJECTION	1.69	1.69	11/01/05
J2680			FLUPHENAZINE DECANOATE, UP TO 25 MG, INJECTION (PROLIXIN)	1.12	1.12	11/01/05
J2690			PROCAINAMIDE HCL, UP TO 1 G, INJECTION (PRONESTYL)	1.07	1.07	11/01/05
J2700			OXACILLIN SODIUM, UP TO 250 MG, INJECTION (BACTOCILE, PROSTAPHLIN)	1.55	1.55	11/01/05
J2710			NEOSTIGMINE METHYLSULFATE, UP TO 0.5 MG, INJECTION (PROSTIGMIN)	0.09	0.09	07/01/06
J2720			PROTAMINE SULFATE, PER 10 MG, INJECTION	0.31	0.31	11/01/05
J2725			PROTIRELIN, PER 250 MCG, INJECTION (RELEFACT, TRH)	21.78	21.78	11/01/05
J2730			PRALIDOXIME CHLORIDE, UP TO 1 G, INJECTION (PROTOPAM CHLORIDE)	48.31	48.31	07/01/06
J2760			PHENTOLAMINE MESYLATE, UP TO 5 MG, INJECTION (REGITINE)	23.01	23.01	11/01/05
J2765			METOCLOPRAMIDE HCL, UP TO 10 MG, INJECTION (REGLAN)	0.47	0.47	11/01/05

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Code	MOD	TOS	Description	Medicaid Maximum Allowable Non-Facility Fee	Facility Fee	Eff Date
J2780			RANITIDINE HYDROCHLORIDE, 25 MG, INJECTION (ZANTAC)	0.76	0.76	07/01/06
J2790			RHO D IMMUNE GLOBULIN, HUMAN, FULL DOSE, 300 MCG.	86.86	86.86	07/01/06
J2794			RISPERIDONE, LONG ACTING 0.5 MG, INJ. (RISPERDAL CONSTA)	4.70	4.70	11/01/05
J2800			METHOCARBAMOL UP TO 10 ML, INJECTION (ROBAXIN)	3.20	3.20	11/01/05
J2805			INJECTION, SINCALIDE, 5MCG	44.48	44.48	01/01/06
J2820			SARGRAMOSTIM (GM-CSF), 50 MCG, INJECTION (LEUKINE)	22.88	22.88	11/01/05
J2912			SODIUM CHLORIDE, 0.9%, PER 2 ML, INJECTION	0.12	0.12	11/01/05
J2916			SODIUM FERRIC GLUCONATE COMPLEX IN SUCROSE, 12.5 MG, INJECTION (FERRLECIT)	4.71	4.71	11/01/05
J2920			METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 40 MG, INJECTION (SOLU-MEDROL)	1.99	1.99	11/01/05
J2930			METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 125 MG, INJECTION (SOLU-MEDROL)	2.62	2.62	11/01/05
J2993			RETEPLASE, 18.1 MG, INJECTION (RETAVASE)	874.27	874.27	11/01/05
J2995			STREPTOKINASE, PER 250,000 IU, INJECTION (STREPTASE)	79.50	79.50	11/01/05
J2997			ALTEPLASE RECOMBINANT, 1 MG, INJECTION (ACTIVASE)	30.77	30.77	11/01/05
J3000			STREPTOMYCIN, UP TO 1 G, INJECTION	6.76	6.76	07/01/06
J3010			FENTANYL CITRATE, 0.1 MG, INJECTION (SUBLIMAZE)	0.30	0.30	11/01/05
J3070			PENTAZOCINE HCL, UP TO 30 MG, INJECTION (TALWIN)	3.85	3.85	11/01/05
J3105			TERBUTALINE SULFATE, UP TO 1 MG, INJECTION (BRETHINE)	4.94	4.94	07/01/06
J3120			TESTOSTERONE ENANTHATE, UP TO 100 MG, INJECTION (EVARONE)	6.07	6.07	07/01/06
J3130			TESTOSTERONE ENANTHATE, UP TO 200 MG, INJECTION (EVARONE)	10.25	10.25	07/01/06
J3230			CHLORPROMAZINE HCL, UP TO 50 MG, INJECTION (THORAZINE)	2.92	2.92	11/01/05
J3240			THYROTROPIN ALPHA, 0.9 MG PROVIDED IN 1.1 MG VIAL, INJECTION (THYROGEN)	699.60	699.60	11/01/05
J3250			TRIMETHOBENZAMIDE HCL, UP TO 200 MG, INJECTION (TIGAN)	4.58	4.58	11/01/05
J3260			TOBRAMYCIN SULFATE, UP TO 80 MG, INJECTION (NEBCIN)	1.60	1.60	07/01/06
J3265			TORSEMIDE, 10 MG/ML, INJECTION (DEMADEX)	2.42	2.42	11/01/05
J3301			TRIAMCINOLONE ACETONIDE, PER 10 MG, INJECTION (KENALOG-10)	1.35	1.35	11/01/05
J3303			TRIAMCINOLONE HEXACETONIDE, PER 5MG INJECTION (ARISTOSPAN)	1.38	1.38	07/01/06
J3305			TRIMETREXATE GLUCURONATE, PER 25 MG, INJECTION (NEUTREXIN)	137.12	137.12	11/01/05
J3360			DIAZEPAM, UP TO 5 MG, INJECTION (VALIUM, ZETRAN)	0.64	0.64	11/01/05
J3370			VANCOMYCIN HCL, 500 MG, INJECTION (VANCOLED)	2.98	2.98	11/01/05
J3396			VERTEPORFIN, 0.1 MG, INJ. (VISUDYNE)	8.95	8.95	11/01/05
J3400			TRIFLUPROMAZINE HCL, UP TO 20 MG, INJECTION (VESPRIN)	11.70	11.70	11/01/05
J3410			HYDROXYZINE HCL, UP TO 25 MG, INJECTION (VISTARIL)	0.15	0.15	11/01/05
J3420			VITAMIN B-12 CYANOCOBALAMIN, UP TO 1,000 MCG, INJECTION	0.26	0.26	11/01/05
J3430			PHYTONADIONE (VITAMIN K), PER 1 MG, INJECTION (AQUAMEPHYTON)	2.37	2.37	11/01/05
J3470			HYALURONIDASE INJECTION UP TO 150 UNITS (WYDASE)	18.06	18.06	11/01/05
J3475			MAGNESIUM SULPHATE, PER 500 MG, INJECTION	0.12	0.12	11/01/05
J3480			POTASSIUM CHLORIDE, PER 2 MEQ, INJECTION	0.02	0.02	07/01/06
J3487			ZOLEDRONIC ACID, 1 MG, INJECTION (ZOMETA)	198.50	198.50	11/01/05
J7030			NORMAL SALINE SOLUTION, 1,000 CC, INFUSION	1.02	1.02	11/01/05
J7040			NORMAL SALINE SOLUTION, STERILE (500 ML = 1 UNIT), INFUSION	0.51	0.51	11/01/05
J7042			DEXTROSE 5% / NORMAL SALINE (500 ML = 1 UNIT)	0.37	0.37	11/01/05
J7050			NORMAL SALINE SOLUTION, 250 CC INFUSION	0.26	0.26	11/01/05
J7060			DEXTROSE 5% / WATER (500 ML = 1 UNIT)	1.13	1.13	11/01/05
J7070			D-5-W, 1,000 CC, INFUSION	2.26	2.26	11/01/05
J7110			DEXTRAN 75, 500 ML, INFUSION (GENTRAN 75)	8.94	8.94	11/01/05
J7120			RINGER'S LACTATE INFUSION, UP TO 1,000 CC	0.93	0.93	11/01/05
J7130			HYPERTONIC SALINE SOLUTION, 50 OR 100 MEQ, 20 CC VIAL	0.40	0.40	11/01/05
J7189			FACTOR VIIA (ANTIHEMOPHIIC FACTOR, RECOMBINANT) 1 MG	1.14	1.14	07/01/06
J7190			FACTOR VIII (ANTIHEMOPHILIC FACTOR, HUMAN) PER I.U.	0.65	0.65	11/01/05
J7192			FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT) PER I.U.	1.06	1.06	11/01/05
J7193			FACTOR IX (ANTIHEMOPHILIC FACTOR, PUREFIED, NON-RECOMBINANT), PER I.U.	0.88	0.88	11/01/05
J7194			FACTOR IX COMPLEX, PER IU	0.70	0.70	11/01/05
J7195			FACTOR IX (ANTIHEMOPHILIC FACTOR, RECOMBINANT), PER I.U.	0.98	0.98	11/01/05
J7197			ANTITHROMBIN III (HUMAN), PER IU (THROBATE III, ATNATIV)	1.54	1.54	11/01/05
J7300			INTRAUTERINE COPPER CONTRACEPTIVE	358.80	358.80	11/01/05
J7302			LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM, 52 MG	407.70	407.70	01/01/06
J7308			AMINOLEVULINIC ACID HCL TOP	101.83	101.83	12/01/05
J7310			GANCICLOVIR, 4.5 MG, LONG-ACTING IMPLANT (VITRASERT)	4,240.00	4,240.00	11/01/05
J7317			SODIUM HYALURONATE, PER 20 TO 25 MG DOSE FOR INTRAARTICULAR INJECTION (HYALGAN)	105.23	105.23	11/01/05
J7318			HYALURONAN (SODIUM HYALURONATE) OR DERIVATIVE (HYALGAN)	4.68	4.68	01/01/06
J7320			HYLAN G-F 20, 16 MG, FOR INTRA-ARTICULAR INJECTION (SYNVISC)	203.97	203.97	11/01/05
J7340			DERMAL AND EPIDERMAL TISSUE OF HUMAN ORIGIN, WITH OR WITHOUT BIOENGINEERED OR PR	26.91	26.91	01/01/06
J7342			DERMAL TISSUE OF HUMAN ORGIN WITH OR WITHOUT OTHER BIOENGINEERED OR PROCESSED	14.48	14.48	11/01/05
J7504			LYMPHOCYTE IMMUNE GLOBULIN, ANIT-THYMOCYTE GLOBULIN EQUINE, PARENTERAL, 250 MG (A	299.24	299.24	01/01/06
J7513			DACLIZUMAB, PARENTERAL, 25 MG (ZENAPAX)	357.35	357.35	07/01/06
J9000			DOXORUBICIN HCL, 10 MG (ADRIAMYCIN)	5.92	5.92	11/01/05
J9001			DOXORUBICIN HCL,ALL LIPID FORMULATIONS, 10 MG (DOXIL)	359.36	359.36	11/01/05
J9010			ALEMTUZUMAB, 10 MG (CAMPATH)	511.60	511.60	11/01/05
J9015			ALDESLEUKIN, PER SINGLE USE VIAL (PROLEUKIN, ETC)	693.78	693.78	11/01/05
J9017			ARSENIC TRIOXIDE, 1 MG (TRISENOX)	33.26	33.26	11/01/05

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J9020			ASPARAGINASE, 10,000 UNITS (ELSPAR)	54.30	54.30	11/01/05
J9025			AZACITIDINE (VIDAZA) 1 MG	4.38	4.38	07/01/06
J9031			BCG LIVE (INTRAVESICAL), PER INSTALLATION (TICE BCG, THERACYS)	113.57	113.57	11/01/05
J9035			BEVACIZUMAB, 10 MG, INJ. (AVASTIN)	57.10	57.10	11/01/05
J9040			BLEOMYCIN SULFATE, 15 UNITS (BLENOXANE)	34.42	34.42	07/01/06
J9041			BORTEZOMIB, 0.1 MG, INJ. (VELCADE)	29.01	29.01	11/01/05
J9045			CARBOPLATIN, 50 MG (PARAPLATIN)	9.35	9.35	07/01/06
J9050			CARMUSTINE, 100 MG (BICNU)	138.49	138.49	11/01/05
J9055			CETUXIMAB, 10 MG, INJ. (ERBITUX)	49.64	49.64	11/01/05
J9060			CISPLATIN, POWDER OR SOLUTION, PER 10 MG (PLATINOL AQ)	2.02	2.02	07/01/06
J9062			CISPLATIN, 50 MG (PLATINOL AQ)	11.91	11.91	07/01/06
J9065			CLADRIBINE, PER 1 MG, INJECTION (LEUSTATIN)	37.25	37.25	11/01/05
J9070			CYCLOPHOSPHAMIDE, 100 MG (CYTOXAN, NEOSAR)	2.01	2.01	07/01/06
J9080			CYCLOPHOSPHAMIDE, 200 MG (CYTOXAN, NEOSAR)	4.03	4.03	07/01/06
J9090			CYCLOPHOSPHAMIDE, 500 MG (CYTOXAN, NEOSAR)	15.20	15.20	11/01/05
J9091			CYCLOPHOSPHAMIDE, 01 G (CYTOXAN, NEOSAR)	20.13	20.13	07/01/06
J9092			CYCLOPHOSPHAMIDE, 02 G (CYTOXAN, NEOSAR)	40.26	40.26	07/01/06
J9093			CYCLOPHOSPHAMIDE, LYOPHILIZED, 100 MG (CYTOXAN LYOPHILIZED)	0.73	0.73	11/01/05
J9094			CYCLOPHOSPHAMIDE, LYOPHILIZED, 200 MG (CYTOXAN LYOPHILIZED)	0.77	0.77	01/01/06
J9095			CYCLOPHOSPHAMIDE, LYOPHILIZED, 500 MG (CYTAXAN LYOPHILIZED)	1.81	1.81	11/01/05
J9096			CYCLOPHOSPHAMIDE, LYOPHILIZED, 01 G (CYTOXAN LYOPHILIZED)	3.64	3.64	11/01/05
J9097			CYCLOPHOSPHAMIDE, LYOPHILIZED, 02 G (CYTOXAN LYOPHILIZED)	3.64	3.64	11/01/05
J9100			CYTARABINE, 100 MG (CYTOSAR-U)	1.02	1.02	11/01/05
J9110			CYTARABINE, 500 MG ((CYTOSAR-U)	5.08	5.08	11/01/05
J9120			DACTINOMYCIN, 0.5 MG (COSMEGEN)	12.02	12.02	11/01/05
J9130			DACARBAZINE, 100 MG (DTIC- DOME)	4.94	4.94	11/01/05
J9140			DACARBAZINE, 200 MG (DTIC - DOME)	9.87	9.87	11/01/05
J9150			DAUNORUBICIN HCL, 10 MG (CERUBIDINE)	24.65	24.65	07/01/06
J9151			DAUNORUBICIN CITRATE, LIPOSOMAL FORMULATION, 10 MG (DAUNOXOME)	56.51	56.51	11/01/05
J9160			DENILEUKIN DIFTITOX, 300 MCG (ONTAK)	1,243.93	1,243.93	11/01/05
J9170			DOCETAXEL, 20 MG (TAXOTERE)	295.27	295.27	11/01/05
J9178			EPIRUBICIN HCL, 2 MG, INJ. (ELLENCE)	24.60	24.60	11/01/05
J9181			ETOPOSIDE, 10 MG (VEPESID)	0.49	0.49	11/01/05
J9182			ETOPOSIDE, 100 MG (VEPESID)	4.89	4.89	11/01/05
J9185			FLUDARABINE PHOSPHATE, 50 MG, INJECTION (FLUDARA)	246.83	246.83	11/01/05
J9190			FLUOROURACIL, 500 MG (ADRUCIL)	1.41	1.41	11/01/05
J9200			FLOXURIDINE, 500 MG (FUDR)	63.13	63.13	11/01/05
J9201			GEMCITABINE HCL, 200 MG (GEMZAR)	115.22	115.22	11/01/05
J9202			GOSERELIN ACETATE IMPLANT, PER 3.6 MG (ZOLADEX)	185.20	185.20	11/01/05
J9206			IRINOTECAN, 20 MG (CAMPTOSAR)	126.90	126.90	11/01/05
J9208			IFOSFAMIDE, PER 1 G (IFEX)	46.78	46.78	07/01/06
J9209			MESNA, 200 MG (MESNEX)	10.90	10.90	07/01/06
J9211			IDARUBICIN HCL, 5 MG (IDAMYCIN)	323.68	323.68	07/01/06
J9212			INTERFERON ALFACON-1, RECOMBINANT, 1 MCG, INJECTION (INFERGEN)	3.92	3.92	11/01/05
J9213			INTERFERON ALFA-2A, RECOMBINANT, 3 MILLION UNITS (ROFERON-A)	32.03	32.03	11/01/05
J9214			INTERFERON ALFA-2B, RECOMBINANT, 1 MILLION UNITS (INTRON-A)	13.26	13.26	11/01/05
J9215			INTERFERON ALFA-N3, (HUMAN LEUKOCYTE DERIVED), 250,000 IU (ALFERON N)	7.44	7.44	09/01/99
J9216			INTERFERON GAMMA-1B, 3 MILLION UNITS (ACTIMMUNE)	272.43	272.43	11/01/05
J9217			LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), 7.5 MG	229.85	229.85	11/01/05
J9218			LEUPROLIDE ACETATE, PER 1 MG (LUPRON)	9.36	9.36	11/01/05
J9250			METHOTREXATE SODIUM, 5 MG	0.24	0.24	07/01/06
J9264			PACLITAXEL PROTEIN-BOUND PARTICLES (ABRAXANE) 1 MG	7.90	7.90	01/01/06
J9265			PACLITAXEL, 30 MG (TAXOL)	14.78	14.78	11/01/05
J9266			PEGASPARGASE, PER SINGLE DOSE VIAL (ONCASPAR)	1,611.20	1,611.20	11/01/05
J9268			PENTOSTATIN, PER 10 MG (NIPENT)	1,835.02	1,835.02	11/01/05
J9280			MITOMYCIN, 5 MG	19.03	19.03	07/01/06
J9290			MITOMYCIN, 20 MG	76.10	76.10	07/01/06
J9291			MITOMYCIN, 40 MG	152.21	152.21	07/01/06
J9293			MITOXANTRONE HCL, PER 5 MG, INJECTION (NOVANTRONE)	323.75	323.75	11/01/05
J9300			GEMTUZUMAB OZOGAMICIN, 5 MG, INJECTION (MYLOTARG)	2,226.82	2,226.82	11/01/05
J9305			PEMETREXED, 10 MG, INJ. (ALTIMA)	40.45	40.45	11/01/05
J9310			RITUXIMAB, 100 MG (RITUXAN)	455.92	455.92	11/01/05
J9320			STREPTOZOCIN, 1 G (ZANOSAR)	152.59	152.59	11/01/05
J9340			THIOTEPA, 15 MG (THIOPLEX)	45.06	45.06	11/01/05
J9350			TOPOTECAN, 4 MG (HYCAMTIN)	755.74	755.74	11/01/05
J9355			TRASTUZUMAB, 10 MG (HERCEPTIN)	53.93	53.93	11/01/05
J9360			VINBLASTINE SULFATE, 1 MG (VELBAN)	0.86	0.86	11/01/05
J9370			VINCRISTINE SULFATE, 1 MG (ONCOVIN)	2.59	2.59	11/01/05
J9375			VINCRISTINE SULFATE, 2 MG (ONCOVIN)	5.18	5.18	11/01/05
J9380			VINCRISTINE SULFATE, 5 MG (ONCOVIN)	12.96	12.96	11/01/05

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Code	MOD	TOS	Description	Non-Facility Fee	Facility Fee	Eff Date
J9390			VINORELBINE TARTRATE, PER 10 MG (NAVELBINE)	25.98	25.98	07/01/06
J9395			FULVESTRANT, 25 MG, INJ. (FASLODEX)	81.30	81.30	11/01/05
J9600			PORFIMER SODIUM, 75 MG (PHOTOFIN)	2,150.25	2,150.25	11/01/05
P9041			ALBUMIN (HUMAN), 5%, 50 ML, INFUSION	14.54	14.54	11/01/05
P9047			ALBUMIN (HUMAN), 25%, 50 ML, INFUSION	30.84	30.84	07/01/06
Q0144			AZITHROMYCIN DIHYDRATE, ORAL, CAPSULES/POWDER, 1 GM (ZITHROMAX, ZITHROMAX Z-PAK)	24.17	24.17	11/01/05
Q4079			NATALIZUMAB (TYSABRI) 1 MG	6.77	6.77	07/01/06
Q9945			LOW OSMOLAR CONTRAST MATERIAL, UP TO 149 MG/ML IODINE CONCENTRATION, PER ML	0.24	0.24	04/01/05
Q9946			LOW OSMOLAR CONTRAST MATERIAL, 150 -199 MG/ML IODINE CONCENTRATION, PER ML	1.79	1.79	04/01/05
Q9947			LOW OSMOLAR CONTRAST MATERIAL, 200-249 MG/ML IODINE CONCENTRATION, PER ML	1.30	1.30	04/01/05
Q9948			LOW OSMOLAR CONTRAST MATERIAL, 250-299 MG/ML IODINE CONCENTRATION, PER ML	0.27	0.27	07/01/06
Q9949			LOW OSMOLAR CONTRAST MATERIAL, 300-349 MG/ML IODINE CONCENTRATION, PER ML	0.35	0.35	04/01/05
Q9950			LOW OSMOLAR CONTRAST MATERIAL, 350-399 MG/ML IODINE CONCENTRATION, PER ML	0.23	0.23	04/01/05
Q9950			LOW OSMOLAR CONTRAST MATERIAL, 350-399 MG/ML IODINE CONCENTRATION, PER ML	0.23	0.23	04/01/05
S0023			CIMETIDINE HYDROCHLORIDE, 300 MG, INJECTION (TAGAMET)	1.34	1.34	11/01/05
S0080			PENTAMIDINE ISETHIONATE, 300 MG, INJECTION (NEBUPENT)	42.48	42.48	11/01/05
S0145			PEGINTERFERON ALFA-2A, 180 MCG/ML (PEGASYS)	317.73	317.73	01/01/06
MENTAL HEALTH						
T1016		3	CASE MANAGEMENT, EACH 15 MINUTES	21.74	21.74	6/15/2005
T1017		3	DMH CASE MGMT AREA MH 1/4HR	29.30	29.30	1/1/2005
T1023		3	SCREENING TO DETERMINE THE APPROPRIATENESS OF CONSIDERATION OF AN INDIVIDUAL	90.00	90.00	1/1/2005
			Providers should always bill their usual and customary charges. Please use the monthly NC Medicaid Bulletins for additions changes and deletion to this schedule.			