

LEA Fee Schedule					
Provider Specialty 060					
Taxonomy: 251300000X					
<p>The inclusion of a rate on this table does not guarantee that a service is covered. Please refer to the Medicaid Billing Guide and the Medicaid and Health Choice Clinical Coverage Policies on the NC Medicaid Web site.</p>					
EFFECTIVE DATE 1/1/2018					
Code		Description	Facility Fee	Non-Facility Fee	Last Updated
29075		application, cast; elbow to finger (short arm)	45.90	62.34	
29085		application hand/wrist cast	49.50	66.52	
29105		application long arm splint	44.78	61.80	
29125		application forearm splint	31.90	47.76	
29126		application short arm splint dynamic	39.24	55.10	
29130		application finger splint static	22.26	29.47	
29131		application finger splint dynamic	24.95	36.20	
29240		strapping of shoulder	34.28	43.52	
29260		strapping of elbow or wrist	28.23	37.46	
29280		strapping of hand or finger	26.59	36.11	
29405		application short leg cast	48.90	63.90	
29505		application long leg splint	36.07	54.25	
29515		application lower leg splint	37.81	51.08	
29530		strapping of knee	28.86	38.08	
29540		Strapping of ankle and/or foot	25.74	31.50	
90791		psychiatric diagnostic evaluation	95.58	121.63	
90832		psychotherapy, 30 minutes	40.15	50.67	
90834		psychotherapy, 45 minutes	60.29	65.81	
90837		psychotherapy, 60 minutes	90.91	96.44	
90847		family psychotherapy including patient, 50 minutes	83.74	88.78	
90853		group psychotherapy (other than of a multiple-family group)	24.65	26.09	

92065		special eye evaluation	30.43	30.43	
92507		treatment of speech, language, voice, communication, and/ or auditory	24.42	68.25	
92508		treatment of speech, language, voice, communication, and/ or auditory	11.19	23.88	
92521		evaluation of speech fluency	93.54	93.54	
92522		evaluation of speech sound production and expression	76.07	76.07	
92523		evaluation of speech sound production with evaluation of language comprehension	157.8	157.8	
92524		behavioral and qualitative analysis of voice and resonance	78.91	78.91	
92526		treatment of swallowing dysfunction and/or oral function for feeding	22.73	63.69	
92550		tympanometry and reflex threshold measurements	71.10	71.38	1/1/2010
92551		Screening test, pure tone, air only	8.27	8.27	
92552		Pure tone audiometry (threshold); air only	16.65	16.65	
92553		audiometry air and bone	22.24	22.24	
92555		speech audiometry threshold;	12.33	12.33	
92556		speech audiometry threshold; with speech recognition	19.06	19.06	
92557		comprehensive audiometry threshold evaluation and speech recognition (92553 and	34.34	36.36	
92567		tympanometry (impedance testing)	12.61	14.06	
92568		acoustic reflex testing; threshold	14.73	14.73	
92570		Acoustic immittance testing, included tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing	24.16	25.60	
92571		filtered speech test	12.61	12.61	
92572		staggered spondaic word test	13.47	13.47	
92576		synthetic sentence identification test	16.27	16.27	
92579		visual reinforcement audiometry (vra)	33.68	35.99	
92582		conditioning play audiometry	31.76	31.76	
92583		select picture audiometry	25.52	25.52	
92585		auditory evoked potentials for evoked response audiometry	79.22	79.22	
92587		evoked otoacoustic emissions; limited (single stimulus level, either transient	30.08	30.08	

92588			evoked otoacoustic emissions; comprehensive or diagnostic evaluation	49.76	49.76	
92590			hearing aid exam and selection monaural	35.53	35.53	
92591			hearing aid exam and selection binaural	53.36	53.36	
92592			hearing aid check monaural	15.55	15.55	
92593			hearing aid check binaural	23.51	23.51	
92594			electracoustic eval for hearing aid monaural	17.17	17.17	
92595			electroacoustic evaluation for hearing aid binaura	25.66	25.66	
92607			eval for prescription for speech generating & alt. comm. device - face to face	119.81	119.81	
92608			each additional 30 minutes (use in conjunction with 92607)	22.90	22.90	
92609			therapeutic services for the use of speech-generatinf device, including programm	63.66	63.66	
92610			eval of swallowing and oral function for feeding	61.57	61.57	
92612			endoscopic study of swallowing	54.81	123.74	
92620			evaluation of central auditory function, with report; initial 60 minutes	60.25	60.25	
92621			evaluation of central auditory function, with report; each additional 15 minutes	14.00	14.00	
92626			evaluation of auditory rehabilitation status; first hour	65.49	65.49	
92627			evaluation of auditory rehabilitation status; each additional 15 minutes (list	15.97	15.97	
92630			auditory rehabilitation; pre-lingual hearing loss	44.06	117.00	
92633			auditory rehabilitation post-lingual hearing loss	44.06	117.00	
95831			muscle testing, manual (separate procedure) with report; extremity (excluding	11.81	20.76	
95832			muscle testing hand(w/wo comparison w/normal side)	12.32	19.53	
95833			muscle testing total evalof body excluding hands	19.67	28.89	
95834			muscle testing total evalof body including hands	24.78	34.30	
95992			Canalith Repositioning Proc	34.06	37.54	
96110			developmental testing; limited (eg, developmental screening test ii, early	8.75	8.75	
96112			Developmental test administration by qualified health care professionsl with interpretation and report, first 60 minutes	106.25	108.56	1/1/2019

96113			Developmental test administration by qualified health care professional with interpretation and report, additional 30 minutes	106.25	108.56	1/1/2019
96116			neurobehavioral status exam (clinical assessment of thinking, reasoning	75.11	79.14	
96121			Neurobehavioral status examination by qualified health care professional with interpretation and report, additional 60 minutes	73.37	89.24	1/1/2019
96125			standardized cognitive performance testing (eg, ross information processing	63.96	75.81	
96130			Psychological testing evaluation by qualified health care professional, first 60 minutes	71.10	71.38	1/1/2019
96131			Psychological testing evaluation by qualified health care professional, additional 60 minutes	71.10	71.38	1/1/2019
96132			Neuropsychological testing evaluation by qualified health care professional, first 60 minutes	73.37	89.24	1/1/2019
96133			Neuropsychological testing evaluation by qualified health care professional, additional 60 minutes	73.37	89.24	1/1/2019
96136			Psychological or neuropsychological or neuropsychological test administration and scoring by qualified health care professional, first 30 minutes	71.10	71.38	1/1/2019
96137			Psychological or neuropsychological test administration and scoring by qualified health care professional, additional 30 minutes	71.10	71.38	1/1/2019
97110			therapeutic procedure 1 or more area	23.37	23.37	
97112			neuromuscular re-education of movement	24.03	24.03	
97116			therapeutic procedure, one or more areas, each 15 minutes; gait training	20.46	20.46	
97140			manual therapy techiques, one or more regions, each 15 minutes	21.68	21.68	
97150			Therapeutic procedures in a group setting	11.19	23.88	10/1/2018
97161			evaluation of physical therapy, typically 20 minutes	67.46	67.46	7/1/2018
97162			evaluation of physical therapy, typically 30 minutes	67.46	67.46	7/1/2018
97163			evaluation of physical therapy, typically 45 minutes	67.46	67.46	7/1/2018
97164			re-evaluation of physical therapy, typically 20 minutes	45.71	45.71	7/1/2018
97165			evaluation of occupational therapy, typically 30 minutes	65.44	65.44	7/1/2018
97166			evaluation of occupational therapy, typically 45 minutes	65.44	65.44	7/1/2018
97167			evaluation of occupational therapy established plan of care, typically 60 minutes	65.44	65.44	7/1/2018

97168			re-evaluation of occupational therapy established plan of care, typically 30 minutes	43.18	43.18	7/1/2018
97530			therapeutic activities, direct (one on one) patient contact by th	24.59	24.59	
97533			sensory integrative techniques to enhance sensory processing and promote	21.70	21.70	
97535			self-care/home management training (eg, activities of daily living (adl) and	24.62	24.62	
97542			wheelchair management (eg, assessment, fitting, training), each 15 minutes	23.01	23.01	
97763			Management and/or training in use of orthotics (supports, braces, or splints) for arms, legs, and/or trunk, per 15 minutes	26.94	26.94	1/1/2018
97750			physical performance test or measurement (eg, musculoskeletal,	23.94	23.94	
97760			orthotic(s) management and training (including assessment and fitting when not	26.44	26.44	
97761			prosthetic training, upper and/or lower extremity (s), each 15 minutes	23.65	23.65	
99173			Eye Chart testing of visual acuity of both eyes	8.27	8.27	10/1/2018
S5125			attendant care services; per 15 minutes	2.74	2.74	
T1002			rn services up to 15 minutes	5.98	5.98	
T1003			lpn/lvn services, up to 15 minutes	3.48	3.48	
V5008			Hearing screening	8.27	8.27	10/1/2018

Providers should always bill their usual and customary charges. Please use the monthly NC Medicaid Bulletins for additions changes and deletion to this schedule.